

CALENDAR FOR THE BOARD OF SUPERVISORS  
**CONTRA COSTA COUNTY**  
AND FOR SPECIAL DISTRICTS, AGENCIES, AND AUTHORITIES GOVERNED BY THE BOARD  
**BOARD CHAMBERS ROOM 107, ADMINISTRATION BUILDING, 651 PINE STREET**  
**MARTINEZ, CALIFORNIA 94553-1229**

**KAREN MITCHOFF**, *CHAIR*, 4th DISTRICT

**JOHN GIOIA**, *VICE CHAIR*, 1st DISTRICT

**CANDACE ANDERSEN**, 2nd DISTRICT

**MARY N. PIEPHO**, 3rd DISTRICT

**FEDERAL D. GLOVER**, 5th DISTRICT

**DAVID J. TWA**, CLERK OF THE BOARD AND COUNTY ADMINISTRATOR, (925) 335-1900

PERSONS WHO WISH TO ADDRESS THE BOARD DURING PUBLIC COMMENT OR WITH RESPECT TO AN ITEM THAT IS ON THE AGENDA, MAY BE LIMITED TO TWO (2) MINUTES.

A LUNCH BREAK MAY BE CALLED AT THE DISCRETION OF THE BOARD CHAIR.

The Board of Supervisors respects your time, and every attempt is made to accurately estimate when an item may be heard by the Board. All times specified for items on the Board of Supervisors agenda are approximate. Items may be heard later than indicated depending on the business of the day. Your patience is appreciated.

**SPECIAL MEETING AGENDA**  
**January 21, 2014**

**10:00 A.M. Convene, Call to Order and Opening Ceremonies**

Inspirational Thought- "The ultimate measure of a man is not where he stands in moments of comfort and convenience, but where he stands at times of challenge and controversy." ~Martin Luther King, Jr.

**CONSIDER CONSENT ITEMS** (Items listed as C.1 through C.44 on the following agenda) – Items are subject to removal from Consent Calendar by request of any Supervisor or on request for discussion by a member of the public. **Items removed from the Consent Calendar will be considered with the Short Discussion Items.**

**PRESENTATIONS (5 Minutes Each)**

**PR.1** PRESENTATION honoring the 100th Anniversary of the United States Power Squadrons. (Marta Van Loan and Kevin Blatter)

**PR.2** PRESENTATION honoring Richard Cabral upon his retirement from Contra Costa County. (Supervisor Mitchoff and Supervisor Piepho)

**SHORT DISCUSSION ITEMS**

**SD. 1** CONSIDER Consent Items previously removed.

- SD.2** CONSIDER waiving the 180-day sit-out period for Joelle Luhn, Retirement Communications Coordinator with the Contra Costa County Employees' Retirement Association, and APPROVE and AUTHORIZE the hiring of Joelle Luhn as a temporary County employee until the permanent position is filled. (Marilyn Leedom, Retirement Chief Executive Officer)

**11:00 A.M.**

- SD.3** 36th Annual Dr. Martin Luther King, Jr., Commemoration and Humanitarian Awards Ceremony.

### **Closed Session**

#### **A. CONFERENCE WITH LABOR NEGOTIATORS**

1. Agency Negotiators: David Twa and Ted Cwiek.

Employee Organizations: Contra Costa County Employees' Assn., Local No. 1; Am. Fed., State, County, & Mun. Empl., Locals 512 and 2700; Calif. Nurses Assn.; Service Empl. Int'l Union, Local 1021; District Attorney's Investigators Assn.; Deputy Sheriffs Assn.; United Prof. Firefighters, Local 1230; Physicians' & Dentists' Org. of Contra Costa; Western Council of Engineers; United Chief Officers Assn.; Service Empl. Int'l Union United Health Care Workers West; Contra Costa County Defenders Assn.; Probation Peace Officers Assn. of Contra Costa County; Contra Costa County Deputy District Attorneys' Assn.; and Prof. & Tech. Engineers, Local 21, AFL-CIO.

2. Agency Negotiators: David Twa and Ted Cwiek.

Unrepresented Employees: All unrepresented employees.

### **DELIBERATION ITEMS**

**1:30 P.M.**

- D.1** HEARING to consider two appeals of the County Planning Commission's decision to approve the land use permit for Phillips 66 Propane Recovery Project located at 1380 San Pablo Avenue, in the Rodeo area, County File LP12-2073; and consider the certification of the Final Environmental Impact Report and related California Environmental Quality Act findings. (Shute Mihaly & Weinberger and Communities for a Better Environment, Appellants) (Phillips 66,

Applicant/Owner) (Lashun Cross and Aruna Bhat, Department of Conservation and Development)

**D. 2 PUBLIC COMMENT (2 Minutes/Speaker)**

D. 3 CONSIDER reports of Board members.

*ADJOURN* in memory of Ken Mercer, former Pleasanton Mayor.

**CONSENT ITEMS**

**Road and Transportation**

- C. 1 ADOPT Traffic Resolution No. 2014/4401 to establish speed limits on Rudgear Road, and RESCIND Traffic Resolution No. 1961/0200, as recommended by the Public Works Director, Walnut Creek area. (No fiscal impact)

**Engineering Services**

- C. 2 ADOPT Resolution No. 2014/19 accepting completion of the warranty period under the Subdivision Agreement (Right-of-Way Landscaping) for road acceptance RA05-01186, for a project developed by Shapell Homes, a division of Shapell Industries, Inc., a Delaware Corporation, as recommended by the Public Works Director, Danville area. (100% Developer Fees)

**Claims, Collections & Litigation**

- C. 3 DENY claim filed by Julie Ginkens.

**Honors & Proclamations**

- C. 4 ADOPT Resolution No. 2014/29 recognizing Yolo County Supervisor Mike McGowan upon his appointment as Deputy Director for the California Department of Motor Vehicles, as recommended by Supervisor Piepho and Supervisor Mitchoff.
- C. 5 ADOPT Resolution No. 2014/20 honoring Richard Cabral upon his retirement from Contra Costa County, as recommended by Supervisor Mitchoff.
- C. 6 ADOPT Resolution No. 2014/21 honoring Chinese American Cooperation Council at the 11th Annual Chinese Cultural Day, as recommended by Supervisor Andersen.

- C. 7 ADOPT Resolution No. 2014/23 recognizing Lafayette Resident Brian Aiello as the 2014 Business Person of the Year, as recommended by Supervisor Andersen.
- C. 8 ADOPT Resolution No. 2014/24 honoring the 100th Anniversary of the United States Power Squadrons, as recommended by Supervisor Andersen and Supervisor Piepho.

### **Appointments & Resignations**

- C. 9 DECLARE vacant Hazardous Materials Commission Business #1 seat and DIRECT the Clerk of the Board to post the vacancy, as recommended by the Health Services Director.
- C. 10 APPOINT Patricia Bristow and REAPPOINT Barbara Guise to the Byron-Brentwood-Knightsen Union Cemetery District, as recommended by Supervisor Piepho.
- C. 11 REAPPOINT Alton Moody, Trudy Negherbon and William Lipsin to the County Service Area, P-2A Citizen Advisory Committee, as recommended by Supervisor Piepho.
- C. 12 ADOPT Resolution No. 2014/25 correcting the terms of office for Seat 2 and Seat 2 Alternate on the Contra Costa Transportation Authority Board of Directors to February 1, 2014 through January 31, 2016 and restating the appointment of Board members and other individuals to serve on Board committees, special county committees, and regional boards/ committees/ commissions for 2014, as recommended by Supervisor Mitchoff.

### **Appropriation Adjustments**

- C. 13 Clerk-Recorder/Elections (0043): APPROVE Appropriations Adjustment No. 5040 authorizing an internal transfer in the amount of \$20,000 from Services/Supplies to Fixed Assets to cover the one-time cost to upgrade the ballot sorter/scanner used in county elections.

### **Personnel Actions**

- C. 14 ADOPT Personnel Adjustment Resolution No. 21404 to cancel one Lieutenant position (represented) and add one Captain (represented) position in the Office of the Sheriff - Town of Danville Contract Police Services. (100% Town of Danville)



- C. 15** ACKNOWLEDGE receipt of report of suspension of competition and direct appointment in the Animal Services Department to facilitate the return to work of a County employee through the County Rehabilitation Program, as provided for in the Personnel Management Regulations, Section 502, as part of the County Disability Program, as recommended by the Assistant County Administrator, Director of Human Resources. (100% Budgeted)
- C. 16** ADOPT Position Adjustment Resolution No. 21411 to add one Public Health Epidemiologist/Biostatistician position (represented) and cancel one Health Services Planner/Evaluator - Level B position (represented) in the Health Services Department. (Offset by salary savings)
- C. 17** ADOPT Position Adjustment Resolution No. 21412 to add one Disease Intervention Technician Project (represented) position and cancel one Disease Intervention Technician (represented) in the Health Services Department. (Cost neutral)

### **Grants & Contracts**

**APPROVE and AUTHORIZE execution of agreements between the County and the following agencies for receipt of fund and/or services:**

- C. 18** APPROVE and AUTHORIZE the Agricultural Commissioner, or designee, to execute contract with the California Department of Food and Agriculture in an amount not to exceed \$4,800, to inspect recycling establishments licensed as weighmasters for the period January 1 through June 30, 2014. (No County match)
- C. 19** APPROVE and AUTHORIZE the Agricultural Commissioner, or designee, to execute a contract with the California Department of Food and Agriculture, to pay the County an amount not to exceed \$100, to enforce California seed marketing and labeling requirements for the period July 1, 2013 through June 30, 2014. (No County match)
- C. 20** ADOPT Resolution No. 2014/18 approving and authorizing the District Attorney to submit an application and execute a grant award agreement, and any extensions or amendments thereof, pursuant to State guidelines, with the California Department of Insurance - Fraud Division for funding of the Disability and Healthcare Insurance Fraud Prosecution Program in the amount of \$95,438 for the period July 1, 2013 through June 30, 2014. (100% State)
- C. 21** APPROVE and AUTHORIZE the Interim Librarian, or designee, to apply for and accept a Big Read grant in the amount of \$20,000 from the National Endowment for the Arts to provide materials and programming in West County libraries for the period September 1, 2014 through June 30, 2015. (No Library Fund match)

- C. 22** APPROVE and AUTHORIZE the District Attorney, or designee, to execute a contract with Canine Companions for Independence in an amount not to exceed \$3,000 to provide a facility dog trained to work with victims of crimes to provide comfort and assist them in remaining calm while being interviewed or providing testimony in the courtroom. (100% Asset Forfeiture Funds)
- C. 23** APPROVE and AUTHORIZE the Employment and Human Services Director, or designee, to execute a contract with California Department of Community Services and Development, including modified indemnification language, to pay the County an amount not to exceed \$481,046, to provide Low Income Home Energy Assistance Program services, for the period January 1, 2014 through January 31, 2015. (No County match)

**APPROVE and AUTHORIZE execution of agreement between the County and the following parties as noted for the purchase of equipment and/or services:**

- C. 24** APPROVE and AUTHORIZE the Employment and Human Services Director, or designee, to execute a contract amendment with InTelegy Corporation, effective November 1, 2013, to increase the payment limit by \$123,480 to a new payment limit of \$735,392, to provide integrated customer service model(s) development and implementation for the period July 1, 2013 through June 30, 2014. (10% County, 45% State, 45% Federal)
- C. 25** APPROVE and AUTHORIZE the County Probation Officer, or designee, to execute a contract amendment with Rubicon Programs to change the contract termination date from December 31, 2013 to February 28, 2014 to provide reentry services to probationers enrolled in the Second Chance Reentry Initiative, with no change to the payment limit. (No fiscal impact)
- C. 26** APPROVE and AUTHORIZE the Health Services Director, or designee, to execute a contract with The Bay Area Cardiology Medical Group, Inc., in an amount not to exceed \$600,000 to provide professional cardiology services for the period January 1, 2014 through December 31, 2015. (100% Contra Costa Health Plan member premiums)
- C. 27** APPROVE and AUTHORIZE the County Probation Officer, or designee, to execute a contract with the National Council on Crime and Delinquency in the amount of \$140,000 to provide evaluation and assessment of the County's Smart Probation program for the period October 1, 2013 through September 30, 2016. (100% Federal Funds)
- C. 28** APPROVE and AUTHORIZE County Risk Manager to execute contracts with specified legal firms for defense of the County in workers' compensation, medical malpractice, and civil rights claims for the period January 1 through December 31, 2014, in accordance with a specified fee schedule. (100% Self-Insurance Internal Service Funds)

- C. 29** APPROVE and AUTHORIZE the Purchasing Agent to execute, on behalf of the Health Services Department, a purchase order with R-Computer in the amount of \$113,000 for maintenance and upgrades on IBM servers and related equipment software for the period January 1 through December 31, 2014. (100% Enterprise Fund I)
- C. 30** APPROVE and AUTHORIZE the Purchasing Agent to execute, on behalf of the Health Services Director, a purchase order with Hyland Software, Inc., in an amount not to exceed \$133,000 for renewal of annual software maintenance and licensing for OnBase Document Management and Image Scanning Software for the period January 1 through December 31, 2014. (100% Enterprise Fund I)
- C. 31** APPROVE and AUTHORIZE the Health Services Director, or designee, to execute a contract with DJR Healthcare Consulting, Inc., in an amount not to exceed \$552,000, to provide professional management and oversight of the Department's Information Technology (IT) Unit, for the period January 1, 2014 through December 31, 2015. (100% Enterprise Fund I)
- C. 32** APPROVE and AUTHORIZE the Health Services Director, or designee, to execute a contract amendment with LTP Carepro, Inc. (dba Pleasant Hill Manor), effective November 1, 2013, to increase the payment limit by \$6,000 to a new payment limit of \$174,000 to provide additional board and care services, with no change in the original term of February 1, 2013 through January 31, 2014. (100% Mental Health Realignment funds)
- C. 33** APPROVE and AUTHORIZE the Purchasing Agent, or designee, to execute a purchase order on behalf of the Sheriff-Coroner with Buchanan Food Service in the amount of \$120,000 to provide bread loaves, rolls and all related bakery items as needed for the West County, Martinez and Marsh Creek detention facilities for the period of January 1 through December 31, 2014. (100% General Fund)
- C. 34** APPROVE and AUTHORIZE the Purchasing Agent to execute, on behalf of the Sheriff-Coroner, a purchase order with Producers Dairy Products Inc., in an amount not to exceed \$175,000 for the purchase of dairy products as needed for the Martinez and Marsh Creek detention facilities for the period January 1, 2014 through December 31, 2014. (100% General Fund)
- C. 35** APPROVE and AUTHORIZE the Purchasing Agent to execute, on behalf of the Sheriff-Coroner, a purchase order with Producers Dairy Products Inc., in an amount not to exceed \$200,000 for the purchase of dairy products as needed for the West County Detention Facility for the period January 1, 2014 through December 31, 2014. (100% General Fund)

- C. 36** APPROVE and AUTHORIZE the Purchasing Agent to execute, on behalf of the Sheriff-Coroner, a purchase order with Allen Packaging Company in the amount of \$125,000 to provide three-compartment trays for Seal-a-Meal food to be used at the West County, Martinez, and Marsh Creek Detention Facilities for the period January 1, 2014 through December 31, 2014. (100% General Fund)
- C. 37** APPROVE and AUTHORIZE the Purchasing Agent, or designee, to execute, on behalf of the Sheriff-Coroner, a change to a purchase order with National Food Group, Inc., to increase the payment limit by \$43,000 to a new payment limit of \$142,000, to provide frozen and dry food as needed for the West County, Martinez and Marsh Creek detention facilities for the period April 1, 2013 through March 31, 2014. (100% General Fund)

### **Other Actions**

- C. 38** ACCEPT the Contra Costa County Planning Commission 2013 Annual Report, as recommended by the Conservation and Development Director.
- C. 39** DECLARE as surplus and AUTHORIZE the Purchasing Agent, or designee, to dispose of fully depreciated vehicles and equipment no longer needed for public use as recommended by the Public Works Director, Countywide. (No fiscal impact)
- C. 40** ACCEPT a bequest from Lili Mai Albertoni-Weedin to the Health Services Department Homeless Shelter in Concord in the amount of \$450,000, as recommended by the County Administrator.
- C. 41** REFER to the Finance Committee a proposal to enter into a long-term vehicle leasing, maintenance, and fleet management program for the Contra Costa County Fire Protection District's light vehicle fleet and a review of implementation of an EMS First-Responder Fee to offset expenses incurred while providing Emergency Medical Services on over 35,000 incident annually, as recommended by the Fire Chief-Contra Costa County Fire Protection District. (No fiscal impact)
- C. 42** ACCEPT the 2013 Annual Report from the Finance Committee, as recommended by the County Administrator.
- C. 43** CONTINUE the emergency action originally taken by the Board of Supervisors on November 16, 1999 regarding the issue of homelessness in Contra Costa County, as recommended by the Health Services Director. (No fiscal impact)
- C. 44** APPROVE 2013-14 Policies and Procedures and Service Plan for the Community Services Bureau of the Employment and Human Services Department.

## **GENERAL INFORMATION**

The Board meets in all its capacities pursuant to Ordinance Code Section 24-2.402, including as the Housing Authority and the Successor Agency to the Redevelopment Agency. Persons who wish to address the Board should complete the form provided for that purpose and furnish a copy of any written statement to the Clerk.

Any disclosable public records related to an open session item on a regular meeting agenda and distributed by the Clerk of the Board to a majority of the members of the Board of Supervisors less than 72 hours prior to that meeting are available for public inspection at 651 Pine Street, First Floor, Room 106, Martinez, CA 94553, during normal business hours.

All matters listed under CONSENT ITEMS are considered by the Board to be routine and will be enacted by one motion. There will be no separate discussion of these items unless requested by a member of the Board or a member of the public prior to the time the Board votes on the motion to adopt.

Persons who wish to speak on matters set for PUBLIC HEARINGS will be heard when the Chair calls for comments from those persons who are in support thereof or in opposition thereto. After persons have spoken, the hearing is closed and the matter is subject to discussion and action by the Board. Comments on matters listed on the agenda or otherwise within the purview of the Board of Supervisors can be submitted to the office of the Clerk of the Board via mail: Board of Supervisors, 651 Pine Street Room 106, Martinez, CA 94553; by fax: 925-335-1913.

The County will provide reasonable accommodations for persons with disabilities planning to attend Board meetings who contact the Clerk of the Board at least 24 hours before the meeting, at (925) 335-1900; TDD (925) 335-1915. An assistive listening device is available from the Clerk, Room 106.

Copies of recordings of all or portions of a Board meeting may be purchased from the Clerk of the Board. Please telephone the Office of the Clerk of the Board, (925) 335-1900, to make the necessary arrangements.

Forms are available to anyone desiring to submit an inspirational thought nomination for inclusion on the Board Agenda. Forms may be obtained at the Office of the County Administrator or Office of the Clerk of the Board, 651 Pine Street, Martinez, California.

Applications for personal subscriptions to the weekly Board Agenda may be obtained by calling the Office of the Clerk of the Board, (925) 335-1900. The weekly agenda may also be viewed on the County's Internet Web Page:

[www.co.contra-costa.ca.us](http://www.co.contra-costa.ca.us)

## **STANDING COMMITTEES**

The **Airport Committee** (Supervisors Mary N. Piepho and Karen Mitchoff) meets quarterly on the first Monday of the month at 1:00 p.m. at Director of Airports Office, 550 Sally Ride Drive, Concord.

The **Family and Human Services Committee** (Supervisors Federal D. Glover and Candace Andersen) meets on the second Monday of the month at 1:00 p.m. in Room 101, County Administration Building, 651 Pine Street, Martinez.

The **Finance Committee** (Supervisors Mary N. Piepho and Federal D. Glover) meets on the fourth Monday of the month at 10:30 a.m. in Room 101, County Administration Building, 651 Pine Street, Martinez.

The **Hiring Outreach Oversight Committee** (Supervisors Federal Glover and Karen Mitchoff) meets on the second Monday of the month at 10:30 a.m. in Room 101, County Administration Building, 651 Pine Street, Martinez.

The **Internal Operations Committee** (Supervisors Karen Mitchoff and Candace Andersen) meets on the first Monday of the month at 10:30 a.m. in Room 101, County Administration Building, 651 Pine Street, Martinez.

The **Legislation Committee** (Supervisors Mary N. Piepho and Karen Mitchoff) meets on the first Thursday of the month at 10:30 a.m. in Room 101, County Administration Building, 651 Pine Street, Martinez.

The **Public Protection Committee** (Supervisors Federal D. Glover and John Gioia) meets on the fourth Monday of the month at 1:00 p.m. in Room 101, County Administration Building, 651 Pine Street, Martinez.

The **Transportation, Water & Infrastructure Committee** (Supervisors Mary N. Piepho and Candace Andersen) meets on the first Thursday of the month at 1:00 p.m. in Room 101, County Administration Building, 651 Pine Street, Martinez.

Airports Committee	March 3, 2014	1:00 p.m.	See above
Family & Human Services Committee	February 10, 2014	1:00 p.m.	See above
Finance Committee	February 24, 2014	10:30 a.m.	See above
Hiring Outreach Oversight Committee	February 10, 2014	10:30 a.m.	See above
Internal Operations Committee	February 3, 2014	10:30 a.m.	See above
Legislation Committee	February 6, 2014	10:30 a.m.	See above
Public Protection Committee	February 24, 2014	1:00 p.m.	See above

Transportation, Water & Infrastructure Committee	February 6, 2014	1:00 p.m.	See above
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**PERSONS WHO WISH TO ADDRESS THE BOARD DURING PUBLIC COMMENT OR WITH RESPECT TO AN ITEM THAT IS ON THE AGENDA, MAY BE LIMITED TO TWO (2) MINUTES**

**A LUNCH BREAK MAY BE CALLED AT THE DISCRETION OF THE BOARD CHAIR**

**AGENDA DEADLINE: Thursday, 12 noon, 12 days before the Tuesday Board meetings.**

### **Glossary of Acronyms, Abbreviations, and other Terms (in alphabetical order):**

Contra Costa County has a policy of making limited use of acronyms, abbreviations, and industry-specific language in its Board of Supervisors meetings and written materials. Following is a list of commonly used language that may appear in oral presentations and written materials associated with Board meetings:

**AB** Assembly Bill

**ABAG** Association of Bay Area Governments

**ACA** Assembly Constitutional Amendment

**ADA** Americans with Disabilities Act of 1990

**AFSCME** American Federation of State County and Municipal Employees

**AICP** American Institute of Certified Planners

**AIDS** Acquired Immunodeficiency Syndrome

**ALUC** Airport Land Use Commission

**AOD** Alcohol and Other Drugs

**ARRA** American Recovery & Reinvestment Act of 2009

**BAAQMD** Bay Area Air Quality Management District

**BART** Bay Area Rapid Transit District

**BayRICS** Bay Area Regional Interoperable Communications System

**BCDC** Bay Conservation & Development Commission

**BGO** Better Government Ordinance

**BOS** Board of Supervisors

**CALTRANS** California Department of Transportation

**CalWIN** California Works Information Network

**CalWORKS** California Work Opportunity and Responsibility to Kids

**CAER** Community Awareness Emergency Response

**CAO** County Administrative Officer or Office

**CCCPFD (ConFire)** Contra Costa County Fire Protection District

**CCHP** Contra Costa Health Plan

**CCTA** Contra Costa Transportation Authority

**CCRMC** Contra Costa Regional Medical Center

**CCWD** Contra Costa Water District

**CDBG** Community Development Block Grant  
**CFDA** Catalog of Federal Domestic Assistance  
**CEQA** California Environmental Quality Act  
**CIO** Chief Information Officer  
**COLA** Cost of living adjustment  
**ConFire** (CCCYPD) Contra Costa County Fire Protection District  
**CPA** Certified Public Accountant  
**CPI** Consumer Price Index  
**CSA** County Service Area  
**CSAC** California State Association of Counties  
**CTC** California Transportation Commission  
**dba** doing business as  
**DSRIP** Delivery System Reform Incentive Program  
**EBMUD** East Bay Municipal Utility District  
**ECCFPD** East Contra Costa Fire Protection District  
**EIR** Environmental Impact Report  
**EIS** Environmental Impact Statement  
**EMCC** Emergency Medical Care Committee  
**EMS** Emergency Medical Services  
**EPSDT** Early State Periodic Screening, Diagnosis and Treatment Program (Mental Health)  
**et al.** et alii (and others)  
**FAA** Federal Aviation Administration  
**FEMA** Federal Emergency Management Agency  
**F&HS** Family and Human Services Committee  
**First 5** First Five Children and Families Commission (Proposition 10)  
**FTE** Full Time Equivalent  
**FY** Fiscal Year  
**GHAD** Geologic Hazard Abatement District  
**GIS** Geographic Information System  
**HCD** (State Dept of) Housing & Community Development  
**HHS** (State Dept of ) Health and Human Services  
**HIPAA** Health Insurance Portability and Accountability Act  
**HIV** Human Immunodeficiency Syndrome  
**HOV** High Occupancy Vehicle  
**HR** Human Resources  
**HUD** United States Department of Housing and Urban Development  
**IHSS** In-Home Supportive Services  
**Inc.** Incorporated  
**IOC** Internal Operations Committee  
**ISO** Industrial Safety Ordinance  
**JPA** Joint (exercise of) Powers Authority or Agreement  
**Lamorinda** Lafayette-Moraga-Orinda Area  
**LAFCo** Local Agency Formation Commission  
**LLC** Limited Liability Company  
**LLP** Limited Liability Partnership  
**Local 1** Public Employees Union Local 1  
**LVN** Licensed Vocational Nurse  
**MAC** Municipal Advisory Council



**MBE** Minority Business Enterprise  
**M.D.** Medical Doctor  
**M.F.T.** Marriage and Family Therapist  
**MIS** Management Information System  
**MOE** Maintenance of Effort  
**MOU** Memorandum of Understanding  
**MTC** Metropolitan Transportation Commission  
**NACo** National Association of Counties  
**NEPA** National Environmental Policy Act  
**OB-GYN** Obstetrics and Gynecology  
**O.D.** Doctor of Optometry  
**OES-EOC** Office of Emergency Services-Emergency Operations Center  
**OPEB** Other Post Employment Benefits  
**OSHA** Occupational Safety and Health Administration  
**PARS** Public Agencies Retirement Services  
**PEPRA** Public Employees Pension Reform Act  
**Psy.D.** Doctor of Psychology  
**RDA** Redevelopment Agency  
**RFI** Request For Information  
**RFP** Request For Proposal  
**RFQ** Request For Qualifications  
**RN** Registered Nurse  
**SB** Senate Bill  
**SBE** Small Business Enterprise  
**SEIU** Service Employees International Union  
**SUASI** Super Urban Area Security Initiative  
**SWAT** Southwest Area Transportation Committee  
**TRANSPAC** Transportation Partnership & Cooperation (Central)  
**TRANSPLAN** Transportation Planning Committee (East County)  
**TRE** or **TTE** Trustee  
**TWIC** Transportation, Water and Infrastructure Committee  
**UASI** Urban Area Security Initiative  
**VA** Department of Veterans Affairs  
**vs.** versus (against)  
**WAN** Wide Area Network  
**WBE** Women Business Enterprise  
**WCCTAC** West Contra Costa Transportation Advisory Committee

To: Board of Supervisors  
 From: Marilyn Leedom, CCCERA Administrator  
 Date: January 21, 2014



Contra  
 Costa  
 County

Subject: Temporary Hire of County Retiree - Waiver of 180 day "Sit Out" Period

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**RECOMMENDATION(S):**

1. CONSIDER waiving the 180-day "sit out" period for Joelle Luhn, Retirement Communications Coordinator at the Contra Costa County Employees' Retirement Association;
2. FIND that the appointment of Joelle Luhn is necessary to fill a critically needed position; and
3. APPROVE AND AUTHORIZE the hiring of county retiree Joelle Luhn, as a temporary County employee until the permanent position is filled, as recommended by the Retirement Chief Executive Officer.

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☒ APPROVE

☐ OTHER

☒ RECOMMENDATION OF CNTY ADMINISTRATOR

☐ RECOMMENDATION OF BOARD  
 COMMITTEE

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Action of Board On: **01/21/2014** ☐ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

AYES \_\_\_\_\_ NOES \_\_\_\_\_

ABSENT \_\_\_\_\_ ABSTAIN \_\_\_\_\_

RECUSE \_\_\_\_\_

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: January 21, 2014

David J. Twa, County Administrator and Clerk of the Board of Supervisors

Contact: Marilyn Leedom, Retirement CEO,  
 (925) 521-3960

By: , Deputy

#### FISCAL IMPACT:

Approval of this request will result in an annual cost of approximately \$41,697. Since County Retirement Board positions are funded by the Contra Costa County Employees' Retirement Association, this request has no impact on the County budget.

#### BACKGROUND:

The Public Employees' Pension Reform Act of 2013 requires that active members who retire on or after January 1, 2013 must wait 180 days after retirement to return to work. The Act also allows the Board, based on a finding that the appointment is necessary to fill a critically needed position, may waive the 180 day period.

Joelle Luhn retired from the Contra Costa County Employees' Retirement Association (CCCERA) on December 7, 2013. Prior to retiring, Ms. Luhn held the position of Retirement Communications Coordinator and was responsible for providing communications materials to actives, retirees and the Board, as well as creating and compiling the Consolidated Annual Financial Report (CAFR) and the Popular Annual Financial Report (PAFR) for CCCERA.

CCCERA is actively working with Human Resources to recruit for this position with the goal of a permanent appointment. However, the production period for the CAFR and PAFR begins in late January and the recruitment and selection process will not be completed by that time.

Due to this vacancy in a critically needed position, CCCERA is requesting a waiver of the 180 day waiting period for Joelle Luhn and approval to hire her as a temporary County employee until the position is permanently filled. The attached request memo was approved by the Retirement Board on January 8, 2014.

Under current Contra Costs County Employees Retirement Association (CCCERA) rules, if a CCCERA retiree returns to work for a CCCERA covered employer, the retiree can work for 960 hours or less per fiscal year. This rule continues to apply.

#### CONSEQUENCE OF NEGATIVE ACTION:

Failure to receive Board approval may jeopardize efforts of the Contra Costa County Employees' Retirement Association's to provide high quality services to active and retired County employees and the Retirement Board.

#### CHILDREN'S IMPACT STATEMENT:

Not applicable.

#### ATTACHMENTS

CCCERA 180 Day Waiver Memo



## ***MEMORANDUM***

**Meeting Date**  
**01.08.14**  
**Agenda Item**  
**#12**

Date: January 8, 2014  
To: Board of Retirement  
From: Marilyn Leedom, Retirement CEO  
Subject: Temporary Hire of CCCERA Retiree  
Waiver of the 180 day waiting period

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### **Background:**

The Public Employees' Pension Reform Act of 2013 (PEPRA) requires that active members who retire on or after January 1, 2013 must wait 180 days after retirement to return to work. The Act allows the employer, based on a finding that the appointment is necessary to fill a critically needed position, may waive this 180 day period.

The Communications Coordinator position at CCCERA is a single class unrepresented position, providing communications material to actives, retirees and the Board. The incumbent also creates and compiles the annual Consolidated Annual Financial Report (CAFR) and the Popular Annual Financial Report (PAFR) for CCCERA.

The Coordinator retired on December 7, 2013 and the position has been vacant since that time.

We are actively working with Human Resources to begin the recruitment process for this position. However, we will be unable to recruit and train a new employee in this crucial position in time for the production of the 2013 CAFR and PAFR. Our production period for the CAFR and PAFR begins in late January.

### **Recommendation:**

We respectfully request a waiver of the 180 day period for Joelle Luhn, Retirement Communications Coordinator, in order to complete the CAFR and the PAFR for 2013.



**Contra  
Costa  
County**

To: Board of Supervisors  
From: Tiffany Lennear, Chief Asst Clerk of the Board  
Date: January 21, 2014

Subject: 36th Annual Dr. Martin Luther King, Jr., Commemoration and Humanitarian Awards Ceremony

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**RECOMMENDATION(S):**

36th Annual Dr. Martin Luther King, Jr., Commemoration and Humanitarian Awards Ceremony.

**FISCAL IMPACT:**

\*

**BACKGROUND:**

The Reverend Dr. Martin Luther King, Jr., born on January 15, 1929, is one of many selfless Americans who sacrificed his life to better the lives of African American victims of segregationist Jim Crow laws, racism, discrimination, the denial of employment, education and basic human dignity. In 1955 Dr. King took a leadership role and organized a nonviolent, 382-day bus boycott in Montgomery, Alabama. This landmark event commonly referenced in American history as the catalyst of the U.S. Civil Rights Movement, 1955 to 1965, was a demonstration in social protest and civil disobedience. The boycott helped to end segregated busing by way of the 1956 Supreme Court decision which declared segregated buses as unconstitutional. This event also captured worldwide attention and catapulted Dr. King to a plateau which enabled him to help counter the effects of discrimination in southern U.S. states through the disciplined teaching and practice of nonviolent disobedience.

Dr. King accomplished a number of phenomenal feats in a brief period of time. Dr. King worked to organize the registration of African American voters in Alabama, fifty-one years ago in 1963 he delivered the famous "I Have a Dream" speech to over a quarter of a million in attendance at the march on Washington, D.C., and in that same year

☒ APPROVE

☐ OTHER

☒ RECOMMENDATION OF CNTY ADMINISTRATOR

☐ RECOMMENDATION OF BOARD  
COMMITTEE

Action of Board On: **01/21/2014** ☐ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

AYES \_\_\_\_\_ NOES \_\_\_\_\_

ABSENT \_\_\_\_\_ ABSTAIN \_\_\_\_\_

RECUSE \_\_\_\_\_

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: January 21, 2014

David J. Twa, County Administrator and Clerk of the Board of Supervisors

Contact: T. Lennear, (925)  
335-1900

By: , Deputy

cc:

was named Man of the Year by

BACKGROUND: (CONT'D)

Time magazine. Dr. King received the Nobel Peace Prize and invested the award money into the Civil Rights Movement.

At the age of thirty-nine, Dr. King's last public speech was on April 3, 1968 in Memphis, Tennessee where he traveled, by invitation, to lead a protest for city sanitation workers. In this last speech Dr. King referenced the First Amendment to the United States Constitution and stressed its protection of the freedoms of assembly, speech, and press; and, stated "the greatness of America is the right to protest for rights." The following evening on April 4, 1968, Dr. King was brutally assassinated and the Country suffered a great loss.

In January 1983 President Ronald Reagan signed into law the national Dr. Martin Luther King, Jr. Holiday to recognize Dr. King's invaluable contributions to the United States. In 1994 Congress designated Dr. King's holiday as a national Day of Service which calls Americans to work together within their community by volunteering their time and service to the betterment of our nation.

In celebration of the Reverend Dr. Martin Luther King, Jr., the Contra Costa County Board of Supervisors recognize Dr. King and the great legacy he has left our County, the United States of America, and the world of people who choose the power of nonviolence to pursue freedom, equality and justice for all.



**Contra  
Costa  
County**

To: Board of Supervisors  
From: Catherine Kutsuris, Conservation and Development Director  
Date: January 21, 2014

Subject: Hearing to Consider Two Appeals on the Phillips 66 Propane Recovery Project (County File #LP12-2073)

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**RECOMMENDATION(S):**

1. OPEN the public hearing and take testimony on the Phillips 66 Propane Recovery Project.
2. CLOSE the public hearing.
3. CERTIFY the Final Environmental Impact Report (FEIR) dated November 2013, finding it to be adequate and complete, finding that it has been prepared in compliance with the California Environmental Quality Act (CEQA) and the State and County CEQA Guidelines, and finding that it reflects the County's independent judgment and analysis, and specify that the Department of Conservation and Development, Community Development Division (30 Muir Road, Martinez, CA) is the custodian of the documents and other material which constitute the record of proceedings upon which this decision is based.
4. CERTIFY that the Board has considered the contents of the FEIR prior to making a decision on the project.
5. DENY the appeals from Communities For A Better Environment and Shute, Mihaly & Weinberger and UPHOLD the County Planning Commission's decision to APPROVE the Land Use Permit (County File #LP12-2073) with the attached conditions of approval.

---

☒ APPROVE

☐ OTHER

☒ RECOMMENDATION OF CNTY ADMINISTRATOR

☐ RECOMMENDATION OF BOARD  
COMMITTEE

---

Action of Board On: **01/21/2014** ☐ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

AYES \_\_\_\_\_ NOES \_\_\_\_\_

ABSENT \_\_\_\_\_ ABSTAIN \_\_\_\_\_

RECUSE \_\_\_\_\_

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: January 21, 2014

David J. Twa, County Administrator and Clerk of the Board of Supervisors

Contact: 925-674-7786

By: , Deputy

cc:



### RECOMMENDATION(S): (CONT'D)

6. ADOPT the findings contained in County Planning Commission Resolution No. 19-2013, which includes the CEQA findings, Growth Management Standards, and additional language to Land Use Permit findings, shown as underlined text, as the basis for the Board's actions.

7. ADOPT the Mitigation Monitoring and Reporting Program.

8. DIRECT the Community Development Division to post a Notice of Determination with the County Clerk.

### FISCAL IMPACT:

None. The applicant, Phillips 66, is obligated to pay any additional costs above the initial application deposit associated with the processing of the application.

### BACKGROUND:

#### 1. Timeline

The following timeline illustrates the land use permit application's progress from submittal to present:

- **June 22, 2012** – Phillips 66 Company applied for approval of a Land Use Permit for the Propane Recovery Project.
- **July 24, 2012** – Notice of Preparation of an EIR distributed.
- **August 20, 2012** – Scoping session held in Martinez.
- **June 10, 2013** – Draft EIR (DEIR) distributed for public review.
- **July 15, 2013** – Public hearing held before the Zoning Administrator in Martinez to accept comments on DEIR.
- **July 23, 2013** – End of public review period for DEIR extended from July 25, 2013 to August 9, 2013.
- **August 9, 2013** – End of public review period for DEIR.
- **November 6, 2013** – FEIR distributed.
- **November 18, 2013** – Closed hearing held before the Zoning Administrator to consider the adequacy of the FEIR. The Zoning Administrator recommended certification of the FEIR by the Planning Commission.
- **November 19, 2013** – Public hearing held before the Planning Commission in Martinez regarding the Land Use Permit and the adequacy of the FEIR. The Commission determined that the FEIR was adequate and approved the Land Use Permit.
- **November 25, 2013** – Appeal from Shute, Mihaly & Weinberger on behalf of the Rodeo Citizens Association received by the Clerk of the Board.
- **December 2, 2013** – Appeal from Communities for a Better Environment received by the Community Development Division.

#### 2. County Planning Commission Hearing

The County Planning Commission opened the public hearing on the project on November 19, 2013. Oral testimony covered a wide variety of topics such as, but not limited to, the adequacy of the FEIR, types and quality of crude oil, propane safety concerns, pollution, public health, greenhouse gas emissions, Refinery safety, Refinery/community relations. There were also several speakers who testified in support of the project.

During the November 19, 2013 hearing, after evaluating the project in its entirety, including all public testimony and evidence in the record, the Commission voted unanimously to certify the FEIR and approved the land use permit with the conditions of approval as recommended by staff.

#### 3. Appeal Discussion

Following the decision of the Planning Commission, two separate appeals were filed by Communities for a Better Environment, and Shute, Mihaly & Weinberger (on behalf of the Rodeo Citizens Association).

Both appellants submitted similar points of appeal. Chiefly, they claim that the EIR fails to include an adequate project description that links the proposed project to a future “larger project” by the Refinery to begin importing and processing heavier lower-quality crude oil feedstocks, such as Canadian tar sands, and that the proposed project is in preparation to implement this objective. Since this is a common point of appeal for both Shute, Mihaly & Weinberger (SMW) and Communities for a Better Environment (CBE), it is being addressed first.

#### Appeal Points and Staff Responses:

##### A. Future Plans to Change Crude Oil Feedstocks to Lead Into a Larger Project:

The main point both appellants have raised is that Phillips 66 plans to change the crude oil feedstock and begin processing lower-quality heavy crudes, and with the lower-quality crudes Refinery operations could be changed to increase the production of propane and butane far beyond current levels. Phillips 66 states that the project objective is to recover existing volumes of propane and butane already being produced at the Refinery and already contained in the Refinery Fuel Gas (RFG) streams and not to increase the amount of propane and butane being produced at the Refinery beyond current levels. On the contrary, instead of burning the propane and butane in Refinery process heaters, the project will allow the applicant to capture and sell more of the propane and butane that is already being produced at the Refinery, irrespective of the types of oil feedstock.

The applicant proposes to recover for sale approximately 4,200 barrels per day of propane and 9,300 barrels per day of butane already existent in the RFG. This is a practice already performed by other Bay Area refineries, and Phillips 66 is planning to catch up with similar practice. Refinery flow data provided in the Phillips 66 Response to Appeals (Exhibit #7) shows that from January to November of 2013, the Refinery feedstock that was processed during that time produced an average of 14,250 barrels per day of propane and butane combined. Additionally, Master Response 2.2, on page 2-2, of the FEIR addresses all comments which asserted that a relationship between the Propane Recovery Project and purported plans to change the type of crude oil to be processed at the Refinery.

The appellants further claim that the EIR fails to adequately define the project because importing and processing heavier lower-quality crude oil feedstock, such as Canadian tar sands, was not mentioned in the project description. A change in crude feedstock was not mentioned in the project description or analyzed in the DEIR and FEIR since no changes in feedstock or a switch in crude quality are proposed as a part of the project, nor is the project dependent on any such changes. Specifically, SMW asserts on page 7 of their 11/18/13 Letter (Exhibit #3b) that the project description is inadequate since it did not include mention of Phillips 66’s Santa Maria Refinery, claiming that the Rodeo Refinery will “...*increase butane and propane production, once the proper amounts of the right feedstocks arrive...*” from the Santa Maria Refinery. As discussed above, implementation of the proposed project is not dependent upon new feedstock from Santa Maria or anywhere else, nor does the project plan to “increase” production of butane and propane, but rather it will recover butane and propane already existent in the Refinery gas streams under current operations. With this project objective in mind, a discussion of the Santa Maria Refinery was not considered germane; nevertheless, on page 2-4 of the FEIR in Master Response 2.2, a discussion of the Santa Maria Refinery and its association with the Rodeo Refinery was provided.

The additional appeal issues raised by the appellants are responded to in Sections B, C, and D below. It should be noted that most of the issues raised by SMW and CBE have already been addressed in the DEIR and FEIR. Staff has summarized the appeal points below, and in addition, a more comprehensive response has been provided which is identified as (Exhibit #6). In further attempting to respond to the appeals, Phillips 66 submitted a response letter to the Board of Supervisors dated January 6, 2014 (See Exhibit #7).

##### B. Appeal by Shute, Mihaly & Weinberger (SMW) on behalf of the Rodeo Citizens Association

The appeal by SMW comprises the following points based on their November 22, 2013 appeal letter (Exhibit #3a). Their appeal is also supported by referencing their November 18, 2013 letter to the Planning Commission and a technical report by Phyllis Fox, Ph.D. (Fox Report), dated November 15, 2013 (see Exhibit #3b for both documents). The issues raised by both the Fox Report and SMW have already been addressed in the DEIR and FEIR. The SMW appeal letter’s primary points are summarized and briefly addressed below.

## Summary of Appeal Points Raised by Shute, Mihaly & Weinberger and Staff Responses:

- *The EIR fails to adequately evaluate the significant impacts of the project, including but not limited to its air quality, biological, safety, health, and climate impacts.*
- *The EIR fails to evaluate cumulative impacts.*
- *The EIR fails to evaluate mitigation measures and alternatives and the County failed to adopt adequate mitigation or feasible alternatives.*
- *The County failed to adequately respond to comments on the EIR.*
- *The County failed to recirculate the EIR.*
- *The County's findings, including its statement of overriding considerations, are not supported by substantial evidence.*
- *The County cannot make the findings for approval required by its code sections; in particular, the County cannot find that the Project will not be a detriment to public health, safety, or welfare or that it will not cause a nuisance in the surrounding community.*
- *The EIR fails to adequately define the project (see previous Staff response in Section A above).*

### Staff Response

EIR Fails to Provide Adequate Analysis of Environmental Impacts: SMW suggests that project impacts to air quality, biological resources, safety, health, and climate should have been considered as potentially significant and mitigated as well. Air quality was analyzed as a potentially significant impact and mitigation measures were established for the project to address air-quality impacts during the short-term construction phase of the project and also to mitigate long-term emissions of criteria air pollutants after project implementation (See Mitigation Monitoring and Reporting Program [MMRP]—Exhibit #5). Project impacts were not determined to be significant for biological resources, safety, health, or greenhouse gases; on the contrary, the analysis of the EIR determined how the proposal to capture the propane and butane from the RFG would be beneficial by promoting the reduction in sulfur dioxide, reduction in flaring events, and reduction in on-site greenhouse gas emissions.

EIR Fails to Include Analysis of Cumulative Impacts: Chapter 5 of the DEIR (page 5-2) provided comprehensive analysis of the potential cumulative impacts in terms of past, present, and future projects both at the Refinery and in the near region. Other projects at the Refinery and at other existing refineries in the County are likely to cause impacts that are similar to those anticipated to result from the project. Other non-Refinery projects could also cause similar potentially overlapping impacts with those of the project. Thirteen projects within an approximately 16-mile radius were evaluated as potential projects that could have cumulative effects in conjunction with the proposed project. The Draft EIR provided sufficient and adequate cumulative analysis of cumulative impacts and determined them to be less than significant.

EIR Fails to Evaluate Mitigation Measures and Project Alternatives: SMW claimed in their appeal that the County failed to adopt adequate mitigation or feasible alternatives. The EIR determined that the proposed project would result in potentially significant environmental impacts to air quality, cultural resources, noise, and transportation and traffic. These impacts were evaluated in the DEIR and mitigation measures were proposed as needed that would reduce each of these impacts to a less-than-significant level (See MMRP—Exhibit #5).

Chapter 6 of the DEIR considered alternatives to all components of the project. The alternatives to the project were duly evaluated, but were found to be infeasible in that they would be inferior in terms of meeting the project objectives and require more energy consumption for their implementation, and therefore were not considered feasible to the project as proposed.

A no-project alternative was discussed on page 6-6 of the Draft EIR which, when compared to the project, would not result in a decrease in GHG and sulfur emissions from the Refinery, as well as missing the opportunity to decrease the number of flaring events at the Refinery. Although, implementation of a reduced project alternative was determined to be the marginally environmentally superior alternative in the Draft EIR, it would not meet all of the project objectives.

County Failed to Adequately Respond to Comments on the DEIR: The County received 48 comment letters on the DEIR for the proposed project. In addition, oral comments were made by individuals who attended the

publicly noticed public hearing before the Zoning Administrator on July 15, 2013. There were also several speakers who spoke in support of the project. The County has made its best good-faith effort to respond each comment in a professional and scientific manner.

County Failed to Recirculate EIR: CEQA Guidelines Section 15088.5 requires a lead agency to recirculate an EIR for further review and comment when significant new information is added to the EIR after public notice is given of the availability of the DEIR but before certification of the FEIR. New information or data that “merely clarifies” an EIR is not significant unless the EIR is changed in a way that deprives the public of a meaningful opportunity to comment upon a substantial adverse environmental effect of the project or a feasible way to mitigate or avoid such an effect that the project proponent declines to implement. Various minor changes and edits were made to the mitigation measures, text, tables and figures of the DEIR, as described in the FEIR. The flow data (see Exhibit #7) that was subsequently provided by the applicant clarifies and confirms the conclusions of the DEIR. This information simply confirms and provides additional support for the conclusions of the DEIR and further confirms that impacts will remain less than significant. Therefore, recirculation is not required.

Inadequacy of Project Findings:

a. CEQA Findings: In response to the SMW point that the County’s findings, including its statement of overriding considerations, are not supported by substantial evidence, staff would point out that the EIR identifies potentially significant environmental impacts that would occur if the project were implemented, and requires feasible mitigation measures that would reduce all of the potentially significant impacts to less-than-significant levels (See MMRP—Exhibit #5). The DEIR provides a comprehensive analysis of the project’s impacts, and cumulative impacts of the project. Furthermore, the County Planning Commission adopted the findings, analysis, and conclusions of the EIR and based its decision to adopt the document upon the evidence referenced in the EIR and its appendices.

b. Land Use Permit Findings: SMW further states that the County cannot make the findings for approval required by its own code sections for Land Use Permits; in particular, they claim that the County cannot find that the project will not be a detriment to public health, safety or welfare, or that it will not cause a nuisance in the surrounding community. Master Response 2.3 and 2.5 of the FEIR addresses onsite hazards in response to concerns about the risk of accidents associated with the storage of propane and butane, and Master Response 2.6 addresses railroad transportation of propane and butane. The EIR thoroughly analyzed and considered all potential hazards that present risks to the community; therefore, as proposed and conditioned, the project will not create a nuisance and/or enforcement problem within the neighborhood or be detrimental to the health, safety and welfare of the community.

C. Appeal by Communities for a Better Environment (CBE):

The appeal by CBE cites a variety of issues (see Exhibit #4a). The CBE appeal is primarily based on an “expert” report by Greg Karras (see Exhibit #4c), an employee of CBE. Comprehensive responses to the Karras report have already been provided in the FEIR beginning on page 3.2-117. CBE also submitted two letters opposing the project to the Planning Commission on the day of the November 19, 2013 hearing (see Exhibits #4b & #4c).

Summary of Appeal Points Raised by CBE and Staff Responses:

- *The FEIR fails to adequately analyze significant environmental impacts.*
- *The FEIR fails to adequately discuss mitigation measures.*
- *The FEIR provides an inadequate discussion of Project alternatives.*
- *The County failed to adequately notify the community of this project.*
- *The project description fails to disclose that this Project is part of a larger project to enable the Refinery to process lower-quality oil feedstock (see previous Staff response in Section A).*

Staff Response:

EIR Fails to Provide Adequate Analysis of Environmental Impacts: CBE asserted that the FEIR failed to properly address potential environmental impacts, such as explosion/fire risks, air pollution, and greenhouse-gas emissions

(GHG) resulting from the refining of a heavier lower-quality oil feedstock. CBE further states that, the FEIR avoids any discussion of any impact associated with a switch in crude quality. Indeed, the DEIR and FEIR did not analyze any impacts associated with a switch in crude quality, since a switch in crude quality, or the refining of heavier lower-quality oil feedstock, is not an aspect of the proposed project, nor is the project dependent on any such switch. CBE also claimed that the proposed project will have significant impacts on biological resources as a result of continued use of the OTC or “once-through” cooling system. As proposed, the project includes a 25% increase of OTC volume; however, the proposed 25% increase will not require any modifications or expansions to the existing OTC system, and does not go beyond the Regional Water Quality Control Board’s (RWQCB) current permit requirements for the Refinery. CBE also states that the RWQCB ordered the applicant to study replacing the OTC system and FEIR denies the existence of the study. The FEIR does acknowledge the study (see FEIR page 3.2-122, last paragraph). The RWQCB has reviewed the DEIR and no comments or objections to the project have been received regarding the OTC system. Finally, the FEIR responds on page 3.2-122 that no fundamental change to the Refinery cooling system is proposed as part of the project; therefore, it is outside of the scope of this project to include discussion on OTC systems alternatives.

EIR Fails to Provide Adequate Mitigation Measures: CBE’s appeal letter states that the FEIR fails to adequately discuss mitigation measures relating to local and state regulations, the County Industrial Safety Ordinance, the General Plan, and comments again in regards to the RWQCB requirements for the OTC system. The EIR determined that the proposed project would result in potentially significant environmental impacts to air quality, cultural resources, noise, and transportation and traffic. These impacts were identified and evaluated in the DEIR and mitigation measures were proposed as needed that would reduce each of these impacts to a less-than-significant level (See MMRP Exhibit #5). A more detailed response related to the Refinery's OTC system and how it will be affected by the proposed project (including the response to the CBE's supplemental letter, received on 1/7/2014) is found in the County response (See Exhibit #6).

County Failed to Provide Adequate Project Alternatives: As previously discussed in Section B, Chapter 6 of the DEIR considered adequate alternatives to all components of the project as required under CEQA.

County Failed to Provide Adequate Notification: CBE also claims that the County failed to adequately notify the community of this project. The project was noticed in compliance with the noticing requirements of CEQA and, in addition, to the County’s noticing requirements in Section 26-2.2002 of the County Code. The notice of completion and availability of the DEIR and the Planning Commission hearing were noticed to all property owners and occupants within a 300-foot radius of the project parcels APN357-010-001 and APN357-300-005. Copies of the DEIR and FEIR were available for public review at the Pleasant Hill and Rodeo public libraries and at the District 5 supervisor’s office. Notices were also sent to all speakers and those who submitted comments at the scoping session and the July 15, 2013 Zoning Administrator’s hearing on the DEIR. Notice was also given to those individuals, agencies, and organizations that requested notice or expressed interest in the project. Notice of the Commission hearing was published in the West County Times on November 8, 2013.

D. CBE December 12, 2013 Letter to Clerk of the Board: On December 12, 2013, CBE submitted a letter to the Clerk of the Board (see Exhibit #4d) regarding the supposed change in crude oil feedstock. The letter references a project being reviewed by the City of Pittsburg called the “WesPac Pittsburg Energy Infrastructure Project, Tar Sands”. The letter describes WesPac as a crude oil transfer facility, and states that it may be a potential new source of oil feedstock to the Rodeo Refinery. Staff has reviewed the letter and as stated above in Section A, the Propane Recovery Project is not dependent on new feedstock from the WesPac facility or anywhere else because it already produces enough propane and butane at the Refinery to achieve project objectives. Currently the WesPac project is under CEQA review and a decision on this project has not been made. Since CBE’s assumption that the proposed Propane Recovery Project and the WesPac are related was made out of speculation, and since the County has determined that this matter is not germane to the proposed project, the County will refrain from further commenting on this matter.

CONSEQUENCE OF NEGATIVE ACTION:

The Propane Recovery Project would not be constructed and the Refinery would not be able to recover and sell the existing propane and butane, and there would be a lost benefit to the community by missing an opportunity to decrease the amount of GHG and sulfur emissions from the Refinery, as well as losing an opportunity to decrease the number of flaring events at the Refinery.

CHILDREN'S IMPACT STATEMENT:

No Impact.

ATTACHMENTS

Exhibit #1 - CPC Resolution No. 19-2013

Exhibit #2 - Conditions of Approval Approved by CPC

Exhibit #3a - Appeal Letter 11/22/13 Shute Mihaley & Weinberger (SMW)

Exhibit #3b - SMW 11/18/13 Letter and Related Fox Report

Exhibit #4a - Appeal Letter 12/02/13 Communities for a Better Environment (CBE)

Exhibit #4b - CBE 11/19/13 Letter by Roger Lin

Exhibit #4c - CBE 11/19/13 Letter and Related Report by Greg Karras

Exhibit #4d - CBE 12/12/13 Letter Regarding WesPac Project

Exhibit #4e - CBE 01/07/14 Letter

Exhibit #5 - Mitigation Monitoring and Reporting Program

Exhibit #6 - County Response

Exhibit #7 - Phillips 66 Response to Appeals

Exhibit #8 - CPC 11/19/13 Staff Report

Exhibit #9 - Notification List

Exhibit #10 - Maps

Exhibit #11 - CBE 01/14/14 Letter

**RESOLUTION NO. 19-2013**

**RESOLUTION OF THE COUNTY PLANNING COMMISSION OF THE COUNTY OF CONTRA COSTA, STATE OF CALIFORNIA, INCORPORATING FINDINGS AND RECOMMENDATIONS FOR, COUNTY FILE #LP12-2073, THE PROPOSED PROPANE AND ADDITIONAL BUTANE RECOVERY PROJECT FOR THE PHILLIPS 66 REFINERY IN THE RODEO AREA OF SAID COUNTY.**

WHEREAS, PHILLIPS 66 COMPANY (Applicant and Owner) proposes in two phases to construct and improve refinery processing equipment to recover propane and additional amounts of butane for sale from refinery fuel gas and other process streams and to decrease sulfur dioxide emissions from the refinery and also add, remove, and modify processing and ancillary equipment on approximately three acres at the Phillips 66 Refinery located in the community of Rodeo of Contra Costa County, for which an application was received by the Department of Conservation and Development, Community Development Division on June 22, 2012; and

WHEREAS, a Notice of Preparation of an Environmental Impact Report was distributed by the Department of Conservation and Development, Community Development Division on July 24, 2012; and

WHEREAS, on August 20, 2012, the County held a scoping session on the proposed project in Martinez, CA; and

WHEREAS, for purposes of compliance with the provisions of the California Environmental Quality Act (CEQA) and State and County CEQA Guidelines, a Draft Environmental Impact Report ("Draft EIR") and Notice of Completion was prepared and circulated for review and comments between June 10, 2013 and August 9, 2013, a 60-day notice; and

WHEREAS, the County Zoning Administrator held a public hearing on July 15, 2013 to provide further opportunity for public comments on the Draft EIR; and

WHEREAS, the Draft EIR identified potentially significant impacts related to Air Quality, Cultural Resources, Noise, and Traffic and Transportation and the Draft EIR recommended mitigation measures which would reduce each impact to a less-than-significant level, no Significant and Unavoidable impacts were identified with the proposed project; and

WHEREAS, following the close of comment period on the Draft EIR, the County prepared written responses to the all comments received and in November 2013 published the Response to Comments (Final EIR), which incorporates the Draft EIR and provides master and reasoned responses to the comments received as well as, changes or additions to the Draft EIR and distributed as required by the California Environmental Quality Act and State and County CEQA Guidelines; and

WHEREAS, at a closed public meeting on Monday, November 18, 2013, and pursuant to Resolution No. 18-2013, the Zoning Administrator recommended the County Planning Commission certify the Final EIR finding it to be adequate and complete, and certify that the Commission considered the contents of the Final EIR prior to making a decision on the project; and,

WHEREAS, after notice having been fully given, a public hearing was scheduled before the County Planning Commission on Tuesday, November 19, 2013 during which the Commission fully reviewed, considered and evaluated all the testimony and evidence submitted in this matter; and

NOW, THEREFORE, BE IT RESOLVED that the County Planning Commission ("this Commission") takes the following actions:

1. ACCEPTS the Zoning Administrator's recommendation with respect to the Final EIR; Zoning Administrator Resolution No. 18-2013
2. CERTIFIES the Final EIR dated November 2013, finding it to be adequate and complete, finding that it has been prepared in compliance with CEQA (Public Resource Code 210000-21177), the State CEQA Guidelines (Cal. Code Regs., Title 14, Section 15000-15387) and the County CEQA Guidelines, and finding that it reflects the County's independent judgment and analysis, and specifying that the Community Development Division (located at 30 Muir Road, Martinez, CA) is the custodian of the documents and other material which constitutes the record of proceedings upon which this decision is based.
3. CERTIFIES that this Commission considered the contents of the Final EIR prior to making a decision on the Project.
4. ADOPTS CEQA Findings that address environmental impacts and mitigation measures, and ADOPTS the Mitigation Monitoring and Reporting Program in the Final EIR.
6. APPROVES the land use permit, County File # LP12-2073, based on the CEQA Findings, Growth Management Standards and Land Use Permit Findings, subject to the conditions of approval.
7. DIRECT staff to file a Notice of Determination with the County Clerk.

BE IT FURTHER RESOLVED that the reasons for these recommendations are as follows and as described in the Planning Commission Staff Report:



## **PROJECT FINDINGS**

### **I. CEQA Findings**

1. **Introduction:** The Contra Costa County Planning Commission adopts the following findings for certification of the Environmental Impact Report (EIR) and approval of the Propane Recovery Project pursuant to the California Environmental Quality Act, California Public Resources Code, Sections 21000, et seq. the Guidelines for Implementation of CEQA, Title 14 of the California Code of Regulations, Sections 15000, et seq. (CEQA Guidelines) and the County's CEQA Guidelines.

Pursuant to Public Resources Code Section 21081 and CEQA Guidelines Section 15091, no public agency shall approve and carry out a project where an EIR has been certified, which identifies one or more significant impacts on the environment that would occur if the project is approved, unless the public agency makes one or more findings for each of those significant impacts, accompanied by a brief explanation of the rationale for each finding. The possible findings, which must be supported by substantial evidence in the record, are:

- a. Changes or alterations have been required in, or incorporated into, the project that mitigate or avoid the significant impact on the environment.
- b. Changes or alterations are within the responsibility and jurisdiction of another public agency and have been, or can and should be, adopted by that other agency.
- c. Specific economic, legal, social, technological or other considerations make infeasible the mitigation measures or project alternatives identified in the EIR.

For those significant impacts that cannot be mitigated to below a level of significance, the public agency is required to find that specific overriding economic, legal, social, technological or other benefits of the project outweigh the significant impacts of the project. The Propane Recovery Project did not present any significant impacts that cannot be mitigated below or to a less-than-significant impact level.

2. **Project and EIR:** The project proposes refinery processing equipment improvements to recover for sale additional amounts of propane and butane from refinery fuel gas (RFG) and other process streams; and to decrease sulfur dioxide (SO<sub>2</sub>) emissions from the refinery as a result of removing sulfur compounds from RFG streams. The proposed project would add and modify processing and ancillary equipment within the Phillips 66 Rodeo refinery in Contra Costa County.

The proposed project would add: 1) a hydrotreater, 2) new fractionation columns to recover propane and butane, 3) six propane storage vessels and treatment facilities, 4) two new rail spurs, and 5) the removal of two 265-foot heater stacks. To provide the

steam required by the project, either a new 140 million Btu/hr steam boiler would be added or more steam would be provided by the existing steam power plant if the new boiler were not built. There would also be minor modifications to existing process units and utility systems for the purpose of tie-ins and to address any changes in operating pressure or temperature at the tie-in points. The project also would require hydrotreating a portion of the RFG, a process that would reduce the amount of sulfur in the fuel gas, and because fuel gas is now burned to produce heat for refinery processes, it would ultimately reduce the refinery's SO<sub>2</sub> emissions within the atmosphere.

The project would be built in two phases. The first phase (Phase I) would include all project components except propane storage and the additional rail loading rack and spurs. During the second phase, (Phase II), the facilities to store and ship propane would be added along with the piping and other ancillary equipment necessary to get the propane from the Propane/Butane Recovery Unit to the storage vessels and loading racks.

The Department of Conservation and Development determined that an EIR was required for the project. Accordingly, the County, as lead agency for this Project, distributed a Notice of Preparation on July 24, 2012. The Draft Environmental Impact Report ("Draft EIR"), State Clearinghouse Number 2012072046, was released for public review on June 10, 2013. The initial public comment period was scheduled for 45 days and was extended an additional 15 days, ending on August 9, 2013. A public hearing before the Zoning Administrator to receive comments on the Draft EIR was held on July 15, 2013. The Final Environmental Impact Report ("Final EIR") was published and distributed in November 2013. The Zoning Administrator held a hearing on November 18, 2013 and recommended certification of the EIR.

The EIR, as referenced in these findings, includes the Draft EIR (and its appendices) as supplemented and revised by the Final EIR, and the Final EIR (and its appendices). The Final EIR contains EIR Text Revisions (Chapter 4) that restates and revises some text, figures and tables of the Draft EIR. When these findings refer to sections, tables, figures or text of the EIR, and unless the context clearly indicates otherwise, these findings refer to the revised versions in Chapter 4 of the Final EIR.

The EIR identifies potentially significant environmental impacts that would occur if the project were implemented, and feasible mitigation measures would reduce all of the potentially significant impacts to less-than-significant levels. The EIR provides a comprehensive analysis of the project's impacts, and cumulative impacts to which the project would contribute. The EIR includes responses to all written and oral comments received during the comment period, and provides adequate, good faith, and reasoned responses to all comments raising significant environmental issues. The EIR also addresses a reasonable range of alternatives. Evidence regarding the range of alternatives, and the evidence indicating that offsite and reduced development alternatives were not studied in detail because they would not achieve most of the project objectives is in the EIR and in the record. The Commission adopts the analysis

and conclusions of the EIR and bases its decision upon the evidence referenced in the EIR and its appendices.

The comprehensive analysis in the EIR provides the Commission with the necessary information required by the California Environmental Quality Act (CEQA) to properly analyze and evaluate any and all of the potential environmental impacts of the Project.

#### Certification of EIR

The Commission finds that the EIR has been completed in compliance with CEQA; that the Commission reviewed and considered the information contained in the EIR prior to approving the project; and the EIR reflects the County's independent judgment and analysis.

#### Recirculation is not required

CEQA Guidelines Section 15088.5 requires a lead agency to recirculate an EIR for further review and comment when significant new information is added to the EIR after public notice is given of the availability of the Draft EIR but before certification of the Final EIR. New information added to an EIR is not significant unless the EIR is changed in a way that deprives the public of a meaningful opportunity to comment upon a substantial adverse environmental effect of the project or a feasible way to mitigate or avoid such an effect that the project proponent declines to implement. The Guidelines provide examples of significant new information under this standard, which involve evidence of a new or more severe significant impact, all as more specifically set forth in the EIR.

The Commission recognizes that the Final EIR incorporates information obtained since the Draft EIR was completed, and contains additions, clarifications, modifications, and other changes. Various minor changes and edits have been made to the mitigation measures, text, tables and figures of the Draft EIR, as described in the Final EIR. Information that confirms the conclusions of the Draft EIR has been provided in response to comments, and mitigation measures have been edited for clarity, feasibility, and to strengthen them. With respect to this information, the Commission adopts the conclusions and analysis of the EIR based upon the evidence to which the EIR refers. This information confirms and provides additional support for the conclusions of the Draft EIR, and further confirms that impacts will remain less-than-significant.

Based on the foregoing, and having reviewed the information contained in the EIR and in the documents comprising the administrative record, the Commission finds that no significant new information has been added since public notice was given of the availability of the Draft EIR that would require recirculation of the EIR.

#### Differences of Opinion Regarding Environmental Analysis

In making its determination to certify the Final EIR and to approve the project, the Commission recognizes that the project involves controversial environmental issues

and that a range of technical and scientific opinion exists with respect to those issues. The Commission has acquired an understanding of the range of this technical and scientific opinion by its review of the Draft EIR, the comments received on the Draft EIR and the responses to those comments in the Final EIR, as well as other testimony, letters, and reports submitted for the record. The Commission recognizes that some of the comments submitted on the EIR, and at the hearing, disagree with the conclusions, analysis, methodology and factual bases stated in the EIR. The EIR was prepared by experts, and that some of these comments were from experts, thus creating a disagreement among experts. The Commission has reviewed and considered, as a whole, the evidence and analysis presented in the EIR and in the record, and has gained a comprehensive and well-rounded understanding of the environmental issues presented by the project. In turn, this understanding has enabled the Commission to make its decisions after weighing and considering the various viewpoints on these important issues.

### *Impact Conclusions and Mitigation Measures*

Exhibit I (the summary of impacts, mitigation measures, and resulting levels of significance that appears as Table 2-1 in the EIR) is attached to these findings and incorporated herein by reference. Exhibit I summarizes the environmental determinations of the EIR about the Project's impacts and describe mitigation measures. This exhibit does not attempt to describe the full analysis of each environmental impact contained in the EIR. Instead, Exhibit I provides a summary description of each impact, describes the applicable mitigation measures identified in the EIR and adopted by the Commission, and states the Commission's findings on the significance of each impact after imposition of the adopted mitigation measures. A full explanation of these environmental findings and conclusions can be found in the EIR. The Commission ratifies, adopts, and incorporates the analysis and explanation in the EIR, and ratifies, adopts, and incorporates in these findings the determinations and conclusions of the EIR relating to environmental impacts and mitigation measures. These findings are based upon the evidence contained in and referenced in the EIR, in staff reports, in the submittals from the applicant, and on the record as a whole.

Exhibit C (the Mitigation, Monitoring Reporting Program [MMRP]) is attached to these findings and is hereby adopted by the Commission, and is incorporated into these findings. The mitigation measures will feasibly reduce or avoid the potentially significant and significant impacts of the project to less-than-significant levels, and will reduce some less-than-significant impacts as well. In adopting these mitigation measures, the Commission intends to adopt each of the mitigation measures identified by the EIR. Accordingly, in the event a mitigation measure recommended in the EIR has inadvertently been omitted from Exhibit C, such mitigation measure is hereby adopted and incorporated in these findings by reference. In addition, in the event the language describing a mitigation measure set forth in Exhibit C fails to accurately reflect the substance of the mitigation measures in the EIR due to a clerical error, the language of the mitigation measure as set forth in the EIR shall control, unless the language of the mitigation measure has been specifically and expressly modified by these findings. Some language has been modified to reflect County practices and

procedures regarding department approval processes, and to reflect technical details of the project that do not substantively affect the mitigation of impacts.

The Commission finds that changes or alterations have been required in, or incorporated into, the project which feasibly avoid or substantially lessen the significant environmental effects on the environment. As shown in the MMRP exhibit, primary responsibility for implementation, monitoring and enforcement of all mitigation measures lies with the County. Other agencies may play a role in approving the project. For example, there may be consultation with the Regional Water Quality Control Board regarding stormwater plans and other water quality aspects of the project, and resource agencies may become involved should any resource issues need their input as a result of the project.

Some of the EIR's mitigation measures were modified in response to such comments. Other comments requested minor modifications in mitigation measures identified in the Draft EIR, requested mitigation measures for impacts that were less-than-significant, or requested additional mitigation measures for impacts as to which the Draft EIR identified mitigation measures that would reduce the identified impact to a less-than-significant level; these requests are declined as unnecessary. The alternative and additional mitigation measures are not necessary to reduce impacts to a less-than-significant level, and some purported to address an impact that was not potentially significant. With respect to the additional measures suggested by commenters that were not added to the EIR, the Commission adopts the reasons set forth in the responses to comments contained in the EIR as its grounds for not including the adoption of these mitigation measures.

3. The various documents and other materials constitute the record upon which the Commission bases these findings and the approvals contained herein. These findings cite specific pieces of evidence, but none of the Commission's findings are based solely on those pieces of evidence. These findings are adopted based upon the entire record, and the Commission intends to rely upon all supporting evidence in the record for each of its findings.

The location and custodian of the documents and materials that comprise the record is Contra Costa County, Department of Conservation and Development, 30 Muir Road, Martinez, CA, 94553, telephone (925) 674-7205.

#### **B. Growth Management Performance Standards**

1. **Traffic:** A traffic impact analysis was prepared for the Propane Recovery Project which suggested mitigation measures that, if implemented, would reduce any potential impacts on traffic during construction of the project to less-than-significant levels. The project was also reviewed by the Public Works Department and Caltrans for impacts on traffic and circulation, and is subject to compliance with their conditions of approval and the mitigation measures required and identified within the Final Environmental Impact Report. Therefore, the proposed project will not have an adverse impact on traffic in the area.

2. **Water:** The refinery currently receives approximately 3,000 gallons per minute of fresh water from the East Bay Municipal Utility District (EBMUD). Implementation of the project would require an increase in fresh water by approximately 20 gallons per minute. The additional fresh water required for the proposed project would be available from EBMUD's existing entitlements. The additional water supply required during project construction would be only a small, temporary increment as compared to existing and proposed water usage.
3. **Sewage Disposal:** Although the refinery lies within the Rodeo Sanitary District's service area, the refinery collects, treats, and discharges all wastewater and stormwater to its own on-site wastewater treatment system. Since the refinery does not discharge to the public wastewater treatment facilities, the capacity of the Rodeo Sanitary District's wastewater treatment facility would be unaffected by the project. The refinery currently discharges approximately 2.8 million gallons per day of wastewater to the on-site treatment plant, but it has the ability to treat up to 10 million gallons per day. The project would increase wastewater flows to the refinery's treatment plant by 0.03 million gallons per day, well below the plant's 10-million-gallon maximum treatment capacity. Thus, the refinery has the capacity to treat the additional wastewater flow.
4. **Fire Protection:** The refinery is licensed by the State Fire Marshal to provide its own fire protection. The refinery is part of a Mutual Aid Organization, which is composed of more than half a dozen refineries that agree to provide one another with emergency response resourced in the event of a major emergency. The Rodeo-Hercules Fire District could also provide emergency services to the refinery; however, the Rodeo-Hercules Fire District would be supported by the Pinole Fire Department, the Crockett-Carquinez Fire District, and the Contra Costa County Fire Protection District in the event that major assistance was needed at the refinery. Implementation of the Propane Recovery Project is not expected to require additional support from public fire protection agencies.
5. **Public Protection:** The Growth Management Element standard is 155 square feet of Sheriff's facility/station area and support facilities for every 1,000 member of the population. The Small population increase associated with this project is not considered significant because the project would create temporary new jobs and only two permanent jobs. Any population growth resulting from the new permanent job positions would be insignificant and positive to the economy and would not impact the County's ability to achieve the performance standard.
6. **Parks and Recreation:** The implementation of the project could possibly induce population growth and ancillary use by employees of nearby facilities due to the increase in employment opportunities. However, any population growth induced will not have a major cumulative effect on the demand for park and recreation facilities and is not subject to payment of park dedication fees.

7. **Flood Control and Drainage:** The proposed project elements would all be constructed within the previously-developed areas, where stormwater and runoff is controlled and treated onsite before discharge. Therefore, drainage patterns would not be altered by the proposed project.

C. **Land Use Permit Findings**

1. ***That the proposed conditional land use shall not be detrimental to the health, safety, and general welfare of the county.***

**Project Finding:** All significant environmental impacts of the Propane Recovery Project as identified in the Final EIR, including Air Quality and emissions associated with construction and operational activities will be reduced to less-than-significant levels after the implementation of mitigation measures 4.3-1 and 4.3-2. Further, the reduction of sulfur dioxide (SO<sub>2</sub>) is an environmental benefit. Implementation of the project will also reduce flaring events because of the proposed capture of propane and butane from RFG; which will reduce the volume of RFG combusted at the Refinery. Furthermore, the replacement of a portion of the RFG with natural gas, will result in a reduction of onsite greenhouse gas emissions.

Although the proposed project would result in increased quantities of butane and propane being shipped from the Refinery by rail, this would not result in additional train traffic compared to existing conditions (See Draft EIR Section 3.3.2.12, page 3-17). Additionally, the risk of transporting propane and butane was evaluated in the Draft EIR, and was determined to be less than significant because the probability of accident occurrences was estimated to be one in every 100 to 1,000 years. The existing refinery butane storage facilities have been determined to be adequate to accommodate the additional butane proposed to be recovered. The proposed propane storage tanks will be designed appropriately to engineering building code standards to accommodate the recovered propane.

Therefore, based on the forgoing, the Propane Recovery Project will not be detrimental to health, safety, and general welfare of the County.

2. ***That the proposed conditional land use shall not adversely affect the orderly development of property within the county.***

**Project Finding:** The refinery is approximately 1,100 acres in size and is located in the unincorporated area of Rodeo in Contra Costa County. Interstate Highway 80 (I-80) bisects the refinery in a northeast to southwest direction. All elements of the Propane Recovery Project would be located on about one acre within the existing boundaries of the 495-acre portion of refinery property already developed for refining operations. All elements of the project will be within the portion of the lands designated for Heavy Industry use by the County General Plan and zoned Heavy Industrial ("H-I") under the Contra Costa County Ordinance Code. Pursuant to these designations, oil refining and other manufacturing operations are allowed and are permitted uses, respectively. Based

on the foregoing, the Propane Recovery Project will not adversely affect the orderly development of property with the County.

3. ***That the proposed conditional land use shall not adversely affect the preservation of property values and the protection of the tax base within the county.***

**Project Finding:** The refinery has been in operation at its current location since 1896. The proposed project will be situated on approximately one acre located throughout the 495-acre portion of the refinery property already developed for refining operations. The proposal will not change the refinery's current land use, nor will it be inconsistent with the present industrial uses in the vicinity of the refinery, including those conducted at the PG&E substation, the Shore Terminal (formerly NuStar) facility, and the Rodeo Sanitary District. The refinery also consists of approximately 600 acres of undeveloped land, a portion of which is used by the refinery as a buffer zone to limit potential impact of the refining operations on non-industrial land uses located in the refinery's general vicinity.

The construction and operation of the proposal will result in the hiring of temporary and permanent employees at the refinery. Further, implementation of the Propane Recovery Project would increase the assessed value of the refinery property, which would expand the County's tax base. The proposal will not adversely affect the preservation of property values and the protection of the tax base within the County.

4. ***That the proposed conditional land use shall not adversely affect the policy and goals as set by the general plan.***

**Project Finding:** The proposed project is consistent with the overall goals and policies of the General Plan. The Land Use Element supports petroleum processing and refining within the Heavy Industrial Districts. The project meets the Growth Management Performance Standards section of the General Plan, and all potentially significant impacts on Air Quality, Cultural Resources, Noise, and Transportation & Traffic will be mitigated to less-than-significant levels. The mitigations as set forth in the Final Environmental Impact Report will protect the health, safety, and general welfare of the public.

5. ***That the proposed conditional land use shall not create a nuisance and/or enforcement problem within the neighborhood or community.***

**Project Finding:** The proposal to be constructed will be located on land designated Heavy Industry by the General Plan and zoned H-I by the County Ordinance Code. Industrial operations have occurred throughout the refinery property for many years. The residential development of Bayo Vista and the community of Rodeo are located south of the refinery. The refinery maintains an open space buffer zone between the oil processing areas and the closest sensitive receptors. The Shore Terminal is located directly to the north of the refinery, with the community of Tormey and Crockett as the closest neighborhoods in this direction; however, topographically these communities



are physically separated from the refinery by rolling hills. The refinery abuts the San Pablo Bay to the west, with land designated by the General Plan as Open space (OS) to the east.

Airborne emissions of certain gasses do have the ability to produce odors, which can result in public nuisances and complaints from residential communities. As discussed within the Final Environmental Impact Report (FEIR) in Chapter 2—Master Responses on page 2-10, the refinery and the communities continue to work on a fenceline monitoring system, as required as part of a previous land use permit. The Propane Recovery Project appears unlikely to result in an increase of odorous emissions, as certain equipment and technology are anticipated to be installed and/or used as part of the fenceline monitoring system.

The Noise Element of the General Plan does contain land use compatibility standards for noise which are intended to limit the noise impacts. Noise from operation of the Propane Recovery Project was determined to be 44 decibels from 2,300 feet (the distance to the closest residential receptors), which would be less than the County exterior day-night noise level threshold of 60 decibels. As set forth in the Final EIR, any noise impacts from construction will be mitigated to less-than-significant levels.

Temporary traffic impacts for the construction of the proposed project would be the most likely potential source of project-related nuisances in the vicinity of the refinery. These traffic impacts will be mitigated to less-than-significant levels by the implementation of Mitigation Measures 4.17-2 (a) and (b), which include the requirement of traffic control plans and prescribed construction-traffic routes. Therefore, the proposal will not create a nuisance and/or enforcement problem within the neighborhood or community.

6. ***That the proposed conditional land use shall not encourage marginal development within the neighborhood.***

**Project Finding:** The Propane Recovery Project will be located in areas zoned H-I under the County Ordinance Code and designated Heavy Industry in the County General Plan. Most of the undeveloped land adjacent to the 495-acre developed portion of the refinery is maintained by Phillips 66 as open space to serve as a buffer between refining operations and the adjacent non-industrial land uses. The areas to the north and southwest are already developed for industrial use. The refinery will not alter its use of the buffer zone. The proposal is intended to recover and sell the excess propane, which is a byproduct that is already produced at the refinery during the refining process and but not sold, but is rather burned as processing fuel in the refinery fuel gas. This project will maintain the existing land use in a manner that will ensure its continued ability to meet future demands. The proposal will not encourage marginal development within the neighborhood.

7. ***That special conditions or unique characteristics of the subject property and its location or surroundings are established.***

**Project Finding:** The Phillips 66 Rodeo refinery has existed in its present location for more than 100 years and is one of the few areas in the County suitable for the proposed project. The project areas are zoned Heavy Industrial District (H-I) by the County Ordinance Code. This designation allows a permitted use of oil refining and other manufacturing operations. The project will not result in any changes in the existing use of the refinery in that propane and butane are both already produced at the facility.

WHEREAS, at the November 19, 2013 hearing the County Planning Commission adopted and certified the contents of the Final EIR, adopted the mitigation monitoring program and approved County File #LP12-2073: and

WHEREAS, in a letter and its attachments, dated November 25, 2013, Shute, Mihaly, & Weinberger LLP filed an appeal of the Commission's decision to approve the Land Use Permit, citing numerous objections to the Final EIR's analysis and conclusions; and

WHEREAS, in a letter dated December 2, 2013, Communities for Better Environment, filed an appeal of the Commission's decision to approve the Land Use Permit, citing numerous objections to the Final EIR's analysis and conclusions; and

NOW BE IT RESOLVED that the secretary of this Commission will sign and attest the certified copy of this resolution and deliver the same to the Board of Supervisors, all in accordance with the Government Code of the State of California.

This Resolution was approved upon motion of the County Planning Commission on Tuesday, November 19, 2013 by the following vote:

AYES: Commissioners Terrell, Snyder, Steele, Stewart, and Wright

NOES: None

ABSENT: Commissioners Clark and Swenson

ABSTENTIONS: None

***Marvin Terrell***

Chair of the County Planning Commission  
County of Contra Costa, State of California

ATTEST:



Aruna Bhat, Secretary  
County of Contra Costa  
State of California

THIS PROJECT IS SUBJECT TO THE FOLLOWING CONDITIONS OF APPROVAL:

**Land Use Permit Approval**

1. \_\_\_\_\_ A Land Use Permit to allow the implementation of the Propane Recovery Project at the Phillips 66 Rodeo refinery is APPROVED based on the following documents received by the Department of Conservation and Development, Community Development Division (CDD):
  - a) Application and materials received on June 22, 2012
  - b) Draft Environmental Impact Report and appendices, dated June 2013

- c) Final Environmental Impact Report and appendices, dated November 2013
- d) Mitigation Monitoring Reporting Program, dated November 2013

### Application Costs

- 2. \_\_\_\_\_ This application is subject to an initial application deposit of \$2,700.00, which was paid with the application submittal, plus time and material costs if the application review expenses exceed 100% of the initial deposit. **Any additional costs due must be paid within 60 days of the permit effective date or prior to use of the permit, whichever occurs first.** The applicant may obtain current costs by contacting the project planner. If you owe additional fees, a bill will be sent to you shortly after permit issuance.

### Notice of Determination Filing Fee

- 3. \_\_\_\_\_ By November 20, 2013, Phillips 66 shall pay the California Department of Fish and Wildlife environmental review fee of \$2,995.25. Payment of this fee is mandated by Assembly Bill 3158, which became effective on January 1, 1991. Until the fee is paid, the project approval is not considered vested or final and no building permits can be issued. Also, if the fee is not paid on time, then the 30-day statutory time limit to file a legal challenge against the approval will be extended to 180 days.

### Mitigation and Monitoring Fees

- 4. \_\_\_\_\_ **At least 60 days prior to commencement of construction-related activities, issuance of grading permits or issuance of building permits, whichever occurs first,** Phillips 66 shall provide the County with an initial deposit of \$10,000.00 to cover costs of mitigation monitoring. Phillips 66 shall be responsible for providing adequate funding to cover all eventual costs of mitigation monitoring.

### Indemnification

- 5. \_\_\_\_\_ **Prior to commencement of construction-related activities, issuance of grading permits or issuance of building permits, whichever occurs first,** pursuant to Government Code Section 66474.9, Phillips 66 shall submit a letter indicating that it will defend, indemnify, and hold harmless the County and its agents, officers, and employees from any claim, action or proceeding against the Department (the County) or its agents, officers, or employees to attack, set aside, void or annul the Department's

approval concerning this land use permit application, which action is brought within the time period provided for in Government Code Section 66499.37. The County will promptly notify Phillips 66 of any such claim, action, or proceeding and cooperate fully in the defense.

### Condition of Approval Compliance Report

6. \_\_\_\_\_ **At least 45 days prior to commencement of construction-related activities, issuance of grading permits or issuance of building permits, whichever occurs first,** Phillips 66 shall submit an application for Condition of Approval Compliance Review to the CDD. The fee for this application is an initial deposit of \$5,000 that is subject to time and materials costs. Should staff costs exceed the deposit, additional fees will be required. Submittals for this application shall include a checklist describing how each condition of approval will be satisfied and applicable proof that each condition has been satisfied (i.e. documentation, plans, photographs, etc.). This application will remain active throughout the life of the project and additional submittals will be required to ensure compliance with each phase of development (grading, building), as described below.

### Geotechnical Reports and Recommendations

7. \_\_\_\_\_ **At least 45 days prior to commencement of construction-related activities, issuance of grading permits or issuance of building permits, whichever occurs first,** Phillips 66 shall submit a satisfactory geotechnical report prepared by a qualified individual or firm for the review of the County Planning Geologist and the review and approval of the CDD. At minimum, this report shall discuss liquefaction, slope stability, expansive soils, erosion, differential settlement, lateral spreading, subsidence and corrosive soils at each of the construction sites where earthwork will be performed and/or new storage units will be constructed. The report shall include specific design and construction recommendations appropriate for addressing any adverse soil conditions. Grading and building plans shall be prepared in accordance with the recommendations of the approved geotechnical report. A non-refundable deposit of \$750.00 shall be submitted with the report.
8. \_\_\_\_\_ **At least 45 days prior to commencement of construction-related activities, issuance of grading permits or issuance of building permits, whichever occurs first,** Phillips 66 shall submit satisfactory evidence for the review of the County Planning Geologist and the review and approval of the CDD, that the design of the project has been reviewed and that it conforms with the recommendations of the Planning Geologist, the project

geotechnical engineer or engineering geologist and the project structural engineer and meets the following requirements:

- i. All above-ground and underground utilities shall be designed to accommodate estimated settlement without failure, especially across transitions between fills and cuts. Seismic design consistent with current professional engineering and industry standards shall be employed in construction for resistance to strong ground shaking.
- ii. The California Building Code and California Accidental Release Prevention Program seismic requirements, or more stringent standards, shall be followed during design and construction of all components of the project.
- iii. Additional requirements recommended by the project California Certified Engineering Geologist or Geotechnical Engineer, based on site-specific studied and specific project requirements, shall be followed and shall be incorporated in the Project design specifications.

9. \_\_\_\_\_ **At least 45 days prior to issuance of grading permits**, Phillips 66 shall submit grading plans for review and approval of the Department of Conservation and Development, Community Development Division (CDD). The grading plans shall be accompanied by an erosion-control plan. At a minimum, the erosion-control plan shall include the following requirements:

- i. Excavation and grading activities shall be conducted pursuant to all required grading permits issued by the Building Inspection Division.
- ii. Temporary erosion control measures shall be provided until vegetation is reestablished or impervious surfaces (asphalt, concrete, etc.) are constructed.
- iii. Best Management Practices selected and implemented for the project shall be in place and operational prior to commencement of major earthwork.

#### Contact Persons and Information

10. \_\_\_\_\_ **Prior to commencement of construction-related activities, issuance of grading permits or issuance of building permits, whichever occurs first**, Phillips 66 shall post a publicly visible sign stating the names, titles, and phone numbers of individuals responsible for control of construction noise, dust, litter, and traffic. A 24-hour emergency number shall also be stated. The sign shall be kept up to date and shall be placed in a conspicuous location on refinery property along San Pablo Avenue.

**Railcar Storage**

11. \_\_\_\_\_ Phillips 66 must continuously monitor the storage of railcars (primarily propane and butane railcars), and as needed contact the Union Pacific Railroad (UPRR) to request and encourage that UPRR utilize on-site areas for storage of railcars and to make space available on-site to the extent practicable for the storage of any propane and butane railcars.

MITIGATION MONITORING REPORTING PROGRAM (MMRP) CONDITIONS OF THE FINAL ENVIRONMENTAL IMPACT REPORT

**MMRP for Project Impacts on Air Quality**

12. \_\_\_\_\_ **Air Quality Mitigation Measure 4.3-1:** Phillips 66 and its construction contractors shall implement the following applicable Bay Area Air Quality Management District (BAAQMD) basic control measures.
- a) Water all exposed surfaces of active construction areas at least twice daily (using reclaimed water if possible). Watering should be sufficient to prevent airborne dust from leaving the site.
  - b) Cover all trucks hauling soil, sand, and other loose materials or require all trucks to maintain at least two feet of freeboard (i.e., the minimum required space between the top of the load and the top of the trailer).
  - c) All visible mud or dirt track-out onto adjacent public roads shall be removed using wet power vacuum street sweepers at least once per day, or more if needed. The use of dry power sweeping is prohibited.
  - d) Limit vehicle speeds on unpaved roads to 15 miles per hour.
  - e) Pave all roadways, driveways, sidewalks, etc. as soon as feasible. In addition, building pads should be laid as soon as possible after grading unless seeding or soil binders are used.
  - f) Idling times shall be minimized either by shutting equipment off when not in use or reducing the maximum idling time to five minutes (as required by the California airborne toxics control measure Title 13, Section 2485, of the California Code of Regulations. Clear signage to this effect shall be provided for construction workers at all access points.
  - g) All construction equipment shall be maintained and properly tuned in accordance with the manufacturer's specifications. All equipment shall be checked by a certified mechanic and

determined to be running in proper condition prior to operation.

- h) Post a publicly visible sign with the telephone number and person to contact at the County regarding dust complaints. This person shall respond and require Phillips 66 to take corrective action within 48 hours. The telephone numbers of contacts at the BAAQMD shall also be visible.

13. \_\_\_\_\_ **Air Quality Mitigation Measure 4.3-2:** Phillips 66 shall permanently decommission the B-401 process heater in Unit 240 to offset significant NO<sub>x</sub> emissions related to the proposed Propane Recovery Project. Prior to operations of the Project, Phillips 66 shall provide documentation to the Department of Conservation and Development, Community Development Division (CDD) that shows that Phillips 66 has not applied for additional NO<sub>x</sub> or GHG emission reduction credits (ERCs) associated with the unit B-401 process heater shutdown.

#### **MMRP for Project Impacts on Cultural Resources**

14. \_\_\_\_\_ **Cultural Resources Mitigation Measures 4.5-1 and 4.5-2:** Pursuant to the California Environmental Quality Act (CEQA) Guidelines Section 15064.5(f), "provisions for historical or unique archaeological resources accidentally discovered during construction" shall be instituted. In the event that any prehistoric or historic-period subsurface cultural resources are discovered during ground-disturbing activities, all work within 100 feet of the find shall be halted and Phillips 66 shall consult with the County and a qualified archaeologist (as approved by the County) to assess the significance of the find per CEQA Guidelines Section 15064.5. If any find is determined to be significant, representatives of the County and the qualified archaeologist would meet to determine the appropriate course of action.

Avoidance is always the preferred course of action for archaeological sites. In considering any suggestion proposed by the consulting archaeologist to reduce impacts to historical resources or unique archaeological resources, the County would determine whether avoidance is feasible in light of factors such as the nature of the find, project design, costs, and other considerations. If avoidance is infeasible, other appropriate measures (e.g., data recovery, interpretation of finds in a public venue) would be instituted. Work may proceed on other parts of the Project site while mitigation for historical resources or unique archaeological resources is carried out.

All significant cultural materials recovered shall be, at the discretion of the consulting archaeologist, subject to scientific



analysis, professional museum curation, and documented according to current professional standards. In the event of an inadvertent discovery of a unique archeological resource, this mitigation measure shall be implemented.

15. \_\_\_\_\_ **Cultural Resources Mitigation Measure 4.5-3:** In the event of the inadvertent discovery of a unique paleontological resource, or site, or unique geological feature, Phillips 66 shall notify both the County and a qualified paleontologist (as approved by the County) of unanticipated discoveries. The qualified paleontologist, under contract to Phillips 66, shall subsequently document the discovery. In the event of an unanticipated discovery of a fossil or fossilized deposit during construction, excavations within 100 feet of the find shall be temporarily halted or diverted until a qualified paleontologist examines the discovery. The paleontologist shall notify the appropriate agencies to determine procedures that would be followed before construction is allowed to resume at the location of the find. The paleontologist shall oversee implementation of these procedures once they have been determined.
  
16. \_\_\_\_\_ **Cultural Resources Mitigation Measure 4.5-4:** In the event that any prehistoric or historic subsurface human remains are discovered during ground disturbing activities, all work within 100 feet of the resources shall be halted and Phillips 66 shall consult with the County and a qualified archaeologist (as approved by the County) to assess the significance of the find per CEQA Guidelines Section 15064.5. If any find is determined to be significant, representatives of the County and the qualified archaeologist would meet to determine the appropriate avoidance measures or other appropriate mitigation. In considering any suggested mitigation proposed by the consulting archaeologist to mitigate impacts to historical resources or unique archaeological resources, the County would determine whether avoidance is feasible in light of factors such as the nature of the find, project design, costs, and other considerations. If avoidance is infeasible, other appropriate measures (e.g., data recovery) would be instituted. Work may proceed on other parts of the project site while mitigation is carried out. All significant cultural materials recovered shall be, at the discretion of the consulting archaeologist, subject to scientific analysis, professional museum curation, and documented according to current professional standards. CEQA Guidelines Section 15064.5(e)(1), below, shall also be followed:
  - (e) In the event of the accidental discovery or recognition of any human remains in any location other than a dedicated cemetery, the following steps should be taken:

- (1) There shall be no further excavation or disturbance of the site or any nearby area reasonably suspected to overlie adjacent human remains until:
  - (A) The coroner of the county in which the remains are discovered must be contacted to determine that no investigation of the cause of death is required, and
  - (B) If the coroner determines the remains to be Native American:
    1. The coroner shall contact the Native American Heritage Commission within 24 hours;
    2. The Native American Heritage Commission shall identify the person or persons it believes to be the most likely descended from the deceased Native American;
    3. The most likely descendent may make recommendations to the landowner or the person responsible for the excavation work for means of treating or disposing of, with appropriate dignity, the human remains and any associated grave goods as provided in Public Resources Code Section 5097.98, or
- (2) Where the following conditions occur, the landowner or his authorized representative shall rebury the Native American human remains and associated grave goods with appropriate dignity on the property in a location not subject to further subsurface disturbance:
  - (A) The Native American Heritage Commission is unable to identify a most likely descendent or the most likely descendent failed to make a recommendation within 24 hours after being notified by the Commission;
  - (B) The identified descendant fails to make a recommendation; or
  - (C) The landowner or his authorized representative rejects the recommendation of the descendant, and the mediation by the Native American Heritage Commission fails to provide measures acceptable to the landowner.

**MMRP for Project Noise Impacts**

17. \_\_\_\_\_ **Noise Mitigation Measure 4.13-1a and 4.13-4:** The applicant shall implement the following construction noise nuisance control measures for the duration of construction.
- a) Ensure that construction equipment and trucks are well tuned and maintained according to the manufacturer's specifications, and that the equipment's standard noise reduction devices are in good working order;
  - b) Place construction equipment at locations to maximize the distance to the nearest residences; and
  - c) Notify nearby residents along Old County Road of the planned construction schedule at least one month prior to construction. Notification shall include the shift hours and include contact information of a designated construction noise coordinator who will maintain communication with affected residences throughout the construction period.
18. \_\_\_\_\_ **Noise Mitigation Measure 4.13-1b and 4.13-4:** The applicant shall coordinate with Contra Costa County to establish a daytime construction shift limited to between 7:00 a.m. and 5:30 p.m. as a Project-specific condition of approval.

**MMRP for Project Impacts on Transportation/Traffic**

19. \_\_\_\_\_ **Transportation/Traffic Mitigation Measure 4.17-2a:** Thirty (30) days prior to construction-related activities or issuance of permits, Phillips 66 shall document road conditions for all routes that will be used by project-related vehicles. Phillips 66 shall also document road conditions after project construction is completed. The pre- and post-construction conditions of the haul routes shall be reviewed by Public Works Department staff. Phillips 66 shall enter into an agreement prior to construction that will detail the pre-construction conditions and the post-construction requirements of a rehabilitation program. Roads damaged by construction would be repaired to a structural condition equal to that which existed prior to construction activity. A cash bond/deposit to finance damage to County roadways shall be required. An encroachment permit may be required from the County and a transportation/haul permit may be also required for any extra-legal loads used during construction. A pavement monitoring plan that describes measures that will be implemented to revitalize pavement along the proposed haul route deteriorated by project-related construction traffic shall also be included and be submitted for review by the Public Works Department prior to the commencement of any construction on-site.

20. \_\_\_\_\_ **Transportation/Traffic Mitigation Measure 4.17-2b:** Thirty (30) days prior to construction-related activities or issuance of permits, access and hauling routes shall be specified to minimize traffic impact to the area wide roadways. Construction traffic should not deviate from this route, except in the event that the route is rendered impassable due to accidents or other unanticipated road closures. In such instances, Phillips 66 shall submit a traffic control plan to the Public Works Department staff for review.

### CONSTRUCTION MANGAGEMENT CONDCTIONS

#### **Litter Control and Recycling**

21. \_\_\_\_\_ Phillips 66 shall maintain project construction sites and surrounding areas in an orderly fashion. Litter and debris shall be contained in appropriate receptacles and shall be removed as necessary. Following cessation of construction activity, all construction materials and debris shall be removed. To the extent possible, demolition debris and construction waste shall be diverted from the waste stream. At least thirty (30) days prior to commencement of demolition or construction, Phillips 66 shall meet with the Conservation Programs staff to identify opportunities for the diversion of waste. These requirements shall be stated on the face of all construction drawings.

#### **Construction Hours**

22. \_\_\_\_\_ The following work hours are limited to work related to the Propane Recovery Project which takes place off the refinery:

All construction activities, including transport of equipment and materials, shall be limited to the hours of 7:00 a.m. to 5:30 p.m., Monday through Friday, and shall be prohibited on Saturday, Sunday and the following state and federal holidays:

New Year's Day (State and Federal)  
 Martin Luther King, Jr. Day (State and Federal)  
 Washington's Birthday/Presidents' Day (State and Federal)  
 Lincoln's Birthday (State)  
 Cesar Chavez Day (State)  
 Memorial Day (State and Federal)  
 Independence Day (State and Federal)  
 Labor Day (State and Federal)  
 Columbus Day (State and Federal)  
 Veterans Day (State and Federal)  
 Thanksgiving Day (State and Federal)  
 Day after Thanksgiving (State)  
 Christmas Day (State and Federal)

These restrictions shall be stated on the face of all construction drawings. The following websites provide details on the actual days that the state and federal holidays occur:

Federal Holidays:  
<http://www.opm.gov/fedhol>

California Holidays:  
[http://www.edd.ca.gov/payroll\\_taxes/State\\_Holidays.htm](http://www.edd.ca.gov/payroll_taxes/State_Holidays.htm)

### **Traffic Control Personnel**

23. \_\_\_\_\_ Phillips 66 shall make a good-faith effort to avoid interference with existing neighborhood traffic flows. To achieve this, Phillips 66 shall provide traffic control personnel at all construction ingress and egress points along San Pablo Avenue.

### **Construction Trailers**

24. \_\_\_\_\_ Phillips 66 may locate construction trailers onsite. Such trailers may be located onsite for up to two months prior to the start of project construction and must be removed within two months after construction is complete.

### **Community Outreach**

25. \_\_\_\_\_ In order to help support the local economy, Phillips 66 shall encourage its employees and subcontractors to patronize local businesses and restaurants during breaks and mealtimes, and that they use personal vehicles during these break times and not construction equipment, such as dump trucks or other large construction vehicles, so as to minimize unnecessary road wear by heavy trucks on local roadways.
26. \_\_\_\_\_ Phillips 66 shall provide the Rodeo Municipal Advisory Council, Crocket Improvement Association and Crockett Community Foundation with quarterly newsletters informing the community of the project status and other relevant information. The first of these newsletters shall be sent no later than one month after issuance of grading or building permits, whichever is issued first.
27. \_\_\_\_\_ Phillips 66 shall advise nearby community organizations, such as the Bayo Vista Residence Council and the Crockett Improvement Association of any employment opportunities that may develop during project construction.

### **PUBLIC WORKS RECOMMENDED CONDITIONS OF APPROVAL**

**Phillips 66 shall comply with the requirements of Title 8, Title 9 and Title 10 of the Ordinance Code. Any exception(s) must be stipulated in these Conditions of Approval. Conditions of Approval are based on the application**

submitted to Department of Conservation and Development, Community Development Division, on June 22, 2012.

**COMPLY WITH THE FOLLOWING CONDITIONS OF APPROVAL PRIOR TO ISSUANCE OF A BUILDING PERMIT AND PRIOR TO INITIATION OF THE USE PROPOSED UNDER THIS PERMIT.**

### **General Requierments**

28. \_\_\_\_\_ Improvement plans prepared by a registered civil engineer shall be submitted, if necessary, to the Public Works Department, Engineering Services Division, along with review and inspection fees, and security for all improvements required by the Ordinance Code for the conditions of approval of this subdivision. Any necessary traffic signing and striping shall be included in the improvement plans for review by the Transportation Engineering Division of the Public Works Department.

### **Construction Traffic**

29. \_\_\_\_\_ The applicant shall gain access to the project site from Interstate 80 to Cummings Skyway and San Pablo Avenue for the construction operation. In the event that this route is rendered impassible due to unanticipated road closures, the applicant shall submit an alternative construction operation route to be reviewed and approved by the Public Works Department prior to use of this alternative route. (See Mitigation Measure 4.17-2b).
30. \_\_\_\_\_ The applicant shall provide a pavement analysis for those roads along the proposed haul route or any alternate route(s) that are proposed to be utilized by the construction operation. This study shall analyze the existing pavement conditions and determine what impact the construction operation will have over the life of the project. The study shall provide recommendations to mitigate identified impacts. The applicant shall be responsible for the cost of constructing the recommended repairs. Prior to issuance of grading, building, or encroachment permits, the applicant shall execute a bonded road improvement agreement to assure the roadway repairs. (See Mitigation Measure 4.17-2a).

### **Access to Adjoining Property (Encroachment Permit)**

31. \_\_\_\_\_ Applicant shall obtain an encroachment permit from the County's Application and Permit Center for the construction of any improvements within the public road rights-of-way of San Pablo Avenue and Cummings Skyway, and/or any impacted public road rights-of-way.

**Drainage Improvements (Collect & Convey)**

32. \_\_\_\_\_ The applicant shall collect and convey all stormwater entering and/or originating on this property, without diversion and within an adequate storm drainage system, to an adequate natural watercourse having definable bed and banks, or to an existing adequate public storm drainage system which conveys the storm waters to an adequate natural watercourse, in accordance with Division 914 of the Ordinance Code.

Exception: The applicant shall be permitted an exception from the collect and convey requirements of the Ordinance provided all stormwater generated on-site is directed to a wastewater treatment plant (with adequate treatment capacity) prior to being discharged to San Pablo Bay.

**National Pollutant Discharge Elimination System (NPDES)**

33. \_\_\_\_\_ The applicant shall be required to comply with all rules, regulations and procedures of the National Pollutant Discharge Elimination System (NPDES) for municipal, construction and industrial activities as promulgated by the California State Water Resources Control Board, or any of its Regional Water Quality Control Boards (San Francisco Bay - Region II, or Central Valley - Region IV).

Compliance shall include developing long-term Best Management Practices (BMPs) for the reduction or elimination of storm water pollutants. The project design shall incorporate wherever feasible, the following long-term BMPs in accordance with the Contra Costa Clean Water Program for the site's stormwater:

- Minimize the amount of directly connected impervious surface area.
- Place advisory warnings on all catch basins and storm drains using current storm drain markers.
- Construct concrete driveway weakened plane joints at angles to assist in directing run-off to landscaped/pervious areas prior to entering the street curb and gutter.
- Develop a perpetual maintenance program for on-site water/drainage facilities.
- Trash bins shall be sealed to prevent leakage, OR, shall be located within a covered enclosure.
- Other alternatives comparable to the above as approved by the Public Works Department.

**Stormwater Management and Discharge Control Ordinance**

34. \_\_\_\_\_ In compliance with Provision C.3 of the National Pollutant Discharge Elimination System (NPDES) Permit and the County's

Stormwater Management and Discharge Control Ordinances (§1014), it has been determined that this project does not require submittal of a Stormwater Control Plan (SWCP); all stormwater generated on-site is directed to a wastewater treatment plant prior to discharging to San Pablo Bay (a controlled point source). The proposed project would not be subject to Provision C.3 of the stormwater permit since the refinery stormwater runoff is discharged to its water treatment plant and regulated under the existing NPDES permit.

#### **Area of Benefit Fees**

35. \_\_\_\_\_ The applicant will be required to comply with the requirements of the Bridge/Thoroughfare Fee Ordinance for the Hercules/Rodeo/Crockett and the West Contra Costa Transportation Advisory Committee (WCCTAC) bridges/roads, and WCCTAC transit Areas of Benefit, as adopted by the Board of Supervisors.

#### **ADVISORY NOTES**

**ADVISORY NOTES ARE NOT CONDITIONS OF APPROVAL; THEY ARE PROVIDED TO ALERT THE APPLICANT TO ADDITIONAL ORDINANCES, STATUTES, AND LEGAL REQUIREMENTS OF THE COUNTY AND OTHER PUBLIC AGENCIES THAT MAY BE APPLICABLE TO THIS PROJECT.**

- A. NOTICE OF OPPORTUNITY TO PROTEST FEES, ASSESSMENTS, DEDICATIONS, RESERVATIONS OR OTHER EXACTIONS PERTAINING TO THE APPROVAL OF THIS PERMIT.

Pursuant to California Government Code Section 66000, et seq., the applicant has the opportunity to protest fees, dedications, reservations or exactions required as part of this project approval. To be valid, a protest must be in writing pursuant to Government Code Section 66020 and must be delivered to the Community Development Division within a 90-day period that begins on the date that this project is approved. If the 90<sup>th</sup> day falls on a day that the Community Development Division is closed, then the protest must be submitted by the end of the next business day.

- B. Additional requirements may be imposed by the Building Inspection Division. The Applicant is strongly encouraged to review this agency's requirements prior to continuing with the project.
- C. Additional requirements may be imposed by the Public Works Department. The Applicant is strongly encouraged to review this agency's requirements prior to continuing with the project.



- D. Additional requirements may be imposed by the Health Services Department, Hazardous Materials Programs. The Applicant is strongly encouraged to review this agency's requirements prior to continuing with the project.
- E. Additional requirements may be imposed by the Bay Area Air Quality Management District. The Applicant is strongly encouraged to review this agency's requirements prior to continuing with the project.
- F. Additional requirements may be imposed by the Regional Water Quality Control Board. The Applicant is strongly encouraged to review this agency's requirements prior to continuing with the project.
- G. Additional requirements may be imposed by the Rodeo-Hercules Fire Protection District. The Applicant is strongly encouraged to review this agency's requirements prior to continuing with the project.
- H. Additional requirements may be imposed by the California Department of Fish and Wildlife. The Applicant is strongly encouraged to review this agency's requirements prior to continuing with the project.
- I. Additional requirements may be imposed by the California Department of Transportation. The Applicant is strongly encouraged to review this agency's requirements prior to continuing with the project.
- J. Additional requirements may be imposed by the East Bay Municipal Utility District. The Applicant is strongly encouraged to review this agency's requirements prior to continuing with the project.
- K. Additional requirements may be imposed by the Pacific Gas and Electric Company. The Applicant is strongly encouraged to review this agency's requirements prior to continuing with the project.
- L. Additional requirements may be imposed by the San Francisco Bay Conservation and Development Commission. The Applicant is strongly encouraged to review this agency's requirements prior to continuing with the project.

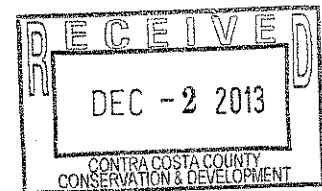
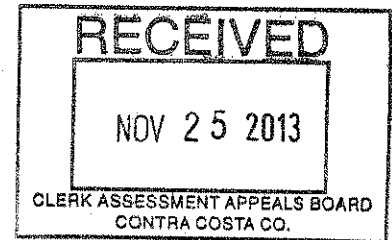
SHUTE MIHALY  
& WEINBERGER LLP

396 HAYES STREET, SAN FRANCISCO, CA 94102  
T: (415) 552-7272 F: (415) 552-5816  
www.smwlaw.com

November 22, 2013

Via Hand Delivery

Tiffany Lennear  
Clerk of the Board  
Lashun Cross  
Principle Planner  
Contra Costa County  
651 Pine Street  
Room 106  
Martinez, CA 94553



Re: Phillips 66 Propane Recovery Project

Dear Ms. Lennear and Ms. Cross:

Rodeo Citizens Association ("RCA") hereby appeals from the November 19, 2013 decision of the Contra Costa County Planning Commission's Approval of the Phillips 66 Propane Recovery Project ("the Project") and certification of the environmental impact report ("EIR") prepared in connection with the Project. The grounds for this appeal are:

1. The County's approval violates the California Environmental Quality Act ("CEQA") for the following non-inclusive list of reasons:
  - The EIR fails to adequately define the Project;
  - The EIR fails to adequately evaluate the significant impacts of the Project, including but not limited to its air quality, biological, safety, health, and climate impacts;
  - The EIR fails to evaluate cumulative impacts;
  - The EIR fails to evaluate mitigation measures and alternatives and the County failed to adopt adequate mitigation or feasible alternatives;

- The County failed to adequately respond to comments on the EIR;
- The County failed to recirculate the EIR; and
- The County's findings, including its statement of overriding considerations is not supported by substantial evidence.

2. The County cannot make the findings for approval required by its code section. In particular, the County cannot find that the Project will not be a detriment to public health, safety, or welfare or that it will not cause a nuisance in the surrounding community.

The grounds for RCA's appeal are further supported by its November 18, 2013 letter to the Planning Commission, the Fox Report submitted with that letter, and the comments of Communities for a Better Environment. RCA reserves the right to submit additional evidence in support of its appeal to the Board of Supervisors.

Very truly yours,

SHUTE, MIHALY & WEINBERGER LLP



Ellison Folk

SHUTE, MIHALY  
& WEINBERGER LLP

396 HAYES STREET, SAN FRANCISCO, CA 94102  
T: (415) 552-7272 F: (415) 552-5816  
www.smwlaw.com

November 18, 2013

Via Email

Planning Commission  
Contra Costa County  
30 Muir Road  
Martinez, CA 94533

**Re: Phillips 66 Propane Recovery Project Environmental Impact Report**

Dear Commissioners:

On behalf of the Rodeo Citizens Association, we submit these comments on the Final Environmental Impact Report ("FEIR") for the Phillips 66 Propane Recovery Project ("Project"). As set forth below, and in the attached report of Phyllis Fox, Ph.D., PE ("Fox Report"), Exhibit A, we have concluded that the EIR suffers from numerous deficiencies that render it inadequate under the California Environmental Quality Act ("CEQA") (Pub. Res. Code § § 21000 *et seq.*) and the CEQA Guidelines (14 Cal. Code Regs. § § 15000 *et seq.*) ("CEQA Guidelines"). We respectfully request that the Commission defer consideration of the proposed Project until such time as the EIR is revised to comply with CEQA.

An EIR is "the heart of CEQA." *Laurel Heights Improvement Assn. v. Regents of University of California* (1988) 47 Cal. 3d 376, 392 ("*Laurel Heights I*"). "The purpose of an environmental impact report is to provide public agencies and the public in general with detailed information about the effect which a proposed project is likely to have on the environment; to list ways in which the significant effects of such a project might be minimized; and to indicate alternatives to such a project." Pub. Res. Code § 21061. The EIR "is an environmental 'alarm bell' whose purpose it is to alert the public and its responsible officials to environmental changes before they have reached ecological points of no return. The EIR is also intended 'to demonstrate to an apprehensive citizenry that the agency has, in fact, analyzed and considered the ecological implications of its action.' Because the EIR must be certified or rejected by public officials, it is a document of

accountability.” *Laurel Heights I*, 47 Cal. 3d at 392 (citations omitted). The EIR for the proposed Project fails entirely to live up to this mandate.

We will not repeat the issues raised in our August 9, 2013 letter or the valid claims raised by Communities for a Better Environment (“CBE”) in its August 9, 2013 and September 4, 2013 letters. We incorporate the CBE letters by reference into this letter. Our review of the EIR has uncovered additional inadequacies beyond those raised in the earlier letters. Specifically, the EIR fails to (1) provide a stable, accurate and detailed project description, thus undermining every aspect of the impacts analysis; (2) accurately evaluate numerous Project impacts, including air quality, greenhouse gas emissions, public health and safety, and biological and geological resources; (3) provide sufficient analysis of cumulative impacts; and (4) adopt feasible mitigation measures that were suggested by commenters to lessen the Project’s air quality and other impacts.

In addition, the FEIR introduces new, significant information requiring recirculation of the EIR and fails to adequately respond to comments. For these and other reasons detailed herein, and in the attached Fox Report, the EIR is inadequate under CEQA.

#### **I. The EIR’s Project Description Is Inadequate.**

In order for an environmental document to adequately evaluate the environmental ramifications of a project, it must first provide a comprehensive description of the project itself. “An accurate, stable and finite project description is the *sine qua non* of an informative and legally sufficient EIR.” *San Joaquin Raptor/Wildlife Rescue Center v. County of Stanislaus* (1994) 27 Cal. App. 4th 713, 730, quoting *County of Inyo v. City of Los Angeles* (1977) 71 Cal. App. 3d 185, 193. As a result, courts have found that, even if an EIR is adequate in all other respects, the use of a “truncated project concept” violates CEQA and mandates the conclusion that the lead agency did not proceed in a manner required by law. *San Joaquin Raptor*, 27 Cal. App. 4th at 730.

Furthermore, “[a]n accurate project description is necessary for an intelligent evaluation of the potential environmental effects of a proposed activity.” *Id.* (citation omitted). Thus, an inaccurate or incomplete project description renders the analysis of significant environmental impacts inherently unreliable. While extensive detail is not necessary, the law mandates that EIRs should describe proposed projects with sufficient detail and accuracy to permit informed decision-making. *See* CEQA Guidelines, §15124 (requirements of an EIR).

**A. The EIR's Project Description Is So Flawed that the EIR Fails As An Informational Document.**

An EIR's job is to provide good faith disclosure, sufficient information to evaluate consequences, and all relevant data compiled in a single report and to have enough technical detail included or cited to for parties to evaluate the analysis of the EIR. Finally and EIR must be based on substantial evidence to support conclusions or questions of fact. Here the EIR falls far short of these requirements.

SMW 1 ↑ We, and other members of the public, asked for the technical specifications regarding the existing Refinery's operations. We explained, for example, that it is imperative to know the Refinery's crude feedstock composition to understand the nature of the Project and its environmental impacts. Rather than provide this information, the FEIR simply asserts that information relating to crude feedstock data is not relevant to the EIR's environmental analyses. FEIR at B4-23 at 3.2-124.

SMW 1 ↓ The EIR never provides a credible explanation as to why data regarding crude feedstocks is irrelevant to the Project or its environmental review. Instead, the FEIR asserts, absent any evidence, that the Project does not include, does not rely on, and would not facilitate a change or modification to the crude blend currently processed at the Refinery. FEIR at B4-9 at 3.2-119. To conclude that the quality and quantity of crude at the Refinery is irrelevant to the Project's operations and environmental impacts, the EIR must provide substantial evidence. Substantial evidence consists of "fact[s], a reasonable presumption predicated on fact, or expert opinion supported by fact," not "argument, speculation, unsubstantiated opinion or narrative." Pub. Res. Code § 21080(e)(1)-(2). Because the EIR's premise is based on no data or documentation, it falls far short of this threshold.

↓ As the Fox Report explains, the Project will result in the use of heavier and more polluting feedstocks. Specifically, the high values for propane and butane that are proposed to be recovered suggest that feedstock input would have to be modified in conjunction with the Project. Fox Report at 4, 5. The EIR, however, does not acknowledge this connection and therefore improperly fails to evaluate the environmental implications of the Project.

↑ It is not as if the issue of a refinery's crude feedstock is unimportant. As the Fox Report makes clear, the chemical composition of raw materials that are processed by a refinery directly affect the amount and composition of the refinery's emissions.

The amount and composition of sulfur in the crude slate, for example, ultimately determines the amount of [sulfur dioxide] that will be emitted from every fired source in the refinery and the amount of odiferous hydrogen sulfide and mercaptans that will be emitted from tanks, pumps, valves, and fittings. The composition of the crude slate establishes the CEQA baseline against which impacts must be measured. Fox Report at 13.

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Other environmental impacts are also entirely dependent on the quality of crude oil processed at the facility. See Fox Report and Fox comments on the Valero Refinery Initial Study, Exhibit A. Moreover, Phillips 66 has recently provided detail about the quality of its crude oil in the environmental review for its other refinery projects.<sup>1</sup> Given this precedent, the County should require that Phillips 66 disclose this information in a revised EIR so that the decision-makers and the public can be fully apprised of the nature of the proposed Project and its environmental impacts.

Members of the public also requested the EIR disclose all of the changes to the Refinery and its associated facilities that would be required to produce the propane and butane that would be recovered by the Refinery. See Comments B2-4, B4-11, B4-36, B4-39. Yet the FEIR, like the DEIR, never discloses the composition of the Refinery fuel gas and other gas streams from which propane and butane would be recovered. The EIR is essentially a black box that does not allow the public to understand the actual nature of the Project or its environmental implications.

Finally, assuming for the sake of argument that the Project itself does not require a change in feedstocks, it is nonetheless critical to identify the existing quantity and quality of crudes currently processed at the Refinery and those that will be processed upon completion of the proposed Project. As Phillips 66 itself has announced, it intends to shift to 100% advantaged crude within the next two years. See Comment B4-6 at FEIR

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<sup>1</sup> ConocoPhillips Santa Maria Refinery Throughput Increase Project DEIR, August 2011 at 2-7, attached to Fox Report..

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3.2-24.<sup>2</sup> As discussed below and in the Fox Report, the severity and extent of refining-related environmental impacts is directly dependent on the crude feedstock used or transported by the facility. Thus to estimate the environmental impacts from the Project, the EIR must disclose information about existing and projected crude supplies and it must rely on this information to calculate future emissions. Indeed, the FEIR admits that current "crude feedstocks used by the Refinery are part of the existing baseline for the Refinery." FEIR Response to Comments ("RTC"). B4-11 at 3.2-120. As such, the EIR must be revised to disclose the Project's baseline feedstock quality and the feedstocks Phillips 66 expects to be processing once the Project is operational. In the absence of this information, it is simply not possible to evaluate the Project's cumulative environmental impacts.

**B. The EIR Improperly Segments the Proposed Project from Other Related Actions.**

CEQA requires that an EIR describe the entirety of a project, including reasonably foreseeable future actions that are part of it. CEQA Guidelines § 15378(a). While an EIR need not include speculation about future environmental consequences of a project, the "EIR must include an analysis of the environmental effects of future expansion or other action if: (1) it is a reasonably foreseeable consequence of the initial project; and (2) the future expansion or action will be significant in that it will likely change the scope or nature of the initial project or its environmental effect." *Laurel Heights I*, 47 Cal. 3d at 394-396. Under the *Laurel Heights I* standard, "the facts of each case will determine whether and to what extent an EIR must analyze future expansion or other action." *Id.* at 396. A project proponent must analyze future expansion and other such action in an EIR if there is "telling evidence" that the agency has either made decisions or formulated reasonably definite proposals as to such future activities. *Id.* at 396-397. Further, there must be discussion "in at least general terms" of the future activity, even if the project is contingent on uncertain occurrences. *Id.* at 398.

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The Project as described in the EIR narrowly involves modifications to the Rodeo Refinery "to recover for sale propane and additional butane from refinery fuel gas and other process streams." DEIR at 3-2, 3-5. However, as discussed above, the EIR fails to disclose changes elsewhere that are required to produce the propane and butane that would be recovered by the facility. As summarized below and discussed extensively in

<sup>2</sup> Phillips 66 defines "advantaged crude" as heavy crude from Canada and Latin America, lighter Canadian grades, and West Texas Intermediate ("WTI"). FEIR at 3.2-24.



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the Fox Report, the existing Refinery does not produce enough butane and propane to support the Project without changes in the amount and type of feedstock. Documentation in the record, including the Bay Area Air Quality Management District ("BAAQMD") permit files, and projects proposed by Phillips 66 at its Santa Maria Facility, provide the missing links in the butane/propane supply chain at the Rodeo Refinery. See BAAQMD Permit Files, attached to Fox Report. While it is clear that there is more to the proposed Project than meets the eye, the EIR's description of the Project is so vague and incomplete that it simply is not possible to fully understand the nature of the modifications to the Refinery or the environmental impacts of these modifications. The most egregious omissions are discussed below.

**1. Amount of Propane and Butane that Could Be Recovered from Baseline Feedstock.**

The EIR does not contain the information necessary to estimate the amount of propane and butane that could be recovered from baseline feedstock such as:

- composition of the Refinery fuel gas and other gas stream from which propane and butane would be recovered, e.g., gas chromatographic analyses;
- distillation curves and composition data for the crude, semi-refined feedstock inputs from elsewhere, and other internal streams that would be routed to the subject Project;
- relative amount of crude and semi-refined feedstock;
- material balance or outputs of refinery models.

The Project's high values for propane/butane recovery suggest that the feedstock input will be modified in conjunction with the Project. The EIR must disclose the calculations that support the foundational assumption that 100% of the propane/butane can be recovered from the baseline refinery fuel gas.

**2. Projects at Phillips 66's Santa Maria Facility**

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Phillips 66's San Francisco Refinery ("SFR") consists of two facilities linked by a 200-mile pipeline. See SMF Throughput Project EIR excerpts, attached to Fox Report. The Santa Maria Facility ("SMF") is located in Arroyo Grande, in San Luis Obispo County, while the Rodeo Refinery ("Refinery") is located in Rodeo. The SMF mainly processes heavy, high sulfur crude oil and sends semi-refined liquid products to the

Rodeo Refinery. The proposed Project DEIR did not even disclose the existence of this related facility.

The EIR addresses changes at just the Rodeo Refinery to increase butane and propane production, once the proper amount of the right feedstocks arrive. As discussed above, the EIR is silent on the composition and relative amounts of feedstock (heavy crude, semi-refined products from the SMF). As the Fox Report explains, the Project requires additional feedstock containing recoverable propane and butane.

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Phillips 66 is undertaking two projects at the SMF that are intricately related to the propane/butane recovery project at the Rodeo Refinery. First, Phillips 66 recently applied to San Luis Obispo County and the San Luis Obispo Air Pollution Control District for a permit to increase the throughput production of semi-refined products at the Santa Maria Refinery ("SMF Throughput Project"). The purpose of the SMF Throughput Project is to send additional semi-refined products to the Rodeo facility. See SMF Throughput Project EIR, attached to Fox Report. As the Fox Report explains, this 8,675 barrels per day ("BPD") throughput increase would necessarily be included in the streams from which propane and butane would be recovered at the Rodeo Refinery. Fox Report at 5, 6. This increase would be converted into semi-refined products in the SMF's distillation units and coker to yield gas oil and naptha, which would be sent to the Rodeo Refinery, where propane and butane would be separated, contributing to the propane/butane slated for recovery by the Rodeo Project. *Id.*

Phillips 66 also recently proposed a Project that would extend a rail spur at the Santa Maria Facility to import increased amounts of crude to support the SMF Throughput Project ("SMF Rail Spur Project"). See SMF Rail Spur Project Application, attached to Fox Report. As the Fox Report explains, the SMF Rail Spur Project, would allow the import of cost-advantaged tar sands crudes:

Tar sands crudes are heavier and more viscous than the feedstock currently processed at either Rodeo or Santa Maria. These crudes are thus commonly blended with 25% to 30% diluent to facilitate transporting them by rail or pipeline. The blended crude is known as a "DilBit." The diluent is typically natural gas condensate, pentanes, or naphtha. The diluent can be readily separated and recovered as propane/butane at Rodeo. Fox Report at 7.

These crudes would be processed at the Santa Maria Facility into semi-refined products and sent to Rodeo. As discussed previously, Phillips 66 has publicized its intent to get advantaged crudes to the West Coast. *See also* 2013 Barclays CEO Energy-Power Conference, attached as Exhibit B and Q1 2013 Phillips 66 Earnings Conference Call – Edited Transcript, attached as Exhibit C.

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In sum, there is plenty of “telling evidence” within and outside of the Rodeo Refinery Project EIR regarding the intimate connection between the proposed Project, the SMF Throughput Project and the Rail Spur Extension Project. These projects are intimately connected in that the Rodeo Project depends on the projects at the Santa Maria Facility and vice versa. Consequently, these are connected actions and therefore must be analyzed concurrently with the direct impacts of the proposed Project itself. CEQA Guidelines, § 15378, subd. (a) (agency must evaluate the environmental impacts of the whole of the action).

Lastly, under CEQA, even assuming, *arguendo*, that the SMF projects are not integral parts of the proposed Project, the EIR must still discuss the SMF projects. *Laurel Heights I*, 47 Cal.3d at 398 (requiring discussion “in at least general terms” of future activity in connection with a project, even if the project is contingent on uncertain occurrences). While the FEIR now adds a brief discussion of the SMF Projects, it claims, absent any evidence, that the type of crude oil processed by the SMF would have *no effect* on the Rodeo Refinery Project. FEIR at 2-4 (emphasis added).

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In sum, the EIR’s incomplete, unstable and vague project description undermines the validity of the document’s environmental impact analyses. The document should be revised to correct these many deficiencies.

## **II. The EIR’s Analysis of and Mitigation for the Impacts of the Proposed Project Are Inadequate.**

The discussion of a proposed project’s environmental impacts is at the core of an EIR. *See* CEQA Guidelines § 15126.2(a) (“[a]n EIR *shall* identify and focus on the significant environmental effects of the proposed project”) (emphasis added). As explained below, the EIR’s environmental impacts analysis is deficient because it fails to provide the necessary facts and analysis to allow the County and the public to make informed decisions about the Project. An EIR must effectuate the fundamental purpose of CEQA: to “inform the public and its responsible officials of the environmental consequences of their decisions before they are made.” *Laurel Heights Improvement*

*Ass'n v. Regents of University of California* (1993) 6 Cal. 4th 1112, 1123 (1993) (“*Laurel Heights II*”). To do so, an EIR must contain facts *and* analysis, not just an agency’s “bare conclusions.” *Citizens of Goleta Valley v. Board of Supervisors* (1990) 52 Cal. 3d 553, 568. Thus, a conclusion regarding the significance of an environmental impact that is not based on an analysis of the relevant facts fails to fulfill CEQA’s informational goal.

Additionally, an EIR must identify feasible measures to mitigate significant environmental impacts. CEQA Guidelines § 15126.4. Under CEQA, “public agencies should not approve projects as proposed if there are feasible alternatives or feasible mitigation measures available which would substantially lessen the significant environmental effects of such projects.” Pub. Res. Code § 21002.

Although the Project clearly has the potential to degrade the environment, neither the public nor decision-makers have any way of knowing the magnitude of this harm. Often, the EIR asks the wrong questions so that the Project’s environmental impacts appear benign, non-existent, or even beneficial. In other instances, the document lacks the necessary detail to verify the validity of its analyses. Consequently, the EIR fails to provide decision-makers and the public with detailed, accurate information about the Project’s significant environmental impacts and to analyze mitigation measures and alternatives that would reduce or avoid such impacts.

**A. The EIR Fails to Adequately Analyze and Mitigate the Project’s Air Quality Impacts.**

**1. Criteria Pollutant Emissions**

The EIR’s analysis of the Project’s criteria pollutant impacts is riddled with errors. It relies on an inadequate study area and therefore underestimates the Project’s potential to result in a substantial increase in criteria pollutant emissions. Second, it underestimates or ignores altogether emissions of criteria pollutants. The end result is that the Project will result in significant air quality impacts that the EIR does not identify or mitigate.

**(a) Inadequate Study Area**

The EIR substantially underestimates the Project’s increase in criteria air pollutant emissions because it relies on an artificially constrained study area. The EIR authors underestimated the emissions associated with increased locomotive engine load, for

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example, because they only counted emissions released within the boundary of the BAAQMD. DEIR at 4.3-20.

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4 By restricting the size of the study area to the boundaries of the BAAQMD, the EIR gives the impression that emissions from the locomotive engines would not pollute the air outside the Air District's boundaries. As the EIR acknowledges, trains will travel from the California and Arizona border to the Richmond Yard with empty rail cars following a Union Pacific route (659 miles), then 12 miles to the Refinery unladen, followed by return mileage of these distances under load. DEIR at 4.8-16. Rather than identify the air emissions that would be generated by trains over the entire route, the EIR used a total rail track length within the BAAQMD of only 67 miles one way. DEIR Tables 4.3-6 and 4.3-7.

The locomotives used to transport recovered propane and ethane from the Refinery to market are the major source of nitrous oxide ("NO<sub>x</sub>") emissions (>70% of total) and an important contributor to reactive organic gas ("ROG") emissions (8%). DEIR Tables 4.3-6 and 4.3-7 and Fox Report at 12. Phyllis Fox recalculated the locomotive line haul emissions for NO<sub>x</sub> and ROG using the total track length within California, but otherwise using all of the EIR's assumptions. The criteria air pollutant emissions locomotive line haul (which is only part of the total locomotive emissions) are significantly higher than disclosed in the DEIR. This increase alone is substantial, and greatly exceeds the BAAQMD daily and annual significance thresholds. Fox Report at 12, 13. This increase in emissions constitute significant impacts for which the DEIR offers no mitigation.

(i) **NO<sub>x</sub> Emissions Associated with the Shutdown of Boiler B-401**

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5 The DEIR errs further because it lacks the evidentiary support that the Project's significant increase in NO<sub>x</sub> emissions would be mitigated to a less than significant level. The document determines that the Project's NO<sub>x</sub> emissions would exceed the BAAQMD daily threshold. DEIR at 4.3-20. The DEIR identifies as mitigation for these NO<sub>x</sub> emissions 10.8 tons of NO<sub>x</sub> reductions per year resulting from shutdown of process heater B-401. *Id.* at 4.3-20, 21. As discussed in our prior letter and in the Fox Report, the shutdown of this heater occurred in October 2011 as mitigation for marine vessel emissions in connection with the Marine Terminal Offload Limit Revision Project. DEIR at 4.3-20. The BAAQMD confirmed the DEIR's problematic approaching stating that it was unable to find any support for the claimed emission reductions. See Fox

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Report at 11. The BAAQMD further expressed concern that "emission from Unit 240 [the shutdown process heaters] may have shifted to other existing equipment due to increased operating demand." *Id.* Further, the DEIR and the record supporting it do not contain any evidence that the emission reductions are permanent, real, and quantifiable.

(ii) **NO<sub>x</sub> Emissions from the Steam Power Plant**

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The DEIR disclosed that steam would be provided by either a new steam boiler or by the existing Steam Power Plant ("SPP"). DEIR at ES-5, 3-7, 3-20. The DEIR included NO<sub>x</sub> emissions only for the new boiler. DEIR at Tables 4.3-6 and 4.3-7. However, since the DEIR was released, Phillips 66 elected to use the existing Steam Power Plant to generate the required steam. See Fox Report at 14. As the Fox Report explains, the SPP would emit four times more NO<sub>x</sub> than disclosed in the DEIR (15.6 tons/year for the SPP compared to 3.7 ton/yr for the steam boiler). Fox Report at 19. The NO<sub>x</sub> emissions from supplying just the steam for the hydrotreater exceed the NO<sub>x</sub> significance threshold of 10 ton/yr and are thus a significant undisclosed air quality impact of the Project. The EIR offers no mitigation for this significant increase in NO<sub>x</sub> emissions.

(iii) **Sulfur Dioxide Emissions**

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The DEIR claims that the Project would reduce sulfur dioxide ("SO<sub>2</sub>") emissions by at least 50%, resulting in an SO<sub>2</sub> emission decrease of at least 180 ton/yr. DEIR at ES-2, 3-5, 4.3-19. The emission inventory in Table 4.3-7 takes credit for a reduction in SO<sub>2</sub> emission of 172.4 ton/yr. DEIR at Table 4.3-7. The BAAQMD Permit Application made a similar claim. However, there it claimed a reduction of 174.7 ton/yr, of which 7.61 ton/yr was proposed to offset Project SO<sub>2</sub> increases and the balance to be banked as Emission Reduction Credits ("ERCs"). See BAAQMD Permit, attached to Fox Report. Since the release of the DEIR, Phillips withdrew its banking application, casting doubt on its claim of a SO<sub>2</sub> reduction. See Exhibit P.

Thus, there is no support, in either the EIR or the BAAQMD permitting record, for the claimed reduction in SO<sub>2</sub> emissions. Emission reductions used to offset impacts must be permanent, real, and quantifiable. There is no evidence that the claimed SO<sub>2</sub> emission reductions meet any of these criteria. In fact, as the Fox Report explains, any claimed reductions could be a myth if the Refinery feedstock is modified to include a larger proportion of high sulfur tar sands crudes, imported through the Santa Maria Facility projects. Further, any such SO<sub>2</sub> reduction would be accompanied by an increase in other

criteria pollutant emissions from the Sulfur Recovery Units and from trucks used to transport the recovered sulfur product to market.

Inasmuch as the EIR provides no support for its claimed reduction in SO<sub>2</sub> emissions, the Project will likely result in a significant increase in SO<sub>2</sub> emissions.<sup>3</sup> The EIR offers no mitigation for this impact.

**(iv) Carbon Monoxide Emissions**

The Project would significantly increase emissions of carbon monoxide ("CO"). Carbon monoxide is emitted from all combustion sources, including locomotives, trucks and commuter auto trips, steam generation, and combustion of the recovered propane and butane at fired sources. The EIR is silent on CO emissions from the entire Project.

**(v) The EIR Fails to Include Emissions from All of the Project's Components.**

The equipment required to recover propane and butane from the refinery fuel gases and to remove sulfur from the recovered products requires various inputs to operate. The EIR omits many of these sources of Project-related emissions including the hydrogen plant and the sulfur recovery unit. As the Fox Report explains, not only does the EIR fail to quantify the increase in emissions from these Project components, the document does not provide any data or other documentation needed to estimate these emissions. See Fox report at 18, 19.

**(vi) The EIR Fails to Include the Project's Indirect Source of Emissions.**

The DEIR fails to include criteria pollutant emissions from burning propane/butane. As discussed below in the context of the EIR's greenhouse gas ("GHG") impact analysis, the EIR incorrectly assumes that the Project's increase in emissions would be offset by removing 14,500 BPD of butane and propane from the fuel gas system and replacing it with natural gas and the shutdown of Plant 4 Hydrogen Plant and B-401

<sup>3</sup> The EIR is further deficient because it does not include any thresholds of significance for SO<sub>2</sub> emissions.

Heater. Yet, a reduction would only occur if the propane/butane are not used as fuel, which is their usual end use.

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Phyllis Fox estimated the NO<sub>x</sub>, particulate matter 10 ("PM<sub>10</sub>"), and ROG emissions from burning recovered propane and butane and determined that they would exceed the BAAQMD's significance thresholds by a large margin. See Fox Report at 16. CO emissions would also greatly exceed the BAAQMD significance thresholds.

As discussed above, the DEIR ignored the Project's potential to increase CO emissions altogether. As the Fox Report explains, the combustion of propane and butane would generate 241 and 245 tons per year of CO, respectively.

**2. The EIR Incorrectly Concludes the Project Would Not Conflict with the Bay Area Air Quality Plan.**

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The EIR relies on the assumption that the Project would not exceed the BAAQMD significance thresholds to conclude the Project would not conflict with or obstruct implementation of the 2010 Clean Air Plan. DEIR at 4.3-15. For the reasons discussed above, Project-related emissions would exceed the BAAQMD significance thresholds. Consequently, the EIR's conclusion that the Project will not conflict with or obstruct implementation of the Clean Air Plan cannot be sustained.

**B. The EIR's Analysis of the Project's Potential to Impact Public Health Is Flawed.**

The EIR fails to adequately analyze the Project's potential to expose nearby sensitive receptors to emissions of toxic air contaminants ("TACs"). The most serious omissions are discussed below.

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First, the EIR provides no information about existing exposure to TACs in the vicinity of the Refinery, the starting point for any adequate analysis of a project's potential to impact public health. This omission violates CEQA's core requirement that an EIR include an adequate "description of the physical environmental conditions in the vicinity of the project." CEQA Guidelines § 15125(a). As the Guidelines instruct, "[k]nowledge of the regional setting is critical to the assessment of environmental impacts." *Id.* § 15125(c). Unless the EIR adequately describes the public's existing exposure to TACs, decision-makers cannot: (1) understand the scope of the existing TAC problem; (2) measure the Project's new TAC impacts against a baseline of current TAC



emissions; (3) evaluate mitigation of those impacts; or (4) intelligently decide whether the Project's approval is worth the risk.

Although the EIR does not disclose it, the area surrounding the Rodeo Refinery is already considered an "impacted community" by the BAAQMD. *See* BAAQMD CEQA Guidelines at 5-2; 5-3 and Figure 5-1, attached as Exhibit D. According to the District, "impacted communities" experience relatively high exposure to TACs in comparison to other communities. *Id.* Given the fact that the surrounding community is already disproportionally impacted by the number of industrial and refinery projects in the area, one would expect the EIR to comprehensively describe each of the sensitive receptors that could be potentially impacted by the Project. Unfortunately, this is not the case.

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The EIR preparers could have obtained current TAC data from either of two sources: EPA's AirData reports or the TAC predictions in the National Air Toxic Assessment Model, which are available for every U.S. census tract.  
<http://www.epa.gov/nata2002/methods.html>

The EIR's deficient analysis of the Project's health risks extends beyond its failure to describe the existing environmental setting. While the EIR includes a health risk

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<sup>4</sup> A separate section of the EIR acknowledges that the Bayo Vista Child Development Center is located 0.5 miles from the Propane Recovery Unit and 0.2 miles from the rail spur on which propane-filled rail cars would be staged. DEIR at 4.9-1. This is the only specific sensitive receptor identified in the EIR.

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assessment ("HRA") that purports to include Project-related emissions, the Project has changed in at least two fundamental ways since the HRA was prepared. First, the EIR explains that the source that would contribute the most to the modeled cancer risk at the MEIR (maximally exposed individual residence) is the proposed fuel gas-fired steam boiler. DEIR at 4.3-23 and DEIR Public Health Supplement at 25. The EIR concludes that since the cancer risk from this boiler is greater than 1 per million, the implementation of Toxic Best Available Control Technology is required by the BAAQMD Regulation 2-5-301.<sup>5</sup> *Id.* Yet, as discussed above, Phillips 66 modified the Project subsequent to the release of the DEIR. Phillips 66 no longer intends to use the boiler but will instead use the steam power plant to generate the required steam. As the Fox Report explains, NO<sub>x</sub> emissions associated with the use of the steam plant would be four times greater than disclosed in the DEIR. Fox Report at 18,19. The FEIR fails to analyze the increase in TAC emissions from the use of the steam plant. Given the increase in NO<sub>x</sub> emissions, there is a strong likelihood that the increase in TAC emissions would also be significant.

Second, as discussed above, there is no support in either the EIR or the BAAQMD permitting record for Phillips 66's claimed 180 ton/yr reduction in SO<sub>2</sub> emissions. SO<sub>2</sub> is known to be deleterious to human health. Exhibit D at C-12 (BAAQMD CEQA Guidelines). It can aggravate respiratory diseases and reduce lung function. *Id.* at C-15, C-16. The HRA must be revised to include accurate SO<sub>2</sub> emissions.

In addition, as the Fox Report explains, the feedstocks that could arrive at the Rodeo Refinery for recovery as propane and butane may include tar sands crudes blended with diluents or "DilBits." Fox Report at 13. These DilBits contain significant amounts of hazardous air pollutants ("HAPs"), such as benzene, a potent carcinogen. These would be emitted at many fugitive components in the Refinery, including compressors, pumps, valves, fittings, and tanks, in greater amounts than from baseline feedstock. The revised HRA must include HAP emissions from the use of increased amounts of tar sands crudes.

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<sup>5</sup> Although the DEIR relies on the implementation of Toxic Best Available Control Technology to apparently conclude that the Project would not result in significant public health impacts, it never explains what this control technology consists of. DEIR at 4.3-24. Nor does the EIR require this control technology as a mitigation for the Project's impacts. Consequently, the EIR lacks the evidentiary support to conclude that the Project's public health impacts would be less than significant.

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Finally, the EIR does not include on-site workers in the analysis of health risks. The DEIR acknowledges that for off-site worker receptors, an exposure time of 8 hours per day, 5 days per week and 49 weeks per year for 40 years was assumed. EIR Public Health Risk Supplement at 23. The EIR should also use these assumptions to assess the Project's impacts on workers at the Rodeo facility.

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The HRA must be revised to include all of these Project-related emissions. If the health risk is determined to be significant, the EIR must identify feasible mitigation to eliminate or reduce these risks.

### C. The EIR Fails to Adequately Analyze the Project's Odor Impacts.

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Despite the presence of numerous substances present in the refining processes that are known to cause odors such as hydrogen sulfide ("H<sub>2</sub>S"), SO<sub>2</sub>, and other reduced sulfur compounds, ammonia, and some organic compounds, including benzene, naphthalene, and toluene (DEIR at 4.3-16), the EIR reaches the conclusion that the Project will not cause a significant odor impact. The document reaches this conclusion based solely on the claimed 50 percent reduction in SO<sub>2</sub> emissions. In fact, the EIR boasts that the Project would have a *beneficial* impact on odor emissions. *Id.* (emphasis in original).

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The occurrence and severity of odor problems depends on numerous factors, including the nature, frequency and intensity of the source, wind speed and direction, and the sensitivity of the receptor(s). Exhibit D at 7-1 – 7-5 (BAAQMD CEQA Guidelines). Other than its brief statement regarding SO<sub>2</sub> emissions, the EIR provides no explanation as to why the Project would not result in any odorous emissions. The public therefore has no way to verify this finding. This lack of information violates CEQA's core purpose of promoting informed decision-making. *See Neighbors for Smart Rail v. Exposition Metro Line Construction Authority* (2013) 57 Cal. 4th 439, 447.

The EIR does not identify the type of odor sources that would be produced by the Project; the frequency of odor events generated by odor source(s) (e.g., operating hours, seasonal); or the distance and landscape between the odor source(s) and the sensitive receptor(s) (e.g., topography, land features). Nor does the document provide *any* information as to whether the refinery is already a source of odor complaints or whether the Refinery even monitors for odorous emissions. In addition, the EIR does not identify standards of significance against which odor impacts would be evaluated.

As mentioned above, the EIR's perfunctory "analysis" of odors addresses only one compound, SO<sub>2</sub>. Also as discussed above, the EIR cannot rely on claimed reductions in SO<sub>2</sub> since there is no support in the EIR or BAAQMD permitting application for these reductions. The EIR never even mentions, let alone analyzes, whether any of the new equipment or operations would result in an increase in other odor producing chemicals, such as hydrogen sulfide, other reduced sulfur compounds, ammonia, and organic compounds, including benzene, naphthalene, and toluene.

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The EIR should be revised to include a comprehensive assessment of odors caused by the proposed Project. The BAAQMD provides guidance for conducting this analysis. Exhibit D at 7-1-7-4 (BAAQMD CEQA Guidelines). Should the analysis determine that the Project's odor impacts are significant, the EIR must identify feasible mitigation measures. The BAAQMD identifies feasible odor mitigation measures for petroleum refineries. These include: (1) water injections to hydrocracking process; (2) vapor recovery system; (3) injection of masking odorants into process streams; (4) flare meters and controls; (5) wastewater circulation technology for aerated ponds; (6) exhaust stack and vent location with respect to receptors; (7) thermal oxidizers; (8) carbon absorption; and (9) biofiltration/bio trickling filters. *Id.*

**D. The EIR Fails to Adequately Disclose and Analyze Project-related Hazards and Public Safety Risks.**

The Project has the potential to pose a substantial risk to the safety of the surrounding community. The Project is located in close proximity to a residential area. The sensitive receptors nearest to the active area of the Refinery include a day care center, the Bayo Vista Child Development Center ("BV CDC"), which is located approximately 0.5 mile southwest of the site of the Propane Recovery Unit. The existing rail spur, which is currently used to transport butane, and on which propane-filled rail cars would be staged, is located approximately 0.2 miles from the BV CDC. DEIR at 4.9-1. The proximity of residents and school children to the Refinery calls for careful and thorough evaluation of the potential risks associated with the proposed Project. Yet the EIR fails to adequately identify or evaluate these potential hazards. Central to an evaluation of a refinery's potential for accidental releases is a description of the operator's existing record of regulatory compliance and history of releases and other incidents. Here, we can find no indication that such an evaluation has been included in the EIR.

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The DEIR defers until after Project approval preparation of a "hazards and operability study" which will allegedly identify process hazards involving acutely hazardous material. DEIR at 4.9-12. Although the DEIR asserts that hazards associated with the refinery could result in substantial property damage and severe off-site injuries, the document concludes, absent any evidentiary support, that since the probability of an accident is unlikely the impact would be insignificant. *Id.* In essence, the DEIR ignores the potentially catastrophic consequences of an accident by focusing on the alleged improbability of one occurring.

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Incidents such as those that occurred at Chevron's Richmond oil refinery in August 2012 confirm that refining oil is an inherently dangerous process. According to the report "Improving Public and Worker Safety at Oil Refineries" prepared by Governor Jerry Brown's Office, every week, the U.S. Department of Energy ("DOE") receives reports on process safety incidents in the U.S. refinery industry. *See* Improving Public and Worker Safety at Oil Refineries Draft Report of the Interagency Working Group on Refinery Safety Governor Jerry Brown, dated July 2013, attached as Exhibit E. The week that ended March 14, 2013 had 26 reported incidents, including unplanned flaring at the Torrance, California Exxon Mobil Refinery; an unplanned shut-down of the hydrocracking unit at Valero's Benicia, California facility; and the unexplained restart of a major electrical unit at the Chevron Refinery in Richmond, California. *Id.* News reports in the past few months tell of multiple catastrophic events that have resulted in fatalities, serious injuries, and devastating environmental effects. *See* Associated Press, *Crews Slowed by Heat in Attacking California Rail Fire*, NBC News, Aug 24, 2011; Bret Schulte, *Oil Spill Spotlights Keystone XL Issue: Is Canadian Crude Worse?*, April 4, 2013; Marianne Lavelle, *Oil Train Crash Probe Raises Five Keys Issues on Cause*, National Geographic, July 11, 2013; David Boroff, *At Least Eight Injured, Five Critically, as Explosions Rock Blue Rhino Propane Gas Plant in Florida*, New York Daily News, July 30, 2013; and Matthias Gafni, *Benicia: Three Valero Refinery Rail Cares Filled With Coke Derail*, Contra Costa Times, Nov. 5, 2013, all attached as Exhibit F.

The Phillips 66 Refinery has itself experienced numerous incidents, including the June 15, 2012 process water tank release of hydrogen sulfide and natural gas vapors and the October 22, 2010 release of heavy black smoke and excess gasses from the facility's flare due to an unplanned shutdown of the Air Liquide hydrogen plant. The EIR authors cannot refuse to study the implications of accidents and releases by cavalierly assuming such incidents will not occur.

SWW 14 As the Fox Report explains, the Project would increase the amount of hazardous materials processed at the Refinery and transported by rail in close proximity to area residents, which has the potential to pose a substantial threat to the health and safety of the residents of Rodeo. Yet, the EIR's treatment of potential increased risks to public safety is dismissive and identifies this impact as insignificant. DEIR at 4.9-14, -18, and 19.

In sum, the EIR's analysis of hazards and public safety risks is flawed because it (1) fails to describe the Refinery's regulatory history and history of violations; (2) fails to adequately analyze significant risks to the adjacent communities; and (3) fails to identify mitigation to minimize those impacts. A description of the most glaring flaws is summarized below.

**1. The EIR Fails to Describe the Refinery's Regulatory History and History of Violations.**

SWW 15 The DEIR discusses the health and safety regulatory framework applicable to refineries generally but fails to take the next necessary step – disclosing Phillip 66's record of legal and regulatory non-compliance. Based on our research, the facility was issued 168 Notices of Violation between December 2003 and April 2011 and has had several incident reports since 2011. See BAAQMD Compliance Memorandum dated May 5, 2011 and BAAQMD Incident Report Information attached as Exhibit G. As discussed below, the EIR omits so much information that it does not come close to meeting CEQA's standards as an informational document.

According to the U.S. Environmental Protection Agency ("EPA") the Refinery ranked as the 8th most toxic polluter of all California facilities with large chemical releases. Phillips 66 was ranked 12th on the Toxic 100 Air Polluters index. See EPA 2011 Toxics Release Inventory and the Political Economy Research Institute Toxic 100 Air Polluters attached as Exhibit H. This index, prepared by the Political Economy Research Institute, identifies the top U.S. air polluters among the world's largest corporations and ranks corporations based on the chronic human health risk from all of their U.S. polluting facilities.<sup>6</sup>

<sup>6</sup> The index relies on the U.S. EPA's Risk Screening Environmental Indicators ("RSEI"), which assesses the chronic human health risk from industrial toxic releases. The underlying data for RSEI is the EPA's Toxics Release Inventory ("TRI"), in which facilities across the U.S. report their releases of toxic chemicals. In addition to the amount

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These compliance rankings are of extreme concern given the facility's proximity to an established residential community and the Carquinez Strait.<sup>7</sup> Given that this Project would implement operations to allow a highly volatile hazardous material transfer on ground subject to liquefaction, Phillips 66's regulatory compliance record is highly relevant. A revised EIR must disclose this compliance record as the baseline for determining the Project's potential threat to public safety.

**2. The EIR Fails to Adequately Identify or Analyze Public Safety Impacts.**

**(a) Rail Transport and Storage**

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The Project proposes the movement of an additional eight liquefied petroleum gas ("LPG") rail cars per day from the Refinery to the Richmond rail yard. After assembling a longer train, the loaded LPG train cars will proceed east through heavily population communities of Richmond, Hercules, Rodeo, Crockett, Port Costa, and downtown Martinez, eventually proceeding to the California-Arizona border. This transfer of LPG will be in addition to the number of LPG rail tank cars that are currently transported from other refineries in the area.

The proposed Project will result in a 145 percent increase in the amount of butane and propane transported off-site via rail. DEIR at Table 3-2 Project Component Matrix at 3-21. Despite the substantial increase in the amount of butane and propane transported off-site via rail, the EIR concludes that the Project would not result in *any* increased safety risks to nearby residents and school children. DEIR at 4.9-14. The EIR contends that because the Refinery already transports butane by rail past these sensitive receptors, the baseline risk already exists and the Project would not introduce new risks. *Id.* and FEIR at 2-17 and 2-19. The EIR provides no evidence to support this conclusion. In fact, studies show that train length is an important factor in derailments in that a longer train is more likely to derail. See "Analysis of Major Derailment Causes on Heavy Haul Railways in the United States, X. Liu, et.al. attached as Exhibit I. In addition, in the

of toxic chemicals released, RSEI also includes the degree of toxicity and population exposure.

<sup>7</sup> The Carquinez Strait is part of the tidal estuary of the Sacramento and the San Joaquin Rivers as they drain into the San Francisco Bay.  
[http://en.wikipedia.org/wiki/Carquinez\\_Strait](http://en.wikipedia.org/wiki/Carquinez_Strait)

event of a derailment of rail tanks of propane, the additional flammable/explosive material being transported would result in a greater amount of material released and would impact a larger area compared to existing conditions.

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Moreover, the EIR relies on the assumption that such accidents are so rare that there is virtually no real risk to the adjacent communities. The EIR's methodology for evaluation of public safety risks inappropriately assumes that public safety risks from accidents at the Refinery are only considered significant if the accidents result in both moderate or high severity injuries/damage and occur once a decade or more. DEIR at 4.9-16. For example, the EIR discloses that the Project would cause an increase in the transport of aqueous ammonia, but determined any impacts would be less than significant because the likelihood of a release during transport is "improbable." DEIR at 4.9-19. Yet, releases of aqueous ammonia are not unprecedented. In fact, Chevron's El Segundo facility experienced a release of this compound in 1998. See U.S. Department of Labor Occupational Safety & Health Administration, attached as Exhibit J. While Chevron also never expected such a release, and would likely have considered such an event improbable, accidents at petroleum facilities occur all too frequently. See Improving Public and Worker Safety at Oil Refineries Draft Report of the Interagency Working Group on Refinery Safety Governor Jerry Brown dated July 2013, attached as Exhibit E.

Of course, for adjacent residents and workers, *any* accidents resulting in impacts beyond the facility's fence-line may have devastating effects. Yet the EIR fails to define what constitutes a "minor injury" and a "serious" injury. Given the close proximity of sensitive receptors to the Refinery and to the tracks used to and for rail transport, what the EIR preparers might consider a "minor injury" could be serious. Emissions from accidental releases may cause adverse effects in healthy individuals and exacerbate conditions in people with chronic illnesses.

Finally, the EIR's evaluation of potential accident scenarios is vague and fails to describe the resulting impacts to nearby residents. For example, the EIR indicates that three of the accident scenarios evaluated would result in moderate to severe injuries, fatalities and property damage. DEIR at 4.9-20 and 21. However, the EIR fails to indicate the extent of area that would be effected by the accidents and fails to describe the resulting impacts to the community. How far would the impacts extend? How many people would be injured? How many fatalities would be expected? What sort of property damage would Rodeo residents experience? An EIR must also provide "information about how adverse the adverse impact will be." *Santiago County Water District v. County of Orange* (1981) 118 Cal. App. 818, 831. Without this information,



SMW 16 it is impossible for County decision makers and the public to evaluate the extent and severity of the Project's impacts relevant to public safety.

**(b) Accidents and Releases from the Facility**

SMW 17 Pressurized propane storage poses an extremely high-magnitude impact hazard and is exacerbated by site-specific factors (*i.e.*, seismically active area susceptible to liquefaction) that increase the likelihood and potential magnitude of impacts. The EIR acknowledges that although this occurs very rarely, the potential exists for a catastrophic failure of an LPG storage vessel such as a "boiling liquid expanding vapor explosion" or BLEVE. DEIR at 4.9-2, 4.9-18, 4.9-19 through 4.9-22, 6-5. The potential impacts of such an incident could be catastrophic. The EIR again concludes that the likelihood of such incidents is so rare that the impact is less than significant and therefore does not warrant mitigation.

Commenters have identified potential mitigation measures to eliminate the catastrophic risk resulting from the rupture of an LPG storage tank. The FEIR dismisses as "infeasible" cooling the LPG storage tanks instead of pressurizing because of the added costs for electricity and the need to construct a new flare. DEIR at 6-5. While the EIR implies that the cost of implementing cooled LPG storage tanks would exceed the cost of pressurized tanks, it provides no evidence supporting this assertion. Moreover, cost alone is not a legitimate basis for rejecting an alternative from EIR consideration. CEQA Guidelines § 15126.6(f)(1).

**(c) The EIR Defers Analysis of Potentially Significant Impacts Involving the Release of Hazardous Materials.**

SMW 18 The EIR lacks sufficient information to enable the public and decision-makers to make an informed judgment regarding the Project's potentially significant impacts related to the release of hazardous materials. Here too, the EIR relies on conclusory statements that are specifically prohibited under CEQA. See *Berkeley Keep Jets Over the Bay Com. v. Board of Port Cmrs.* (2001) 91 Cal. App. 4th 1344, 1371 (striking down an EIR "for failing to support its many conclusory statements by scientific or objective data"); *San Joaquin Raptor Rescue Center v. County of Merced* (2007) 149 Cal. App. 4th 645, 659 ("[D]ecision makers and general public should not be forced to . . . ferret out the fundamental baseline assumptions that are being used for purposes of the environmental analysis.").

Perhaps most egregious, the EIR identifies the need for a detailed hazards and operability study of the Project-related changes. DEIR at 4.9-12. Yet, rather than conduct this detailed study now, as required by CEQA, the EIR promises to complete the study after Project approval. *Id.* ["Upon completion of the Project, the Hazardous Materials Business Plan that provides input to the RMP would be updated and the RMP scenarios reviewed for potential change as a result of the Project."]. In the absence of this study, the public and decision-makers are left in the dark as to the severity and extent of the Project's hazards.

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18 Similarly, although the EIR acknowledges the presence and likely disturbance of contaminated soil in the Project area (DEIR at 4.9-10), it ignores potentially significant impacts related to disturbance of these soils. The EIR concludes, absent any analysis, that the Project would not result in impacts because contaminated soils would be handled in accordance with regulatory requirements. DEIR at 4.9-15. The EIR assumes that simply because the Project is proposed to conform to existing regulations, it will not have a significant environmental impact. This is not the standard under CEQA. Under well-established case law, compliance with existing policies and regulations does not excuse the agency from describing Project activities or from analyzing resulting impacts. See *Protect the Historic Amador Waterways v. Amador Water Agency* (2004) 116 Cal. App. 4th 1099, 1108-09 (environmental effect may be significant despite compliance with such requirements). Therefore, the EIR provides no evidentiary support for the conclusion that the Project's impacts related to hazardous materials would be less than significant.

In another example, the EIR acknowledges that the Project would "tend to interfere with roads, access, and egress within the refinery especially during construction." DEIR at 4.9-15. The EIR even states that "the Project would have to be integrated into refinery operations and its Emergency Response Plan." *Id.* However, instead of analyzing the impacts on site access, operations, and emergency response, the EIR concludes that the unspecified "integration" of the Project would result in no impacts. *Id.* Here too, the EIR lacks any evidentiary support that there would be no impact relating to emergency response. Obstructing, or in any way interfering with, evacuation routes near an operating oil refinery is an extreme cause for concern. As the EIR acknowledges, the Rodeo-Hercules Fire Protection District has closed Fire Station 75 in Rodeo indefinitely due to budget cuts. DEIR Comments from Richard Ryan, Rodeo-Hercules Fire Protection District to Lashun Cross, Contra Costa County, dated August 8, 2013, FEIR at 3.1-26. Thus, the Project's interference with evacuation procedures combined with reduced emergency services in the community could result in

devastating impacts following an accident at the refinery. A revised EIR must clearly disclose the Refinery's emergency response and evacuation plans. These evacuation plans must take into account nearby residents and workers, not just the Refinery's employees.

SMW 18 Finally, the EIR completely ignores impacts to worker safety. Other than a description of the regulatory setting related to worker safety (DEIR at 4.9-5) the EIR provides no analysis of the Project's risks to on-site workers. The Project will increase the amount of hazardous materials handled at the facility and will require a site safety plan to protect workers and the public from exposure to potential hazards at the site. DEIR at 4.9-6. Analysis of these risks and preparation of the site safety plan must be performed as part of the environmental process and not deferred until after project approval.

Because the EIR relies on plans that are not yet approved, and because it fails to provide enforceable measures and performance standards, there is no assurance the Project's impacts related to hazards would not be significant and that they would be mitigated at all. *See Sacramento Old City Ass'n v. City Council* (1991) 229 Cal. App. 3d 1011. A revised EIR must identify all feasible mitigation measures and analyze alternatives that would substantially lessen the significant impacts of the Project.

**E. The EIR Fails to Adequately Analyze the Project's Impacts Related to Geologic Hazards.**

SMW 19 A The EIR's impact analysis lacks the detail that CEQA requires. As discussed below, the EIR includes only cursory conclusions that the potential for impacts exist, but lacks the necessary analysis of those impacts. Specifically, the Project would locate an LPG loading rack, rail cars containing propane, and two new rail spurs on soils that are highly susceptible to liquefaction in the event of an earthquake. DEIR at 4.7-8. Despite this site limitation, the EIR defers preparation of a site-specific geotechnical report and relies on an incomplete investigation of the geotechnical conditions at the Project site. The EIR then concludes, absent any evidentiary support, that related impacts would be less than significant. This approach is impermissible under CEQA.

First, the EIR relies in part on a preliminary geotechnical investigation performed in 2002 for previous improvements at the Refinery site. DEIR at 4.7-3. However, the EIR admits that potential liquefaction hazards were not specifically analyzed during this

preliminary geotechnical investigation. *Id.* at 4.7-7. Thus, the 2002 geotechnical study fails to address the conditions at the Project site and cannot be relied upon to support the current impact analysis.

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Second, the EIR relies on a Geologic Peer Review for the Project performed by Darwin Myers Associates. See letter from D. Myers to Lashun Cross, dated July 13, 2012 (Appendix G to November 19, 2013 County Planning Commission Staff Report) and attached as Exhibit K. This letter makes clear that extensive geotechnical documentation still needs to be prepared in order to evaluate geologic hazards on the site. *Id.* Myers states that he was not even provided with a geotechnical report, grading or foundation plans, geotechnical data on foundation conditions, the approach to site grading, drainage, or foundation design. *Id.* at 5. He goes on to state that based on his previous experience with projects on the Phillips 66 Refinery site, there is a potentially significant risk of hazards from expansive soils, undocumented fill that is inadequate for the support of planned improvements, compressible soils, and liquefaction. *Id.* The Myers letter recommends, among other things, that a site-specific preliminary geotechnical report be prepared *prior to deeming the application complete*. *Id.* Myers specifies that the geotechnical report should provide criteria to guide planning for the proposed Project improvements. *Id.* Myers confirms that this geotechnical analysis is needed for purposes of CEQA. *Id.* at 6.

Instead of performing the recommended analysis, the EIR ignores the Myers letter and defers the necessary analysis of impacts until after project approval. DEIR at 4.7-15 and FEIR at 2-11 and 2-12. Notwithstanding this incomplete investigation, the EIR concludes that Project-related risks associated with liquefaction and seismic hazards would be less than significant. DEIR at 4.7-15 through 4.7-17 and FEIR at 2-14. However, without a full investigation, the EIR has no basis to conclude that Project components proposed on the western shore of the site will not be constructed on unstable soils and will not result in significant impacts. Having failed to analyze the impacts, the EIR fails to identify feasible mitigation measures to minimize impacts resulting from the Project site's location.

An analysis of the Project's potential to locate development on unstable soils must necessarily begin with a detailed investigation of the existing conditions on the Project site. The EIR must be revised to include a comprehensive analysis of these site constraints and to identify appropriate mitigation measures. Without a full investigation, the EIR has no basis to conclude that the proposed construction of Project components in

SMW 19/ an area susceptible to liquefaction would not result in impacts. Site constraints, such as underlying soil properties, must be identified prior to Project approval.

**F. The EIR Fails to Adequately Analyze and Mitigate Significant Impacts to Public Services and Facilities.**

SMW 20/ The EIR dismisses the Project's potential to increase demand for fire protection services based on the assertion that the Refinery provides internal fire protection and emergency services on the Project site. Despite the fact that an accident at the Project site, such as an explosion of one of the propane or butane storage tanks, would impact nearby residents, the EIR completely ignores the need for emergency response services to protect the adjacent community.

Although the EIR discloses that recent budget cuts have necessitated cuts in emergency services (at 3.1-27) and the Rodeo-Hercules Fire Protection District Fire Station 75 in Rodeo is closed indefinitely, the EIR never evaluates the implications of the lack of adequate emergency services. The Rodeo-Hercules Fire District confirmed, in its letter to the County, that existing services are not adequate to provide the additional services required to respond to emergency situations potentially resulting from the proposed Project. FEIR at 3.1-26. Similarly, the city of Martinez has experienced closure of one of its fire stations due to County budget cuts. See fire station closure report attached as Exhibit L.

Firefighters at the closed fire stations in Rodeo and Martinez would have become first responders to a volatile hazardous materials rail accident should those stations have remained open. Ensuring the safety of the community is not just some bureaucratic hurdle to be jumped over. The County has a duty to ensure that it has the ability to provide sufficient emergency response in the event of an accident or release. As it stands, the EIR does not come close to ensuring that such provisions are in place.

The EIR also fails to analyze the Project's potential to impact public facilities and personnel in the event of a chemical release, fire, or explosion. As noted by the Rodeo Sanitary District Manager, the proposed Project facilities are located in close proximity – within 3,000 feet – of the District's treatment plant and operations building. See DEIR Comments from Steven Beall, Rodeo Sanitary District to Lashun Cross, Contra Costa County, dated August 15, 2013, FEIR at 3.1-44. The District's facilities, along with personnel at those facilities, would be at risk in the event of an accident. Yet, the EIR never analyzes the potential implications of an accident affecting the treatment plant. The

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loss of sewage treatment capabilities would be devastating to the community as well as the environment.<sup>8</sup> Rather than performing the required analysis, the FEIR dismisses the comment and refers the reader to the analysis in the DEIR, which fails altogether to address the impacts in question. *Id.*

These elevated risks, and feasible mitigation, must be evaluated in a revised EIR.

**G. The EIR Fails to Adequately Disclose or Analyze the Project's Greenhouse Gas Emissions.**

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The EIR concludes that the Project would result in a net decrease in GHG emissions and would therefore have a *beneficial impact* with regard to climate change. DEIR at 4.8-17 and Table 4.8-3 (emphasis added). This conclusion is belied by common sense and evidence in the record. The most egregious deficiencies in the EIR's estimation of the Project's contribution to GHG emissions are identified below.

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First, the EIR's calculations are severely flawed because they assume emission increases from the new boiler, additional natural gas combustion, and other miscellaneous sources would be offset by removing 14,500 BPD of butane and propane from the fuel gas system and replacing them with natural gas and the shutdown of Plant 4 Hydrogen Plant and B-401 Heater. As the Fox Report explains, however, a reduction would only occur if the propane/butane are not used as fuel, which is their usual end use. The EIR fails to disclose the use of the removed butane and propane. Butane and propane, for example, are fuels, often called liquefied petroleum gas or LPG. They are also feedstocks to various chemical processes. Either use would result in GHG emissions.

Some, perhaps all, of the recovered butane and propane will likely be sold for use as fuel. The resulting emissions are indirect emissions from the Project and must be included in the Project GHG emission inventory. Had the EIR included the use of propane/butane in its calculation of GHG emissions, it would have identified an increase of 433,266 metric tons per year ("MT/yr") of GHG from the Project. Fox Report at 11. Regardless of where the propane and butane are actually used, the environmental consequences of their use are the same and must be considered.

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<sup>8</sup> The District's treatment plant serves approximately 8,000 residents, and businesses in Western Contra Costa County.

Second, the DEIR estimated GHG emissions assuming 4,200 BPD of propane and 3,800 BPD of butane. Butane generates about 6% more GHG than propane per gallon burned. In correspondence with the BAAQMD, Phillips 66 has requested a lump-sum limit of 14,500 BPD (6/28/13 RTC Letter, p. 5, Response to Comment #6), which would allow them to produce 100% butane, increasing GHG emissions compared to those estimated in the DEIR.

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Third, the GHG emission calculation additionally assumes a net reduction of 234,000 MT/yr from the shutdown of the Plant 4 Hydrogen Plant and B-401 Heater. DEIR at Table 4.8-3. However, as discussed above, neither the EIR or any of the supporting documentation provides any support for the claimed reductions from these shutdown units. This is consistent with comments filed by BAAQMD on the DEIR. They were unable to find any support for the DEIR's claimed GHG reductions from decommissioning a process heater and hydrogen plant. The BAAQMD further expressed concern that "emission from Unit 240 [the shutdown process heaters] may have shifted to other existing equipment due to increased operating demand." Increased heat demand, for example, would result from recovering butane and propane for the Project and to upgrading additional semi-refined materials from the Santa Maria Facility.

Regardless, the emission reductions already occurred since the units were shutdown in 2011 as part of the Marine Wharf Project. The EIR may not take credit for reductions that are not part of the Project. Since these emission reductions have already occurred, they are part of the existing baseline and cannot be relied upon to claim a reduction in emissions from the Project.

Fourth, the Project requires the installation of a hydrotreater. The DEIR claims that the amount of hydrogen present in the existing gas streams is adequate to supply the increased hydrogen demand for this unit. DEIR at 3-25. The BAAQMD questioned this assumption and asked Phillips to accept a permit condition stating no hydrogen would be used at the new hydrotreater. Phillips declined and admitted that "... there are short periods when hydrogen from a hydrogen plant will need to be supplied." See Fox Report referencing a 4/30/13 Phillips Response Letter, p. 3, Response to Comment #4. Hydrogen plants include a furnace and vents that are significant sources of criteria pollutant and GHG emissions. Fox Report at 23. Despite this fact, the DEIR does not disclose the amount of additional hydrogen that will be required nor the resulting emissions.

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According to the Fox Report, if the GHG reductions from both the Plant 4 Hydrogen Plant and B-401 Heater Shutdown are removed from the GHG inventory in DEIR Table 4.8-3 and the increase in emissions from burning the propane and butane are added, the net increase in GHG emissions based on DEIR Table 4.8-3 would be 1.3 million MT/yr ( $+325,978 + 234,000 + 759,244 = 1,319,222$  MT/yr). These emissions exceed the CEQA significance threshold by a vast amount and are highly significant. The EIR offers no mitigation for these impacts.

#### H. The EIR's Analysis of Impacts and Mitigation of Significant Impacts to Biological Resources Is Flawed.

As detailed below the EIR underestimates Project-related impacts to biological resources as a result of a series of errors, including the failure to: (1) describe accurately the environmental setting; (2) analyze and mitigate for impacts to sensitive species and habitats; and (3) adequately evaluate cumulative impacts. The EIR's treatment of biological impacts does not meet CEQA's well-established legal standard for impacts analysis. Given that analysis and mitigation of such impacts are at the heart of CEQA, the EIR will not comply with the Act until these serious deficiencies are remedied.

##### 1. The EIR Contains an Inadequate Description of the Project Area's Existing Biological Resources.

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The EIR fails to accurately portray the site's underlying environmental conditions and therefore undercuts the legitimacy of the environmental impact analysis. The Project site and vicinity contain several types of wetlands, including northern coastal salt marsh, coastal brackish marsh, and coastal and valley freshwater marsh, all of which are considered sensitive habitat by the California Department of Fish and Wildlife. DEIR at 4.4-4. A number of sensitive and listed species depend on these habitats, including the salt marsh harvest mouse (federally endangered), California clapper rail (federally endangered), and black rail (State threatened). *Id.* at 4.4-27 and Table 4.4-1. The Project site drains into San Pablo Bay. The estuarine habitat of San Francisco Bay, of which San Pablo Bay is a continuous part, supports diverse marine biota. *Id.* at 4.4-6. San Pablo Bay supports over 40 species of fish, including several federally threatened species. *Id.* at 4.4-18.

Notwithstanding the rich array of biological resources on and adjacent to the Project site, the EIR relies on insufficient biological surveys. With few exceptions, surveys for sensitive plant and animal species are outdated (conducted in 1994) or entirely



absent. DEIR at 4.4-2 and 4.4-3. Rather than conduct up-to-date surveys, the EIR states that consultant biologists "examined" the proposed Project area in 2003 and 2006 by reviewing high resolution photos of the site. *Id.* at Appendix B. The EIR also attaches a species list for the Project area provided by the U.S. Fish and Wildlife Service ("USFWS"). *Id.* While aerial photos can indicate types of habitat available on and adjacent to a site, they are incapable of determining the presence or absence of species. Nor can a USFWS list of species serve as a substitute for a project-specific analysis. Indeed, the agency's list of species clearly indicates that surveys should be performed for the species and habitats associated with the project area. DEIR at Appendix B, page B-11["We recommend that your *surveys* include any proposed and candidate species on your list." (emphasis added).

Relying on surveys that are decades old is unacceptable in that site and adjacent area conditions could be substantially altered. Instead of updating the site surveys, the EIR asserts, without any evidence, that the site conditions have not substantially changed since 1994. DEIR at 4.4-2. Yet, the DEIR itself provides evidence of changed conditions when it states that the importance and sensitivity of wetlands has increased as a result of widespread filling and destruction to enable urban development, and that since 1994, the status of several species with the potential to occur in the project vicinity has changed. DEIR at 4.4-18 and 4.4-8. Additionally, agency-required protocols for surveys are likely to have changed since 1994.

The EIR's perfunctory description of the sensitive species and habitats present in the Project area results in an incomplete description of the sensitive environmental setting of the Project. According to settled case precedent, this failure to describe the Project setting violates CEQA. *See San Joaquin Raptor*, 27 Cal. App. 4th at 724-25 (environmental document violates CEQA where it fails to completely describe wetlands on site and nearby wildlife preserve). The revised EIR must include an update of biological conditions on the site and in adjacent areas that provide habitat, including aquatic habitat in the coastal waters adjacent to the site. This information must be provided for each species that can potentially occur in the vicinity of the Project. Without it, the document cannot evaluate the Project's impacts on wildlife.

## 2. The EIR Fails to Adequately Analyze the Project's Impacts on Biological Resources.

Despite the EIR's acknowledgement that several Project components located near the shorelines are proximal to sensitive habitats (e.g., wetlands and estuarine open water

habitats), the EIR fails to analyze impacts to sensitive species that it acknowledges may be present in these habitat areas. DEIR at 4.4-4 and 4.4-25. First, although the salt marsh harvest mouse, California clapper rail, and black rail occur in the Project area (EIR at 4.4-27 and Table 4.4-1), the EIR dismisses impacts to these species, suggesting that sensitive habitats are already subject to disturbances from existing Refinery operations. *Id.* at 4.4-25. This approach violates CEQA. The fact that sensitive biological resources already suffer from disturbance and pollution does not mean that impacts would not be significant. To the contrary, if sensitive species are using habitats in a stressed ecosystem, even incremental additional stressors could cause further harm. Therefore, it is critical that the EIR describe existing conditions in sensitive habitats areas and evaluate the extent and severity of any direct and indirect impacts resulting from the Project.

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Second, the Project does not analyze impacts to sensitive fish species from the Project's operations. The Project site falls within the San Francisco Bay Hydrologic Basin. DEIR 4.10-1. The Basin is designated as critical habitat for Steelhead and Chinook salmon. 50 CFR 226.211 Critical Habitat for Seven Evolutionarily Significant Units of Salmon in California, § 226.211 (a) and (b). Project components located near the shorelines are proximal to the estuarine open water habitat that border the Refinery. DEIR at 4.4-25. The EIR acknowledges that this habitat is home to several threatened fish species, including several salmonids (identified in Table 4.4-1) that may be present along the Refinery shoreline on a seasonal or year-round basis. *Id.* at 4.4-27 and 4.4-28.

The Project's once-through discharge would increase by 8,500 gallons per minute. DEIR at 4.4-27. The DEIR acknowledges that if Refinery discharge water is too hot, salmonids could be adversely impacted. *Id.* and Table 4.4-1. The EIR then concludes that, because Refinery discharges will not exceed maximum temperatures allowed under the Refineries National Pollutant Discharge Elimination System ("NPDES") permit, impacts to surrounding resources would be less than significant. DEIR at 4.4-28. However, the EIR never actually analyzes the impact of this increased discharge; instead it relies on compliance with existing regulations to ensure that Project operations won't harm fish. Under CEQA, a lead agency cannot rely on compliance with existing statutory and regulatory obligations to conclude that a project will not result in impacts. *Protect the Historic Amador Waterways*, 116 Cal. App. 4th at 1108-09 (environmental effect may be significant despite compliance with such requirements). The EIR cannot simply assume that other agencies' standards suffice to ensure a Project's impacts would be less than significant. The EIR must actually conduct an analysis of the impacts.

Moreover, the EIR itself provides evidence that discharged waters from the Refinery may impact threatened fisheries. The document explains that discharges from the Refinery average 80 degrees Fahrenheit, with allowed maximum temperatures of 105 degrees Fahrenheit. DEIR at 4.4-27. However, the EIR fails to analyze whether discharges at these temperatures would harm salmonids that occupy adjacent habitat. Salmonids are cold water fish and the growth rate of their young are largely influenced by water temperature. See Chinook Salmon Life History, University of California, Agriculture and Natural Resources California Fish Website, available at <http://calfish.ucdavis.edu/species/?uid=20&ds=241>; and generally Moyle, P.B. 2002, *Inland Fishes of California* Revised Ed. at 251- 271 attached as Exhibit M. Apart from optimal temperatures for rearing young, few fish can survive temperatures above 24 degrees Celsius/75 degrees Fahrenheit for even short periods of time. Moyle, P.B at 255.

CEQA mandates a finding of significance for any impact that "restrict[s] the range of an endangered, rare or threatened species." Guidelines § 15065(a)(1). In *Vineyard Area Citizens for Responsible Growth, Inc., v. City of Rancho Cordova*, the Supreme Court applied this requirement, making clear that any impacts to federally designated critical habitat are *per se* significant. 40 Cal. 4th 412, 425, 449 (2007) (EIR invalidated for failure to consider significant any reduction in water flow in designated critical habitat area for the Central Valley steelhead trout). The reasoning is manifest: the federal agency charged with the protection of a listed species has the requisite expertise to determine the habitat areas that, if impacted, would "restrict the range" of the listed species, and that determination must be respected by state and local agencies under CEQA. Guidelines § 15065(a)(1); see also 16 U.S.C. § 1532(5)(A)(i) (defining critical habitat as the areas "on which are found those physical or biological features essential to the conservation of the species").

### 3. The EIR Fails to Analyze Cumulative Impacts to Biological Resources.

The San Francisco Bay Hydrologic Basin's deep-water channels, tidelands, and marshlands provide a wide variety of habitats that have become increasingly vital to the survival of several plant and animal species. The basin sustains rich communities of crabs, clams, fish, birds, and other aquatic life and serves as important wintering sites for migrating waterfowl. DEIR at 4.10-2. The San Francisco Bay ecological system survives in the face of myriad threats and stresses from previous development in the area,

and additional, incremental adverse impacts from habitat loss and other environmental impacts may very well push it to collapse.

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The EIR acknowledges that certain resources in the area are diminished due to environmental stressors. For example, with regard to northern coastal salt marsh, the EIR acknowledges that "the listed status of these species is reflective of the greatly diminished extent of this habitat type in the San Francisco Bay area and elsewhere." DEIR at 4.4-5. Despite this fact, the EIR fails to disclose the extent and quality of biological resources that historically occurred in the Project area, or the amount of resources already lost in the region. Yet, the EIR fails to evaluate the cumulative impacts of this Project and other projects on this habitat and the listed species that use it. It does not provide any quantification or discussion of the combined impact of this Project and nearby projects on biological resources. Instead, it wrongly assumes compliance with existing legal requirements suffices to mitigate cumulative impacts. DEIR at 4.4-27 and 4.4-28.

The dismissive approach of the EIR towards the cumulative contribution of the Project stands to condemn the remaining biological resources in this area to the proverbial "death by a thousand cuts." An EIR must include objective measurements of a cumulative impact when such data are available (or can be produced by further study) and are necessary to ensure disclosure of the impact. *See Kings County Farm Bureau*, 221 Cal. App. 3d at 729.

Finally, other refining-related projects (discussed below) will result in additional shipping traffic through the San Francisco and San Pablo Bays that will impact water quality and aquatic habitat. Yet, the EIR fails to identify, let alone analyze the cumulative increase in copper loading and other increased pollutants that will degrade water quality and aquatic and riparian habitats in the region. The revised EIR must analyze these cumulative impacts, along with the impacts to water quality resulting from discharge of coolant waters for the proposed project, and identify mitigation measures and/or Project alternatives for any impacts that are determined to be significant.

### **III. The EIR Fails to Adequately Analyze the Project's Cumulative Environmental Impacts From Other Refining-Related Projects.**

An EIR must discuss a Project's significant cumulative impacts. CEQA Guidelines § 15130(a). A legally adequate cumulative impacts analysis views a

particular project over time and in conjunction with other related past, present, and reasonably foreseeable future projects whose impacts might compound or interrelate with those of the project at hand. "Cumulative impacts can result from individually minor but collectively significant projects taking place over a period of time." CEQA Guidelines § 15355(b).

A project has a significant cumulative effect if it has an impact that is individually limited but "cumulatively considerable." *Id.* §§ 15065(a)(3), 15130(a). "Cumulatively considerable" is defined as meaning that "the incremental effects of an individual project are significant when viewed in connection with the effects of past projects, the effects of other current projects, and the effects of probable future projects." *Id.* § 15065(a)(3). Cumulative impacts analysis is necessary because "environmental damage often occurs incrementally from a variety of small sources [that] appear insignificant when considered individually, but assume threatening dimensions when considered collectively with other sources with which they interact." *Communities for a Better Env't v. Cal. Res. Agency* (2002) 103 Cal.App.4th 98, 114. Here, the EIR's analysis of cumulative impacts is incomplete, cursory and superficial.

Initially, the analysis does not comply with CEQA's requirement that agencies first determine whether cumulative impacts to a resource are significant, and then to determine whether a project's impacts are cumulatively considerable (*i.e.*, significant when considered in conjunction with other past, present and reasonably foreseeable projects). CEQA Guidelines § 15064(h)(1). The EIR skipped the first step and focused only on the second. This error caused the document to underestimate the significance of the Project's cumulative impacts because it focused on the significance of the Project's impacts on their own as opposed to considering them in the context of the cumulative problem. It is wholly inappropriate to end a cumulative analysis on account of a determination that a project's individual contribution would be less than significant. Rather, this should constitute the beginning of the analysis.

Second, the EIR's scope is limited largely to direct, immediate impacts within the immediate Project vicinity. For example, the analysis of cumulative air quality impacts is limited to the jurisdictional area of the BAAQMD despite the fact that Project-related rail traffic would generate emissions, at a minimum, throughout California.

Third, the list of reasonably foreseeable future projects considered in the EIR is under inclusive, especially in light of the potential geographic scope of certain potentially significant impacts. One of the EIR's most egregious deficiencies is the document's

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failure to disclose that several California refiners are considering developing "Crude By Rail" projects that could bring in tar sands-based dilbit crudes to each of the Bay Area refineries. See Valero's Crude by Rail Project in Benicia Could Open the Floodgates to Tar Sands in California, NRDC, attached as Exhibit N. Each of the Bay Area's refineries have either recently permitted projects or have pending permits that will facilitate transporting and refining tar sands crude. These refinery projects, including at least three projects proposed by Phillips 66 (Santa Maria Facility Throughput Extension Project, Santa Maria Facility Rail Spur Extension Project, and the Ferndale Washington Crude Unloading Facility Project), as well as several others including the Valero Crude by Rail Project, the Tesoro Project, and the WesPac Pittsburg Energy Infrastructure Project will result in the delivery of tar sands diluted with other chemicals to the Bay Area. See map of other refinery projects in the area, attached as Exhibit O.

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Although the Rodeo Refinery EIR mentions certain of these other projects, and purports to analyze the cumulative environmental impacts from the projects it identifies, it does not come close to disclosing the staggering environmental impacts on the Bay Area. In fact, the Rodeo EIR, like the other projects' environmental documents go to great lengths to not disclose the actual nature of the projects in an attempt to mask what will be severe environmental impacts. As the Natural Resources Defense Council makes clear in reference to the Valero project,

They have gone to great lengths to make this project look benign, claiming that the refinery doesn't need any modifications, saying the new crude will be a lot like the old crude, and that the rail project as designed wouldn't be suitable to carry tar sands anyway.

Well, that may be partially true technically, but it's completely misleading. Valero applied for a permit to make major adjustments to the refinery in 2002 - for the past 11 years, they have made modifications, including increasing coking capacity and building a new hydrogen plant that will allow it to process much dirtier crude oil. As for their claim that they cannot move tar sands by rail without specially heated railcars and offloading equipment-- that's true, but by adding chemicals to dilute tar sands bitumen, they create dilbit, which flows like regular oil and can be transported in regular rail tanker cars. *Id.*

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Not only does the Rodeo EIR not analyze the cumulative environmental effects of each of the petroleum-related projects (again, the document incorrectly asserts that because the Project's environmental impacts would be less than significant, the cumulative effects would also be less than significant), it omits several projects from the cumulative analysis altogether.

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As discussed above, the Phillips 66 Santa Maria Facility ("SMF") and the Rodeo Refinery, are linked by a 200-mile pipeline. These facilities constitute the San Francisco Refinery ("SMR"). The SMR mainly processes heavy, high-sulfur crude oil. Semi-refined liquid products from the SMF are sent by pipeline to the Rodeo Refinery for upgrading into finished petroleum products. In August 2011, the San Luis Obispo County Air Pollution and Control District ("SLOAPCD") and San Luis Obispo County Department of Planning and Building circulated an EIR for a project to increase throughput at the SMF. Within the last year, Phillips 66 applied to the SLOAPCD to modify the existing rail spur currently on the southwest side of the SMR. The purpose of this Project is to allow SMR "to access a full range of competitively priced crude oil." Fox Report at 10.

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As the Fox Report makes clear, the SMF Projects will increase the volume of products leaving the SMF for the Rodeo Refinery via pipeline including semi-refined crude oil or a combination of semi-refined crude oil and previously refined gas/oil petroleum. Despite the clear relationship between the SMF Projects and the Rodeo Refinery Project, the Rodeo Refinery EIR does not evaluate the Project's cumulative impacts. These include a cumulatively considerable increase in criteria and toxic air contaminant air emissions and greenhouse gas emissions.

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In addition, because the SMF throughput project, coupled with SMF Rail Project will enable tar sand crudes to be sent to and processed by the Rodeo refinery, the refining of increased volumes of tar sands crude will result in cumulative environmental impacts that have not been analyzed in the Rodeo Refinery EIR. As the Fox Report explains, the chemical composition of the crude raw materials that are processed by a refinery directly affect the amount and composition of emissions from a refinery. The amount and composition of sulfur in the crude slate, for example, ultimately determines the amount of SO<sub>2</sub> that will be emitted from every fired source in the refinery and the amount of odiferous hydrogen sulfide and mercaptans that will be emitted from tanks, pumps, valves, and fittings. Fox Report at 12.

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Fox goes on to explain that DilBits contain significant amounts of hazardous air pollutants, such as benzene, a potent carcinogen. These pollutants too would be emitted at many fugitive components in the Refinery, including compressors, pumps, valves, fittings, and tanks, in greater amounts than from baseline feedstock. *Id.* At 13. These increased emissions would result in significant public health and air quality impacts not addressed in the DEIR nor the FEIR. These include significant increases in volatile organic compounds ("VOCs") emissions not otherwise included in the emission estimates; hazardous air pollutants, including benzene, which could cause significant health impacts; and highly odiferous sulfur compounds that would individually and cumulatively cause malodors, degrade ambient air quality, increase the incidence of accidental releases, and adversely affect the health of workers and residents around the Refinery. Further, the high acid levels in these crudes and their semi-refined products would accelerate corrosion of refinery components, contributing to equipment failure and increased accidental releases. *Id.* The U.S. Geological Survey ("USGS"), confirms the Fox Report's findings. It explains that "natural bitumen," the source of all Canadian tar sands-derived oils, contains 102 times more copper, 21 times more vanadium, 11 times more sulfur, six times more nitrogen, 11 times more nickel, and 5 times more lead than conventional heavy crude oil, such as those currently refined from Ecuador, Columbia, and Brazil.<sup>9</sup>

Canadian tar sands crude is also considered to be the dirtiest, most carbon-intensive fuels on the plant. NASA climatologist Jim Hansen explains in the Scientific American, attached as Exhibit O. Canadian tar sands represent a significant tonnage of carbon:

With todays technology there are roughly 170 billion barrels of oil to be recovered in the tar sands, and an additional 1.63 trillion barrels of worth underground if every last bit of bitumen could be separated from sand. "The amount of CO2 locked up in Alberta tar sands is enormous," notes mechanical engineer John Abraham of the University of Saint Thomas in Minnesota, another signer of the Keystone protest letter from scientists. "If we burn all the tar sand oil, the temperature rise, just from burning that tar sand, will be half of what we've

<sup>9</sup> R.F. Meyer, E.D. Attanasi, and P.A. Freeman, Heavy Oil and Natural Bitumen Resources in Geological Basins of the World, U.S. Geological Survey Open-File Report 2007-1084, 2007, p. 14, Table 1, Available at <http://pubs.usgs.gov/of/2007/1084/OF2007-1084v1.pdf>.



already seen"—an estimated additional nearly 0.4 degree Celsius from Alberta alone.

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Notwithstanding the clear evidence documenting the effect that petroleum-refining has on GHG emissions, and enormous increase that would result from the transport, processing and refining of tar sands crudes, the Rodeo Refinery EIR concludes that there would be no cumulative increase in GHG emissions. DEIR at 5-11. The EIR lacks the evidentiary support for this conclusion.

Furthermore, it is important to acknowledge that climate change is the classic example of a cumulative effects problem; emissions from numerous sources combine to create the most pressing environmental and societal problem of our time. *Kings County Farm* ("Perhaps the best example [of a cumulative impact] is air pollution, where thousands of relatively small sources of pollution cause serious a serious environmental health problem."). As one appellate court recently held, "the greater the existing environmental problems are, the lower the threshold for treating a project's contribution to cumulative impacts as significant." *Communities for Better Env't v. Cal. Res. Agency* (2002) 103 Cal. App. 4th 98, 120.

Finally, the Refinery EIR omits two other projects from consideration in its analysis of cumulative environmental impacts:

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A. **Phillips 66 Ferndale, Washington Crude Unloading Facility Project**

Phillips 66 was recently issued a permit to construct a new crude rail unloading facility at its Ferndale Refinery in Washington. See documentation, attached to Fox Report. According to the Fox Report, this Project will directly facilitate barging tar sands crude to the Rodeo Marine Terminal.

B. **WesPac Pittsburg Energy Infrastructure Project**

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WesPac Energy-Pittsburg LLC (WesPac) proposes to modernize and reactivate the existing oil storage and transfer facilities located at the NRG Energy, Inc. (NRG, formerly GenOn Delta, LLC) Pittsburg Generating Station. The proposed WesPac Energy-Pittsburg Terminal (Terminal) would be designed to receive crude oil and partially refined crude oil from trains, marine vessels, and pipelines, store oil in existing or new

storage tanks, and then transfer oil to nearby refineries, including Phillip 66's Rodeo Refinery. WesPac RDEIR at 2.0-1

The Terminal Project consists of the modernization and reactivation of the following components at the NRG facility: (1) marine terminal; (2) onshore storage terminal, including both East and South Tank Farms; and (3) the existing San Pablo Bay Pipeline. In addition, the project consists of the construction and operation of new facilities, including: (1) Rail Transload Facility; (2) Rail Pipeline; (3) KLM Pipeline connection; and (4) new ancillary facilities, including an office and control building, warehouse, electrical substation, and others as described below. *Id.* at 2.0-4.

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For the delivery of crude oil and partially refined crude oil by train, a new Rail Transload Operations Facility would be constructed on a 9.8-acre vacant rail yard, to be leased from BNSF Railway Company. All products handled at the facility would be transported by rail, ship, barge, or pipeline; no products would be transported by truck as part of the proposed project. *Id.* at 2.0-1. The Terminal would operate with an average throughput of 242,000 barrels (BBLs) of crude oil or partially refined crude oil per day, and would have a maximum capacity throughput of 375,000 BBLs per day. *Id.* at 2.0-2. The total annual throughput for the entire Terminal would be approximately 88,300,000 BBLs of crude oil and/or partially refined crude oil per year. *Id.*

As mentioned above, Conoco Phillips is one of the refineries that may receive crude oil and/or deliver crude oil to the Terminal. *Id.* Therefore, this project should have been included in the cumulative impact analysis both because the physical construction and operation of this facility will contribute to cumulative environmental impacts and because it will facilitate greater amounts of crude delivery to and from the Rodeo Refinery.

The EIR must be revised to take into account each of the cumulative projects that has the potential to result in cumulatively considerable environmental impacts. Furthermore, the EIR must identify feasible mitigation measures capable of reducing these environmental impacts.

#### IV. The EIR Should be Recirculated

CEQA requires recirculation of an EIR when significant new information is added to the document after notice and opportunity for public review was provided. Pub. Res. Code § 21092.1; CEQA Guidelines § 15088.5. "Significant new information" includes: (1) information showing a new, substantial environmental impact resulting either from the

project or from a mitigation measure; (2) information showing a substantial increase in the severity of an environmental impact not mitigated to a level of insignificance; (3) information showing a feasible alternative or mitigation measure that clearly would lessen the environmental impacts of a project and the project proponent declines to adopt the mitigation measure; or (4) instances where the draft EIR was so fundamentally and basically inadequate and conclusory in nature that public comment on the draft EIR was essentially meaningless. *Laurel Heights II*, 6 Cal.4th 1112, 1130.

The EIR must be recirculated for public comment. As explained throughout this letter, evidence exists in the record presenting significant, new information showing new, substantial environmental impacts or substantial increases in the severity of significant environmental impacts. Below is a non-inclusive list summarizing certain of the EIR issues that trigger recirculation:

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- The EIR underestimates the increase in NO<sub>x</sub> and ROG emissions from the Project's locomotive line haul emissions. Had the EIR correctly calculated these emissions, it would have concluded that the increase greatly exceeds the BAAQMD daily and annual significance thresholds. Fox Report at 12, 13. This increase in emissions constitute significant impacts for which the DEIR offers no mitigation.

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- The increase in NO<sub>x</sub> emissions resulting from the use of the existing Steam Power Plant. would emit four times more NO<sub>x</sub> than disclosed in the DEIR (15.6 tons/year for the SPP compared to 3.7 ton/yr for the steam boiler. The NO<sub>x</sub> emissions from supplying just the steam for the hydrotreater exceed the NO<sub>x</sub> significance threshold of 10 tons per year and are thus a significant undisclosed air quality impact of the Project. The EIR offers no mitigation for this significant increase in NO<sub>x</sub> emissions.

In other instances, the DEIR was so fundamentally and basically inadequate and conclusory in nature that public comment on the draft EIR was essentially meaningless :

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- The EIR authors refuse to provide any supporting documentation regarding quantity or quality of crude oil that will be processed at the Refinery despite the public statements by Phillips 66 that it intends to import heavy crudes to its west coast refineries.

- SMW 32 • The EIR's claim that the two projects proposed at the Phillips 66 Santa Maria Facility (SMF) – and the type of crude processed by the SMF would have *no effect* on the Rodeo Refinery Project. FEIR at 2-4 (emphasis added).
- SMW 33 • The EIR claims that the Project would reduce SO<sub>2</sub> emissions by at least 50 percent resulting in an SO<sub>2</sub> emission decrease of at least 180 tons per year. There is no support, in either the EIR or the BAAQMD permitting record, for the claimed reduction in SO<sub>2</sub> emissions.
- SMW 34 • The EIR omits several important petroleum-refining projects from consideration in its analysis of cumulative environmental impacts, and concludes absent evidentiary support that the project would not result in a cumulatively considerable increase in air quality, greenhouse gas emissions and public health and safety impacts.

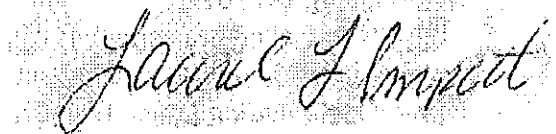
## V. Conclusion

The EIR remains woefully inadequate under CEQA. The County must substantially revise and recirculate the document in order to correct its numerous defects. In addition, because the FEIR discloses significant new information regarding the Project's impacts to air quality, public health and safety, and climate change, the document must be recirculated so that the public can comment on the new information.

We appreciate the opportunity to submit our initial comments on the DEIR and will submit our comprehensive comments as soon as practicable.

Very truly yours,

SHUTE, MIHALY & WEINBERGER LLP



LAUREL L. IMPETT, AICP, Urban Planner  
CARMEN BORG, AICP, Urban Planner  
ELLISON FOLK

cc: (all without exhibits)  
Senator Barbara Boxer  
Jared Blumenfeld, Regional Administrator, EPA Region IX  
Lashun Cross, Principal Planner, Contra Costa County  
Roger Lin, Communities For a Better Environment  
Diane Bailey, Natural Resources Defense Council  
Janet Pygeorge, Rodeo Citizens Association  
Jane Callaghan, Rodeo Citizens Association

**List of Exhibits**

- Exhibit: A Phyllis Fox, Ph. D., PE, Comments on Environmental Impact Report for the Phillips 66 Propane Recovery Project, Nov. 15, 2013.
- Exhibit: B Greg Garland, Chairman and CEO, Phillips 2013 Barclays Energy-Power Conference, Sept. 12, 2013
- Exhibit: C Edited Transcript Thomson Reuters Streetevents, Quarter 1 2013 Phillips 66 Earnings Conference Call 3:00 P.M. GMT, May 01, 2013
- Exhibit: D Bay Area Air Quality Management District, California Environmental Quality Act Guidelines
- Exhibit: E Governor Jerry Brown, Improving Public Worker Safety at Oil Refineries, Draft Report of the Interagency Working Group on Refinery Safety, Jul. 2013.
- Exhibit: F Associated Press, *Crews slowed by Heat in attacking Calif. rail fire*, NBC News, Aug 24, 2011, [http://www.nbcnews.com/id/44259169/ns/us\\_news-life/t/crews-slowed-heat-attacking-calif-rail-fire/](http://www.nbcnews.com/id/44259169/ns/us_news-life/t/crews-slowed-heat-attacking-calif-rail-fire/); and Bret Schulte, *Oil Spill Spotlights Keystone XL Issue: Is Canadian Crude Worse?*, Apr. 4, 2013, <http://news.nationalgeographic.com/news/energy/2013/04/130405-arkansas-oil-spill-is-canadian-crude-worse/>; and Marianne Lavelle, *Oil Train Crash Probe Raises Five Keys Issues on Cause*, National Geographic, Jul. 11, 2013, <http://news.nationalgeographic.com/news/energy/2013/07/130711-oil-train-crash-five-key-issues/>; and David Boroff, *At least eight injured, five*

*critically, as explosions rock Blue Rhino propane gas plant in Florida*, New York Daily News, Jul. 30, 2013, and <http://www.nydailynews.com/news/national/15-missing-florida-explosions-article-1.1412355>; and Matthias Gafni, *Benicia: Three Valero refinery rail cars filled with coke derail*, Contra Costa Times, Nov. 5, 2013, [http://www.contracostatimes.com/news/ci\\_24458813/valero-refinery-rail-car-derails-benicia](http://www.contracostatimes.com/news/ci_24458813/valero-refinery-rail-car-derails-benicia).

- Exhibit: G Bay Area Air Quality Management District, Compliance Memorandum, May 5, 2011 and Bay Area Air Management District Incident Report Information, Oct. 22, 2010 and Jun. 15, 2013.
- Exhibit: H Environmental Protection Agency, Toxics Release Inventory California Report, 2011; and Political Economy Research Institute, Toxic 100 Air Polluters Index, Aug. 2013.
- Exhibit: I Analysis of Major Derailment Causes on Heavy Haul Railways in the United States, X. Liu, et.al.
- Exhibit: J United States Department of Occupational Safety & Health Administration, Accident Inspection, Aug. 8, 1998 – Jan. 28, 1999.
- Exhibit: K Letter from D. Myers to Lashun Cross, Principle Planner, Contra Costa County, dated July 13, 2012 (Appendix G to November 19, 2013 County Planning Commission Staff Report)
- Exhibit: L Contra Costa County Fire Protection District, Fire Station Closures, News and Events <http://www.cccfpd.org/newsandevents.php>
- Exhibit: M Chinook Salmon Life History, University of California, Agriculture and Natural Resources California Fish Website, available at <http://calfish.ucdavis.edu/species/?uid=20&ds=241>; and generally Moyle, P.B. 2002, *Inland Fishes of California* Revised Ed. at 251- 271
- Exhibit: N Diane Bailey, *Valero's Crude by Rail Project in Benicia Could Open the Floodgates to Tar Sands in California*, National Resource Defense Council Staff Blog, Jul, 02, 2013 [http://switchboard.nrdc.org/blogs/dbailey/valeros\\_crude\\_by\\_rail\\_project.html](http://switchboard.nrdc.org/blogs/dbailey/valeros_crude_by_rail_project.html)
- Exhibit: O Cumulative Projects Map, retrieved on Nov, 15 2013 from <https://maps.google.com/>.

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Exhibit: P David Biello, *How Much will Tar Sands Oil Add to Global Warming?*,  
Scientific American, Jan. 23, 2013,

Exhibit: Q Phillips 66, Banking Application Cancellation, Aug, 06, 2013.

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**Comments**  
**on**  
**Environmental Impact Report**  
**for the**  
**Phillips 66 Propane Recovery Project**  
**Rodeo, California**

Prepared  
for  
Shute, Mihaly & Weinberger LLP on behalf of  
Rodeo Citizens Association

November 15, 2013

Prepared by  
Phyllis Fox, Ph.D., PE  
Consulting Engineer  
745 White Pine Ave.  
Rockledge, FL 32955



## I. INTRODUCTION

The Phillips 66 San Francisco Refinery, located at Rodeo (Refinery), is proposing to recover an additional 4,200 barrels per day (BPD) of propane and 3,800 BPD of butane from the refinery fuel gas (RFG) (collectively known as "liquefied natural gas" or LNG) to export for sale (Project). I was asked by Shute, Mihaly & Weinberger to review the Draft Environmental Impact Report (DEIR)<sup>1</sup> for this Project, related files of the Bay Area Air Quality Management District (BAAQMD), and select responses to comments in the Final Environmental Impact Report (FEIR).<sup>2</sup> Based on this review, I was asked to evaluate the accuracy of the DEIR/FEIR Project Description and their analysis of the Project's air quality impacts.

My evaluation, presented below, indicates the Project would result in significant unmitigated air quality and public health impacts. The DEIR and FEIR significantly underestimate the amount of criteria pollutants and greenhouse gas emissions that would be emitted by the Project. Emissions of nitrogen oxides (NOx) and reactive organic gases (ROG) will exceed both daily and annual CEQA significance thresholds. These emissions plus certain hazardous air pollutants (HAPs) emissions that were not disclosed in the DEIR will cause significant unmitigated air quality and public health impacts.

F1 [ The DEIR's Project description is incomplete. First, it fails to disclose the baseline crude slate, which determines the CEQA baseline emissions from all processing units within the Refinery. Second, it fails to disclose other directly related projects at the Phillips 66 Santa Maria Facility, which is linked by pipeline to the Rodeo Refinery. These directly related projects result in significant cumulative impacts that were not evaluated. Third, it fails to disclose related changes at the Rodeo Refinery itself, including a significant drop in refinery fuel gas heat content, which requires physical modifications to 19 process heaters. Finally, the Project description omits all of the key chemical composition data required to assess impacts and vet the DEIR's no significant impact conclusions.

My resume is included in Attachment 1 to these comments. I have over 40 years of experience in the field of environmental engineering, including air emissions and air pollution control; greenhouse gas emission inventory and control; air quality management; water quality and water supply investigations; hazardous waste investigations; environmental permitting; nuisance investigations (odor, noise); environmental impact reports, including CEQA/NEPA documentation; risk assessments; and litigation support.

I have M.S. and Ph.D. degrees in environmental engineering from the University of California at Berkeley with minors in Hydrology and Mathematics. I am a licensed professional engineer (chemical, environmental) in five states, including California; a

<sup>1</sup> Contra Costa County Department of Conservation and Development, Phillips 66 Propane Recovery Project, Draft Environmental Impact Report, June 2013 (DEIR).

<sup>2</sup> Contra Costa County Department of Conservation and Development, Phillips 66 Propane Recovery Project, Final Environmental Impact Report, November 2013 (FEIR).

Board Certified Environmental Engineer, certified in Air Pollution Control by the American Academy of Environmental Engineers; and a Qualified Environmental Professional, certified by the Institute of Professional Environmental Practice.

I have prepared comments, responses to comments and sections of EIRs for both proponents and opponents of projects on air quality, water supply, water quality, hazardous waste, public health, risk assessment, worker health and safety, odor, risk of upset, noise, land use and other areas for well over 100 CEQA documents. This work includes EIRs, Negative Declarations (NDs), and Mitigated Negative Declarations (MNDs) for all California refineries as well as various other permitting actions for tar sands refinery upgrades in Indiana, Louisiana, Michigan, Ohio, South Dakota, Utah, and Texas and LNG facilities in Texas, Louisiana, and New York. I was a consultant to a former owner of the subject Refinery on CEQA and other environmental issues for over a decade and am thus very familiar with both the Rodeo Refinery and the Santa Maria Facility.

My work has been cited in two published CEQA opinions: (1) *Berkeley Keep Jets Over the Bay Committee v. Board of Port Commissioners* (2001) 91 Cal.App.4th 1344 and *Communities for a Better Environment v. South Coast Air Quality Management Dist.* (2010) 48 Cal.4th 310.

## II. THE PROJECT IS PIECEMEAELED

The DEIR only evaluated a portion of the Project. The Project as described in the DEIR narrowly involves modifications to the Rodeo Refinery "to recover for sale propane and additional butane from refinery fuel gas and other process streams." DEIR, pp. 3-2, 3-5. However, the DEIR fails to disclose changes elsewhere that are required to produce all of the propane and butane that would be recovered.

F2 The components of the Project evaluated in the DEIR include an LPG Recovery Unit, Fuel Gas Hydrotreating, Propane Storage, Railcar Loading Modification, and certain ancillary facilities. DEIR, Table 3-1 & Sec. 3.4. I reviewed the BAAQMD file for this Project and other currently pending and related projects. Based on this review, in my opinion, sufficient propane and butane could not be recovered from the current crude slate to support the Project's propane/butane production goals. Changes in the amount and type of feedstock would be required to achieve the propane and butane recovery goals.

The Refinery currently recovers up to 9,000 BPD of butane in the summer for sale.<sup>3</sup> DEIR, p. 3-17. The Project would increase butane recovery by 3,800 BPD and also recover 4,200 BPD of propane. The total butane and propane recovery after the Project has been implemented would be limited by permit conditions to a maximum daily of 14,500 BPD and 5,292,550 barrels per 12 consecutive months. 6/28/13 Response

<sup>3</sup> Butane sold as LPG has the disadvantage of a fairly high boiling point and thus is not desirable as a fuel during the winter when stored outdoors in areas that have temperatures below freezing.

Letter,<sup>4</sup> p. 5, Response to Comment #5. It is unclear whether this is 14,500 BPD in addition to the existing 9,000 BPD or a total of 14,500 BPD, including current baseline butane recovery.<sup>5</sup> The DEIR, for example, clearly states that the Project would recover 3,800 BPD of "additional butane." DEIR, p. 3-23. This should have been clarified in the FEIR, but was not. Regardless, this is a large amount butane and propane for a refinery that processes very heavy crudes configured as shown in DEIR Figure 3-4. Thus, other modifications, not disclosed in the DEIR, are required to fully implement this Project.

The average feedstock to the Refinery over the period 2007 to 2011 was 116,800 BPD and ranged from 110,000 BPD to 128,000 BPD, or nearly up to its reported capacity of 130,000 BPD. DEIR Project Description,<sup>6</sup> Table 1. Thus, the proposed butane plus propane recovery Project would convert about 12% of the baseline feedstock to butane and propane, assuming a total of 14,500 BPD. If one assumes the Project would recover 14,500 BPD additional, plus the existing 9,000 BPD, 20% of the feedstock would be converted. Further, about 16% of the product output of the Refinery, estimated as 89,400 BPD over the period 2007 to 2011 (DEIR Project Description, Table 4), would be propane and butane.

F2 These high percentages are not consistent with my experience, particularly for the mainly heavy crudes and semi-refined products from heavy crudes processed at this Refinery, which have much lower amounts of these low-boiling products.<sup>7</sup> The DEIR and other documents I consulted contain no information that would allow me to directly estimate the amount of propane and butane that could be recovered from baseline feedstock such as:

- composition of the Refinery fuel gas and other gas stream from which propane and butane would be recovered, e.g., gas chromatographic analyses;
- distillation curves and composition data for the crude, semi-refined feedstock inputs from elsewhere, and other internal streams that would routed to the subject Project;
- relative amount of crude and semi-refined feedstock;
- material balance or outputs of refinery models.

These high values for propane/butane recovery suggest that the feedstock input will be modified in conjunction with the Project. Yet the DEIR lacks the data or

<sup>4</sup> Letter from Don Bristol, Phillips, to Brian Lusher, BAAQMD, Re: Response to Incomplete Letter 5/21/13 Application #25199, June 28, 2013 (6/28/13 Response Letter). (References are identified in footnotes and provided on the attached DVD.)

<sup>5</sup> The 4/30/13 Response Letter, p. 4, Response to Comment #6 states "The throughput [14,500 BPD] includes butane that is currently being recovered as well as the butane and propane that will be recovered as part of this project."

<sup>6</sup> Phillips 66, Rodeo Propane Recovery Project Description, August 2012.

<sup>7</sup> Oil Transportation Information at <http://www.oil-transport.info/crudedata/crudeoildata/crudeoildata.html>

calculations that support the foundational assumption that 100% of the propane/butane can be recovered from the baseline refinery fuel gas.

F2 The FEIR asserts that "the actual amount of propane and butane currently available for recovery (determined using measured flow data and lab analysis of propane and butane content) is approximately 4,200 bpd of propane and 9,300 bpd of butane." FEIR, p. 3.2-130. However, none of this data is in the record. We do not know, for example, if the amount "currently available" is the amount being processed in the CEQA baseline, or the amount that will be available for processing in the future, after the Project is implemented, based on other changes at other related Phillips 66 facilities, such as at Phillips 66's Santa Maria Facility or Ferndale Refinery.

A crude throughput expansion project, for example, was recently approved at the Phillips 66 Santa Maria Facility, which is linked by pipeline to the Rodeo Refinery. This project is further discussed below. In summary, the DEIR for the Santa Maria Facility (referred to as SMF DEIR/FEIR in these Comments) clearly states that partially refined products from this increase in crude will be sent to the Rodeo Refinery for further processing. As explained below, these partially refined products are feedstocks to the Propane/Butane Recovery Project. The Santa Maria crude throughput increase project is not operational yet. Thus, there is solid evidence that there will be increases in the input to the Propane/Butane Project from related projects elsewhere in the Phillips 66 system that are not part of the instant CEQA baseline. Thus, the amount "currently available" likely includes future increases in production that have not been disclosed in the Propane/Butane Project DEIR or FEIR. Thus, cumulative impacts of these two projects should have been evaluated and the increase in emissions from processing the increase in semi-refined products from Santa Maria at Rodeo should have been included in the emission calculations.

As the cited flow data and lab analysis are asserted to establish the Project baseline and is part of the Project description (i.e., it determined the design basis of the Project), it must be provided for public review. This is particularly critical here as the claimed recovery of propane and butane from the baseline feedstock is very high for the type and amount of crude that the FEIR asserts is currently refined and the existing Refinery configuration. As noted above, other projects currently proposed by Phillips 66 could increase the recoverable propane and butane, making up the deficit.

F3 The San Francisco Refinery (SFR) consists of two facilities linked by a 200-mile pipeline. The Santa Maria Facility (SMF) is located in Arroyo Grande, in San Luis Obispo County, while the Rodeo Refinery (referred to as "the Refinery" in these Comments) is located in Rodeo in the San Francisco Bay Area. The SMF mainly processes heavy, high sulfur crude oil and sends semi-refined liquid products, e.g., gas oil, to the Rodeo Refinery. SMF DEIR,<sup>8</sup> pp. ES-2, 1-1 and Table 2-3. The Refinery DEIR does not disclose the existence of this related facility but it is acknowledged in the FEIR. FEIR, Master Response 2.2.

<sup>8</sup> Marine Research Specialists, Phillips 66 Santa Maria Refinery Throughput Increase Project, Final Environmental Impact Report, October 2012 (SMF FEIR), Available at: <http://slcleanair.org/phillips66feir>.

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The subject DEIR addresses changes at just the Rodeo Refinery to increase butane and propane production, once the proper amount of the right feedstocks arrive. As discussed above, the DEIR is silent on the composition and relative amounts of feedstock (heavy crude, semi-refined products received from SMF) and the FEIR adds no additional information. Additional feedstock containing recoverable propane and butane is required.

Additional feedstock could be produced by proposed modifications at the Santa Maria Facility to increase its production of semi-refined feedstock (gas oil and naphtha), to send to the Rodeo Refinery. Phillips 66 proposed to increase the production of semi-refined products at the Santa Maria Refinery specifically to send to the Rodeo Refinery. SMF DEIR, p. ES-4. This throughput increase would necessarily be included in the streams from which propane and butane would be recovered, as explained below. Another related Phillips 66 project (rail spur extension required to import increased amounts of crude to support the throughput expansion) at the Santa Maria Facility is currently undergoing CEQA review. The SMF Rail Spur DEIR is expected to be released soon. My commentary here is based on the Rail Spur Land Use Application. SMF Rail Spur Land Use Ap.<sup>9</sup> These two projects provide the missing links in the butane/propane supply chain at the Rodeo Refinery.

F3  
The Santa Maria throughput increase project would increase "...the volume of products leaving the SMF for the Rodeo Refinery via pipeline." SMF DEIR, pp. ES-4, 2-25. The products are not specifically identified in this statement, but are noted elsewhere as gas oil and naphtha. SMF FEIR, pp. 2-11, 2-17. These semi-refined products would contain a significant amount of butane and propane<sup>10</sup> and would be further processed at the Rodeo Refinery to generate additional butane and propane, as explained further below. DEIR, Figs. 3-4 and 3-6.

The SMF DEIR for the throughput increase project included a clarifying statement as to the products that would be sent to Rodeo, which was deleted in the FEIR: "an increased volume of products leaving the SMF for the Rodeo Refinery via pipeline (including semi-refined crude oil or a combination of semi-refined crude oil and previously refined gas/oil petroleum)." SMF DEIR,<sup>11</sup> p. 2-25. This omission is material as it indicates that more than semi-refined products from the SMR would be sent to the Rodeo Refinery. This omission suggests crudes could also be sent to the Rodeo Refinery. This clue, coupled with the rail spur extension project suggests that tar sands crudes, some of which are semi-refined, could additionally be sent to the Rodeo Refinery via rail import at Santa Maria. This issue is discussed below.

The SMF FEIR indicates the throughput of the Santa Maria Facility would increase from the permit level of 44,500 BPD (SMF FEIR, p. ES-4) by 10% to a

<sup>9</sup> Phillips 66 Company, Land Use Application, Santa Maria Refinery Rail Project, June 2013.

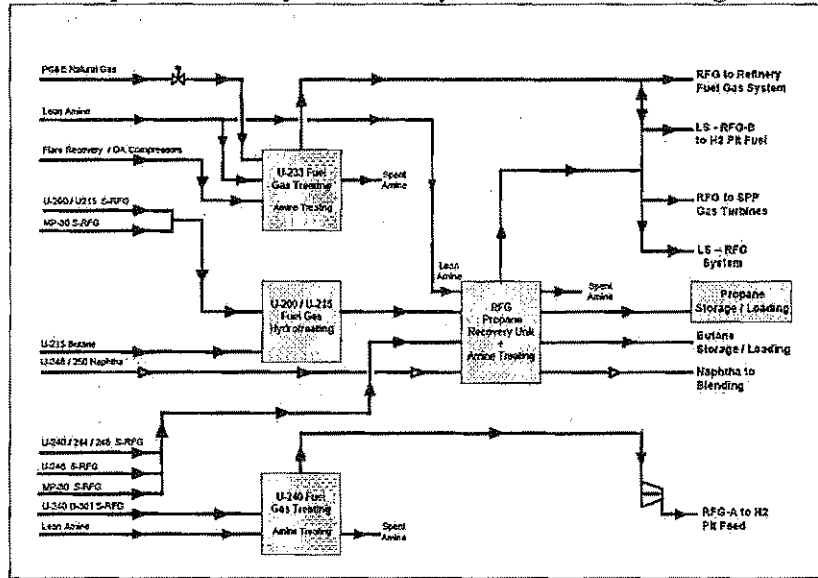
<sup>10</sup> See, e.g., MSDS for naphtha, available at: <http://www.collectioncare.org/MSDS/naphthamsds.pdf>.

<sup>11</sup> Marine Research Specialists, ConocoPhillips Santa Maria Refinery Throughput Increase Project, Public Draft Environmental Impact Report, August 2011.



3-2. Propane and butane are recovered in this unit. This new propane/butane extraction unit is shown in DEIR Figure 3-6, which is reproduced here as Figure 2 for ease of reference.

Figure 2  
Proposed Refinery Fuel Gas System Block Flow Diagram



SOURCE: Phillips 66 Company

Phillips 66 Propane Recovery Project, 120548

Figure 3.6  
Proposed Refinery Fuel Gas System Block Flow Diagram

The RFG Propane Recovery Unit is the big yellow box in the middle of Figure 2. Blue arrows in the lower left hand corner of Figure 2 identify the inputs to this unit, which are various refinery streams. These streams include "U-240/244/248 S-RFG." This designation means that Refinery Fuel Gas (RFG) from Unit U-240 is sent to the RFG Propane Recovery Unit. (This stream was formerly sent to the U-240 Fuel Gas Treating Unit. DEIR, Fig. 3-5.) As Santa Maria Gas Oil (SMGO) is one of the inputs to Unit U-240, changes at the Santa Maria Facility would be transmitted directly to the Project via the U-240 Prefrac Unit.

This establishes a direct link between this Project and modifications at the Santa Maria Facility. This is the "nexus" to the larger project with the potential to change crude oil feedstocks.

The increase in throughput at the Santa Maria Facility would increase the amount of SMGO processed at Rodeo into propane and butane. The new rail spur at the Santa Maria Facility would enable tar sands crudes to be imported to and processed at Santa Maria and/or shipped directly to Rodeo. As discussed below, tar sands crudes imported by rail are blended with a diluent that is rich in butane and propane. Thus, both projects proposed for the Santa Maria Facility will have a direct impact on the amount of propane and butane available for recovery at Rodeo, making up any deficit based on the Rodeo baseline crude slate. The baseline crude slate and feedstocks to the propane/butane

recovery Project are not disclosed so this link and its impact on emissions would never be discovered and thus not mitigated.

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Thus, there is both a direct pipeline link between the two facilities, an explicit statement that the SMF throughput project was developed to send more semi-refined product to the Rodeo Refinery, and a direct process link between those products and the input to the propane/butane recovery Project disclosed on the process flow diagrams for the Project. These three factors establish a nexus between the propane/butane Project and modifications at the Santa Maria Facility. Thus, these two projects are integrally related and should have been evaluated as a single project.

↑  
Additional propane/butane-rich feedstock could be obtained by importing certain classes of cost-advantaged tar sands crudes. These tar sands and other cost-advantaged crudes are cost advantaged because they are stranded, with no pipeline access and thus must be delivered by rail.<sup>12</sup> However, refineries are not equipped to take delivery of large amounts of crude by rail, which requires large unit trains that require significant infrastructure improvements.

F4  
↓  
Tar sands crudes are heavier and more viscous than the feedstock currently processed at either Rodeo or Santa Maria. These crudes are thus commonly blended with 25% to 30% diluent to facilitate transporting them by rail or pipeline. The blended crude is known as a "DilBit." The diluent is typically natural gas condensate, pentanes, or naphtha.<sup>13</sup> The diluent can be readily separated and recovered as propane/butane at Rodeo.

Cost-advantaged crude sells at a discount relative to crude oils tied to the global benchmark, North Sea Brent crude. Many of these cost-advantaged crudes are rich in fractions that would increase the yield of butane and propane<sup>14</sup> at the Rodeo Refinery. Based on analyses by one of Phillips' competitors, Western Canadian Select (WCS) was identified as one of the most cost-advantaged crude for direct rail import to California.<sup>15</sup>

<sup>12</sup> Small amounts of Canadian tar sands crudes are currently arriving on the west coast by ship. However, the pipeline capacity to transport the tar sands crude to the west coast and the rail capacity to transport it to the west coast for subsequent water delivery is currently very limited. However, projects are underway to alleviate these bottlenecks, including a Phillips 66 project at its Ferndale facility in Washington. The Ferndale project would allow direct import of tar sands crude at the Rodeo Marine Terminal.

<sup>13</sup> Gary R. Brierley, Visnja A. Gembicki, and Tim M. Cowan, Changing Refinery Configurations for Heavy and Synthetic Crude Processing, Available at: <https://www.edockets.state.mn.us/EFiling/edockets/searchDocuments.do?method=showPoup&documentId=%7BA07DE342-E9B1-402A-83F7-36B18DC3DD05%7D&documentTitle=5639138>.

<sup>14</sup> See, for example, Pat Swafford, Evaluating Canadian Crudes in US Gulf Coast Refineries, Crude Oil Quality Association Meeting, February 11, 2010, Available at: [http://www.coqa-inc.org/20100211\\_Swafford\\_Crude\\_Evaluations.pdf](http://www.coqa-inc.org/20100211_Swafford_Crude_Evaluations.pdf).

<sup>15</sup> Valero, UBS Global Oil and Gas Conference, May 21-22, 2013, p. 10, Available at: <http://www.valero.com/InvestorRelations/Pages/EventsPresentations.aspx>, provided as Appendix D to TGG Comments.



Western Canadian Select is a tar sands DilBit that contains 2% butane and 4.3% pentane.<sup>16</sup>

Cost-advantaged crudes could reach Rodeo by rail starting at the Phillips 66 Ferndale Marine Terminal and then barged down the Pacific coast to the Phillips 66 Rodeo Marine Terminal; by rail to Santa Maria and then by pipeline to Rodeo; or by rail or barge to the nearby Pittsburg terminal.<sup>17</sup> However, the Phillips 66 refineries are not equipped to accept large volumes of crude by rail. Thus, Phillips 66 is currently permitting projects to achieve both of these goals.<sup>18</sup>

F4  
An expansion of the Phillips 66 Marine Terminal at Rodeo was recently permitted to allow an increase of crude oil imported by ship by 20,500 BBP, from 30,682 BPD at present to 51,182 BPD.<sup>19</sup> Phillips 66 was recently issued a permit to construct a new crude rail unloading facility at its Ferndale Refinery in Washington to increase rail shipments of cheap Canadian tar sands crudes. This rail terminal would allow it to import tar sands crude by rail and barge them down the Pacific coast to Rodeo.<sup>20 21</sup>

The Phillips 66 rail spur extension project at the Santa Maria Facility would allow the import of a "full range of competitively priced crude oil." Rail Spur Land Use Ap., Appx. A, pdf 18. Phillips has admitted that these "competitively priced crude oils" include Canadian tar sands crudes. These crudes would be processed at the Santa Maria Facility, which sends its semi-refined products to Rodeo. The SMF is permitted to process up to 49,950 BPD of crude. SMF FEIR, p. 1-1. The rail spur project would allow the import of 37,000 BPD of "competitively priced crude oils", or 74% of its

<sup>16</sup> Crude Monitor, Western Canadian Select, Available at: <http://www.crudemonitor.ca/crude.php?acr=WCS>.

<sup>17</sup> Phillips 66 Delivers on Advantaged Crude Strategy, Available at: <http://www.phillips66.com/EN/newsroom/feature-stories/Pages/AdvantagedCrude.aspx>.

<sup>18</sup> Phillips 66 Delivers on Advantaged Crude Strategy, Available at: <http://www.phillips66.com/EN/newsroom/feature-stories/Pages/AdvantagedCrude.aspx>.

<sup>19</sup> Bay Area Air Quality Management District, CEQA Initial Study, Marine Terminal Offload Limit Revision Project, Phillips 66 Refinery, Rodeo, California, BAAQMD Permit Applications 22904, December 2012.

<sup>20</sup> Northwest Clean Air Agency, Order of Approval to Construct (OAC) 1152, Crude Unloading Facility, Phillips 66 Ferndale Refinery, June 7, 2013. See also: Thomson Reuters: "Phillips 66 Seeks Permit for Facility to Receive Crude by Rail", April 3, 2013, Available at: <http://www.4-traders.com/PHILLIPS-66-10447684/news/Phillips-66-seeks-permit-for-facility-to-receive-crude-by-rail-16604359/>.

<sup>21</sup> In addition, crude oil will either be received by or delivered to a new facility located in Pittsburg, California. The proposed WesPac Energy-Pittsburg Terminal (Terminal) would be designed to receive crude oil and partially refined crude oil from trains, marine vessels, and pipelines, store oil in existing or new storage tanks, and then transfer oil to nearby refineries, including Rodeo. WesPac RDEIR, p. 2.0-1. All products handled at the facility would be transported by rail, ship, barge, or pipeline. *Id.* The Terminal would operate with an average throughput of 242,000 barrels (BBLs) of crude oil or partially refined crude oil per day, and would have a maximum capacity throughput of 375,000 BBLs per day. *Id.*, p. 2.0-2. The total annual throughput for the entire Terminal would be approximately 88,300,000 BBLs of crude oil and/or partially refined crude oil per year. *Id.*

P4  
1  
throughput. Rail Project IS,<sup>22</sup> pp. 15, 22. This means that one of the feedstocks for the propane/butane recovery Project would be significantly modified by the Santa Maria rail spur project to include tar sands crude, which would include propane/butane rich DilBits.

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F5  
While the DEIR did not acknowledge the relationship between the subject Project and the rail spur extension project, the FEIR does mention the existence of the rail spur extension project at Santa Maria, but claims, with no support, that the crudes imported would be only from "domestic sources available in the marketplace." FEIR, p. 2-4. This contradicts the rail spur project description, which describes the project as allowing the import of a "full range of competitively priced crude oil," not just "domestic" sources. I am not aware of anything in the record for the Santa Maria rail spur extension project that would limit imported crude to just "domestic" sources. This contradicts not only the record in that case, but also public statements to the contrary by Phillips 66. Further, the FEIR does not evaluate the rail spur's environmental impacts at Rodeo, which are potentially significant, as discussed below and in Attachment 2 (my comments on Valero).

In a September 2013 presentation, Greg Garland, Chairman and CEO of Phillips 66, stated Phillips 66 plans to import "cost advantaged" crude from Canada to its refineries in California as illustrated in Figure 3. Garland stated: "Our real challenge that we have or opportunity that we have is to get advantaged crudes to the East Coast and West Coast. So we're working that in terms of moving Canadian crudes down into California or building rail facilities. We're looking at rail to barge to ship, down to the West Coast refineries...."<sup>23</sup>

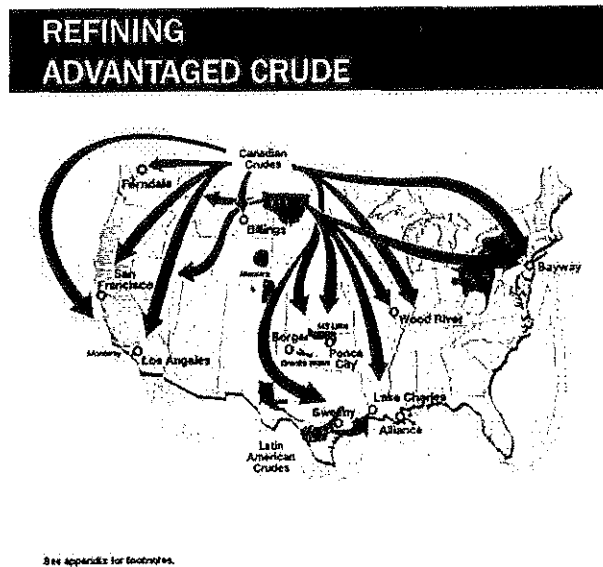
In a May 2013 presentation, Phillips EVP Tim Taylor stated in response to a question on bringing heavy Canadian crude oil into California that "Today, we are doing some barge movements down the coast into California on heavy Canadian. You can look in the Northwest to do that. So that's an option that we're going to continue to use and we're looking at expanding that opportunity with some of the logistics things we're putting in place. We're also continuing to move crude by rail in smaller amounts into California and looking at projects really to increase that as well."<sup>24</sup>

<sup>22</sup> Arcadis, Applicant's Reference CEQA IS, Santa Maria Refinery Rail Project, June 2013 (Rail Project IS").

<sup>23</sup> September 12, 2013 Transcript, pdf 7: Available at: [http://www.phillips66.com/EN/investor/presentations\\_ccalls/Documents/Barclays\\_091213\\_Final.pdf](http://www.phillips66.com/EN/investor/presentations_ccalls/Documents/Barclays_091213_Final.pdf)

<sup>24</sup> May 1, 2013 Transcript, pdf 13, Available at: [http://www.phillips66.com/EN/investor/presentations\\_ccalls/Documents/PSX-Transcript-2013-05-01.pdf](http://www.phillips66.com/EN/investor/presentations_ccalls/Documents/PSX-Transcript-2013-05-01.pdf)

Figure 3<sup>25</sup>



### III. THE PROJECT DESCRIPTION IS INCOMPLETE

The information included in the DEIR is not adequate to identify and assess all of the impacts of the Project. There are two major classes of omissions.

First, the DEIR did not disclose that the Project would occur at a refinery that is linked by pipeline to a separate facility, the Santa Maria Facility, that will supply part of the feedstock proposed to be recovered as propane/butane. The FEIR acknowledges this link in response to comments. FEIR, Master Response 2.2, However, the FEIR continues to ignore the environmental impacts resulting from the link between modifications currently under way or proposed at the Santa Maria Facility and this Project. The link is established above in Comment II.

The failure to disclose this link, via Santa Maria gas oil which is converted into propane and butane at Rodeo by the Project, is a serious omission. The changes proposed and underway at the Santa Maria Facility will increase both the amount and composition of the feedstocks recovered as propane and butane at the Rodeo Refinery. These changes in feedstock amount and composition would result in significant air quality and public health impacts at Rodeo.

The FEIR asserts that "a company's purchase of raw materials is a business activity and not a CEQA project or action that would require a discretionary permit or approval by the County." FEIR, p. 3.2-118. This is incorrect. The chemical composition of the raw materials that are processed by a refinery directly affect the amount and

<sup>25</sup> Greg Garlands, Phillips 66, Barclays Conference, pdf 24, Available at: [http://www.phillips66.com/EN/investor/presentations\\_ccalls/Documents/barclays2013\\_finalv2.pdf](http://www.phillips66.com/EN/investor/presentations_ccalls/Documents/barclays2013_finalv2.pdf).

composition of emissions from that refinery. The amount and composition of sulfur in the crude slate, for example, ultimately determines the amount of SO<sub>2</sub> that will be emitted from every fired source in the refinery and the amount of odiferous hydrogen sulfide and mercaptans that will be emitted from tanks, pumps, valves, and fittings. The composition of the crude slate establishes the CEQA baseline against which impacts must be measured.

F7 In particular, the feedstocks that could arrive at the Rodeo Refinery for recovery as propane and butane may include tar sands crudes blended with diluents or "DilBits." These DilBits contain significant amounts of hazardous air pollutants, such as benzene, a potent carcinogen. These would be emitted at many fugitive components in the Refinery, including compressors, pumps, valves, fittings, and tanks, in greater amounts than from baseline feedstock.

These increased emissions would result in significant public health and air quality impacts not addressed in the DEIR nor the FEIR. These include significant increases in volatile organic compounds (VOCs) emissions not otherwise included in the emission estimates; hazardous air pollutants, including benzene, which could cause significant health impacts; and highly odiferous sulfur compounds that would individually and cumulatively cause malodors, degrade ambient air quality, increase the incidence of accidental releases, and adversely affect the health of workers and residents around the Refinery. Further, the high acid levels in these crudes and their semi-refined products would accelerate corrosion of refinery components, contributing to equipment failure and increased accidental releases.

Second, the DEIR failed to disclose that the Project would reduce the heat content of the refinery fuel gas from 1340 Btu/scf (British thermal unit per Standard Cubic Feet) (BAAQMD Permit Ap., p. 10) to 1050 MMBtu (one million Btu) (5/13/13 BAAQMD Notes). This is a 30% drop in the heat content of the fuel for all refinery fuel gas-fired sources within the Rodeo Refinery. Notes in the BAAQMD's files indicates that this will require replacing the burners in at least 19 process heaters. 5/13/13 BAAQMD Notes.

F8 The DEIR did not disclose this dramatic decline in fuel gas heat content or the related changes in equipment that would be required to burn the altered refinery fuel gas. The FEIR concedes a decline in heat content in response to comments but fails to disclose the magnitude of the decline. However, the FEIR asserts with no analysis that "removal of propane and butane from the system and replacing it with natural gas would not affect the performance of combustion devices at the Refinery." FEIR, p. 3.2-130. The affected combustion units and burner configurations were not identified and baseline emissions were not disclosed. Thus, there is no basis for this claim.

The FEIR argues that the types of changes that would be made to heaters are considered by the BAAQMD to be an "alteration" rather than a "modification" as there would be no emission increase. FEIR, p. 3.2-130. However, the BAAQMD definition of "alteration" is irrelevant for purposes of CEQA. The EIR must identify the change in emissions from the affected combustion units and burner configurations.

F8  
A large drop in fuel heat content can affect the combustion efficiency of all combustion sources, including heaters, boilers, and turbines. A related concern is a concomitant drop in flame temperature. The Project basically involves replacing propane and butane that are currently part of the Refinery Fuel Gas (RFG) with natural gas. Propane and butane burn with a hotter flame than natural gas.<sup>26</sup> These two effects, a large drop in heat content and a lower flame temperature, would result in an increase in the emission of products of incomplete combustion, including hazardous air pollutants, carbon monoxide, and reactive organic gases from all fuel gas fired combustion sources. None of these pollutants are routinely monitored, e.g., with continuous emission monitoring systems, and some are not monitored at all (HAPs). Thus, the increases would not even be detected until after the fact. The DEIR and FEIR did not disclose the flame temperature issue. Further, only 19 process heaters would receive upgraded burners. The FEIR is silent on the impacts that would result from the lower heat content fuel and lower resulting flame temperature at other combustion sources that will not be upgraded.

The DEIR should be revised to include a complete description of the Project and an analysis of all of the environmental effects of these changes.

#### IV. PROJECT EMISSIONS ARE UNDERESTIMATED AND SIGNIFICANT

The DEIR underestimated the increase in greenhouse gas (GHG) emissions and criteria pollutant emissions (NO<sub>x</sub>, ROG, PM<sub>2.5</sub>/PM<sub>10</sub>) that would result from the Project. If the EIR had accurately estimated the Project's emissions, it would have determined that the Project will result in significant unmitigated air quality impacts from emissions of GHGs, NO<sub>x</sub>, and ROG. The DEIR also failed to estimate the increase in carbon monoxide emissions that would result from the Project.

##### IV.A. Greenhouse Gas Emissions (GHG) Are Underestimated

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The DEIR estimated that the Project would decrease GHG emissions by 325,978 metric tons per year (MT/yr). DEIR, Table 4.8-3. The increases in GHG emissions from a new boiler (67,133 MT/yr), additional natural gas combustion (592,761 MT/yr), and other miscellaneous sources (7,372 MT/yr) are assumed to be offset by removing 14,500 BPD of butane and propane from the fuel gas system and replacing it with natural gas, which emits less GHG (-759,244 MT/yr) and the shutdown of Plant 4 Hydrogen Plant and B-401 Process Heater (-234,000 MT/yr). These reductions are not supported and are incorrect. When the errors discussed below are corrected, GHG emissions exceed the significance threshold of 10,000 MT/yr for stationary sources and 1,100 MT/yr for other types of projects (DEIR, p. 4.8-13). Thus, they are a significant unmitigated impact of the Project.

<sup>26</sup> Flame Temperatures of Some Common Gases, Available at; [http://www.engineeringtoolbox.com/flame-temperatures-gases-d\\_422.html](http://www.engineeringtoolbox.com/flame-temperatures-gases-d_422.html).

# 1. Reduction: Removing Butane and Propane from Fuel Gas

The Project would remove 14,500 BPD of butane and propane from the refinery fuel gas system and replace it with natural gas. As propane and butane generate more GHG emissions when burned than natural gas, this results in a net decrease in GHG emissions at the Refinery of 166,483 MT/yr ( $592,761 - 759,244 = -166,483$  MT/yr). DEIR, Table 4.8-3.

However, a reduction would only occur if the propane/butane are not used as fuel, which is their usual end use. The DEIR fails to disclose the use of the removed butane and propane. This undisclosed use could result in indirect impacts that were not considered in the DEIR. Butane and propane, for example, are fuels, often called liquefied petroleum gas or LPG. They are also feedstocks to various chemical processes. Either use would result in GHG emissions.

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First, some, perhaps all, of the recovered butane and propane could be sold within California for use as fuel, where CEQA clearly applies to 100% of the resulting GHG emissions. If sold as fuel to customers in California, the resulting emissions are indirect emissions from the Project and must be included in the Project GHG emission inventory. Correspondence in the BAAQMD file indicates that "... some past (and current) butane deliveries have included local industrial customers within Contra Costa and Alameda counties." 4/30/13 Phillips Response Letter,<sup>27</sup> p. 10, Response to Comment #15. Thus, absent a condition of certification prohibiting the sale of propane and butane for any use in California that would generate GHG, 100% of the GHG emissions from burning propane and butane, the most likely end use, must be included in the EIR's GHG impact analysis. This one modification results in an increase in GHG emissions of 433,266 MT/yr from the Project.<sup>28</sup> This is a significant unmitigated impact of the Project.

Second, even assuming 100% of the propane and butane were burned or otherwise used outside of California in a manner that generated GHG, these emissions would still result in significant adverse impacts on California as GHG is a global pollutant, widely acknowledged to affect climate change worldwide, regardless of release point. The GHG emissions released in neighboring states, for example, would contribute to sea level rise along the California coast; loss in California's snow pack, leading to floods and droughts; and more high ozone days in California. DEIR, pp. 4.8-1/2.

Under this view, the Project is exporting its significant GHG impact to neighboring states, where it continues to impact global climate and thus California. Therefore, regardless of where the propane and butane are actually used, the environmental consequences of its use are the same and must be considered.

<sup>27</sup> Letter from Don Bristol, Phillips 66, to Brian Lusher, BAAQMD, Re: Response to Incomplete Letter 3/1/13, April 30, 2013 (4/30/13 Phillips Response Letter).

<sup>28</sup> Revised GHG emissions based on DEIR Table 4.8-3:  $-325,978 + 759,244 = 433,266$  MT/yr.

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Thus, the DEIR implicitly assumes that the propane and butane removed from the refinery fuel gas will not be used in a manner that generates GHG and ignores the impacts of this use.

## 2. Relative Proportions of Propane and Butane

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The GHG emissions were estimated assuming the production of 4,200 BPD of propane and 3,800 BPD of butane. Butane generates about 6% more GHG than propane per gallon burned. FEIR GHG Supplement, Nov. 2012, p. 4. In correspondence with the BAAQMD, Phillips has requested a lump-sum limit of 14,500 BPD (6/28/13 Phillips Response Letter, p. 5, Response to Comment #6), which would allow them to produce 100% butane, increasing GHG emissions compared to those estimated in the DEIR.

## 3. Reduction: Hydrogen Plant and Heater Shutdown

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The GHG emission calculation additionally assumes a net reduction of 234,000 MT/yr from the shutdown of the Plant 4 Hydrogen Plant and the Unit 240 Process Heater B-401. DEIR, p. 4.3-13 and Table 4.8-3. The DEIR asserts that the GHG reduction corresponds to the 3-year average baseline GHG emissions from these units and cited ERM 2013. DEIR, p. 4.8-12. However, the DEIR references indicate that ERM 2013 is the BAAQMD Authority to Construct Application. DEIR, p. 9-8. I reviewed this document. It does not contain any support for the claimed reductions from shutting down these units. I was unable to find any support for these reductions in any of the documents that I reviewed and thus was unable to confirm whether they were correctly calculated. Regardless, the subject units were reportedly shutdown in 2011, which is part of the CEQA baseline. Thus, these reductions cannot be claimed as mitigation for Project increases.

My inability to find any support for these GHG emissions is consistent with comments filed by BAAQMD staff on the DEIR. They were also unable to find any support for the claimed GHG reductions from decommissioning a process heater and hydrogen plant. The BAAQMD further expressed concern that "emission from Unit 240 [the shutdown process heaters] may have shifted to other existing equipment due to increased operating demand." Increased heat demand, for example, would result from recovering butane and propane for the Project and upgrading additional semi-refined materials from the Santa Maria Facility. Further, the DEIR and the record supporting it do not contain any evidence that the emission reductions are permanent, real, and quantifiable.<sup>29</sup>

The FEIR responded to the BAAQMD's comments, asserting that the "GHG-related offsets that would be associated with the B-401 process heater are presented in the DEIR for informational purposes only and are not required to reduce the GHG emissions impact to a less-than-significant level." FEIR, p. 3.1-24. However, this is true only when considered in isolation, without acknowledging the increase in GHG emissions from burning the propane and butane removed from the refinery fuel gas. Further, this FEIR

<sup>29</sup> Letter from Jean Roggenkamp, BAAQMD, to Lashun Cross, CCC Dept. of Conservation and Development, Re: Phillips 66 Company Propane Recovery Project DEIR, August 6, 2013.

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response also fails to provide any support for the GHG reductions from these shutdown unit.

If the GHG reductions from both the Plant 4 Hydrogen Plant and B-401 Process Heater Shutdown are removed from the GHG inventory in DEIR Table 4.8-3 and the increase in emissions from burning the propane and butane are added, the net increase in GHG emissions based on DEIR Table 4.8-3 would be 1.3 million MT/yr (-  $325,978 + 234,000 + 759,244 = 1,319,222$  MT/yr). These emissions exceed the CEQA significance threshold by a vast amount and are highly significant.

#### IV.B. Criteria Pollutant Emissions Are Underestimated

The DEIR estimated daily and annual Project operational emissions for nitrogen oxides (NOx), sulfur dioxide (SO2), particulate matter (PM10 and PM2.5), and reactive organic gases (ROG). DEIR, Tables 4.3-6 and 4.3-7. The resulting emissions were compared to the BAAQMD's daily and annual CEQA significance thresholds for NOx, PM10, PM2.5, and ROG. No significance threshold was proposed for SO2 and carbon monoxide (CO) was omitted from DEIR's analyses completely.

The emissions that were estimated in the DEIR and remain unchanged in the FEIR are underestimated for two reasons, discussed below. When the errors in the emission calculations are corrected, the resulting increases in daily and annual NOx and ROG emissions exceed both the daily and annual CEQA significance thresholds. These are significant air quality impacts that were not identified or mitigated in the DEIR or FEIR.

##### 1. Relies on Invalid NOx Emission Reductions

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The DEIR's daily and annual NOx emission analysis relies on NOx emission reductions from shutting down Process Heater B-401. DEIR, Tables 4.3-6 and 4.3-7. These reductions occurred in 2011, during the CEQA baseline. Therefore, they are part of the baseline and not available to offset Project NOx increases. The increase in the DEIR's estimate of both daily (99.2 lb/day > 54 lb/day) and annual NOx emissions (13.9 ton/yr > 10 ton/yr) exceed CEQA significance thresholds without these Process Heater B-401 reductions and are thus significant unmitigated impacts of the Project.

##### 2. Excludes Locomotive Emissions Outside of the BAAQMD

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Notwithstanding the use of invalid NOx offsets, the increase in NOx emissions are even higher than disclosed in the DEIR. The locomotives used to transport recovered propane and butane from the Refinery to market are the major source of NOx emissions (>70% of total Project emissions) and an important contributor to ROG emissions (8%). DEIR, Tables 4.3-6 and 4.3-7. These emissions were underestimated by only counting emissions released within the boundary of the BAAQMD, rather than the entire distance the locomotives will travel within California. DEIR, p. 4.3-20. CEQA covers at least all emissions released within the State and in some cases, emissions released outside of the State that impact in-State values.



The total rail track length within the BAAQMD used to calculate locomotive emissions in DEIR Tables 4.3-6 and 4.3-7 was 67 miles one way (AQS Attach. 1,<sup>30</sup> pdf 15) based on 50% of the trains using the Union Pacific route and 50% using the BNSF route. The total track length to the California-Arizona border used to calculate GHG emissions is 659 miles one way, based on the same 50/50 assumption. DEIR, p. 4.8-16 and AQS Attach. 1, pdf 15.

I revised the locomotive linehaul emissions for NOx and ROG using the total track length within California, but otherwise using all of the DEIR's assumptions. The results of my calculations are shown in Table 1. The criteria pollutant emissions from locomotive linehaul (which is only part of the total locomotive emissions) are significantly higher than disclosed in the DEIR, as shown in Table 1. This increase alone is sufficient to tip NOx emissions over the BAAQMD daily and annual significance thresholds, even assuming the invalid boiler NOx emission offsets.

**Table 1**  
**Revised Locomotive Linehaul Emissions**

	DEIR <sup>31</sup> (lb/day)	Rev. <sup>32</sup> (lb/day)	Sig. Criteria (lb/day)	DEIR <sup>31</sup> (ton/yr)	Rev. <sup>32</sup> (ton/yr)	Sig. Criteria (ton/yr)
NOx	76.03	<b>580</b>	54	9.84	<b>72</b>	10
ROG	3.63	<b>27</b>	54	0.47	<b>3.5</b>	10

Note: bold indicates a revised locomotive linehaul emission rate that exceed the significance threshold all by itself, without considering increases from any other sources.

These revised emissions combined with all other claimed emission increases and decreases as reported in the DEIR, Tables 4.3-6 and 4.3-7, exceed the BAAQMD significance thresholds for both daily and annual NOx and ROG emissions, as explained below.

The net increase in daily NOx emissions, including the revised locomotive linehaul emissions of 580 lb/day and the invalid NOx offsets, is 541 lb/day.<sup>33</sup> These emissions exceed the NOx daily significance threshold of 54 lb/day by a factor of ten. DEIR, Table 4.3-6.

Similarly, the net increase in annual NOx emissions, including the revised locomotive linehaul emissions of 72 ton/yr and the invalid NOx offsets, is 66 ton/yr.<sup>34</sup>

<sup>30</sup> Phillips 66, Rodeo Propane Recovery Project, Air Quality Supplement, Attachment 1, Criteria Pollutant and GHG Emissions, November 2012 (AQS Attach. 1).

<sup>31</sup> AQS Attach. 1, pdf 1.

<sup>32</sup> From AQS Attach. 1, pdf 19 (lb/day) and pdf 20 (ton/yr): Linehaul emissions within California = small line haul from Richmond terminal to refinery + large linehaul from California border to Richmond terminal. For NOx in lbs/day:  $18.97 + 57.06(659/67) = 580.2$  lb/day or 72.7 ton/yr. For ROG:  $0.97 + 2.65(659/67) = 27.1$  lb/day or 3.47 ton/yr.

<sup>33</sup> Total revised daily NOx emissions :  $20.4 + (79.0 - 76.03) + 580 - 62.3 = 541.1$  lb/day.

<sup>34</sup> Total revised annual NOx emissions :  $3.7 + (10.2 - 9.84) + 72.7 - 10.8 = 65.96$  ton/yr.

F13

This exceeds the NOx annual significance threshold by a factor of six. DEIR, Table 4.3-6.

The DEIR indicates the shutdown of Process Heater B-401 reduced daily NOx emissions by 244 lb/day (DEIR, Table 4.3-4). The DEIR also indicates the shutdown of Process Heater B-401 reduced annual NOx emissions by 44 ton/yr. DEIR, Table 4.3-4. However, even assuming 100% of these shutdown emissions were available for the Project, they would not be adequate to offset the daily increases in linehaul NOx emissions as calculated in Table 1. Regardless, 100% of Process Heater B-401 NOx reductions are not available as some of them (33.16 ton/yr) were used to offset NOx emission increases of the Marine Terminal Offload Limit Project. Marine Terminal IS, Table 3.3-2.

The DEIR suggests by omission that more NOx offsets are available than were relied on in Tables 4.3-6 and 4.3-7 by presenting the full boiler shutdown amount without disclosing that most had already been used. The FEIR clarifies that the balance of the NOx reductions from the Process Heater B-401 shutdown, not relied on in Tables 4.3-6 and 4.3-7, were used to offset increases associated with the Marine Terminal Project. FEIR, pp. 3.1-24/25. They are not available to offset the additional increase in NOx emissions resulting from the increase in locomotive linehaul emissions as calculated in Table 1, assuming the full transit distance within California. Thus, the revised increase in daily and annual NOx emissions are a significant unmitigated air quality impact when the correct travel distance of locomotives is used to estimate emissions.

The increase in daily ROG emissions from all Project sources, including the revised locomotive linehaul emissions, is 70.4 lb/day,<sup>35</sup> which exceeds the ROG daily significance threshold of 54 lb/day by 30%. Similarly, the increase in annual ROG emissions from all Project sources, including the revised locomotive linehaul emissions is 11.4 ton/yr,<sup>36</sup> which exceeds the ROG annual significance threshold of 10 ton/yr. Thus, daily and annual ROG emissions from the Project are significant unmitigated air quality impacts that were not disclosed in the DEIR when the correct travel distance of locomotives is used to estimate emissions.

Finally, even if emissions were based only on the track length within the BAAQMD, rather than the entire State, the Project would still exceed the NOx daily significance threshold if the actual UP track length going south out of the District (90 miles) was used in the calculations, rather than the average of the UP and BNSF track lengths (67 miles). The distance to the eastern boundary of the District is 44 miles and to the southern boundary, 90 miles. The 67 miles used in the DEIR's linehaul emission calculations is the average of these two ( $90+44/2 = 67$ ). 6/28/13 Phillips Response Letter, p. 12, Response to Comment #15. However, nothing in the EIR would prevent 100% of the trains from using the UP track going south out of the District. The daily

<sup>35</sup> Total revised daily ROG emissions :  $18.1 + 25.1 + (3.8-3.63) + 27 = 70.4$  lb/day.

<sup>36</sup> Total revised annual ROG emissions :  $3.3 + 4.6 + (0.5-0.47) + 3.5 = 11.4$  ton/yr.

F14  
1 NOx emission increase, assuming the UP track length of 90 miles within the District would be 57 lb/day, which exceeds the CEQA significance threshold of 54 lb/day.<sup>37</sup>

### 3. Underestimates Steam Boiler Emissions

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The DEIR emission estimates assumed a new 140 MMBtu/hr boiler would be required to supply steam for the Project. The net emission calculations in Comment IV.B.2 that correct the linehaul underestimate assume this new boiler. However, during BAAQMD permitting, Phillips 66 removed the new 140 MMBtu/hr boiler and revised the emissions to assume steam demand would be met by using surplus low pressure steam, improving efficiency of existing steam consumers, and by increasing high pressure steam production at the Steam Power Plant. This resulted in a reduction in emissions from supplying steam, compared to emissions claimed in the DEIR. 4/30/13 Phillips Response Letter, p. 4, Response to Comment #7.

However, these changes disclosed in the BAAQMD permitting file are small, compared to increases from other Project components in the DEIR, and thus do not materially affect any of the conclusions in Comment IV.B.2. Further, as discussed below in Comment IV.C.3, the NOx emissions from supplying steam at the Steam Power Plant are actually significantly higher than claimed in the Phillips permitting application (15.6 ton/yr compared to only 3.7 ton/yr assumed in the DEIR). See Comment IV.C.3. These revised emissions alone are sufficient by themselves to exceed the BAAQMD NOx annual significance threshold.

### IV.C. Other Emissions from The Project Are Omitted

The DEIR estimated emissions from new equipment that would be added by the Project plus certain associated mobile source emissions, including a new boiler, tanks and piping, locomotives, and truck and commuter trips. The locomotive emissions are discussed in Comment IV.B.2. DEIR, Tables 4.3-6 & 4.3-7, p. 4.3-21.

F16  
The equipment required to recover propane and butane from the refinery fuel gases and to remove sulfur from the recovered products requires various inputs to operate. This results in increases in emissions above the CEQA baseline that were not included in the DEIR's analysis. These include: (1) use of the recovered propane and butane elsewhere in California; (2) electricity; (3) hydrogen; (4) emissions from increased sulfur removal; and (4) certain increases in emissions from generating steam at the existing Steam Plant to support the Project. Each omitted emission source is discussed below.

The BAAQMD files indicate that Phillips conceded there would be an increase in the throughput of the Air Liquide Hydrogen Plant and an increase in the Sulfur Recovery

<sup>37</sup> From AQS Attach. 1, pdf 19 (lb/day): Linehaul emissions within California = small line haul from Richmond terminal to refinery + large linehaul from boundary of BAAQMD to Richmond terminal. Linehaul emissions for NOx in lbs/day:  $18.97 + 57.06(90/67) = 95.6$  lb/day. The net increase =  $20.4 + (79.0-76.03) + 95.6 - 62.3 =$  or  $56.7$  lb/day > 54 lb/day.

F16

Units, but in both cases, less than the permitted levels.<sup>38</sup> However, for purposes of CEQA compliance, the permitted levels are not material, but rather the increase relative to a historic baseline. These emissions were not included in the Project totals.

1. Propane/Butane Combustion In California

The DEIR failed to include criteria pollutant emissions from burning or otherwise using the recovered propane/butane anywhere. The recovered propane/butane is being produced to meet commercial-grade standards with less than 5 ppm hydrogen sulfide (H<sub>2</sub>S). 6/28/13 Phillips Response Letter, p. 2. Commercial-grade propane is used as a fuel.<sup>39</sup> Thus, it is reasonably foreseeable that the produced propane/butane would be used as fuel, increasing criteria pollutant and GHG emissions.

The BAAQMD permitting file further discloses that Phillips currently sells butane from the Rodeo Refinery in California. 4/30/13 Phillips Response Letter. Thus, emissions from the use of propane/butane as a fuel within California are a reasonably foreseeable impact caused by the Project and must be evaluated. 14 Cal Code Regs. §§15064(d)(3) and 15358(a)(2).

There is nothing in the DEIR or FEIR that would prohibit Phillips from selling 100% of the recovered propane/butane for new uses as a fuel anywhere, including within California. Thus, unless the County imposes a condition requiring that 100% of the propane/butane is sold outside of the jurisdiction of CEQA or for non-combustion, non-emitting uses, the FEIR must include criteria pollutant emissions from its use and mitigate the resulting impacts, which are significant as demonstrated below.

I estimated the criteria pollutant emissions from combusting 100% of the Project's propane/butane in boilers within California. The results of my calculations are summarized in Table 2.

<sup>38</sup> Phillips 66 Propane Recovery Project Issues, BAAQMD Notes; Letter from Don Bristol, Phillips 66, to Brian Lusher, BAAQMD, Re: Response to Incomplete Letter 3/1/13, April 30, 2013, pp. 3 (Response to Comment #4) and 6 (Response to Comment #8).

<sup>39</sup> See, e.g., Tesoro Safety Data Sheet, Propane - Commercial Grade, Available at: [http://www.tsocorp.com/stellent/groups/corpcomm/documents/tsocorp\\_documents/msdspropane.pdf](http://www.tsocorp.com/stellent/groups/corpcomm/documents/tsocorp_documents/msdspropane.pdf).

**Table 2**  
**Emissions from Combusting Propane/Butane**  
**Within California**

	Emission Factor	Emissions	
	(lb/10 <sup>3</sup> gal)	(lb/day)	(ton/yr)
<b>PROPANE</b>			
Total PM	0.7	123	22.5
NOx	13	2,293	418.5
CO	7.5	1,323	241.4
ROG	0.8	141	25.8
<b>BUTANE</b>			
Total PM	0.8	128	23.3
NOx	15	2,394	436.9
CO	8.4	1,341	244.7
ROG	0.9	144	26.2
Emission factors from AP-42, Table 1.5-1. Propane: 4,200 BPD; Butane: 3,800 BPD ROG = TOC - CH <sub>4</sub> .			

F17 These emissions are compared with significance thresholds established in the DEIR for evaluating the operational air quality impacts of the Project (DEIR, p. 4.3-14) in Table 3. This comparison shows that the emissions from burning recovered propane and butane exceed significance thresholds for NOx, PM10, and ROG by a large margin and thus must either be mitigated or the EIR must prohibit the sale of recovered propane/butane within California for fuel. The emissions of CO are also large and significant, but the DEIR failed to establish a significance threshold for this pollutant.

**Table 3**  
**Comparison of Emissions from Combusting Propane/Butane**  
**Within California With Significance Criteria**

	TOTAL EMISSIONS		SIGNIFICANCE CRITERIA	
	(lb/day)	(ton/yr)	(lb/day)	(ton/yr)
Total PM	251	45.8	82	15
NO2	4,687	855.4	54	10
CO	2,664	486.1		
ROG	285	52.0	54	10
Assumes 100% of PM from combustion is PM10 DEIR, p. 4.314				

## 2. Increase In Hydrogen

F18

The hydrotreater that will be installed as part of the Project requires hydrogen to react with sulfur and convert it into forms that can be removed. The DEIR claims that the amount of hydrogen present in the existing gas streams is adequate to supply the increased hydrogen. DEIR, p. 3-25.

The BAAQMD questioned this assumption and asked Phillips to accept a permit condition stating no hydrogen would be used at the new hydrotreater. Phillips declined and admitted that "... there are short periods when hydrogen from a hydrogen plant will need to be supplied. These periods would typically be during startup of the hydrotreater catalyst system." 4/30/13 Phillips Response Letter, p. 3, Response to Comment #4. Phillips has not quantified the amount of additional hydrogen that will be required nor the resulting emissions. Hydrogen plants include a furnace and vents that are significant sources of criteria pollutant and GHG emissions, including specifically, the hydrogen plant that would supply this Project.<sup>40</sup> The EIR must quantify all of the emissions that would be generated as a result of the Project.

## 3. Increase in Steam

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The DEIR disclosed that steam would be provided by either a new 140 MMBtu/hr steam boiler or by the existing Steam Power Plant (SPP). DEIR, pp. ES-5, 3-7, 3-20. The DEIR included emissions only for the new 140 MMBtu/hr boiler. DEIR, Tables 4.3-6 and 4.3-7. Since the DEIR was released, Phillips has elected to use the existing SPP to generate the required steam. The NOx emissions from the existing SPP are higher than those disclosed in the DEIR, as explained below.

Correspondence in the BAAQMD file indicates steam demand will be met by using surplus low pressure steam currently vented, improving steam generation efficiency, and by increasing high pressure steam production at the SPP. The increase in high pressure steam would be provided by increasing the firing rate of natural gas in the duct burners by 45 MMBtu/hr. It is unclear whether additional fuel would also have to be fired in the associated gas turbines.

The emissions included in the BAAQMD permit files (which vary from the emissions identified in the DEIR) are based only on increasing the firing rate of natural gas in the duct burners by 45 MMBtu/hr, and assume very low (and unsupported) emission factors. The emission factor used for NOx, for example, is 0.017 lb/MMBtu (4.5 ppm @ 15% O<sub>2</sub>). 4/30/13 Phillips Response Letter, pp. 5-6, Response to Comment #7.

Based on my experience permitting many similar projects with duct burners, they typically emit much more NOx than assumed in the 4/30/13 Phillips calculations (4/30/13 Phillips Response Letter, pp. 5-6). Duct burner emissions are low only if they are located in a heat recovery steam generator equipped with modern selective catalytic

<sup>40</sup> Air Liquide, Hydrogen Plant Project, Application for Authority to Construct and Major Facility Review Permit, Rodeo, California, October 2005.

reduction to control NOx. No such arrangement is described in the DEIR (Sec. 3.3.2.9) or the original 1985 BAAQMD engineering evaluation.<sup>41</sup> The subject gas turbines/duct burners are permitted to emit 83 lb/hr when firing 1048 MMBtu/hr for all turbine/duct burners combined.<sup>42</sup> This corresponds to a NOx emission factor of 0.079 lb/MMBtu ( $83/1048 = 0.079$ ). This NOx emission factor is nearly five times higher than the one used in Phillips' duct burner NOx emission calculations.

F19 Using this revised emission factor to estimate NOx emissions from increased steam demand yields 15.6 ton/yr NOx ( $0.079 \times 45 \times 8760/2000 = 15.6$ ) or four times more than disclosed in the DEIR (3.7 ton/yr) for the new 140 MMBtu/hr boiler. The originally proposed new boiler evaluated in the DEIR should be more efficient and emit less NOx, etc. than the old SPP due to use of modern technology and current Best Available Control Technology (BACT) controls such as selective catalytic reduction (SCR). The NOx emissions from supplying just the steam for the hydrotreater exceed the NOx significance threshold of 10 ton/yr and are thus a significant undisclosed air quality impact of the Project.

#### 4. Increase In Sulfur Removal

F20 The Project will increase the throughput of the existing Sulfur Recovery Units (SRU) by about 135 ton/yr of sulfur. DEIR, Fig. 3-6; 5/13/13 BAAQMD Notes, p. 2; 6/28/13 Phillips Response Letter, pp. 6-8, Response to Comment #8. The Refinery uses the Claus process to convert acid gas to liquid sulfur, which is sold. This involves combusting acid gas, which would increase NOx, CO, VOC and other emissions. The resulting elemental sulfur is sold, which involves truck emissions. Thus, the increase in throughput of the SRU would be accompanied by increases in combustion emissions from the Claus unit and the trucks used to transport the recovered sulfur product to market. The resulting increase in emissions was not disclosed in the DEIR or FEIR. The information in the files I reviewed is not adequate to estimate these emissions. It did not include, for example, the increase in acid gases that would be processed by the Claus unit, the criteria pollutant emission factors for the Claus furnace, or the number of additional truck trips that would be required to transport the sulfur to market.

#### 5. Increase In Electricity Generation

F21 The Project will require 1.28 MW electricity or 10,900 MW-hour of electricity DEIR, pp. 3-23, 3-28. The generation of this electricity at off-site facilities will increase criteria pollutant and GHG emissions that were not included in the DEIR. The information in the files I reviewed did not include any emission factors in pounds of pollutant per megawatt hour, which are required to estimate these emissions.

#### 6. Emissions from Changes in Feedstock Quality

<sup>41</sup> BAAQMD, Engineering Evaluation, Union Oil Company, Gas Turbine Cogeneration Facility, November 8, 1985.

<sup>42</sup> Phillips 66 LPG Recovery Project, Permit Limit Summary, BAAQMD, Condition ID 18629.

The currently proposed rail spur project at the Santa Maria Facility would allow the import of DilBits. These are rich in the propane/butane fractions required to supply the subject Project at the Rodeo Refinery. If said DilBits were routed directly to the Rodeo Refinery or if they were processed at Santa Maria to generate semi-refined products for Rodeo, which are feed for the propane/butane Project, this would result in public health impacts that were not disclosed in the DEIR.

DilBits contain large amounts of light material that distill below 149 C and are thus very volatile. This material can be emitted to the atmosphere from storage tanks and equipment leaks of fugitive components (pumps, compressors, valves, fittings) in much larger amounts than other heavy crudes and their byproducts that are currently processed at the Rodeo Refinery.

F22 The diluent is a low molecular weight organic material with a high vapor pressure that contains not only propane and butane that would be recovered by the Project, but also high levels of other VOCs, sulfur compounds, and hazardous air pollutants (HAPs). These would be emitted during unloading and would be present in emissions from tanks and fugitive components. The DEIR did not disclose the potential presence of diluent and made no attempt to estimate these diluent-derived emissions.

The composition of some typical diluents/condensates used in DilBits is reported on the website, [www.crudemonitor.ca](http://www.crudemonitor.ca).<sup>43</sup> The DEIR does not identify the specific diluents that would be used by the Project or even that diluents would be present. The CrudeMonitor information indicates that diluent contains very high concentrations (based on 5-year averages, v/v basis of the hazardous air pollutants benzene (7,200 ppm to 9,800 ppm); toluene (10,300 ppm to 25,300 ppm); ethyl benzene (900 ppm to 2,900 ppm); and xylenes (4,600 ppm to 23,900 ppm).

The sum of these four compounds is known as "BTEX" or benzene-toluene-ethylbenzene-xylene. The BTEX in diluent ranges from 27,000 ppm to 60,900 ppm. The BTEX in DilBits, blended from these materials, ranges from 8,000 ppm to 12,300 ppm.<sup>44</sup> Similarly, the BTEX in synthetic crude oils (SCOs), which also could be imported via the

<sup>43</sup> Condensate Blend (CRW) - <http://www.crudemonitor.ca/condensate.php?acr=CRW>; Fort Saskatchewan Condensate (CFT) - <http://www.crudemonitor.ca/condensate.php?acr=CFT>; Peace Condensate (CPR) - <http://www.crudemonitor.ca/condensate.php?acr=CPR>; Pembina Condensate (CPM) - <http://www.crudemonitor.ca/condensate.php?acr=CPM>; Rangeland Condensate (CRL) - <http://www.crudemonitor.ca/condensate.php?acr=CRL>; Southern Lights Diluent (SLD) - <http://www.crudemonitor.ca/condensate.php?acr=SLD>.

<sup>44</sup> DilBits: Access Western Blend (AWB) - <http://www.crudemonitor.ca/crude.php?acr=AWB>; Borealis Heavy Blend (BHB) - <http://www.crudemonitor.ca/crude.php?acr=BHB>; Christina Dilbit Blend (CDB) - <http://www.crudemonitor.ca/crude.php?acr=CDB>; Cold Lake (CL) - <http://www.crudemonitor.ca/crude.php?acr=CL>; Peace River Heavy (PH) - <http://www.crudemonitor.ca/crude.php?acr=PH>; Seal Heavy (SH) - <http://www.crudemonitor.ca/crude.php?acr=SH>; Statoil Cheecham Blend (SCB) - <http://www.crudemonitor.ca/crude.php?acr=SCB>; Wabasca Heavy (WH) - <http://www.crudemonitor.ca/crude.php?acr=WH>; Western Canadian Select (WCS) - <http://www.crudemonitor.ca/crude.php?acr=WCS>; Albian Heavy Synthetic (AHS) (DilSynBit) - <http://www.crudemonitor.ca/crude.php?acr=AHS>.



Santa Maria rail spur project or the Ferndale Rail Terminal and barged to Rodeo, ranges from 6,100 ppm to 14,100 ppm.<sup>45</sup> These are very high concentrations that were not considered in the DEIR or FEIR. These levels are high enough to result in significant worker and public health impacts.

F22 The CrudeMonitor information also indicates that these diluents contain elevated concentrations of volatile mercaptans (9.9 to 103.5 ppm), which are highly odiferous and toxic compounds that could result in significant odor and nuisance impacts. Mercaptans can be detected at concentrations substantially lower than will be present in emissions from the tanks and fugitive emission, including pumps, valves, flanges, and connectors.<sup>46</sup> In fact, mercaptans are added to natural gas in very tiny amounts so that the gas can be smelled to facilitate detecting leaks.

Thus, recovering propane and butane from semi-refined products generated from these tar sands crudes or from directly refining these crudes would emit VOCs, HAPs, and malodorous sulfur compounds, not found in comparable levels in conventional crudes currently handled at the Refinery. There are no restrictions on the feedstock composition nor any requirements to monitor emissions for these HAPs from tanks and leaking equipment where DilBit-blended and other light crude fraction would be handled.

#### 7. CO Emissions Were Not Estimated

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L The Project would significantly increase emissions of carbon monoxide (CO), a criteria pollutant. Carbon monoxide is emitted from all combustion sources, including locomotives, trucks and commuter auto trips, steam generation, and combustion of the recovered propane and butane at fired sources. The DEIR is silent on CO emissions from the entire Project.

#### IV.D. Decrease in SO<sub>2</sub> Emissions Is Not Supported

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F24  
1 The DEIR claims that the Project would reduce SO<sub>2</sub> emissions by at least 50%, resulting in an SO<sub>2</sub> emission decrease of at least 180 ton/yr. DEIR, pp. ES-2, 3-5, 4.3-19. The emission inventory in Table 4.3-7 takes credit for a reduction in SO<sub>2</sub> emission of 172.4 ton/yr. DEIR, Table 4.3-7. The BAAQMD Permit Application made a similar claim. However, there it claimed a reduction of 174.7 ton/yr, of which 7.61 ton/yr was proposed to offset Project SO<sub>2</sub> increases and the balance would be banked as Emission

<sup>45</sup> SCOs: CNRL Light Sweet Synthetic (CNS) - <http://www.crudemonitor.ca/crude.php?acr=CNS>; Husky Synthetic Blend (HSB) - <http://www.crudemonitor.ca/crude.php?acr=HSB>; Long Lake Light Synthetic (PSC) - <http://www.crudemonitor.ca/crude.php?acr=PSC>; Premium Albion Synthetic (PAS) - <http://www.crudemonitor.ca/crude.php?acr=PAS>; Shell Synthetic Light (SSX) - <http://www.crudemonitor.ca/crude.php?acr=SSX>; Suncor Synthetic A (OSA) - <http://www.crudemonitor.ca/crude.php?acr=OSA>; Syncrude Synthetic (SYN) - <http://www.crudemonitor.ca/crude.php?acr=SYN>.

<sup>46</sup> American Industrial Hygiene Association, Odor Thresholds for Chemicals with Established Occupational Health Standards, 1989; American Petroleum Institute, Manual on Disposal of Refinery Wastes, Volume on Atmospheric Emissions, Chapter 16 - Odors, May 1976, Table 16-1.

Reduction Credits. BAAQMD Permit Ap., p. 17. However, Phillips subsequently withdrew its banking application, casting doubt on its claim of a SO2 reduction.

F24  
I Thus, there is no support, in either the DEIR record or the BAAQMD permitting record, for the claimed reduction in SO2 emissions. Emission reductions used to offset emission increases must be permanent, real, and quantifiable. There is no evidence that the claimed SO2 emission reductions meet any of these criteria. In fact, claimed reductions could be a myth if the Refinery feedstock is modified to include a larger proportion of higher sulfur tar sands crudes than currently refined. Such crudes could reach the Refinery via the related Santa Maria rail spur project or the Ferndale rail terminal by barge down the Pacific coast.

#### V. CUMULATIVE AIR QUALITY IMPACT ANALYSIS IS INADEQUATE

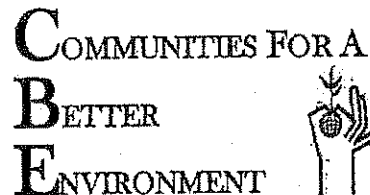
I The DEIR included only the Marine Terminal project, the temporary boiler, and an SO2 transfer proposal in the list of cumulative projects. DEIR, Sec. 5.4.3.3. However, the DEIR and FEIR fail to disclose the cumulative impacts that would result from other currently proposed projects that would affect the amount and composition of feedstock refined at Rodeo, compared to CEQA baseline feedstock. Changes in baseline feedstock as explained in these comment, i.e., tar sands crudes such as DilBits, and increased amounts of semi-refined materials from the Santa Maria Facility, would increase emissions of all criteria pollutants and hazardous air pollutants at most all emission sources in the Refinery.

F25  
I First, as discussed in Comment II, two projects are proposed at the Santa Maria Facility that would directly impact Rodeo. These would send increased amounts of gas oil and naphtha to Rodeo for processing, increasing emissions from many refining units compared to the CEQA baseline. A rail spur is also proposed for Santa Maria that would allow the import of tar sands crudes. These tar sands crudes would change the chemical composition of Rodeo feedstocks, as described in Comment IV.C.6 and Attachment 2. These feedstocks, for example, would increase emissions of hazardous air pollutants from tanks, compressors, pumps, valves and flanges throughout the Refinery. They would also increase NOx and SO2 emissions from fired sources throughout the Refinery, relative to the CEQA baseline.

Second, as also discussed in Comment II, Phillip 66's Ferndale Refinery is permitted to construct a rail terminal, which will facilitate barging tar sands crude to the Rodeo Marine Terminal. The Rodeo Marine Terminal was recently permitted to import increased amounts of crude. This would also change the chemical composition of Rodeo feedstocks, as described in Comment IV.C.6 and Attachment 2, compared to the CEQA baseline feedstock.

I These directly related projects will cumulatively increase air emissions above the CEQA baseline. They must all be evaluated together in a revised DEIR to determine cumulative air quality impacts.

CONTRA COSTA  
2013 DEC -2 PM 2:55  
APPLICATION & PERMIT CENTER



December 2, 2013

**RE: Appeal of Planning Commission Certification of the Final Environmental Impact Report for the Phillips 66 Propane Fuel Recovery Project**

To the Contra Costa County Board of Supervisors:

Communities for a Better Environment ("CBE") appeals the Contra Costa County Planning Commission's certification of a deficient Final Environmental Impact Report ("FEIR") for the Phillips 66 "Propane Fuel Recovery Project" ("Project"). This appeal is based on the arguments set forth herein, in addition to those set forth in CBE's comments to the Draft Environmental Impact Report for the Project ("DEIR"), the comments submitted by the Rodeo Citizens Association and other commenters to the same DEIR, as well as any arguments and information presented before the County Planning Commission at its November 19, 2013 hearing on the matter.

The FEIR has failed to cure critical errors identified by CBE and others in their comments to the DEIR. In particular, CBE's comments identified the project proponent's lack of good faith in disclosing information regarding integral project components, and the DEIR's subsequent failure to include an adequate project description that details the reality of a larger project; one that would enable the Project proponent to process lower quality oil feedstock. CBE's findings, detailed in the Expert Report of Greg Karras, were corroborated by the comments of the Rodeo Citizens Association, submitted on November 18, 2013, including the Comments of technical expert, Phyllis Fox, which also reveal additional, fundamental flaws in the DEIR, similarly left uncured in the FEIR.

The FEIR neither discloses the Project's true specifications nor its overall objective and, therefore, cannot provide any meaningful discussion of significant environmental impacts, mitigation of those impacts, and feasible alternatives. For this, and the additional reasons explained below, the County Planning Commission should neither have certified such an insufficient document, nor approved any subsequent land use permit based on its inadequate analysis and conclusions unsupported by substantial evidence as required by the California Environmental Quality Act ("CEQA"). In addition, the County did not meet CEQA's notice requirements, in part, as a result of the inadequacy of the project description contained in the environmental documents, as well as the County's failure to otherwise provide adequate written notice to the public of this Project. The Board should, therefore, reject the Planning Commission's certification of this insufficient document and initiate procedures to have the document immediately revised and recirculated.

CBE1

The Project Description Fails to Disclose that this Project is Part of a Larger Project to Enable the Refinery to Process Lower Quality Oil Feedstock

CBE 2 A, "finite project description is indispensable to an informative, legally adequate EIR."<sup>1</sup> Moreover, when comments submitted by the public raise significant environmental issues and hold a position contrary to that of the lead agency, the lead agency must address those comments *in detail* and give reasons why specific comments and suggestions were not accepted.<sup>2</sup> "There must be good faith, reasoned analysis in response. Conclusory statements unsupported by factual information will not suffice."<sup>3</sup>

Although the FEIR provides several cross references to various responses to comments addressing the issue of crude quality raised by CBE and other commenters, overall, its responses fail to address the substance of such comments. Indeed, the FEIR's response to comments sections, including Master response 2.2, B4-5, B4-36 through B-73, B4-9, B4-11, do nothing more than cross reference each other, and the DEIR, in order to conclusively deny CBE's position without any meaningful analysis, or statements of evidentiary support.

FEIR Master Response 2.2 is Insufficient

Master Response 2.2 constitutes the majority of the FEIR's response to the question of whether the Project will result in a switch to a lower quality oil feedstock. The County asserts that the Project does not propose to add, change or modify the operation of other process units, and offers little more than such a conclusory statement.

CBE 3 In response to any suggestion of the use of a different crude slate, the County merely cites repeatedly to Section 3.2.1 on page 3-5 of the DEIR; the section containing the Project's stated description. The County also states that there is, "nothing in the record," (the record being that which was prepared for the DEIR) to suggest that this Project is part of a larger project to change the crude slate processed at the refinery. This overall conclusive reliance on a document, whose very substance and omissions are called into question, is essentially non-responsive and cannot constitute substantial evidence.

The sparse additional evidence in Master Response 2.2 is also insufficient. For instance, in regard to Phillips 66 management's statements to its investors promoting the company's strategic switch to, "advantaged crude," the County's response in the FEIR suggests that there is no definition of "advantaged crude." In fact, the very same Phillips 66 document offers the definition, which includes, "heavy crude oil from Canada."<sup>4</sup> Furthermore, Chief Executive Officer, Greg Garland adds: "the single biggest lever we have to improve value in our refining business is through lowering our feedstock costs."<sup>5</sup> Also stated in CBE's Comments, Phillips 66 management signals its intent to bring this "advantaged crude" directly to its San Francisco

<sup>1</sup> *County of Inyo v. City of Los Angeles* (1977) 71 Cal.App.3d 185, 199.

<sup>2</sup> 14 Cal. Code Reg. § 15088(c).

<sup>3</sup> 14 Cal. Code Reg. § 15088(c).

<sup>4</sup> Phillips 66 Delivers on Advantaged Crude Strategy, available at <http://www.phillips66.com/EN/newsroom/feature-stories/Pages/AdvantagedCrude.aspx>, last accessed Aug 7, 2013

<sup>5</sup> *Id.*

CBE 3

refineries, both the Rodeo and Santa Maria facilities by rail or barge.<sup>6</sup> Nevertheless, despite the inclusion of this information and other investor-targeted statements identified by CBE and others, the FEIR ignores these specific strategies, obscuring the project proponent's true intent.

#### The Project is Improperly Piecemealed

"A public agency is not permitted to subdivide a single project into smaller individual subprojects in order to avoid the responsibility of considering the environmental impact of the project as a whole."<sup>7</sup>

Master Response 2.2 also discusses Phillips 66's Santa Maria Facility ("SMF"). The response identifies SMF's new proposed project, currently in the application stage with San Luis Obispo County, to increase crude oil shipments via rail car in addition to pipeline. The County asserts that "there is no request for or discussion of this project requiring any change to the SMF to accept different crude feedstocks." In stark contrast, the SMF new proposed project description reads: "the purpose of the project is to allow SMF to access a full range of competitively priced crude oil."<sup>8</sup> The FEIR omits publicly available information that shows the true link between these two facilities and the Project.

CBE 4

Both the Comments of Greg Karras and Phyllis Fox highlight the direct link between this Project and the proposed modifications at the SMF. Their extensive analyses identify projects at the Rodeo and Santa Maria refineries, that although separate in time, are connected in purpose, including: other projects at the Rodeo facility, the direct pipeline link between the Rodeo and Santa Maria facilities and the production of propane and butane at the same, the overall reliance of the Rodeo facility on the SMF for the stated objective of this Project, and the new rail spur at the SMF that would enable tar sands crudes to be imported to and processed at the SMF, and/or shipped directly to Rodeo. The DEIR failed to identify, much less analyze the potential impacts of these projects in relation to one another, and despite comments regarding the need for such an analysis, the FEIR also fails to provide any substantial evidence to contradict these independent and corroborating analyses. The FEIR similarly omits any mention of any other related projects, including but not limited to Phillips 66's proposed project to increase storage and desalination capacity at its Carson facility in Los Angeles, currently under review with the South Coast Air Quality Management District – an additional integral project component to enable Phillips 66's refineries to switch their crude slate, statewide.

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<sup>6</sup> FEIR 3.2-26.

<sup>7</sup> *Orinda Ass'n v. Board of Supervisors* (1986) 182 CA 3d 1145, 1171.

<sup>8</sup> Project Purposes and Objectives, available at:

<http://www.slocounty.ca.gov/Assets/PL/Santa+Maria+Refinery+Rail+Project/description.pdf>

### The Project Will Enable a Switch in Crude Quality

CBE 5

The FEIR similarly offers little more than conclusory statements to satisfy CBE's concerns regarding the switch in crude quality itself.<sup>9</sup> Moreover, the County seems to confuse CBE's identification of this larger project, or the switch in crude slate, with, "purchasing raw materials," that does not constitute a CEQA, "project," and therefore does not require an EIR analysis.<sup>10</sup> This position directly conflicts with the spirit of the statements made by the Phillips 66 representative at the Planning Commission hearing, who confirmed this future switch in crude slate, and assured the Commissioners that the company would obtain an EIR for that switch when it happens.

Notably, Phillips 66's attempts to obscure their underlying intent to switch the crude quality at the San Francisco Refinery will result in impermissible, deferred mitigation of the resulting potential impacts. California Courts have consistently held that foreseeable changes, which would have an effect on a proposed project, must be discussed at the time of the project's approval process.<sup>11</sup> As noted above, the Phillips 66 representative present at the hearing before the County Planning Commission did not negate the company's overall plan to switch its crude slate. Instead, he said only that the company would obtain CEQA review at the time in which such a switch was underway. Contrary to what appears to be Phillips 66's position on this matter, however, Phillips 66 must get that County approval *now*. If the LPG is derived from the oil feedstock, and the feedstock is likely to change, that change will evidently have an effect on LPG production that the FEIR should have documented, and addressed through mitigation measures where necessary. Thus, Phillips 66 should not be permitted to defer an analysis that is, in this case, required *now*.

CBE 6

The FEIR's response is also inadequate. The FEIR should have included an analysis of increased emissions and worker safety risks as a result of a change in feedstock. As stated in the Fox comments, "the amount and composition of sulfur in the crude slate...ultimately determines the amount of SO<sub>2</sub> that will be emitted from every fired source in the refinery," and this Project would commit the refinery to continued coking of the highest density part of the crude resource.<sup>12</sup> Such coking is necessary to meet the Project's export objectives, otherwise the refinery would not be able to produce enough propane and butane.<sup>13</sup> "Denser coker feeds produce more gases and more LPG..." and in order to produce the Project's 8000 barrels per day of LPG, the refinery will have to process a certain density of coker feed.<sup>14</sup> The very project components themselves, therefore, reveal that the project *relies* on a switch in crude feedstock.

CBE 7

In regards to worker safety, CBE proposed that the County discuss the findings of the Chemical Safety Board ("CSB"), in particular, the nexus between a lower quality oil feedstock, increased risks of hazards to workers, and the need to reduce those risks to the As Low As

<sup>9</sup> See e.g., FEIR comment response B4-5.

<sup>10</sup> See FEIR at 3.2-118.

<sup>11</sup> *Laurel Heights Improvement Assn. v. Regents of University of California*, (1988) 47 Cal. 3d 376, 396.

<sup>12</sup> Karras Report at 6.

<sup>13</sup> *Id.*

<sup>14</sup> *Id.* at 7.

Reasonably Practicable ("ALARP") level. The County's response merely states that, "there is no apparent nexus...to require compliance with this advice."<sup>15</sup>

CBE 7  
↓  
CBE's requests for further information or verification on crude quality were also met with the same general and conclusory responses. For instance, CBE seeks further information on how the Project will meet its export objective without changing its feedstock. Comment response B4-12 merely refers CBE back to the, already identified as deficient, DEIR section detailing the capacity and storage of tanks. This comment response is but one example of the FEIR's inability to confirm how the Project will meet its export goals and the County's failure to cure that error. Similarly, in response to Karras' identified Project reliance on severe processing of denser oils in the crude stream in order to create enough byproduct gases to meet the Project's objectives, the FEIR still offers wholly conclusory, irrelevant or insufficient responses, for the most part, simply "reiterating" the inadequate project description.<sup>16</sup>

#### The FEIR Fails to Discuss Foreseeable Significant Environmental Impacts of the Project

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An adequate EIR must analyze "the environmental effects of future expansion or other action if: (1) it is a reasonably foreseeable consequence of the initial project; and (2) the future expansion or action will be significant in that it will likely change the scope or nature of the initial project or its environmental effects."<sup>17</sup>

CBE 8  
↑  
FEIR comment response B4-2 introduces a whole discussion of the, "lifecycle," of emitting sources and how the CEQA guidelines no longer use this term due to its lack of definition. Nevertheless, CBE also does not use the term, lifecycle. CBE has merely identified that this Project will produce goods that will fulfill their emitting destiny at some point in time in the future – they are indirect emissions. That is foreseeable, and an impact that the FEIR should have included. A discussion of "lifecycle" terminology does nothing other than to confuse the issue. Ultimately, this Project's objective, "good," will be sold and used somewhere, creating some emissions that the FEIR should have identified, analyzed and, if necessary, mitigated.

The County suggests that there is, "uncertainty concerning the locations, quantities and types of fuel that might be replaced by the propane/butane...whether such production could have the potential to affect the overall consumption of propane/butane or the use or non-use of another fuel." The County determines that these issues are too "speculative for inclusion in the EIR analysis." Nevertheless, the County is in possession of data from the refinery that will easily allow for an estimate of the emissions from combustion of its product, also possible at liberal and conservative ranges, to account for possible future fluctuations in demand. Furthermore, Phillips 66 currently sells butane from its Rodeo Refinery in California. Emissions from the use of this fuel are a clearly and reasonably foreseeable impact caused by this Project that the FEIR failed to discuss.

<sup>15</sup> FEIR at B4-28.

<sup>16</sup> See FEIR at 3.2-131.

<sup>17</sup> *Supra*, footnote 11.

## The FEIR Fails to Adequately Analyze Significant Environmental Impacts

CBE identifies the following significant environmental impacts that the FEIR fails to properly address. CEQA requires project proponents to address all of a proposed project's anticipated environmental impacts.<sup>18</sup> This requires an analysis of both short-term and long-term significant environmental impacts.<sup>19</sup>

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CBE 9  
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1. *Risk of explosion/accident/fire/catastrophic failure.* A lower quality oil feedstock is directly correlated to the increased frequency of catastrophic failures, such as the August 6, 2012 fire at the Chevron Richmond Refinery. In addition, site specific factors of this Project exacerbate dangers of the storage of propane in high pressure tanks. As noted below, the accounting for such risk under the Industrial Safety Ordinance ("ISO") has not yet occurred, but is in fact illegally deferred until a later date.

Moreover, as the FEIR consistently denies the Project's reliance on a switch in crude slate, it evidently also does not see the need to address this significant impact.<sup>20</sup>

- ↑  
CBE 10  
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2. *Significant Air Pollution Impacts from the Refining of a Lower Quality Oil Feedstock.* The refining of this lower quality crude slate is likely to result in increased, "emergency," flaring. Each of these flaring episodes comes with associated and extremely high levels of additional pollution. In addition, the daily operation and refining of a lower quality crude slate will result in increased daily emissions of pollutants, including fugitive emissions and heightened concentrations of toxic compounds.

The FEIR again avoids any discussion of any impact associated with a switch in crude quality.<sup>21</sup> Noteworthy however, comment response B4-20 attempts to bolster its position by a corroborating reference to Phillips 66's corresponding Air District application for Emissions Reduction Credits; an application that Phillips 66 recently withdrew.

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CBE 11  
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3. *Significant Biological Resource Impacts due to OTC system.* CBE highlights the potential impact the continued use of the OTC system will have on species in and around the San Francisco Bay, and may even result in the "taking" of endangered species.

The Regional Water Quality Board has in fact determined that this impact could prove so potentially harmful, that they have ordered the Project proponent to study replacing the OTC system - prior to any expansion. This study is already

<sup>18</sup> Public Resources Code section 21100(b)(1); *County of Inyo v. City of Los Angeles* (1977) 71 Cal. App. 3d 185, 199.

<sup>19</sup> CEQA Guidelines section 15126.2(a).

<sup>20</sup> See FEIR at B4-19.

<sup>21</sup> See FEIR at B4-20.



CBE 11



CBE 12



CBE 13

signed and submitted to the Water Board. It is referenced and attached to CBE's comments to the DEIR, and documents the feasibility of replacing the cooling system. However, by contrast, the FEIR supports expanding the old system, which forecloses any replacement. Even more surprising, the FEIR denies the existence of this study.<sup>22</sup>

4. *Significant Cumulative Impacts.* The FEIR's failure to properly address cumulative impacts stems from its flawed project description. Certainly, the lack of a good faith and accurate project description will render any proper analysis of cumulative impacts necessarily meaningless. Comment response B4-22 merely recites the CEQA guidelines for the analysis of cumulative impacts, wholly failing to address the DEIR's insufficient discussion and response to CBE's concerns, especially taking into account the potential geographic reach of this Project.

5. *Significant Greenhouse Gas Emissions.* The FEIR fails to adequately consider both on and off-site GHG emissions. On-site, the FEIR does not acknowledge a crude switch and therefore does not address the higher GHG emissions in refining a lower quality oil feedstock. Off-site, the FEIR fails to provide any meaningful discussion of GHG emissions from the Project's objective product, propane, wherever it is used. Inevitably, this Project's propane will be used somewhere. The County should have at least provided some estimate of how much, including resultant GHG emissions.

The FEIR's response comments do little to address these concerns. B4-23 states that as crude quality data was not used to estimate GHG emissions, then there is no need to address how a switch in crude quality could affect emissions. If there is a switch to lower crude quality, however, the GHG emissions will also increase. Whatever variables the County used to estimate GHG emissions will be affected by a switch in crude quality.

In regard to off-site emissions, FEIR B4-23 again mistakes the propane use as a, "lifecycle," emission, ignoring a proper analysis that such emissions are ultimately foreseeable, and therefore, indirect emissions that the FEIR should have addressed.

Moreover, the bare measurement of GHG emissions included in the FEIR raises significant concern. The FEIR includes comment responses defending reliance on BAAQMD significance thresholds that are currently the subject of litigation.<sup>23</sup> Nevertheless, BAAQMD itself calls this Project into question:

'the DEIR provides no supportive technical detail to determine if emission estimates are accurate. In addition, the supplemental documents requested by District staff had missing information. Without this information, staff

<sup>22</sup> See FEIR at B4-47.

<sup>23</sup> See FEIR at B4-24.

CBE 13

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CBE 14

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is unable to determine if calculations and emissions estimates are correct, and thus, cannot support the conclusions related to the significance of air quality or GHG impacts.<sup>24</sup>

6. *Significant Environmental Impacts from the Use of the OTC System.* Lead agency guarantees of permit limit adherence cannot substitute for any meaningful analysis under CEQA. The FEIR fails to properly analyze a significant impact, instead stating that if the significant impact occurs, another agency has the authority to remedy that impact. That is deferred mitigation. As such, the FEIR still does not address the significant direct and cumulative impacts of the Project's continued use of the OTC system.<sup>25</sup>

#### The FEIR Fails to Adequately Discuss Mitigation Measures

The FEIR subsequently cannot adequately analyze mitigation measures for significant environmental impacts that the County will not investigate in the FEIR, despite abundant evidence to the contrary. In addition, as noted above, the County improperly defers its analysis of hazard management under the Industrial Safety Ordinance, including risks due to catastrophic failure of Project components. Surprisingly, however, the County maintains its reliance on the same inherently safer systems analysis but applied to, and eventually used to exclude, Refrigerated Liquified Gas Storage as a feasible alternative.<sup>26</sup> Overall, the County's analysis of mitigation measures is inadequate and not based on substantial evidence, but rather the flawed assurances left uncorrected from the DEIR.

#### Local and State Regulations

The FEIR still improperly defers an analysis under the Industrial Safety Ordinance. Similarly, the FEIR fails to address the Project's conflicts with the County General Plan and the Regional Water Quality Control Board.

#### County Industrial Safety Ordinance

A mitigation measure requiring the completion of studies *after* project approval, constitutes deferred mitigation and is contrary to CEQA.<sup>27</sup>

CBE and other commenters alert the County of the need for an inherently safer systems analysis under the ISO *now*. Instead, the County merely states that, "the Refinery operates under

<sup>24</sup> See FEIR, Comment Letter A6. The County's response to the Air District is also inadequate, merely referring District staff and the public to the Appendix of the DEIR or other mysterious documents at the County office, which wholly negates CEQA's single EIR document requirement.

<sup>25</sup> (See FEIR at B4-25, informing the public that the RWQCB has the authority to require modifications to a facility's operations to ensure water quality standards.)

<sup>26</sup> FEIR at B4-28.

<sup>27</sup> *Sundstrom v. County of Mendocino*, (1988) 202 Cal. App. 3d 296, 207.

rules that provide the necessary hazards analysis."<sup>28</sup> Such studies, "will be carried out prior to (Project) startup...upon completion of the Project...the Risk Management Plan would be updated," and modified as a result of the Project.<sup>29</sup> Especially in lieu of all of the risks of catastrophic failure, the recent explosion at the Chevron Richmond Refinery, and the surrounding dangers in the natural environment, such as liquefaction, this deferred mitigation is unacceptable and left uncured by the FEIR.

CBE 15

#### Contra Costa County General Plan

As noted in CBE's comments on the DEIR, the County's General Plan includes the goal of increased deployment of renewable energy systems, such as wind, solar and biomass methane production. Every refinery has the option of partially repowering itself with these renewable resources. A key component of this Project is the repowering of the refinery, now by natural gas purchased from PG&E, a discussion that should have involved renewables, especially bearing in mind the General Plan. The FEIR fails to correct this deficiency as well as other conflicts with the General Plan such as liquefaction potential and seismicity at the Project site.<sup>30</sup>

#### Regional Water Quality Board/OTC system

As noted in CBE's comments on the DEIR and above, the Project conflicts with the Regional Water Quality Control Board's Orders to retire OTC systems, and also, the specific feasibility study regarding the retiring of this particular OTC system.

#### The FEIR Provides An Inadequate Discussion of Project Alternatives

An EIR must identify a range of reasonable alternatives "which would feasibly attain most of the basic objectives of the project *but would avoid or substantially lessen any of the significant effects of the project.*"<sup>31</sup>

CBE 16

The FEIR only includes the analysis of three alternatives that all would have greater environmental impacts than the Project. The County did not analyze one alternative that would reduce the environmental impacts of the proposed project; in the County's analysis, even the No Project alternative would have greater impacts than the Project. The failure to consider even a single alternative with lesser environmental impacts than the proposed project is contrary to the purpose of the CEQA alternatives requirement.

The FEIR also fails to consider alternatives that embrace alternative forms of cleaner energy, pursuant to the General Plan as discussed above. CBE noted that while environmentally beneficial alternatives may be more costly in the short run, "[t]he fact that an alternative may be more expensive or less profitable is not sufficient to show that the alternative is financially

<sup>28</sup> FEIR at B4-19.

<sup>29</sup> *Id.*

<sup>30</sup> See FEIR at B4-16

<sup>31</sup> 14 Cal. Code Reg. § 15126.6(a) (emphasis added).

infeasible."<sup>32</sup> CBE asked the County to request more information from the refinery in order to assess the various alternatives to the proposed project which were not included in the DEIR.<sup>33</sup> Nevertheless, the FEIR's discussion is identical to the DEIR's discussion of alternatives.

CBE 16  
The information requested by CBE is important. It is impossible to determine or verify the impacts of the alternatives posited in the FEIR, even the No Project alternative, when the County has failed to identify what those alternatives would even look like. It is similarly impossible to compare the impacts of the reduced-project alternative to those of the proposed project when the County fails to identify significant environmental impacts.<sup>34</sup> The FEIR's analysis of alternatives is not sufficient, but instead an identification of alternatives, if even that.<sup>35</sup>

Further, the County dismissed the alternatives suggested by CBE by noting that if they were to be considered in the EIR, they would likely be rejected as either not meeting the project's objectives or being infeasible.<sup>36</sup> The County provides no evidence beyond its own conclusory statement that the additional alternatives would be infeasible, or would otherwise be beyond the reasonable range of alternatives required by CEQA.<sup>37</sup> Consequently, this is an insufficient response under the CEQA Guidelines.<sup>38</sup>

Finally, the County notes in its response that "although all impacts of the proposed Project are either less than significant or mitigated to less than significant, a reduced sized project is marginally superior to the proposed Project."<sup>39</sup> However, even if the County believes that significant environmental impacts will be mitigated, this does not excuse the County from preparing a meaningful analysis of feasible project alternatives.<sup>40</sup>

<sup>32</sup> *Citizens of Goleta Valley v. Bd. of Supervisors of Santa Barbara Cnty.*, (1988) 197 Cal.App.3d 1167, 1181.

<sup>33</sup> CBE Comments at 25.

<sup>34</sup> DEIR at p. 6-7.

<sup>35</sup> See *Laurel Heights I*, 47 Cal. 3d at 406 ("It defies common sense for the Regents to characterize this as a discussion of any kind; it is barely an identification of alternatives, if even that.").

<sup>36</sup> FEIR at p. 3.2-128.

<sup>37</sup> See 14 Cal. Code Reg. § 15126.6(f) ("The range of alternatives required in an EIR is governed by a 'rule of reason' . . .").

<sup>38</sup> 14 Cal. Code Reg. § 15088(c) (in response to comments, "[c]onclusory statements unsupported by factual information will not suffice").

<sup>39</sup> FEIR at p. 3.2-128.

<sup>40</sup> *Laurel Heights Improvement Assn. v. Regents of Univ. of Cal.* (1988) 47 Cal.3d 376, 401 (*Laurel Heights I*) (holding that an EIR must include a meaningful analysis of feasible project alternatives, even when the lead agency assumes that significant impacts will be substantially avoided by mitigation measures alone).

The County Failed to Adequately Notify the Community of this Project

"If a final EIR does not adequately apprise all interested parties of the true scope of the project for intelligent weighing of the environmental consequences of the project, informed decision-making cannot occur under CEQA and the final EIR is inadequate as a matter of law."<sup>41</sup>

CBE 17  
Certifying the FEIR in its current deficient state would be a complete disservice to the public. Although CBE appreciates the County's efforts to provide the statutorily mandated CEQA comment periods and deadlines, the County has nevertheless utilized the minimum amount of time authorized under CEQA for review of the FEIR. The County allowed ten short days for review of the highly dense and technical FEIR. The spirit of CEQA does not require the County to offer the least amount of time authorized by statute for review of a project, let alone a highly technical one, but should allow for the best time frame to encourage this, "intelligent weighing," of environmental consequences.

Furthermore, the overall notice that this Project afforded the community is inadequate. Several community members, a staff member at the local school, and even the Sanitary District stated that they had, "no idea," about this Project. (See e.g., FEIR at 3.1-8, 3.1-40, 3.3-175, 3.3-177, 3.3-181, 3.3-223). In addition to CEQA's notice requirements, in order to satisfy the Constitutional requirement of due process, the County should have provided actual notice to all parties that may be subject to any, "taking," such as a decrease in property values, as a result of this Project.

Conclusion

For the above reasons, the County Planning Commission prejudicially abused its discretion by failing to proceed in the matter required by law and certifying an insufficient document not supported by substantial evidence.<sup>42</sup> The Board should reject the Planning Commission's certification of the FEIR for this Project. The FEIR should be revised and recirculated.

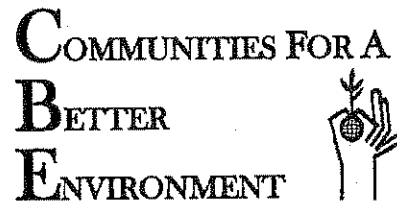
In health,

/s/

Roger Lin  
Yana Garcia  
Heather Lewis  
Attorneys for Communities for a Better Environment

<sup>41</sup> *CBE v. City of Richmond and Chevron Products Company* (2010) 184 Cal. App. 4th 70, 82-83.

<sup>42</sup> Pub. Res. Code §§ 21168, 21168.5



November 19, 2013

Via Email

Planning Commission  
Contra Costa County  
30 Muir Road  
Martinez, CA 94533

**Re: Phillips 66 Propane Recovery Project, November 2013 Proposed Final  
Environmental Impact Report, SCH #2012072046; County File #LP12-2073**

Dear Chair Terrell, Vice-Chair Snyder and Commissioners:

T  
CBE18  
Our organization ("CBE") has seen this before. In 2005, Chevron submitted an application to the City of Richmond for the Hydrogen Renewal Project at its Richmond Refinery. Chevron proposed modifications that would allow its refinery to, "modernize," and become, "more efficient." Through that environmental review process, several parties, including CBE, discovered that Chevron was obscuring the fact that these changes would in reality increase Chevron's ability to process lower quality, heavier crude oil feedstock. Nevertheless, the final Environmental Impact Report ("EIR") for the Chevron project merely offered conclusory statements that such a change in oil feedstock was not likely to occur. CBE and other parties ultimately challenged the certification of that deficient EIR.

In 2010, the California Court of Appeal agreed with CBE: the Chevron EIR's conclusory terms regarding the oil feedstock quality were neither supported by facts nor any meaningful analysis. The Court of Appeal also noted that, "conflicting information developed during the EIR process," cast serious doubt on the EIR's assertions. This conflicting information included Chevron's statements to its investors regarding the company's true intention to refine lower quality oil feedstock.

Today, this Commission is faced with a strikingly similar set of facts, and a strikingly similarly deficient Final Environmental Impact Report for the Phillips 66 Propane Recovery Project ("FEIR" for the "Project"). Two refinery experts, Greg Karras and Phyllis Fox, have submitted separate comments to your agency, agreeing on and detailing the same concern that the Project is part of a larger project, masking a true intention to process a lower quality oil feedstock at the Phillips 66 Rodeo Refinery. Just as in the Chevron case, refinery experts identify the need for more information and a more detailed and adequate project description in order to fully analyze and set forth necessary mitigation measures as required by the California

1904 Franklin Street, Suite 600 • Oakland, CA 94612 • T (510) 302-0430 • F (510) 302-0437

Southern California: 6325 Pacific Blvd., Suite 300 • Huntington Park, CA 90255 • T (323) 826-9771 • F (323) 588-7079

Environmental Quality Act ("CEQA"). Despite the information contained in these two expert comment letters, however, the FEIR, fails to state any information to either debunk or verify these experts' concerns. For instance, Karras' Comment 15 illustrates that, in order to meet the Project's stated goals and objectives, the refinery would have to commit to, 'continued coking of the highest-density part of the crude resource,' or otherwise risk smaller profit margins. To this, the FEIR merely offers the conclusory response that no change in crude slate is proposed or needed. The FEIR offers no additional relevant support or evidence. Rather, the FEIR states in response, 'feedstock selection is determined by maximizing profit around gasoline and diesel production.' Meanwhile, recall public statements made to investors by Phillips 66 Chief Executive Officer, Greg Garland, which include: "the single biggest lever we have to improve value in our refining business is through lowering our feedstock costs." As highlighted in CBE's Comments, Phillips 66 management signals its intent to bring this "advantaged crude" directly to its Rodeo refinery. It is remarkable that the FEIR does not address Karras' identified, "commitment," to heavier crude, but instead makes this broad, yet telling, statement regarding crude slate.

CBE 18  
The FEIR completely fails to acknowledge, much less analyze the meaning behind investor targeted statements, such as the one quoted above. Master Response 2.2 suggests that there is no definition for "advantaged crude." However, Phillips 66 itself offers that definition, which includes, "heavy crude oil from Canada."<sup>1</sup> In fact, the company elaborates to its investors: "(the) opportunity that we have...is to get...Canadian crudes down into California...We're looking at rail to barge to ship, down to the West Coast refineries..."<sup>2</sup> This lower quality oil feedstock implicates greater pollution and worker safety hazards, both of which are not adequately discussed in the FEIR.

Evidently, the same conflicting information and investor targeted comments that made the Chevron EIR inadequate also plague this current FEIR. Furthermore, the County's actions during this review period draw the Project's true intentions into question. In the same Chevron case, the City of Richmond failed to include the baseline and post-project crude oil quality data in the project EIR. In response, the California Attorney General strongly advocated for a, "crude cap," imposing a limitation on the conditional use permit precluding Chevron from altering its crude slate mix. Even the Court of Appeal found the lack of such a "crude cap" especially persuasive, which would have resolved the crude quality issue for many, if not all of the parties. The County's failure to include a similar condition of approval for Phillips 66 and this Project, a condition that could have resolved this issue, and would certainly not have been met with the company's objection if it did not obviate any true intention, highlights the fact that the County cannot guarantee against the refining of lower quality oil feedstock as a result of the Project.

The FEIR is fundamentally flawed. The County cannot issue a valid land use permit until it cures these flaws. As a result of the FEIR's fundamental shortcomings, certification of the FEIR as written will completely trample principles of public participation embedded in the

<sup>1</sup> Phillips 66's definition for "advantaged crude" is included in the same document that CBE cites to, regarding Garland's investor comments, in CBE's Comments on the Draft EIR.

<sup>2</sup> September 12, 2013 Transcript, pdf 7: Available at:

[http://www.phillips66.com/EN/investor/presentations\\_ccalls/Documents/Barclays\\_091213\\_Final.pdf](http://www.phillips66.com/EN/investor/presentations_ccalls/Documents/Barclays_091213_Final.pdf).

CBE 18  
language and spirit of CEQA. 'If a final EIR does not adequately apprise all interested parties of the true scope of the project for intelligent weighing of the environmental consequences of the project, informed decision-making cannot occur under CEQA and the final EIR is inadequate as a matter of law.'<sup>3</sup> Therefore, certifying the FEIR in its current deficient state would be a complete disservice to the public. Although CBE appreciates the County's efforts to provide the statutorily mandated CEQA comment periods and deadlines, the County has nevertheless utilized the minimum amount of time authorized under CEQA for review of this FEIR. The County allowed ten short days for review of the highly dense and technical FEIR. The spirit of CEQA does not require the County to offer the least amount of time authorized by statute for review of a project, let alone a highly technical one, but should allow for the best time frame to encourage this, "intelligent weighing," of environmental consequences.

Ten days to review such an extensive and technical document is hardly likely to yield any sufficient information to satisfy the concerns of CBE's members. This letter represents but a fraction of our organization's concerns regarding the FEIR's responses that barely address our comments to the Project's draft EIR. Moreover, the County is now in receipt of updated comments regarding the FEIR by Greg Karras, and the comments of Phyllis Fox prepared for Shute, Mihaly and Weinberger LLP on behalf of the Rodeo Citizens Association. At an absolute minimum, *the Commission should require staff to immediately revise and recirculate the FEIR.* The sooner that all parties can reach an agreement on how to revise this deficient EIR, the sooner we can come to a common understanding on how this Project should proceed.

In health,

/s/

Roger Lin  
Yana Garcia  
Attorneys for Communities for a Better Environment

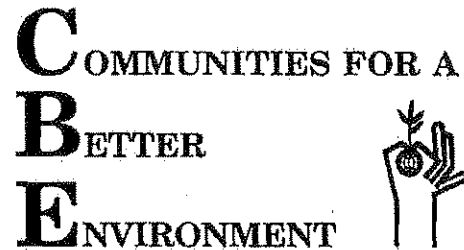
cc: Lashun Cross, Principal Planner, Contra Costa County  
Janet Pygeorge, Rodeo Citizens Association  
Laurel Impett, Shute, Mihaly & Weinberger LLP  
Diane Bailey, Natural Resources Defense Council

<sup>3</sup> CBE v. City of Richmond and Chevron Products Company, 184 Cal. App. 4th 70, 82-83 (2010).



19 November 2013

Marvin Terrell, Chair  
Planning Commissioners  
County Planning Commission  
Contra Costa County  
30 Muir Road  
Martinez, CA 94533



Re: **Phillips 66 Company Propane Recovery Project, November 2013 Proposed Final Environmental Impact Report, SCH #2012072046; County File #LP12-2073**

Dear Chair Terrell and Commissioners,

Communities for a Better Environment (CBE) respectfully renews our request that this Environmental Impact Report (EIR) be revised and recirculated for full public review. This letter addresses the treatment in the November 2013 Final EIR (FEIR) of problems CBE identified in our review of the proposed project cited above and the June 2013 Draft EIR (DEIR).

We believe that CBE and other independent experts presented substantial evidence that the project as proposed has a reasonable potential to result in significant unmitigated adverse impacts on air quality, climate, community and worker health and safety, and the San Francisco Bay.<sup>1</sup> The FEIR fails to disclose, analyze, or mitigate these significant potential impacts in large part because its project description is inadequate, as discussed in the summary below.

The project would result in burning at least 40% more fuel for energy onsite and offsite than the Rodeo facility uses now. This is directly related to its "recovery" for sale of much more LPG than data show the Rodeo facility can produce now. That is directly related to its components to bring in and process lower quality oil feeds, parts of the project the FEIR rejects disclosing.<sup>2</sup> The project needs more LPG; this refinery can get more either by increased coking of denser oils, or by importing it, or both; and the concurrent wharf, rail, and process throughput expansions at its interconnected Santa Maria and Rodeo facilities—enabling it to bring in more tar sands dilbit and coke the bitumen in it while importing LPG in its carrier diluent—would do both.

In this respect the project is what Phillips' top management say they are building: a delivery mechanisms for refining more tar sands oil here. And it would be done largely with repurposed, existing, and in critically important cases outdated, dangerous, and harmful technology.

<sup>1</sup> See expert reports submitted by Greg Karras and Phyllis Fox on behalf of CBE and the Rodeo Citizens Association for details and documentation of the evidence summarized here.

<sup>2</sup> The FEIR's insistence that the project will have no effect on oil feedstock one way or the other appears to be little more than a smokescreen. It provides no data for its claim that the facility already produces so much LPG, ignores the fundamental engineering fact that feedstock and products are key process variables that are interrelated, and defines its view of the "project" so narrowly as to exclude the refinery's key activities that provide the LPG.

Chair Terrell and Commissioners

19 November 2013

Page two

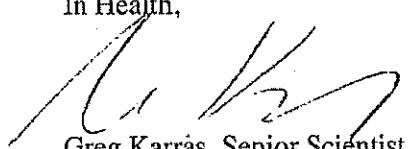
Apparently to cut corners on cost, the project proposes to store the LPG under pressure in vulnerable locations where it could explode catastrophically instead of using cooled storage. County HMP staff want to see this analyzed to find and require the *inherently safer* system. But under their current Industrial Safety Ordinance authority, they must wait until after it is built—which could be too late for safer alternatives that are feasible now. The EIR can and should include this “Documented Inherently Safer Systems Evaluation,” and the feasible safer system as mitigation, before the project is built, when it is not too late, but the FEIR actually argues against doing so.

CBE 19  
Also apparently to cut cost (on the downtime of the Rodeo coking unit for tie-ins), the project proposes to expand a cooling system so outdated and harmful to the Bay that no other refinery in the region has used it for decades. So potentially harmful, in fact, that state water quality officials ordered Phillips to study replacing it *before* this project proposed expanding it. Phillips’ study that was so ordered is signed and submitted—and it shows replacing the cooling system is feasible—but the FEIR supports expanding the old system, which would foreclose replacing it. As to Phillips’ study admitting it is feasible to replace this antiquated system instead of expanding its harm, CBE submitted it with our comments, but the FEIR appears to deny that it exists.

Instead of revealing the substantial evidence for the many significant, and apparently avoidable but as-yet unmitigated, potential impacts that independent experts have documented, the proposed FEIR omits it. Worse, the FEIR reacts to comments documenting these material facts by arguing against disclosing them, and continuing its errors of omission. This hides the scope of the project and its environmental implications from public review. Some fifty examples of these serial omissions, from the FEIR “responses” to the project description section of CBE’s expert report alone, are attached hereto and incorporated into this letter by reference.

CBE respectfully submits that the proposed FEIR is deficient and must, properly, be revised and recirculated for full public review.

In Health,



Greg Karras, Senior Scientist  
Communities for a Better Environment (CBE)

Attachment: Table A. Summary of FEIR responses to 50 omissions identified by CBE in DEIR

Copy: Refinery Action Collaborative  
Shute Mihaly & Weinberger LLP  
Interested organizations and individuals

CBE 20

CBE 20

**Table A. Summary of FEIR responses to 50 omissions identified by CBE in DEIR<sup>a</sup>**

	Omitted Information Identified (CBE Expert Report page #)	Provided In FEIR?	Summary of FEIR Comment on Information Request (FEIR page #)
1	Estimated project operating life, showing other EIRs provide this (4)	No	FEIR suggests a quantitative estimate would be too speculative (3.2-119)
2	Disclosure that wharf expansion would begin to implement a switch to new crude feeds at Rodeo (4)	No	FEIR claims no change in crude supply is proposed or needed (3.2-129, referencing 3.2-118, 119)
3	Data on crude feed <u>quantity</u> , explaining this must be known to evaluate the scale of impacts (5)	No	FEIR claims crude feed data are omitted because no change in crude is proposed or needed (3.2-129)
4	Data on oil <u>use</u> , explaining oil will be cracked to make much of the LPG that now will be exports (5, 6)	No	FEIR claims crude feed data are omitted because no change in crude is proposed or needed <sup>b</sup> (3.2-130)
5	Change in oil <u>quality</u> , explaining that more and/or denser oils must be coked to make enough LPG (6, 7)	No	FEIR claims crude feed data are omitted because no change in crude is proposed or needed (3.2-132, 133)
6	Disclosure of the project's reliance on dense coker feeds (7, fn 18)	No	FEIR ignores that coker products and feeds are linked. <sup>b</sup> Its argument that conflates LPG, fuel gas, and oil feed economics obscures this process fact. (3.2-132, 133, 130; see also 2-3)
7	Disclosure of project link to coker operation, as feed & products are key coking variables (7, fn 20)	No	
8	Disclosure that project locks the refinery into a lower quality crude slate than otherwise needed (8)	No	FEIR denies any project link to any changes in crude or coking operation (e.g. 3.2-132, 133)
9	Data on baseline and potential crude feed quality, explaining that another Phillips EIR provides some of this data (8, fn 22)	No	FEIR ignores this explanation, denies any project link to any changes in crude or in coker operation (3.2-132 through 3.2-135)
10	Disclosure of upstream process changes linked to project (8, fn 22)	No	FEIR refers to these projects without disclosing this link (2-4)
11	Disclosure of Phillips' stated intent to refine more tar sands at SFR (12)	No	FEIR refers to the statements without disclosing their content (2-3)
12	Data on changes in the composition of fuels burned (12, 13)	No	FEIR says there is no basis to analyze this data (3.2-135, citing 3.2-121)

CBE 20

<b>Table A (page two).</b>		
<b>Omitted Information Identified (CBE Expert Report page #)</b>	<b>Provided In FEIR?</b>	<b>Summary of FEIR Comment on Information Request (FEIR page #)</b>
13 Data on combustion equipment that could be affected by changes in the heat content of refinery fuels (13)	No	FEIR claims no basis to analyze this (3.2-135, citing 3.2-121); elsewhere, it admits this change in heat content.
14 Disclosure of activities that could increase SO <sub>2</sub> emissions using emission reduction credits (ERCs) that were proposed as part of this project in February 2013 (13, 14)	No	FEIR claims no basis for this analysis (3.2-135, citing 3.2-121). Note that page 3.2-119 refers to responses that do not address proposed or future ERCs resulting from <u>this</u> project.
15 Amount of heat the project would dump in the Bay (14 paragraph 27)	No	FEIR does not respond to this request (see 3.2-57, 3.2-135 through 138)
16 Disclosure of NPDES findings showing EIR inflated once-through cooling (OTC) system baseline (14)	No	FEIR omits these multi-year findings, asserting only a one-year value, with no data to verify this value <sup>b</sup> (3.2-135)
17 Temperature of OTC water exiting processing prior to onsite heat loss before discharge (15, fn 47)	No	FEIR does not respond to this request (see 3.2-58, 3.2-135 through 138)
18 Disclosure of a discrepancy between maximum heat the DEIR says project will create and the heat the OTC expansion could carry (15)	No	Instead of disclosing this discrepancy the FEIR obfuscates it by arguing (wrongly) that it is based on average heating (3.2-136)
19 Cooling system design data to confirm whether the discrepancy between project heat and cooling capacities will be used for increased process heat or decreased use of existing cooling towers (15, 16)	No	FEIR conflates the need for these data to confirm how the extra cooling capacity could be used with its argument that no change in crude feed is proposed or needed (3.2-136)
20 Disclosure that OTC is antiquated, no longer used by other Bay Area refineries, and being phased out by power plants (16)	No	FEIR rejects need for this disclosure claiming comparison to technology used by other refiners is outside the scope of the project (3.2-136)
21 Disclosure of a state order to evaluate replacing the OTC system the project would expand (16)	No	FEIR rejects need for this disclosure, saying that it would be "speculative" to report the state's rationale for its order (3.2-137, 3.2-122)

CBE 20

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<u>Table A (page three).</u>		
<u>Omitted Information Identified (CBE Expert Report page #)</u>	<u>Provided In FEIR?</u>	<u>Summary of FEIR Comment on Information Request (FEIR page #)</u>
Disclose and discuss the report by Phillips, required by the state order, indicating that OTC can be replaced at Rodeo (16; CBE attached report)	No	Although a signed copy was provided by CBE, the FEIR rejects discussing this report, claiming (wrongly) that its findings do not yet exist (3.2-137)
Evaluate project impacts from continuing to operate OTC that could otherwise be replaced (17)	No	FEIR argues that it need not evaluate these impacts because the project proponent proposes to expand OTC (3.2-121, 122, 123, 127, 136, 137)
Describe the potential biological effects of OTC expansion (18)	No	FEIR ignores the need for this analysis, and instead argues that:  (1) NPDES requirements will ensure against impacts; and  (2) the DEIR did not overestimate (inflate) the project baseline. <sup>b</sup>  In addition, the FEIR adds a reference to a second old (2006-2007) biological monitoring study <sup>b</sup> (3.2-137, citing 3.2-121/122/123)
Identify the limitations of OTC biological monitoring studies (18)	No	
Discuss the extent to which a 2006 study referenced in the EIR addresses these limitations (18)	No	
State whether that study collected any biological samples (19)	No	
Clarify that this 2006 study could not have measured effects of future, expanded OTC flow (19)	No	
Explain that a large enough volume of 80–110 °F thermal waste would harm fish adapted to cooler (≈55 °F) water near the OTC (19)	No	FEIR argues instead that NPDES limits should be assumed to protect against project impacts, including impacts at the shoreline outfall where OTC thermal waste discharges (3.2-137, 3.2-138)
Disclose that the thermal waste receives little or no dilution, greatly exacerbating its localized impact, and NPDES limits allow that (19)	No	
Correct the false statement in the DEIR that “the NPDES permit establishes maximum once-through volumes” (20)	Yes	FEIR acknowledges the error and proposes corrected text; it does not, however, change its incorrect reliance on NPDES requirements (3.2-138)

CBE 20

<b>Table A (page four).</b>		
<b>Omitted Information Identified (CBE Expert Report page #)</b>	<b>Provided In FEIR?</b>	<b>Summary of FEIR Comment on Information Request (FEIR page #)</b>
32 Disclose 2000–2011 effluent trends from NPDES findings showing that OTC flow is not, in fact, limited by NPDES requirements (20)	No	Despite admitting its flow limit error, the EIR fails to disclose data showing NPDES requirements do not ensure against new OTC impacts (3.2-138)
33 Identify the species of threatened or endangered fish “potentially at risk of being entrained” in the OTC (21)	No	FEIR ignores the need for this information, arguing that “the baseline condition for the proposed Project includes the permitted use of” OTC, and asserting (wrongly) that these potential impact statements, quoted from the DEIR, are only CBE’s opinions (3.2-138)
34 Identify the species of threatened or endangered fish that “could be subjected to increased risk of injury, death, or habitat reduction at effluent discharge locations” (21)	No	
35 Include & describe the documented Process Hazard Analysis that is required by the Industrial Safety Ordinance (ISO) for the project (21)	No	FEIR labels this request as an “introductory statement of the commenter’s opinion” to which it need not respond, then refers to other “basic information” in the DEIR and to its responses to comments about crude oil, but does not respond to the need for this information and analysis (3.2-138, citing 3.2-117, 3.2-120)
36 Include & describe the documented Inherently Safer Systems evaluation that is required by the ISO for the project (21; see also 23)	No	
37 Disclose some project LPG would be stored at a shoreline plot at high risk for soil liquefaction (22)	No	FEIR wrongly labels this request as a claim of a “larger project,” reasserts its argument about that separate issue, refers to “regulatory background” in the DEIR, and argues other requirements will ensure the needed analysis “prior to startup” of the project built.  The FEIR does not address the need for the information requested—and it ignores that its argument <u>supports</u> evaluating the potential for a safer design to be precluded if that design is not addressed in the EIR.  (3.2-138/139, citing 3.2-121)
38 Evaluate probability of catastrophic LPG storage failure based on site-specific (not only based on average worldwide) conditions (22)	No	
39 Evaluate catastrophic incident consequences for workers (23)	No	
40 Disclose and evaluate the potential that a feasible safer design might be precluded after the project is permitted and built (23; see also 26)	No	

CBE 20

Table A (page five).			
	Omitted Information Identified (CBE Expert Report page #)	Provided In FEIR?	Summary of FEIR Comment on Information Request (FEIR page #)
41	Disclose that there is no exemption from Inherently Safer Systems requirements based on cost alone; correct the error in the DEIR that implies such an exemption (23)	No	FEIR refers to the same argument directly above, referencing regulatory background that does not provide the disclosure or correction that is needed (3.2-139, citing 3.2-121)
42	The EIR failed to include & discuss the Human Factors Evaluation the ISO requires for this project (24)	No	FEIR argues (wrongly) that there is no specific problem identified by this comment  (3.2-139, citing 3.1-7)
43	The EIR does not discuss the Safety Culture issue involved in recent disastrous refinery incidents (24)	No	
44	Describe and discuss the frequency, magnitude, and consequences of safety incidents reported at U.S., California, and Bay Area refineries since 1999 (24)	No	FEIR argues that, while interesting, this information "does not address any concern or issue specifically related to the DEIR" (3.2-139)
45	Identify & describe the impacts of selling project LPG for purposes that include burning it offsite (24)	No	FEIR sets up a smokescreen that attempts to conflate these reasonably foreseeable indirect impacts with "lifecycle" emissions, then it argues (illogically) that the LPG produced by the project could be used offsite even if the project is not built, and finally asserts (absurdly) that such emissions "would not be caused by the proposed Project"  (3.2-139, citing 3.2-124)
46	Correct the error in the DEIR that assigns offsite emissions from burning project LPG a value of zero in the DEIR's impact analysis (25)	No	
47	Describe and evaluate potential offsite emissions from burning project LPG in relation to the EIR's stated significance thresholds (25)	No	
48	Evaluate the amount of petroleum coke, which is created as a byproduct along with project LPG and is an extremely dirty-burning fuel, that could be burned as fuel both in the refinery and offsite (25)	No	FEIR argues this request is "a broad summary" that "fails to identify alternatives to the Project," and argues that the project described in the EIR does not propose to modify coking operations (3.2-139, citing 3.2-118, 2-2 through 2-4)

CBE 20

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<b>Table A (page six).</b>		
<b>Omitted Information Identified (CBE Expert Report page #)</b>	<b>Provided In FEIR?</b>	<b>Summary of FEIR Comment on Information Request (FEIR page #)</b>
The DEIR does not explain that the company's Rodeo Facility (RF) and Santa Maria Facility (SMF) are two parts of one integrated refinery, the San Francisco Refinery (SFR) (25)	No	The FEIR fails to disclose integration of the SMF and RF into one SFR, and argues (wrongly) that SMF throughput increase and crude by rail projects are independent from the RF project.
The DEIR also fails to explain the extent to which this project at the RF, and the concurrent SMF expansion to increase production and pipeline shipments to Rodeo, are two parts of a single, larger, project that remains undisclosed (25)	No	It fails to disclose key parts of the SMF and RF projects that reveal their interdependence, while repeating its unsupported argument that the project will not change refinery oil feedstock or coking operation.  (3.2-139, citing 3.2-118/119, 2-2 through 2-4)

<sup>a</sup> Omissions summarized in this table are identified and discussed in CBE's Expert Report submitted on 4 September 2013. The CBE Expert Report's analysis is intensive, but is limited to the scope as set forth in the Report, and these examples are further limited to the project description section of the Report. Therefore the omissions summarized in this table represent only a sample of the serious deficiencies in the November 2013 EIR.

<sup>b</sup> With respect to the FEIR comments summarized in the table regarding "new" data not included in the DEIR, County staff responded to requests filed by CBE, as required under the California Public Records Act, stating that none of this information exists for review.



**Expert Report of Greg Karras**  
Communities for a Better Environment (CBE)  
4 September 2013

Regarding the

**Phillips 66 Company Propane Recovery Project**  
**Draft Environmental Impact Report** released in June 2013 by the  
Contra Costa County Department of Conservation and Development  
State Clearinghouse #2012072046  
County File #LP12-2073

### **Contents**

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I, Greg Karras, declare and say:

1. I reside in unincorporated Marin County and am employed as a Senior Scientist for Communities for a Better Environment (CBE). My duties for CBE include technical research, analysis, and review of information regarding industrial health and safety investigation, pollution prevention engineering, pollutant releases into the environment, and potential effects of environmental pollutant accumulation and exposure.

### **Qualifications**

2. My qualifications for this opinion include extensive experience, knowledge, and expertise gained from nearly 30 years of industrial and environmental health and safety investigation in the energy manufacturing sector, including petroleum refining, and in particular, refineries in the San Francisco Bay Area.

3. Among other assignments, I served as an expert for CBE and other non-profit groups in efforts to prevent pollution from refineries, to assess environmental health and safety impacts at refineries, to investigate alternatives to fossil fuel energy, and to improve environmental monitoring of dioxins and mercury. I served as an expert for CBE in collaboration with the City and County of San Francisco and local groups in efforts to replace electric power plant technology with reliable, least-impact alternatives.

I served as an expert for CBE and other groups participating in environmental impact reviews of related refinery projects, including, among others, the Chevron Richmond refinery “Hydrogen Renewal Project” now subject to reanalysis pursuant to a California Court of Appeals Order,<sup>1</sup> and the “Contra Costa Pipeline Project” now pending before the County.<sup>2</sup> I serve as an expert for CBE in collaboration with labor, academic, and other community based and environmental groups in a project involving comprehensive investigation of environmental health and safety impacts of, and alternatives to, refining denser, more contaminated types of crude oils.

4. I authored a technical paper on the first publicly verified pollution prevention audit of a California petroleum refinery in 1989 and the first comprehensive analysis of refinery selenium discharge trends in 1994. I authored an alternative energy blueprint, published in 2001, that served as a basis for the Electricity Resource Plan adopted by the City and County of San Francisco in 2002. From 1992–1994 I authored a series of technical analyses and reports that supported the successful achievement of cost-effective pollution prevention measures at 110 industrial facilities in Santa Clara County. I authored the first comprehensive, peer-reviewed dioxin pollution prevention inventory for the San Francisco Bay, which was published by the American Chemical Society and Oxford University Press in 2001. In 2005 and 2007 I co-authored two technical reports that documented air quality impacts from flaring by San Francisco Bay Area refineries, and identified feasible measures to prevent these impacts.

5. My recent publications include the first peer reviewed estimate of combustion emissions from refining denser, more contaminated “lower quality” crude oils based on data from U.S. refineries in actual operation, which was published by the American Chemical Society in the journal *Environmental Science & Technology* in 2010, and a follow up study that extended this work with a focus on California and Bay Area refineries, which was peer reviewed and published by the Union of Concerned Scientists in 2011. Most recently, I presented invited testimony on *inherently safer systems* requirements for existing refineries that change crude feedstock at the U.S. Chemical Safety Board’s public hearing on the Chevron Richmond refinery fire that was held on 19 April 2012. My curriculum vitae and list of publications are attached hereto.

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<sup>1</sup> See *CBE v. City of Richmond* 184 Cal\_App.4<sup>th</sup>.

<sup>2</sup> See Contra Costa Pipeline Project file, County File #LP072009, SCH #2007062007.

## Scope of Review

6. In my role at CBE I have reviewed the proposed project called the Phillips 66 Company Propane Recovery Project (project) and the June 2013 Draft Environmental Impact Report (DEIR) released by Contra Costa County for public review of the proposed project. My review of the project and DEIR reported herein is focused on catastrophic incident, flaring, air emission, cooling system, and climate impacts that could result from the project. My opinions on these matters and the basis for these opinions are stated in this report.

## Project Description

7. According to the DEIR, the project would install, at the Phillips 66 San Francisco Refinery (SFR) Rodeo facility, process equipment that would enable the refinery to treat, recover, store, and ship for sale 8,000 barrels<sup>3</sup> of additional liquefied petroleum gases (LPG) daily, including 4,200 b/d of propane and 3,800 b/d of additional<sup>4</sup> butane. This equipment would include:

- a three-reactor hydrotreater installed to the coker and related fuel gas treatment;
- three 120–140 foot tall fractionator towers and two 70 foot tall absorber towers;
- 140 MMBtu<sup>5</sup> per hour of expanded steam boiler capacity to heat this processing;
- six pressurized propane storage tanks totaling 15,000 barrels capacity; and
- two additional rail spurs and a two-sided loading rack to load eight rail cars/day.<sup>6</sup>

8. Ancillary equipment such as additional process vessels, heat exchangers, pumps, and piping would be installed, and modifications to an existing once-through system would increase Bay water use to 40,000 gallons/minute to cool the new processing.<sup>6</sup>

9. Information that is needed to understand and evaluate the environmental implications of this project has, in many cases, been omitted from the DEIR, even though the same information that the DEIR omits is publicly available from other sources. Some forty of these critically important deficiencies in the DEIR's description of the project are discussed in paragraphs 10 through 47.

<sup>3</sup> 1 barrel (b): 42 gallons; 0.159 cubic meter (m<sup>3</sup>). Conversely, 1 m<sup>3</sup>: 6.29 barrels; 264 gallons.

<sup>4</sup> The refinery already produces 5,500 b/d of butane for sale, based on the DEIR at 3-21.

<sup>5</sup> MMBtu: 1 million Btu (British thermal units); 1.00551 gigajoule (GJ).

<sup>6</sup> See DEIR at 3-21, Table 3-2, 3-27.

10. The DEIR does not disclose how long the project could be expected to operate. The omission is important because the time frame of the project must be identified to understand and evaluate potential impacts of project operation over that time.

11. There is no good reason why the time over which the project may reasonably be expected to operate should be kept secret in the DEIR. An operating life estimate must have been made to support critical equipment design specifications, such as vessel wall thickness and materials of construction to resist corrosion, and schedules for major maintenance “turnarounds.” Phillips 66 also would have used this estimate in financial analysis before committing to the project. Publicly reported data show similar refinery processes have operated for 30–50 years or more.<sup>7</sup> Another EIR for a proposed project at the Richmond refinery suggested it is “reasonable to use past history as a guideline” and to expect similar “equipment to be operated for several decades.”<sup>8</sup> Moreover, an EIR for a related project at this refinery disclosed and analyzed a 40 year project duration.<sup>9</sup>

12. Impacts of the project that would emerge later and are obscured by this omission include those from its effects on a concurrent feedstock switch. California refiners’ long-stable and dominant sources of crude oil are dwindling, driving an historic refinery crude switch. See Chart 1. Foreign crude was only 6% of total California refinery crude feed in 1990; in 2012 it was 51%.<sup>10</sup> By 2020, roughly three-quarters of the crude refined statewide likely will *not* be from currently producing sources in California or Alaska.<sup>11</sup> Because it relies on dwindling California oil supplies via pipeline for most of its crude feed,<sup>12</sup> the SFR almost certainly will be among those California refineries that switch crudes dramatically during the project’s operating life. Indeed, the refinery’s 1995 wharf project forecast this outcome,<sup>9</sup> and its recent related project to allow 67% more crude delivered via its wharf<sup>13</sup> would begin to implement the switch. Among other problems, omitting the operating life of the project obscures the project’s implications for the choice of new crudes, and the impacts of that feedstock choice.

<sup>7</sup> See BAAQMD, 2009; and BAAQMD, 2011.

<sup>8</sup> See City of Richmond, 2008. SCH #2005072117, FEIR Response to Comments, page 3.16a-1.

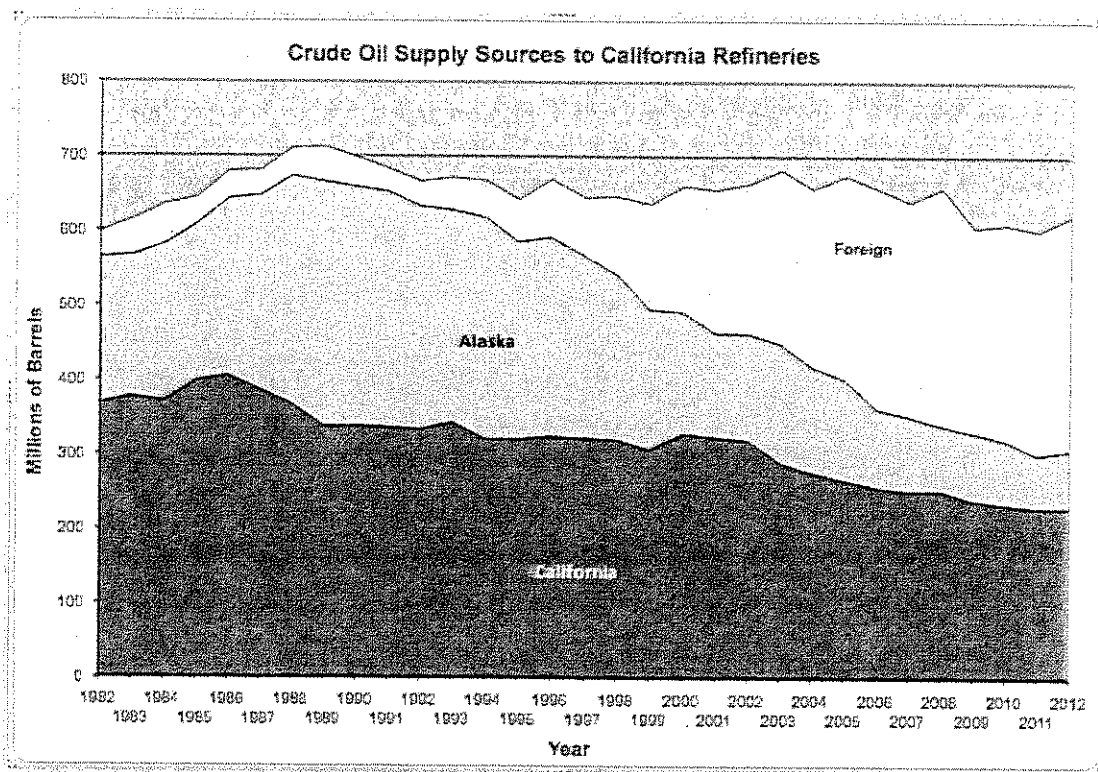
<sup>9</sup> FEIR SCH #91053082 (State Lands, 1995). See section 4 at pages S-1 (stating a 40-year project duration) and S-4 (“it is assumed that sources of San Joaquin” and “Alaskan crude, will decline” and “[m]ore reliance will be placed on crude imports from foreign sources”).

<sup>10</sup> Cal. Energy Commission ([http://energyalmanac.ca.gov/petroleum/statistics/crude\\_oil\\_receipts](http://energyalmanac.ca.gov/petroleum/statistics/crude_oil_receipts)).

<sup>11</sup> See Baker & O’Brien, 2007; and Croft, 2009.

<sup>12</sup> Based on *Oil & Gas Journal* capacity and 11.2–18.7 MMb/y wharf limit.

<sup>13</sup> Based on 11.2 vs 18.7 MMb/yr (DEIR at 5-4); see also ERM & BAAQMD, 2012.



**Chart 1. Crude oil supply sources to California refineries, 1982–2012**

California Energy Commission ([http://energyalmanac.ca.gov/petroleum/statistics/crude\\_oil\\_receipts](http://energyalmanac.ca.gov/petroleum/statistics/crude_oil_receipts)).

13. The DEIR does not report the crude oil quantity processed by the refinery. Its crude throughput ( $\approx 120,000 \text{ b/d}^{14}$ ) must be known to understand and evaluate the scale of environmental impacts resulting from project effects on crude processing.

14. The DEIR does not disclose the changes in crude oil use that could result from the project. Data summarized in Table 1 suggests that meeting project objectives would increase the refinery's total LPG production for export sales to 11.2% of its total crude feed volume, 230–570% of the butane yield from initial distillation of its total crude feed, and 450–1,200% of the propane yield from distilling that crude.<sup>15</sup> This change in

<sup>14</sup> San Francisco Refinery (SFR) crude capacity in b/cd; volume that can be processed during 24 hours after making allowances for types and grades of inputs and products, environmental constraints and scheduled downtime (*Oil & Gas Journal*, 2012). This value is close to those the company reported to air and water officials (see Phillips, 2012b; SFR NPDES permit orders).

<sup>15</sup> See data in Table 1. LPG production from DEIR at 3-21. Total post-project butane export is included because project equipment would replace existing processing for production of butane that is now exported and would not change existing crude distillation equipment to change LPG yield from crude distillation. See also EIA Refinery Yield: Monthly average U.S. refinery LPG yield ranged from 1.8–5.7% on crude volume during January 1993–May 2013.

processing would affect refinery production and create environmental impacts in several ways the DEIR does not describe:

- The location of emissions from LPG combustion would change. LPG now used as refinery fuel that is self-produced from crude would be removed from refinery fuel gas and sold for uses involving combustion at a different location.
- Fuel gas heat content would decline, as more LPG is removed from fuel gas and replaced with natural gas, which has a lower heat content. This could affect combustion sources, fuel gas balance, and flare gas recovery refinery wide. Effects from this fuel gas quality problem are different from, and could occur regardless of, the fuel gas quality improvement from sulfur removal that the DEIR describes.
- The refinery would become more reliant on severe processing of the denser oils in the crude stream in order to create enough byproduct gases from “cracking” these oils to fill the LPG gap between its crude distillation yield and LPG production objectives. This would be necessary to meet project export objectives because the refinery could not otherwise create enough propane and butane, and further would be driven by the enlarged revenue and profit streams from meeting those objectives.

**Table 1. Post-project LPG production greatly exceeds refinery crude distillation yield**

	<u>Initial crude distillation yield<sup>a</sup></u>		<u>Post-project LPG production<sup>b</sup></u>	
	% vol. on crude	barrels/day <sup>c</sup>	barrels/day	% of crude feed <sup>c</sup>
Propane	0.30–0.78	360–936	4,200	3.50
Butanes	1.35–3.31	1,620–3,970	9,300	7.75

(a) Median and 95<sup>th</sup> Percentile yields from 205 publicly reported crude oil assays (*see* Crude Assays).

(b) Total post-project production for export sales based on capacity reported (DEIR at 3-21).

(c) Calculated based on reported crude capacity of 120,000 b/cd from *Oil & Gas Journal* (2012).

15. The DEIR does not disclose the change in crude feed quality that could result from the project. The configuration of this project and refinery requires coking for the additional LPG-rich byproduct gases to meet the project’s production and profit goals. Installing a catalytic cracker<sup>16</sup> or repurposing a hydrocracker would entail capital or lost motor vehicle fuels production costs that make those options conflict with maximizing LPG export profits. The U200 delayed coker is the primary source of LPG-rich gases that cannot be treated adequately by DGA (amine) processing; the project would “[i]nstall to U200” hydrotreating to provide this treatment; and the new hydrotreater’s proposed purpose in this project is to allow LPG to be recovered from coker gases.<sup>17</sup>

<sup>16</sup> The Phillips 66 SFR does not include a catalytic cracking process. *See* BAAQMD, 2013.

<sup>17</sup> Phillips, 2012b at 4; DEIR at 3-5, 3-12, 3-16, 3-21, 3-23/24/25, 6-4/5; Phillips, 2012a at 5.

Delayed coking is severe thermal cracking (415–515 °C at 15–90 psi for ≈24 hours) that is used to crack the densest oil streams processed, such as the residue from vacuum distillation of atmospheric distillation bottoms and bitumen.<sup>18</sup> Thus, the project would commit the refinery to continued coking of the highest-density part of the crude resource.

16. Importantly, denser coker feeds produce more gases and more LPG. Coking converts dense components of crude into oil streams that can be processed further to make light liquid fuels.<sup>18</sup> Named for its petroleum coke byproduct, it also creates byproduct gases with 1–4 carbon atoms (C4–), including butanes (C4) and propane (C3), which are burned as refinery fuel or, especially in the case of C3 and C4, sold as LPG.<sup>19</sup> Along with temperature, pressure, and reaction time, key process variables include feedstock properties and product targets.<sup>20</sup> Data summarized in Table 2 suggest that even at full coker capacity,<sup>21</sup> producing 8,000 b/d of LPG from refinery coker gases could require running the densest vacuum residues. Though it shows estimates only for a few possible feeds, Table 2 illustrates how, by adding an LPG export objective to its coker output, the project will drive the refinery to coking higher density feeds.

**Table 2. Denser feeds increase C4– (including LPG) yield from delayed coking**

<b>Vacuum resid feed</b>			
cut point (°C)	+482	+538	+538
density (kg/m <sup>3</sup> )	952–981	1,013	1,044
sulfur content (% wt.)	0.50–0.60	3.40	5.30
<b>C4– (including LPG) yield</b>			
C4– yield (% vol.)	10–11	15	17
<b>C4– yield at 47 kbpd</b>			
coker capacity (b/d)	4,700–5,310	6,880	7,930

**C4–: hydrocarbons with 4 carbons or less; LPG (butanes and propane) and lighter gases.**

Data from tables 7.1-2 and 7.1-6 in Meyers, 1986. C4– overestimates LPG yield. Yield converted from mass to volume assuming all C4– is LPG with 539 kg/m<sup>3</sup> density, and 967 kg/m<sup>3</sup> density coke.

<sup>18</sup> See Meyers, 1986; Speight, 1991. Heavy or aliphatics-rich synthetic crude oils (SCOs) derived from partially pre-processing tar sands bitumen or crude residua may be included in these coker feeds, and refiners have sometimes labeled such SCOs as “gas oils,” but calling them gas oil in this context is misleading. The DEIR does not disclose the project’s reliance on low-quality oils.

<sup>19</sup> Delayed coking byproducts also include mercaptans and olefins (Meyers, 1986), which the new hydrotreater would remove from coker gases (Phillips, 2012a). Mercaptans are highly odorous: the coker thus may be linked to the refinery’s notorious odor problems. These coking byproduct contaminants appear to be the reason for the new hydrotreater but are not named in the DEIR.

<sup>20</sup> See Meyers (1986) at 7-69. The DEIR does not disclose this project link to coker operation.

<sup>21</sup> 47,000 b/cd (*Oil & Gas Journal*, 2012).

17. Thus, the project's new commitment to coking denser oils in order to meet its LPG export sales objective would lock the refinery into a crude slate at least as dense as, and likely denser than, its current slate. It likely would be denser because making more LPG would drive the refinery toward coking higher-density vacuum resid and bitumen and also toward increasing coker feed rates.<sup>22</sup> This would make denser vacuum resids, bitumen, or both a larger share of the crude slate, driving the density of the crude slate up.<sup>23</sup> Worse, it would do so during a period when the refinery almost certainly must switch—and in fact is beginning to switch—to new sources for its crude supply, as discussed in paragraphs 11 and 12. The project would thereby lock the refinery into a new crude slate of lower quality than it need otherwise choose. The DEIR does not disclose this effect of the project.

18. Contamination of refinery feedstock would increase as a result of the project. Sulfur and other toxic trace elements concentrate in the densest components<sup>24</sup> of crude that the imperative to produce more coker LPG would make a larger portion of the refinery's crude slate. Imports likely to dominate the new slate in order to fill SFR coking capacity—39% of its total feed volume<sup>25</sup>—with vacuum resid feeds as dense as the high-LPG feed shown in Table 2 could boost sulfur content substantially. See Table 3. Regional trends also support this expectation. See Chart 2. Indeed, sulfur in the new slate could reach  $\approx 3\text{--}4.5\%$  wt. The DEIR omits crude quality data,<sup>22</sup> but the crude feed is not nearly that high in sulfur now.<sup>26</sup> Available information suggests that the current average Rodeo feedstock is  $\approx 915\text{--}918\text{ kg/m}^3$  in density and  $\approx 1\text{--}1.5\%$  wt. % sulfur.<sup>27</sup> The crude slate resulting from the project likely would be denser and far more contaminated.

<sup>22</sup> A separate environmental review of increased throughput rates reports some of the crude feed data that the DEIR should and could have reported, and reveals the company's plans to increase throughput rates for at least some of its upstream processing (see SMF EIR 2012 Excerpts). The DEIR does not mention or disclose this other proposed project or environmental review.

<sup>23</sup> The density of a crude oil is proportional to the volume of higher molecular weight, higher boiling point, larger hydrocarbons in that crude oil. See Karras, 2010; Speight, 1991.

<sup>24</sup> Sulfur, as well as nickel and vanadium, among other toxic elements, concentrates in the vacuum residua component of crude and bitumen. See Speight, 1991; Karras, 2010.

<sup>25</sup> SFR's 47,000 b/d of coking is 39% of its 120,000 b/d crude capacity (*Oil & Gas J.* data).

<sup>26</sup> Compare UCS (2011), ERM & BAAQMD (2012), *Oil & Gas Journal*, SMF EIR (2012) and EIA Imports Analysis: the Alaskan, imported, and San Joaquin (weighted average pipeline component) streams that comprise about three-quarters of Rodeo's slate have a combined average sulfur content of  $\approx 1\%$  wt. %: an average of 3% sulfur in this *current* slate is not plausible.

<sup>27</sup> UCS, 2011; ERM & BAAQMD, 2012; SMF EIR 2012.



Table 3. Selected data for crude oils with dense ( $\geq 1,040 \text{ kg/m}^3$ ) vacuum residue yield comprising  $\approx 30\text{--}39\%$  of the whole crude oil's total volume.

	DOE avg. <sup>a</sup> for these crude oils	Eocene <sup>b</sup> Crude (Mid-East)	Crude oils containing bitumen from tar sands <sup>c</sup>			
			Access Western	Christina Dilbit Bld.	Surmont Heavy Bld	WCS*
<b>Whole crude</b>						
density ( $\text{kg/m}^3$ )	918	945	922	923	936	929
sulfur (wt. %)	2.98	4.57	3.94	3.80	2.99	3.51
TAN (mg KOH/g)	—	0.20	1.70	1.55	1.39	0.94
nickel (ppm wt.)	—	21	72	68	51	58
vanadium (ppm)	—	59	194	179	140	141
<b>Vacuum residue</b>						
volume (% crude)	34	34	36	36	29	37
density ( $\text{kg/m}^3$ )	1,060	1,070	1,062	1,059	1,061	1,054
sulfur (wt. %)	6.04	7.35	6.49	6.21	6.07	5.56
<b>Vacuum Gas Oil &amp; Residue combined</b>						
volume (% crude)	53	68	61	60	56	63

\*WCS: Western Canadian Select. (a) Data from the U.S. Dept. of Energy, Crude Oil Analysis Database: shown is the average of all data for crude oils with residue yields that are 30–39% of crude volume, and also denser than  $1,040 \text{ kg/m}^3$  ( $n = 15$ ). (b) Data from publicly reported assays of traded oils (Chevron, 2013). (c) Data from Canadian Crude Quality Monitoring Program. See Crude Assays; DOE COA 2013, attached).

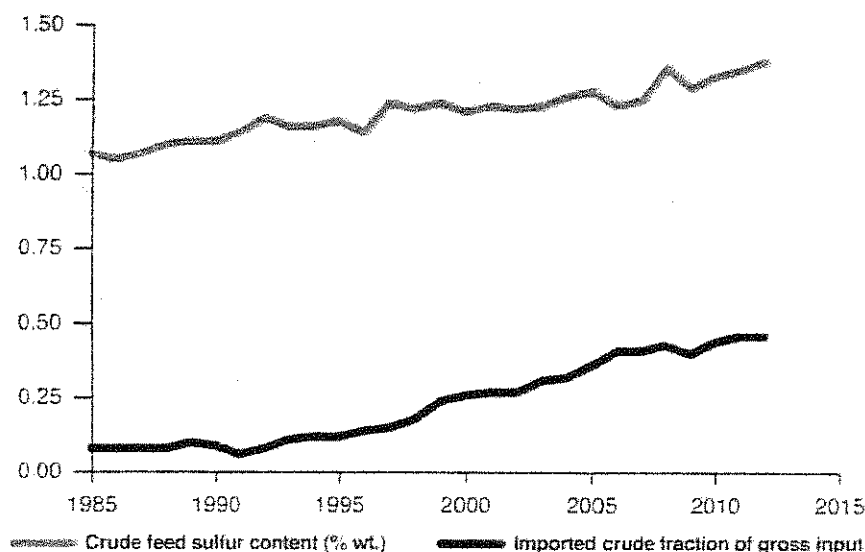


Chart 2. Sulfur and imports content of West Coast refinery crude feeds, 1985–2012

PADD 5 data from the U.S. Energy Information Administration ([www.eia.gov/petroleum/data.cfm](http://www.eia.gov/petroleum/data.cfm)).

19. This new, dense crude slate likely will include more oil derived from “tar sands” bitumen. The project would commit the refinery to coker feed-rich crude over a period when the worldwide portion of high-density crude supplied by “heavy oil” and bitumen is likely to grow dramatically.<sup>28</sup> Bitumen has already come to dominate crude production in Canada,<sup>29</sup> the largest source of U.S. crude imports.<sup>30</sup> Moreover, crude can account for up to 90% of a refinery’s operating costs,<sup>31</sup> and tar sands bitumen is price-discounted (due in part to delivery constraints),<sup>32</sup> so Phillips 66 is incented to run it, especially since the company’s affiliates produce two of the bitumen blends shown in Table 3.<sup>33</sup> Indeed, recent major projects expanded the Rodeo facility’s capacity to run more of these oils.<sup>34</sup> It now has vacuum distillation capacity to process a crude slate with atmospheric residua yield as high as 73% of the barrel, and coking capacity to process a slate with vacuum residua yield as high as 39% of the barrel,<sup>35</sup> which is more than enough to run the bitumen blends shown in Table 3.

20. Exactly what new crude blends to run is typically analyzed intensively based on many dozens of factors, but it is clear that the refinery will seek to run near capacity<sup>36</sup> and will continue to match blends of oils<sup>37</sup> to its processing capacities. Processing analysis for a blend of Western Canadian Select (WCS) and Alaskan North Slope (ANS) crude oils that the refinery could run is summarized as a hypothetical example in Table 4. In this simplified example, the refinery sells 12,000 b/d of the naphtha it distills from 120,000 b/d of WCS to other refiners, purchases 11,200 b/d of ANS gas oil, and runs its

<sup>28</sup> See Meyer et al., 2007. *Heavy oil and natural bitumen resources in geologic basins of the world*. U.S. Geological Survey Open-File Report 2007-1084; see also Kerr, 2009.

<sup>29</sup> ERCB st 98-2009. *Alberta’s Energy Reserves 2008 and Supply/Demand Outlook 2009-2018*. Energy Resources Conservation Board, Calgary. See pp. 2-6; see also *Oil & Gas Journal*, 2007.

<sup>30</sup> EIA, 2013. ([http://www.eia.gov/dnav/pet/pet\\_move\\_impcus\\_a2\\_nus\\_epc0\\_im0\\_mbb1\\_a.htm](http://www.eia.gov/dnav/pet/pet_move_impcus_a2_nus_epc0_im0_mbb1_a.htm)).

<sup>31</sup> *Interim Investigation Report, Chevron Richmond Refinery Fire*. U.S. Chemical Safety and Hazard Investigation Board. Adopted 19 April 2013. (CSB, 2013.) See page 33.

<sup>32</sup> See Fox, 2013; and Goodman, 2013. (NRDC expert reports on Valero Crude by Rail Project.)

<sup>33</sup> See Canadian Crude Monitoring Program ([www.crudemonitor.ca](http://www.crudemonitor.ca)): Christina Dilbit Blend (“produced at the jointly owned Cenovus Energy Inc. and ConocoPhillips Christina Lake SAGD facility”); and Surmont Heavy Blend (50% owned, and operated by, Conoco Phillips Canada).

<sup>34</sup> See Strategic Modernization SCH #2002122017; Clean Fuels Expansion SCH #200509028; Marine Terminal Offload Project (ERM & BAAQMD, 2012); and DEIR at 3-19/20, 5-4/5-7.

<sup>35</sup> Based on process vs. crude capacities reported as of 1/1/13 by *Oil & Gas Journal* (2012).

<sup>36</sup> U.S. refineries ran at 90% of capacity on average since 1990 ([www.eia.gov/petroleum/data](http://www.eia.gov/petroleum/data)).

<sup>37</sup> In addition to California and Alaska, the SFR processed oils from Canada and 20 other countries during 2004-2012 (EIA Imports Analysis).

Table 4. Example SFR refinery crude slate blending tar sands and conventional oils.

Crude slate	Volume (b/d)	Density (kg/m <sup>3</sup> )	Sulfur (wt. %)	Oil source
Total input processed*	119,184	952	3.40	
Naphtha (naph)	11,088	691	0.05	Western Canadian Select (WCS)
Distillate (dist)	21,096	880	1.22	WCS
Vacuum gas oil (gas oil)	31,188	954	2.97	WCS
Imported vacuum gas oil	11,184	929	1.20	Alaskan North Slope (ANS)
Vacuum residua (resid)	44,628	1,054	5.56	WCS

\* Excludes straight run (SR; from atm. distillation) naphtha exported (12,000 b/d).

	Capacity (b/d)		Throughputs(b/d)
Atmospheric distillation	120,000	WCS oils	108,000
Vacuum distillation (VDU)	87,000	SR resid	44,628
Delayed coking (DCU)	47,000	VDU resid	44,628
Hydrocracking (HCU)	58,000	VDU gas oil	40,000
distillate Hydrotreating	44,000	HCU dist	26,481
naphtha Hydrotreating	29,000	DCU naph	11,470
Reforming	31,000	DCU naph	4,470
Isomerization	9,000	DCU naph	7,000
		HCU naph	2,000
		SR gas oil*	42,372
		VDU gas oil	2,372
		DCU gas oil	14,423
		SR dist	17,519
		HCU naph	6,442
		HCU naph	15,442

\* Includes ANS oil that bypasses atm. distillation (11,184 b/d).

Sulfur balance: 613 tonnes/day enter refinery in crude  
-145 t/d leaving refinery in coke  
468 t/d recovered (82% of SRU capacity)

Crude quality data from Canadian Crude Quality Monitoring Program ([www.crudemonitor.ca](http://www.crudemonitor.ca)) and publicly reported assays for ANS crude (*Oil & Gas Journal*; ExxonMobil and BP web sites). Refinery process capacities as of 1 January 2013 from *Oil & Gas Journal* (2012). Delayed coking yield based on typical yield reported for dense (1,044 kg/m<sup>3</sup>) vacuum residua feed (see Tables 7.1-2 and 7.1-6 in Myers, 1986) and typical North American petroleum coke density (see Table S5 in Karras, 2010). Internal refinery hydrocarbon flow volumes may vary with varying volume expansion/loss effects in conversion processing. Capacities shown include the company's Santa Maria operations, which are integrated with the Rodeo operations via transfers of intermediate products, facilitating import/export logistics for refinery input blending.

vacuum distillation, coking, hydroprocessing, reforming and isomerization units at full capacity on the resultant WCS/ANS blend. This hypothetical example assumes WCS delivery, and represents but one of perhaps thousands of blends that the company might analyze closely for feedstock performance and cost containment. Nevertheless, this example shows that a new tar sands-derived crude slate could be very dense ( $\approx 952 \text{ kg/m}^3$ ) and high in sulfur ( $\approx 3.4 \text{ wt. \%}$ ).

21. Crucially, logistical costs of bringing tar sands oil into the refinery—while rail loading, pipeline, and pipeline-to-boat capacities remain bottlenecked<sup>38</sup>—emerge as a

<sup>38</sup> See Fox, 2013; and Goodman, 2013. (NRDC expert reports on Valero Crude by Rail Project.)

barrier to processing much more tar sands oil at the San Francisco Refinery. By linking a major new profit stream from LPG sales to price-discounted coker feeds such as bitumen, while expanding total rail and wharf loading capacity, the project could breach this transport cost barrier, and increase tar sands crude inputs to the refinery.

22. A Phillips 66 web page presents a map depicting crude transport routes from the tar sands region of Canada to its SFR by rail, pipeline, and ship, and quotes Chairman and CEO Greg Garland among the following excerpted statements:

“Advantaged crude sells at a discount relative to crude oils tied to the global benchmark ... [and] include[s] heavy crude from Canada ...

‘We are looking at pipe, rail, truck, barge and ship—just about any way we can get advantaged crude to the front end of the refineries,’ said Garland. ...

The next challenge for the company is identifying strategies to get more advantaged crude oil to its California refineries [which can run a wide range of crudes].”<sup>39</sup>

Separately, Garland disclosed that the company’s “opportunity to improve performance in California is really around getting advantage crudes to the front end of the California refineries, its rail, its ship, it’s *working on optimization of the cost structure and the export capabilities of those refineries.*”<sup>40</sup> (Emphasis added.) These disclosures support the evidence discussed in paragraphs 12–21 and shed some light on how expanding rail capacity, production capacity, and LPG sales revenue in a way that is locked into low-quality crude feeds could “optimize the cost structure” for getting cheap tar sands oil to the refinery. The DEIR omits these disclosures.

23. Among other problems, denser and more contaminated crude feeds can greatly increase refinery energy intensity, air emissions, toxic pollutant releases, flaring, and catastrophic incident risk. The DEIR does not disclose or describe these impacts.

24. Changes in the fuel burned to heat, pressurize, and power refinery process equipment that would result from the project are not described adequately in the DEIR. It acknowledges a substantial shift in fuels to be burned but does not report the chemical composition of the current mixture of gasses burned or the changed mixture to be

<sup>39</sup> See: <http://www.phillips66.com/EN/newsroom/feature-stories/Pages/AdvantagedCrude.aspx>.

<sup>40</sup> Thomson Reuters DECEMBER 13, 2012 / 01:30PM GMT, PSX – Phillips 66 First Annual Analyst Meeting. ([www.streetevents.com](http://www.streetevents.com)).

burned. Some of this fuel gas composition data is available,<sup>41</sup> but it is not included in, or analyzed by, the DEIR. The mixture of chemicals burned must be identified and analyzed to support complete and reliable estimates of project air emissions.

25. Similarly, as the project causes the refinery to burn more fuel for energy it lowers the fuel's heat content, changing combustion conditions when it is burned. The DEIR provides no information about changes in the equipment that would burn this changed fuel refinery wide. For example, it is troubling that the company first asserted the lower heat content of refinery fuel gas "will require alterations to the burners of 19 heaters to operate efficiently," but now asserts that "no changes to any burners are required at this time," without providing design capacity data for its burners requested by air officials.<sup>42</sup> The DEIR does not mention this issue or correspondence, but this type of data on combustion equipment that could be affected by project fuel changes must be reported and analyzed to support a complete and reliable analysis of project impacts on flaring.

26. The DEIR does not disclose a part of the project that would enable emission increases that could cancel out its claimed SO<sub>2</sub> emissions reduction. Phillips 66 seeks "emission reduction credits" that could be banked and then used later, allowing the refinery to increase emissions by the credited amounts. In its application for air permits submitted for this project eight months ago, the company references the SO<sub>2</sub> emission reduction associated with the project that also is asserted in the DEIR, and then states:

"Phillips 66 requests 174.7 tons per year of SO<sub>2</sub> emission reduction credits (ERCs) for this reduction. Of this amount, 7.61 tpy will be used to offset project SO<sub>2</sub> increases so that there will be no net increase in SO<sub>2</sub> emissions from the project (see Table 3-1). The remaining 167.1 tpy of SO<sub>2</sub> (174 tpy minus 7.61 tpy) will be banked as ERCs."<sup>43</sup>

This part of the project, to increase emissions later, and this "no net increase" claim, contradict the DEIR's unqualified assertion that the project will result in reducing refinery wide SO<sub>2</sub> emissions "by at least 50%."<sup>44</sup> The DEIR does not propose any condition of approval requiring that the promised refinery wide emission reduction be

<sup>41</sup> See project Air Permit Application attachments A-4 and A-7 (Air Permit App Atts A 4 & 7).

<sup>42</sup> See Phillips' letters of 30 April 2013 (page 1) and 28 June 2013 (page 14) responding to BAAQMD letters of 1 March and 21 May, 2013 advising that its air permit application for the project is incomplete, and presenting numerous data requests (Air Permit Correspondence).

<sup>43</sup> Air Permit Application at 17, Section 3.4 (Air Permit App Sections 1-3).

<sup>44</sup> DEIR at ES-2, 3-5, and 4.3-19.

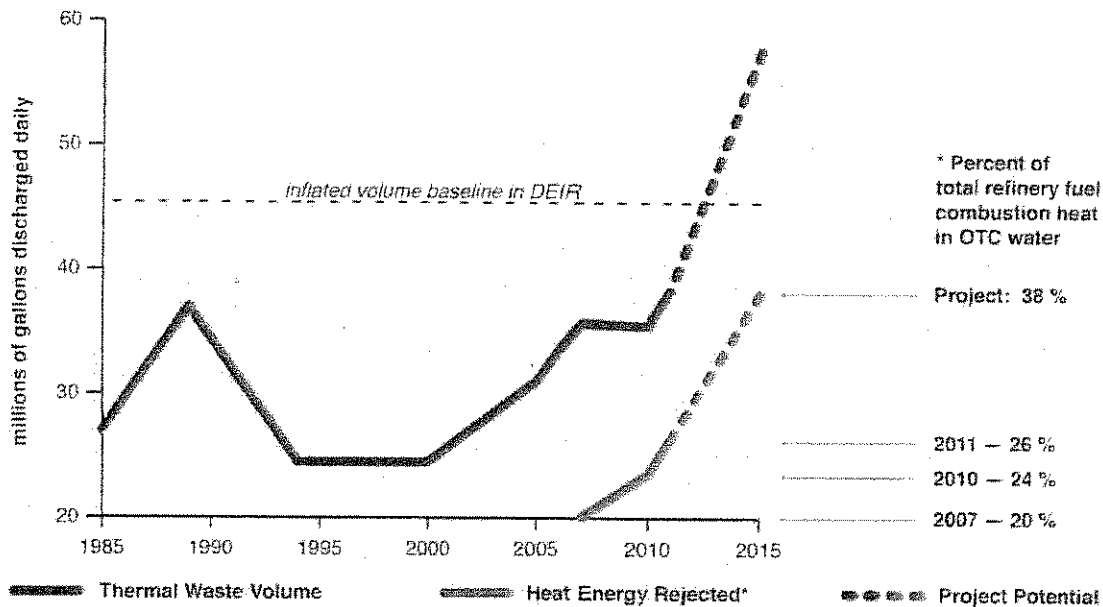
permanent. It does not identify the now-apparent link, between undisclosed future activities, and this project that could allow those future activities to pollute. It does not evaluate what those activities entail, whether they are part of the project or related to it in other ways as well, why the future rebound in emissions seems necessary, how soon it might occur, or how long it might last. Omitting plans to enable emissions that the DEIR is at the same time asserting will be cut appears misleading. In any case, this part of the project conflicts with the project objective to reduce emissions that is stated in the DEIR.

27. Waste heat from burning fuel to operate the project would be transferred to San Francisco Bay by expanding “once-through cooling” (OTC) that sucks Bay water into the refinery and discharges it back to the Bay as thermal waste. The DEIR does not report how much more heat the project would dump into the Bay. Moreover, its analysis of Bay water use, which *should* indicate the extent of thermal and other impacts of the OTC expansion, underestimates the potential increase in OTC water and heat flows.

28. According to the DEIR, the OTC expansion to 57.6 million gallons/day (MGD) represents an increase of 12.2 MGD from a project baseline OTC flow of 45.4 MGD.<sup>45</sup> The DEIR asserts this 45.4 MGD baseline without any supporting documentation, but NPDES findings omitted from it show that average OTC flow never approached 45.4 MGD since at least 1985. See Chart 3. Further, the refinery was required to estimate impacts of related prior modifications on its OTC flow and estimated they would increase it to only  $\approx 35.4$  MGD.<sup>46</sup> Permit review analysis of post-modification continuous monitoring data to check on that estimate found OTC flow of  $\approx 35.5$  MGD in 2010, and by mid-2011 this monitoring showed a long-term average OTC flow of  $\approx 38.3$  MGD.<sup>46</sup> This evidence shows that the 45.4 MGD DEIR estimate inflates the project’s OTC baseline. Based on the proposed OTC expansion to 40,000 gpm (57.6 MGD) and the most recent NPDES long-term average OTC flow (38.3 MGD), the project could use  $\approx 19.3$  MGD of Bay water. This more accurate OTC flow increment (19.3 MGD) exceeds the increment the DEIR calculated from its inflated baseline (12.2 MGD) substantially.

<sup>45</sup> DEIR at 3-27; see also Phillips, 2012b at 23–24: The same 40,000 gpm post-project total and 8,500 gpm increase on a purported 31,500 gpm baseline is asserted without documentary support in both, but 40,000 gpm is the proposed OTC rate that would be implied by project approval.

<sup>46</sup> NPDES Permit R2-2011-0027 at F-53 and Finding II. B. 3; see also Table E-5.



**Chart 3. Rodeo facility combustion heat transfer to S.F. Bay.** Thermal waste 1985–2011 volume data from NPDES orders R2-1985-029, 1989-002, 1994-129, 2000-015, 2005-0030 and R2-2011-0027; project potential volume from DEIR. Heat energy rejected is shown as a percentage of total refinery fuel energy (DEIR tables 4.6–1, 4.6–2) and is estimated based on volume entering OTC at 55 °F (Reg. Monitoring Program, Davis Pt. Oct–June avg.) and exiting processing at 110 °F before heat loss to the atmosphere and mixing in the retention system upstream of the outfall, and the specific heat of water (4.1868 J). Project potential heat percentage based on 2011 fuel use plus 140 MMBtu/hr for project steam.

29. Total heat rejected by OTC would grow, from  $\approx 6.3$ – $6.8$  million gigajoules/year during 2007–2011 to  $\approx 10.2$  MM GJ/yr as a result of the project.<sup>47</sup> Waste heat rejected by the project flow increment ( $\approx 3.4$ – $3.9$  MM GJ/yr) would greatly exceed the total energy of additional fuel the DEIR states the refinery could burn for the project (1.23 MM GJ/yr).<sup>48</sup> Consequently, refinery wide reliance on OTC to reject waste heat would grow, from  $\approx 20$ – $26\%$  of all fuel energy burned in the facility during 2007–2011, to  $\approx 38\%$  of post-project refinery energy use.<sup>49</sup> See Chart 3. The DEIR does not identify or explain the discrepancy between the fuel it says the project would burn and the heat its expanded OTC could carry, and it does not disclose this increased refinery wide reliance on OTC.

<sup>47</sup> 1 gigajoule (GJ): 1 billion joules; 0.994 MMBtu. Waste heat rejected estimated as summarized in the caption of Chart 3. Note that the DEIR does not report the temperature of water exiting processing before entering the retention basin and mixing with other flows around the splitter; it states only that heat loss in those upstream steps will keep the OTC discharge at E-002  $\leq 110$  °F.

<sup>48</sup> Based on 140 MMBtu/hr expanded steam boiler capacity (see DEIR at 3-20; 3-21) at 100% utilization. Note that even the DEIR's underestimated OTC flow ( $\approx 2.16$  MM GJ/yr) would reject more heat than this expanded boiler firing would add: the DEIR does not identify the discrepancy.

<sup>49</sup> Based on annual fuel use in DEIR at 4.6-2, and project adding 140 MMBtu/hr to 2011 fuel use.

30. This increased reliance on OTC to carry heat from as-yet unidentified sources is consistent with an undisclosed increase in firing rates to process denser, higher sulfur crude feeds—which are known to increase refinery energy intensity.<sup>50</sup> It is consistent, also, with a shift from existing cooling towers to OTC—which might yield savings on cooling tower makeup water and chemicals.<sup>51</sup> Confirming or quantifying either or both possibilities may require cooling system design information that the DEIR does not provide. Regardless of its specific uses in cooling the refinery, however, the project's expansion of OTC would conflict with ongoing efforts to phase out and replace OTC.

31. In 2010 California adopted the Statewide Water Quality Control Policy on the Use of Coastal and Estuarine Waters for Power Plant Cooling.<sup>52</sup> Among other things, this policy required power plant cooling systems to reflect the best technology available, encouraged them to use recycled water instead of estuarine water, and required most plants to cease OTC for units “not directly engaged in power-generating activities or critical system maintenance” by October 2011.<sup>52</sup> Importantly, oil refining is not addressed specifically by this policy at least in part because most California refineries replaced OTC with “closed loop” cooling towers long ago. In fact, the Rodeo facility is the only one of the five refineries lining the Bay that still uses this antiquated cooling technology<sup>53</sup>—and it has been since the Richmond refinery phased out and replaced OTC in the 1980s. The DEIR does not discuss this crucial context.

32. Work that could lead to phasing out and replacing OTC at the refinery has been ordered by the California Regional Water Quality Control Board. The Board ordered the refinery to prepare an engineering evaluation of replacing OTC, including a “conceptual design for a closed loop cooling tower system, including estimated costs (capital and operation) and construction timetable.”<sup>54</sup> Phillips' 2012 response reported locations where two cooling towers could be built to replace OTC, conceptual designs for them, and estimated capital (\$50 MM) and operating (\$5.5 MM/yr) costs.<sup>51</sup> For context, this estimate suggests that the annualized cost over ten years represents only 0.2–0.3 % of the refinery's annual cost for \$75/b–\$115/b crude. The DEIR does not include or discuss this state order to evaluate replacing OTC or this refinery report indicating it can be done.

<sup>50</sup> See Karras, 2010; Bredeson et al., 2010; Brandt, 2012; Abella and Bergerson, 2012.

<sup>51</sup> See *Cooling Tower Replacement Feasibility Evaluation* (Phillips Cooling Tower).

<sup>52</sup> As adopted by the State Water Resources Control Board on 1 October 2010 (SWRCB, 2010).

<sup>53</sup> Chevron R2-2011-0049; Shell R2-2012-0052; Tesoro R2-2010-0084; Valero R2-2009-0079.

<sup>54</sup> NPDES Permit R2-2011-0027 at Provision VI.C.2.f.



33. Evidence discussed in paragraphs 27–32 indicates that, by building onto and expanding the existing OTC system at the refinery, the project would foreclose an opportunity to replace OTC in the near term, and would instead continue and expand the use of this antiquated cooling technology. It would thereby result in the continuation of adverse impacts on aquatic life in San Francisco Bay that could otherwise be eliminated, in addition to the impacts from project increases in OTC flows. However, the DEIR seeks to evaluate only impacts from its (under)estimate of the increased OTC flow rate, further underestimating the project's potential impacts on the Bay.

34. Once-through cooling harms aquatic ecosystems by injuring or killing biota and degrading their habitats via entrainment,<sup>55</sup> impingement,<sup>56</sup> and thermal pollution.<sup>57</sup> In operation at design temperature, the severity of system- and site-specific impacts is generally proportional to OTC flow. Clearly adverse impacts have been documented from entrainment and at shoreline thermal discharge sites in San Francisco Bay,<sup>58</sup> but monitoring studies have yet to measure the full ecological impact of site-specific OTC applications. This is in part because of practical limitations in scientific tools. For example, reviews of a series of Bay OTC impact studies<sup>59</sup> found:

- Sampling techniques can be too aggressive for some species that become mutilated and unidentifiable or too passive to capture and account accurately for other species.
- Perceptions about the cost of comprehensive sampling lead to excluding many species or life stages—such as phytoplankton, invertebrates, eggs, and species present in very low abundance—and to attempts to measure “surrogate” species instead.
- Similarly, multi-year sampling is seldom done, but interannual variability changes the occurrence and abundance of many species affected by OTC in estuaries like the Bay.
- Sampling and data management designs must anticipate seasonal and spatial variation in the abundance of various species and life stages, but the site-specific timing of such changes is difficult to predict in many cases and may be impossible to predict for some poorly studied species.

<sup>55</sup> The organism enters into the cooling system with water drawn through the intake screens.

<sup>56</sup> The organism is held against the intake screen by the force of the water flowing into the plant.

<sup>57</sup> Habitat is degraded or lost to various species when the ambient water temperature rises locally.

<sup>58</sup> For example, Mirant Corp. expected aquatic plant and invertebrate species to rebound if its Potrero power plant's thermal discharge was removed from a shoreline outfall (*Construction and Thermal Impacts First Quarter Larval Fish Assessment, 2001-2002*), and entrainment in the 226 MGD Potrero OTC flow was shown to kill an estimated 241–321 million larval fish annually (CBE, 2006). Impacts from the project's 57.6 MGD flow may be different from those of that different OTC system in another part of the Bay, and lesser or greater proportionate to its flow.

<sup>59</sup> See CBE, 2006.

- Taxonomic identification, especially in samples with small numbers of nonabundant or mutilated organisms among large numbers of another species, requires judgment.
- Rates of survival to reproductive age for larvae or juveniles affected by entrainment are generally not measured directly, and are instead inferred from generalized life history data that may be inaccurate or incomplete for certain species or populations.
- Indirect impacts, such as those from loss of forage (food supply) for another species, may be significant, but are difficult to measure and generally are not measured.
- Undersampled species may disproportionately affect the ecological system studied.
- Measurement limitations—such as those mentioned here as well as sampling losses and other anomalies—must be tracked and interpreted in analysis of the data.

Thus, OTC impact studies involve many judgments that are ultimately subjective and yet may determine whether impacts are detected. Compounding the problem in another way, these studies are typically sponsored by plant operators who prefer to avoid replacing OTC. For these reasons, the best practice standard for environmental review of OTC impact monitoring studies includes some form of independent peer review during study design, study implementation, and interpretation of study results. The DEIR does not identify any of these limitations in biological monitoring studies of OTC.

35. No description of the biological effects of OTC *expansion* is provided in the DEIR. Its full discussion of biological effects from the OTC system itself—except for admitting that endangered species are at increased risk of adverse impact—is one long sentence about an old study of intake impacts:

“The Refinery documented the effectiveness of the wedgewire screens in 2006, estimating that their configuration virtually eliminated impingement of adult and juvenile fishes and significantly reduced entrainment of larval fishes; the location of the intake structure provides effective sweeping flow velocities that, combined with low through-screen velocities at maximum pumping rates, minimize the entrainment of larval fishes.”<sup>60</sup>

The DEIR thus does not discuss the extent to which this study: measured all potentially impacted species; used sampling techniques that were effective for all species targeted; identified all targeted species in each sample accurately; monitored or accounted for the great interannual variability of the estuarine impact zone; captured seasonal and spatial variability in OTC impacts; measured long-term survival of entrained or impinged biota and indirect impacts such as forage reduction on other species; measured effects on non-abundant species present, or made proper judgments about these issues in data analysis.

<sup>60</sup> DEIR at 4.4-27. A thermal impact study is not yet done: see Phillips thermal ext 1, 2.

The DEIR does not actually say whether this study collected *any* biological samples. Moreover, this study of 2006 OTC flow conditions does not represent the project's potential for much greater long-term future OTC flow conditions. See Chart 3. The DEIR obscures this important fact by its false assumption that only its underestimated flow increment (12.2 MGD), rather than the full post-project OTC flow (57.6 MGD), should be assessed for potential impacts. The project would increase OTC flow more than the DEIR's inflated baseline discloses *and* would cause the full expanded OTC flow to continue when it otherwise could be eliminated, as discussed in paragraphs 27–33. Accordingly, this 2006 study, and the DEIR itself, does not describe the biological implications of the expanded OTC flow that would result from the project.

36. Instead of describing these environmental implications of the project, the DEIR asserts that any impacts from the OTC expansion will be less than significant because of NPDES permit limits.<sup>61</sup> This assertion is contradicted by facts that the DEIR does not disclose, but in a vain attempt to support it, the DEIR makes a series of erroneous statements that describe the project and its setting inaccurately. In a paragraph referring to an allowable “maximum discharge temperature of 110 °F” the DEIR asserts:

“By using sufficient cooling water to ensure that maximum temperatures remain in compliance with the NPDES permit, no significant impacts on special-status fishes would occur.”<sup>62</sup>

This statement is clearly erroneous because a large enough volume of 80–110 °F thermal waste would injure or kill fish that are adapted to 55 °F water,<sup>63</sup> but it also is misleading. This statement only makes sense if the heat in the 57.6 MGD discharge diffuses rapidly. The statement thus invites the inference that the Rodeo OTC discharges via a deepwater diffuser—a technology so universally required that a proper environmental review would surely note the anomaly if that was not the case—but that is not the case. The antiquated OTC discharges from a shoreline outfall. See Map 1 discharge point 003. Consequently, the thermal waste receives little or no initial dilution, greatly exacerbating its localized impact, and NPDES permit limits allow that, but the DEIR does not disclose these facts.

<sup>61</sup> DEIR at 4.4-27 and 4.4-28; see also DEIR at 4.10-24. It is acknowledged that deferring to future actions by others to address impacts has serious policy and legal implications that require analysis beyond the scope of this report.

<sup>62</sup> DEIR at 4.4-28.

<sup>63</sup> This water temperature (≈55 °F) is typical in the ambient water of San Pablo Bay near the OTC outfall. See Regional Monitoring Program, Oct–Jun average for Davis Point (Site BD40).



**Map 1. Rodeo facility outline, discharge points, and intake points.** Attachment B to NPDES Permit, Order R2-2011-0027. The left-most circle containing a cross denotes discharge point E-003.

37. Compounding its error, the DEIR further explains its reliance on NPDES limits by asserting that “the NPDES permit establishes maximum once-through volumes.”<sup>64</sup> This statement is untrue. The permit limits several pollutants in the OTC thermal waste discharge at outfall E-003 but flow volume is *not* limited by this permit.<sup>65</sup> The 56% increase in OTC flow during 2000–2011, a period when two permit orders document concerns over OTC impacts that remain unresolved,<sup>65</sup> demonstrates the fallacy of the DEIR’s flow limit assertion poignantly. See Chart 3. The DEIR’s misplaced focus on permit limits also obscures the permit’s ongoing effort to develop closed loop cooling to replace OTC and eliminate its impacts—a crucial effort that the project would foreclose.

<sup>64</sup> DEIR at 4.4–23; see also 4.4-27.

<sup>65</sup> All NPDES permit limits on the OTC (E-003), for °F, TOC, Cl, Cu, Ni, Zn, and dioxins, are given in tables 8–11 of NPDES Permit Order R2-2011-0027, and flow volume is *not* among them. Provisions VI.C.2 d–f of this Order, and provisions D.9 and D.10 of Order R2-2005-0030 document ongoing, unresolved concerns regarding impacts of the OTC during this period.

38. Remarkably, the DEIR admits that the project's expansion of once-through cooling has the potential to adversely impact threatened or endangered fish species without specifying which ones. It states: "[S]pecial-status fish species identified in Table 4.4-1 that may be present along the Refinery shoreline on a seasonal or year-round basis ... are potentially at risk of being entrained in intake pipes, and this risk could increase due to the increased volume of once-through water that would be required under the Project. ... These fishes [also] could be subjected to an increased risk of injury, death, or habitat reduction at effluent discharge locations"<sup>66</sup> The DEIR defines "special-status fish species" to include, among others, the Southern DPS-Green Sturgeon, the Central California Coast and Central Valley DPS-Steelhead, the Central Valley Spring-run Chinook Salmon, and the Winter-run Chinook Salmon—all federally listed threatened or endangered species.<sup>67</sup> The severity or importance of this potential impact may depend in part upon which of the endangered or threatened species face this project risk, but the DEIR does not provide that information, or at least does not do so in an easily understandable form.

39. LPG taken from cracking byproduct gases and treated in the refinery would be stored in new propane and existing butane tanks before loading to railcars via two new rail spurs and a new two-sided loading rack, according to the DEIR project description.<sup>68</sup> The DEIR acknowledges that although this occurs very rarely, the potential exists for a catastrophic failure of an LPG storage vessel such as a "boiling liquid expanding vapor explosion."<sup>69</sup> However, the DEIR describes it as occurring too rarely to warrant analysis of mitigation, and describes cooling the LPG storage tanks instead of pressurizing them (which would eliminate this catastrophic risk) as "infeasible" because of the added costs for electricity and a new flare.<sup>69</sup> Impacts of such an incident could be catastrophic and irreversible. The DEIR does not include or describe the documented Process Hazard Analysis or Inherently Safer Systems Evaluation required by the County Industrial Safety Ordinance (ISO) for the project, and thus does not disclose that those requirements contradict its analysis.

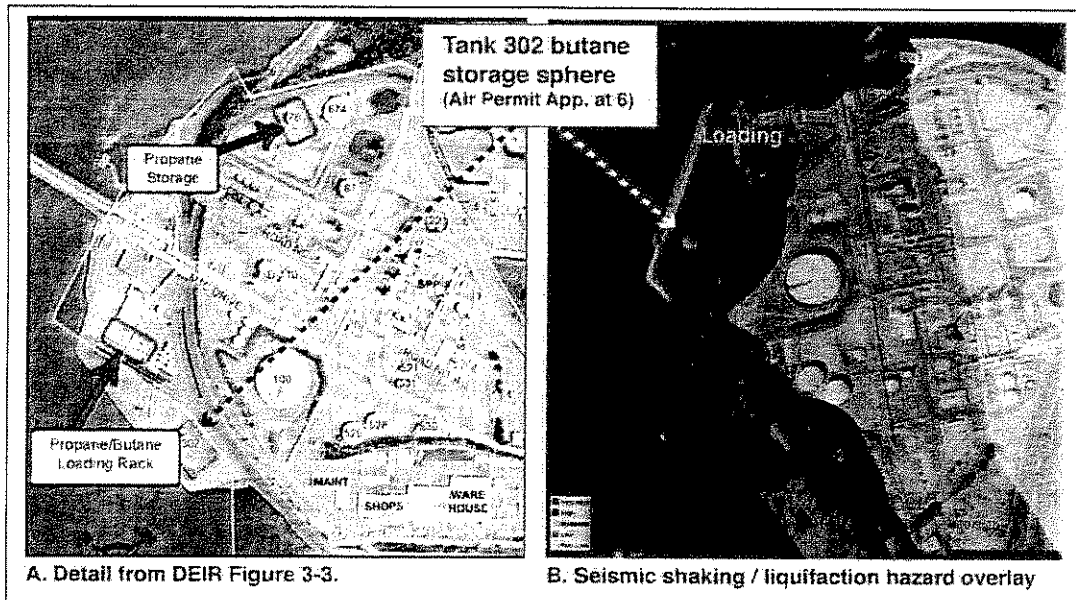
<sup>66</sup> DEIR at 4.4-27. The quote continues, with a qualifier regarding the thermal impact reading "*if those temperatures exceed permitted discharge limits.*" However, the DEIR wrongly assumes the increased volume of hot shoreline discharge that receives little or no dilution is controlled by permit volume limits and will not impact the fish, as discussed in paragraphs 36 and 37.

<sup>67</sup> DEIR at 4.4-9 and 4.4-10 (Table 4.4-1).

<sup>68</sup> DEIR at 3-6, 3-17, 3-21 and 3-25.

<sup>69</sup> DEIR at 4.9-2, 4.9-18, 4.9-19 through 4.9-22, 6-5.

40. Process hazard analysis (PHA) requires, among other things, rigorous determination of the site-specific likelihood of particular hazardous consequences.<sup>70</sup> “Conducting a comprehensive hazard review to determine risks and identify ways to eliminate or reduce risks is an important step in implementing an inherently safer process.”<sup>70</sup> For example, a comprehensive PHA for the project’s new propane and additional butane storage would identify and analyze the increased probability of catastrophic failure caused by soil liquefaction in an earthquake—a serious site-specific risk in the seismically active East Bay. At least one of the tanks that would store project LPG is sited on a shoreline plot<sup>71</sup> at high risk for soil liquefaction. See Map 2. This would increase the probability of catastrophic failure involving LPG storage over time. The DEIR, however, estimates this probability based on generalized industry-wide estimates of its frequency.<sup>72</sup> Because it does not describe or evaluate the site-specific conditions, the DEIR underestimates the probability of a catastrophic event.



**Map 2. Project-related LPG storage near loading, and earthquake liquefaction hazard**

Note the two plate's different orientation to North. Plate B from Ed Tannenbaum and Danielle Fugere. Burgundy shading in the area near the shoreline (Plate B) indicates very high liquefaction hazard.

<sup>70</sup> CSB, 2013 at 40; see also CSB at 32.

<sup>71</sup> Project butane would increase this and other tanks' throughput. DEIR at 3-21/26, 4.5-7, 4.9-1.

<sup>72</sup> DEIR at 4.9-18; see also AICE, 1989 at 205.

41. County Hazardous Materials Program staff have informed Phillips 66 that they expect “revised siting studies with placing new equipment and associated impacts to existing processes including locations that house personnel (e.g., control rooms, admin buildings)” for the project.<sup>73</sup> These studies would detail what comparing maps 1 and 2 shows: Project-related LPG storage is located relatively close to a concentration of other vessels containing flammable hydrocarbons, the administration building, parking lots, and thus numerous plant personnel. However, the DEIR describes only “moderate” consequences of a catastrophic LPG storage incident, and explains that this is “primarily due to the large distances to the *off-site receptors* (730 to 1340 m.).”<sup>74</sup> (*Emphasis added.*) Its incomplete description of the project’s setting causes the DEIR to ignore workers and underestimate the magnitude of this catastrophic risk.

42. Cooled instead of pressurized liquefied gas storage could eliminate the risk of catastrophic LPG storage vessel explosion. Because it is practicable and safer than the proposed pressurized storage for this identified catastrophic hazard, cooled storage could be defined as an inherently safer system with respect to this hazard. In contrast to the DEIR’s failure to analyze this mitigation, the ISO *requires* documented inherently safer systems analysis for new processes and facilities.<sup>75</sup> The U.S. Chemical Safety Board recommends that inherently safer technology should be implemented to drive risk as low as reasonably practicable (ALARP), and notes that: “It is simpler, less expensive, and more effective to introduce inherently safer features during the design process ... rather than after the process is already operating.”<sup>75</sup> Furthermore, in contrast to the DEIR’s description of cooled storage as “infeasible” due to the costs of additional electric power and a new flare, the ISO seeks to implement inherently safer solutions “to the greatest extent feasible.”<sup>75</sup> There is no cost exemption for affordable cooled storage. The DEIR’s description of catastrophic hazards is in error, and its failure to describe inherently safer systems requirements for the project obscures this error.

43. CHMP staff also expect documented human factors evaluations of processes and procedures for the project.<sup>73</sup> These could include, among other things, evaluation of “safety culture” problems that may incent company management to defer safety measures

<sup>73</sup> 11 July 2013 letter from Michael Dossey to Jim Ferris, Phillips 66 (CCHMP-Phillips). The DEIR does not include these process-specific studies or evaluations or discuss their results.

<sup>74</sup> DEIR at 4.9-21.

<sup>75</sup> ISO § 450-8.016(d)(3); see also CSB, 2013 at 40, 45-47, and 55. The DEIR does not include or discuss the Chemical Safety Board’s findings, or even its recommendations to the County.

as a shortsighted way to cut costs.<sup>76</sup> But the DEIR does not include or report on this human factors evaluation, and although it is relevant, the DEIR does not discuss this safety culture issue. Chevron management deferred at least six worker requests to inspect or replace a piping circuit over ten years, before that severely corroded pipe ruptured catastrophically in the 6 August 2012 Richmond refinery fire.<sup>77</sup> In another example of poor safety culture, the BP Texas City refinery explosion in March 2005 killed 15 people and injured 180 after BP management—in part to boost profits by avoiding short term costs—deferred replacement of a blowdown stack with a flare.<sup>78</sup> Similarly, the DEIR assumes a bias in favor of avoiding the cost of a flare in its inappropriate failure to analyze identified mitigation for a catastrophic hazard presented by the project.

44. Chemical spills, fires, and explosions at U.S. oil refineries killed at least 30 and injured at least 15,211 workers and nearby residents since 1999.<sup>79</sup> At least 49 upset “emergency” incidents occurred at Bay Area refineries since March 2010.<sup>80</sup> At least 30 such incidents occurred at California refineries in a recent five-month span.<sup>81</sup> The DEIR does not describe or discuss this important context for review of project hazards.

45. Exporting 8,000 b/d of additional LPG from the refinery for sale instead of burning that propane and butane in its fuel gas would change the location of emissions from LPG created by refinery processes. Although selling this LPG for purposes that obviously include burning it is the primary objective the DEIR states for the project, the DEIR does not identify or describe the resultant off-site impacts or provide information about specific end uses of this LPG.<sup>82</sup> Those potential emissions are substantial: the

<sup>76</sup> Chevron Safety Audit Oversight Committee, 2013. Audit Scope of Work.

<sup>77</sup> CSB, 2013: see esp. 36–42.

<sup>78</sup> Chemical Safety Board incident investigation (CSB, 2005). See esp. page 253: In one instance BP managers decided on in-kind replacement of the hazardous design in part to “maintain profits” by avoiding new source standards that likely would have required connecting to a flare.

<sup>79</sup> U.S. Chemical Safety Board incident investigation reports ([www.csb.gov](http://www.csb.gov)). Injuries include hospital visits associated with the 2012 Chevron Richmond refinery fire.

<sup>80</sup> Flare causal analyses submitted to Bay Area AQMD pursuant to Rule 12-12, §406.

<sup>81</sup> Labor Occupational Health Program, U.C. Berkeley, 2013 (LOHP).

<sup>82</sup> BAAQMD asked for the end uses of this LPG but like the DEIR, the company did not report them (see Air permit correspondence). Because of this nonreporting only a “potential to pollute” estimate is possible, but it is reasonably foreseeable that virtually all project LPG exports could be burned. Combustion activities (residential, C4 gasoline addition, industrial and recreational) are the primary end use of LPG sold nationally, and markets are highly regional; LPG use for petrochemical feedstock is highly concentrated in the Gulf Coast. Shipping costs to sell Rodeo LPG in the Gulf Coast would make it less competitive than Gulf Coast LPG supplies.



DEIR estimates that the LPG the project would remove from refinery fuel gas would emit greenhouse gases (GHG) at a rate of 759,244 tonnes/yr.<sup>83</sup> But instead of identifying, describing, or accounting for the resultant off-site impacts, the DEIR subtracts this amount from its project GHG emission estimate. The DEIR thereby assigns offsite LPG emissions a value of zero—even though it accounts for project emissions from outside the refinery gate for transport, and electricity generation—erroneously calculating a net decrease in GHG emissions (–325,978 tonnes/yr) when the correct net emissions, by its own estimate, total 433,266 tonnes/yr (–325,978 + 759,244).<sup>83</sup> Thus, project emissions could exceed the 10,000 tonnes/yr threshold of significance for GHG emissions used by the DEIR substantially. The DEIR does not identify a potential impact that would be significant, in part because it does not describe LPG environmental implications of achieving the project’s main stated goal outside the refinery gate.

46. Byproduct coke production would increase along with cracked LPG gases for the project, but the DEIR does not say how much, or whether this additional petroleum coke will be exported, burned in the refinery, or both. Increased coking of denser feeds might increase coke production by thousands of barrels/day, and coke burns much dirtier than the gases the DEIR assumes the refinery will burn.<sup>84</sup> Burning the extra coke created by the project in place of other refinery fuel could increase refinery emissions substantially.

47. The DEIR does not explain that the company’s Rodeo Facility (RF) and Santa Maria Facility (SMF) are two parts of one integrated refinery. The SMF and RF are linked by a pipeline sending crude and intermediate oils between them,<sup>85</sup> their processes are integrated to a capacity that neither can achieve alone,<sup>86</sup> and Phillips 66 reports them as a single processing entity to industry and government monitors<sup>86</sup> that is called the “San Francisco Refinery.”<sup>85</sup> Omitting all of this, the DEIR also fails to explain the extent to which this project, and the concurrent SMF expansion to increase production and pipeline shipments to Rodeo,<sup>85</sup> are two parts of a single, larger, project that remains undisclosed.

<sup>83</sup> See DEIR at 4.8-18, Table 4.8-3

<sup>84</sup> Denser feeds might increase coke yield on coker feed volume by ≈10% (see tables 7.1-2, 7.1-6 in Meyers, 1986), not counting the effect of increasing coker feed volume. As compared with CO<sub>2</sub> emissions of ≈67.7 kg/GJ fuel gas and ≈56.0 kg/GJ natural gas, burning petroleum coke emits CO<sub>2</sub> at a rate of ≈108 kg/GJ. See Karras, 2010 at Table S1.

<sup>85</sup> SMF EIR 2012 Excerpts (attached). See esp. pages 2-1 (describing SMF–Rodeo integration), 2-11 (processes, and intermediates sent to Rodeo), 2-25 (project would increase deliveries of oils to Rodeo via pipeline), and 2-26 (project potential for 408,255 tons/yr increase in coke produced).

<sup>86</sup> See *Oil & Gas Journal*, 2012; and EIA Ref. Cap. 2013. See also orders R2-2011-0027 and R3-2007-0002. Comparing the references shows “Rodeo” capacities reported to EIA include SMF.

## Project Impacts on the Environment

48. Project emissions would exceed a climate significance threshold, as the DEIR's emission estimates show, when its failure to account for emissions from burning project LPG is corrected. See paragraph 45. A check on its estimates, accounting for the 8,000 b/d of LPG (464,243 m<sup>3</sup>/yr) sold and replaced by natural gas for refinery fuel, confirms that project GHG emissions would exceed the significance threshold established in the DEIR by more than 40 times. See Table 5. These observations make sense because oil refining emits more GHG than any other industry in California,<sup>87</sup> and the project would increase fossil fuel combustion associated with the refinery's activities substantially.<sup>88</sup> Among other potential measures to lessen or avoid this impact, the County could consider requiring that refinery use of electricity from the grid be purchased from renewable, rather than fossil-fueled, generation sources.

**Table 5. GHG emissions from project LPG and natural gas to replace it in fuel gas**

	DEIR estimate (CO <sub>2</sub> e) <sup>a</sup>		CBE estimate (CO <sub>2</sub> ) <sup>b</sup>	
	LPG	natural gas	LPG	natural gas
volume (m <sup>3</sup> /yr)	464,243	310,000,000	464,243	313,000,000
energy (GJ/yr)	11,230,541	11,230,541	11,900,000	11,900,000
emissions (tonnes/yr)	759,244	592,761	782,000	666,000
change in off-site LPG emissions		759,244		782,000
change from replacing LPG in fuel gas		-166,483		-116,000
net of other project emissions identified <sup>a</sup>		-159,495		-159,495
<b>Total project emissions identified in DEIR</b>		<b>433,266</b>		<b>506,505</b>
Threshold of significance from DEIR		10,000		10,000

LPG volume shown as liquid, from DEIR Table 3-2. (a) DEIR data from Table 4.8-3, except energy estimate from page 4.8-16 and natural gas volume estimate from Table 3-2. Other project emissions: boiler, mobile source and indirect emissions minus shutdown credit. (b) Based on natural gas energy equivalent to project LPG volume and heat contents (25.62, 0.038 GJ/m<sup>3</sup>) and CO<sub>2</sub> emission factors (65.76, 55.98 kg/GJ) for LPG and natural gas, respectively, from Table S1 in Karras, 2010.

49. Stored under pressure, project gases could explode. Because predicting when this catastrophic and irreversible consequence might occur is ultimately speculative, and a safer design that might eliminate this hazard could be precluded after the project is built, the project as proposed would create an *inherent hazard*.<sup>89</sup> The project's failure to

<sup>87</sup> See CARB, 2013.

<sup>88</sup> Project LPG sales burned elsewhere and replaced with natural gas onsite would represent ~44% of all fuel energy burned in the refinery in 2011, based on DEIR data (see pages 4.6-2, 4.8-16).

<sup>89</sup> See: CSB, 2013 at 40-48, 55.

demonstrate the use of inherently safer systems (ISS)—including cooled instead of pressurized storage, which would eliminate this catastrophic explosion hazard—through a process hazard analysis (PHA)<sup>90</sup> would conflict with the Industrial Safety Ordinance. Therefore, project gas storage under pressure would result in a hazard impact. The DEIR failed to identify the significance of this impact because its analysis ignored hazardous siting conditions and PHA and ISS requirements, and rejected analysis of an inherently safer measure that could avoid a catastrophic hazard based on cost, contrary to safety best practice and the Industrial Safety Ordinance. See paragraphs 39–44.

50. Pressurized gas storage explosion hazard resulting from the project can be mitigated but the DEIR did not complete its analysis of this mitigation opportunity. The County could consider developing an appropriate permit condition requiring cooled storage of propane and butane stored as a result of the project. Developing an appropriate permit condition would require reporting and evaluation of the PHA and documented ISS analyses that were not reported or addressed in the DEIR.

51. Expansion of the existing once-through cooling system would conflict with state plans and policies to phase out and replace this antiquated technology and foreclose an opportunity to replace the system in the near term via ongoing work to implement those plans and policies. Increased impingement, entrainment and thermal waste impacts that would result from the project would adversely impact aquatic biota and have the potential to injure or kill members of the remaining populations of threatened or endangered fish species that depend upon aquatic habitats in the vicinity of the refinery. Therefore, the project would adversely impact the biological resources of the San Francisco Bay-Delta ecosystem in conflict with state plans and policies.

52. The DEIR failed to identify the state plans, policies, and ongoing work the project would conflict with and foreclose by expanding the once-through cooling system. Due to these errors and its assumption of an erroneous project baseline it targeted only a fraction of the intake and discharge flow that would result from the project for its impact analysis. The DEIR reported no biological analysis of actual system effects that includes data representative of the expanded system. Its conclusions ultimately relied on a description of flow, heat, and discharge limitations that is demonstrably incorrect. As a result, it did

<sup>90</sup> No documented PHA or ISS is included in the DEIR, and County safety staff still sought these analyses, *including for cooled storage*, as of 11 July 2013. CHMP-Phillips071113; DEIR at 6-5.

not identify the significance of this impact. See paragraphs 27–38. The County could consider, among other measures to lessen or avoid this impact, requiring replacement of the antiquated once-through cooling system with closed loop cooling towers.

53. Sulfur dioxide (SO<sub>2</sub>) emissions could increase, instead of decreasing as the DEIR claims, and this impact could be significant, but the DEIR did not analyze, or include information needed to analyze, this potential impact. The project outlined *in concept* might cut emissions substantially, but the DEIR's claim that refinery wide SO<sub>2</sub> emissions will be cut by 50% is wrong for several reasons. The project application for "emission reduction credits" to *increase* SO<sub>2</sub> emissions by 174.7 tons/yr that Phillips asserts will be used to achieve "no net increase" in project emissions would foreclose an emissions cut. See paragraph 26. Further, if the actual emissions cut from treating and replacing fuel gas is less than 174.7 tons/yr, emissions could increase. The extent of this potential increase cannot be quantified because data to support the emission credits—such as fuel gas hydrotreating specifications, and pre- and post-project fuel gas balances showing the composition and flows of gases among process units—is not included in the DEIR.

54. Importantly, this undisclosed change in the project that would foreclose the promised SO<sub>2</sub> emissions reduction conflicts with the DEIR's stated project objective to reduce emissions. The County could consider developing a land use permit condition that ensures the 50% reduction in refinery wide SO<sub>2</sub> emissions identified in the DEIR will be real, measurable and permanent. Developing an effective condition could be expected to require, among other things, analysis of the fuel gas composition and petroleum coke disposition data that is not disclosed in the DEIR (see paragraphs 24 and 46).

55. Flaring could be caused by fuel gas quality upsets resulting from the project because it lowers the heat content of gases burned throughout the refinery without upgrading equipment designed to burn gases with higher heat content. Fuel gas quality upsets, including those involving low heat-content gases, have caused significant flare episodes at the refinery repeatedly.<sup>91</sup> The company's shifting statements about whether existing burners should be or will be upgraded underscore the potential for increased frequency and magnitude of this type of flaring.<sup>92</sup> Flaring from fuel gas *quality* upsets can occur independently from that caused by fuel gas *quantity* upsets, and the DEIR did

<sup>91</sup> Flare Causal Analysis excerpts; see also CBE, 2007. *Flaring Prevention Measures*.

<sup>92</sup> See paragraph 25; Air Permit Correspondence; see also paragraph 14.

not analyze or mitigate this fuel gas quality issue. Moreover, flaring episodes impact air quality and health via acute exposures around each episode,<sup>93</sup> so that fuel gas quality flaring from the project could cause significant impacts even if the project reduces flaring from fuel gas quantity problems. To support a complete and reliable analysis of impacts on flaring, specifications for the changed fuel gas quality and for all of the combustion equipment that could be affected by this change must be reported and analyzed.

56. Flaring likely would be caused by the crude switch resulting from the project. Three independent reviews following the refining of higher sulfur crude at Gulf Coast and Bay Area refineries found evidence for increased flaring and flare emission intensity from hydrocracker and hydrotreater upsets.<sup>94</sup> This potential impact would not be mitigated by project treatment of fuel gas because the emergency shutdowns of these high-pressure processes that initiate the flaring typically requires dumping their contents to flares, bypassing fuel gas treatment. Indeed, flaring is allowed in emergencies, despite known local air impacts,<sup>95</sup> as a last-resort emergency response safeguard *after* potentially catastrophic conditions begin to manifest. This flaring indicates a process hazard.

57. The DEIR did not describe or evaluate upset flaring or any other impact of the denser, more contaminated crude slate that likely would result from the project. The denser hydrocarbons disproportionately present in denser crude oils have many more carbon atoms, and much lower hydrogen:carbon ratios, than the gasoline, diesel, or jet fuel made from these oils. These dense hydrocarbons also have greater concentrations of contaminants—such as sulfur, nitrogen, nickel, vanadium, selenium, and naphthenic acids, among others—that are toxic, corrosive, poison process catalysts, or decompose in refining processes to form toxic and corrosive compounds such as hydrogen sulfide (H<sub>2</sub>S). Density and contaminant content broadly correlate among well mixed blends of whole crude oils from many different locations and geologies.<sup>96</sup> But complicating assessment and further increasing the hazard, this correlation breaks down in the case of

<sup>93</sup> See CBE, 2005. *Flaring Hot Spots*; BAAQMD, 2006 at 6–8.

<sup>94</sup> Subra, 2008; Karras, 2008; Dolbear, 2008 (Dolbear AG Summary). The concise notes from Dolbear's review inform the need to check for unanticipated hazards from crude switching: "This work forced me to think through this system again, and I conclude that, at least in the refineries in question, increasing contaminant levels do result in stressing the system to lead to upsets".

<sup>95</sup> Compare BAAQMD, 2006 at 6–8 (documenting flaring impact on nearby community) with BAAQMD Flare Control Rule 12-12 §101 (nothing in rule should be construed to compromise safety) and §301 (standard allows flaring in emergency to avoid potentially worse consequences).

<sup>96</sup> See Speight, 1991; Karras, 2010.

some individual crude oils that the project could lock the refinery into processing. In particular, partially pre-processed oils<sup>97</sup> and bitumen<sup>98</sup> derived from tar sands can be highly contaminated relative to their density.

58. Lower quality crude is an inherently more hazardous feedstock. Making engine fuels from its denser, hydrogen-poor hydrocarbons requires processing proportionately more of each barrel using severe carbon rejection (e.g., coking) and hydrogen addition (e.g., hydrocracking) and making that hydrogen, increasing refinery energy use and fuel burning for that energy.<sup>99</sup> Its greater contaminant content results in greater amounts of various toxic chemicals passing through the refinery into the environment, potentially increasing fugitive emissions of benzene and other toxics,<sup>98</sup> and in some cases boosting per-barrel releases of toxic trace elements by up to an order of magnitude.<sup>100</sup> The larger volume of toxic, flammable, and corrosive materials undergoing severe processing at high temperature and pressure further increases the frequency of process malfunctions and upsets over time, and the magnitude of these incidents when they occur.

59. Switching to higher sulfur crude was a causal factor in the disastrous Richmond refinery fire on 6 August 2012. See Chart 4. Sulfur corrosion of the pipe section that ruptured catastrophically in the incident (gray shading), sulfur in the gas oil running through this pipe (black line), and sulfur in the refinery crude feed supplying that gas oil (red line) are shown in this chart. The percent change from baselines is shown.<sup>101</sup> As sulfur increased in the crude, it increased in the gas oil distilled from that crude and running through the pipe, and sulfidic corrosion began to thin the wall of this pipe more than four times faster than before that dramatic sulfur increase. See Chart 4. This example of an ultimately disastrous feedstock substitution hazard applies to the SFR and the even more inherently hazardous crude feed that likely would result from the project.

60. Sulfur attacks metal equipment in contact with oil streams at temperatures above  $\approx 230$  °C, causing thinning that leads to catastrophic ruptures, so that “sulfidic” corrosion “continues to be a significant cause of ... incidents associated with large property losses

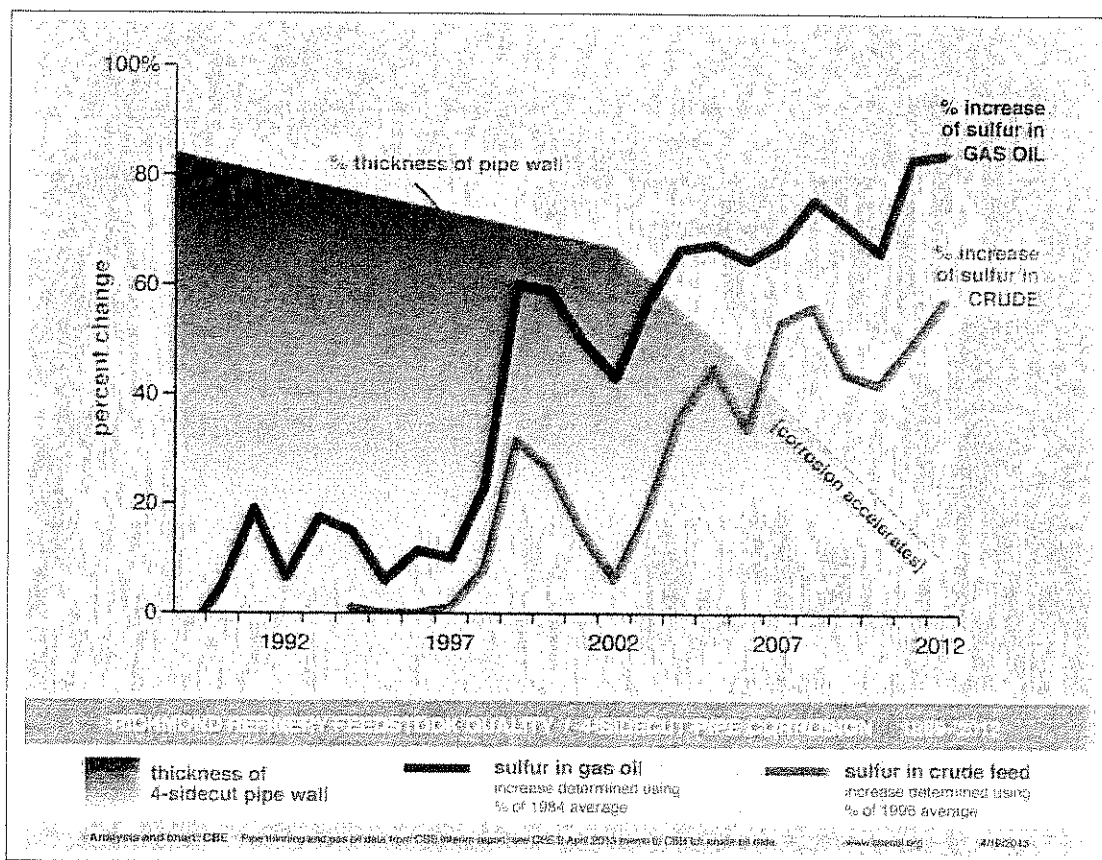
<sup>97</sup> See Karras, 2010.

<sup>98</sup> See Fox, 2013.

<sup>99</sup> See Karras, 2010; UCS, 2011; Bredeson et al., 2010; Brandt, 2012; Abella and Bergerson 2012.

<sup>100</sup> See CBE, 1994; and Wilhelm et al., 2007.

<sup>101</sup> For example, sulfur increased by more than 50% in crude based on crude sulfur content > 1.5 wt. % (Aug 2011–Jul 2012 avg.) versus a baseline < 1 wt. % (1996 avg.). See Karras, 2013.



**Chart 5. Richmond refinery feedstock quality / 4-Sidecut pipe corrosion, 1989-2012.**  
From testimony presented in the 19 April 2-13 U.S. Chemical Safety Board public hearing at Richmond, CA.

and injuries.”<sup>102</sup> Sulfidic corrosion can occur anywhere in refineries where sulfur-bearing oils are processed this hot.<sup>102</sup> “Process variables that affect [sulfidic] corrosion rates include the total sulfur content of the oil, the sulfur species present, flow conditions, and the temperature of the system.”<sup>103</sup> Higher sulfur crude feeds can accelerate sulfidic corrosion dramatically.<sup>104</sup> See Chart 4. All steels are attacked, but carbon steel, and carbon steel that has low silicon content, are particularly vulnerable.<sup>104</sup> U.S. refineries built before 1985 are especially vulnerable because they likely include low-silicon carbon steel equipment components.<sup>104</sup> Newer equipment can be similarly vulnerable because, perhaps in the rush to build and restart production, it may be made from inappropriately

<sup>102</sup> API, 2009 at vii. See also pages 3-8, and 16; and CSB, 2013 at 29-30.

<sup>103</sup> CSB, 2013 at 16.

<sup>104</sup> See CSB, 2013 at 16-45; see esp. 33-36. see also API, 2009.

corrosion-vulnerable alloys mistakenly installed, and then operated because of this error.<sup>105</sup> Sulfidic corrosion is difficult to monitor: it may accelerate in a few small, vulnerable, yet critical components of refinery piping systems many miles long, requiring monitoring of 100% of the components, but that is costly and may not be performed.<sup>106</sup> Actions taken to cut energy costs have in some cases inadvertently exacerbated sulfidic corrosion.<sup>107</sup> Further, in addition to introducing another hazard, corrosion resulting from naphthenic acids (TAN) in the crude can exacerbate sulfidic corrosion.<sup>108</sup> Ignoring or failing to recognize the nature of this hazard is part of the problem—impacts of a new and different feedstock are at best difficult to predict, and past operating history is *not* a guide to the future hazard when a refinery switches to a new and high-sulfur crude.<sup>109</sup> The proposed project at SFR presents these aspects of this hazard.

61. Sulfur is likely to reach  $\approx 3\text{--}4$  wt. % in the new crude slate that would result from the project. See paragraphs 12–22. This could cause more aggressive sulfidic corrosion than the increase to  $\approx 1.55$  % sulfur that caused the catastrophic pipe failure in 2012 at Richmond. The new crude slate is also likely to include more high TAN tar sands oils that could further exacerbate sulfidic corrosion and create a new corrosion hazard.<sup>110</sup> The Rodeo facility was built before 1985: carbon steel equipment that is especially vulnerable to sulfidic corrosion is likely present in the plant. The project as proposed documents no positive materials identification program that is addressing this vulnerability. Nor does it document any management of change, process hazard, or inherently safer systems analysis of this hazard, in conflict with the ISO and industry standards.<sup>111</sup> The project, as proposed, would create a catastrophic hazard resulting from switching to a new crude and rely, in essence, on past operating history to address this hazard. That is unsafe.

<sup>105</sup> Incorrect alloys for corrosion resistance may have been installed mistakenly in up to 3% of piping components and 10% of items such as drain plugs at some refineries (API, 2009 at 16).

<sup>106</sup> See CSB, 2013 at 16–45; see esp. 33–36. see also API, 2009.

<sup>107</sup> See API, 2009 at 8; CSB, 2013 at 33.

<sup>108</sup> Total acid number (TAN), measured in mg KOH/g oil, reflects organic acids in crude oils that refiners call “naphthenic” acids. “[I]t is important to note that naphthenic acids can dissolve the iron sulfide scale [that might otherwise slow sulfidic corrosion] or at the very least render it less protective. ... [and it] is often difficult to isolate the individual effects of naphthenic acids and sulfur compounds [but] naphthenic acid never lowers sulfidation corrosion.” API, 2009 at 4.

<sup>109</sup> CSB, 2013 at 35; API, 2009 at 5, 7, 8 and 16.

<sup>110</sup> TAN ranges from  $\approx 0.9\text{--}1.7$  mg KOH/g in tar sands oils that are likely to be refined as a result of the project (see Table 3): 0.5 mg KOH/g is considered high for this acid (see Sheridan, 2006).

<sup>111</sup> County safety staff noted these PHA and ISS requirements (CHMP–Phillips071113); failure to analyze corrosion impacts of crude changes also violates industry standards (CSB, 2013 at 36).



62. Chart 5 shows data describing the scale of emissions from burning more fuel for the extra energy to refine denser, more contaminated crude slates. GHG emissions are plotted against crude slate density. Each white circle represents an annual average observed in one of the four largest U.S. Petroleum Administration Defense districts (PADDs) from 1999–2008; each orange diamond an observed California-wide annual average from 2004–2009; and the black square represents the Shell Martinez refinery annual average observed in 2008. The diagonal rise among the 47 observations from left to right in the chart indicates denser crude slates increase refinery emissions. Observed average emissions nearly double, from  $\approx 260\text{--}500\text{ kg/m}^3$  crude refined, as crude density increases from  $860\text{--}932\text{ kg/m}^3$ . The SFR crude slate density increment that could result from the project ( $+37\text{ kg/m}^3$ ; paragraphs 12–22) is shown by the width of the yellow band in the chart; the right-hand edge of this band shows the density of the WCS/ANS blend that the refinery could run as a result of the project ( $952\text{ kg/m}^3$ ; see Table 4). This crude slate approaches the density of “heavy oil” as defined by the USGS ( $957\text{ kg/m}^3$ ),<sup>112</sup> and is considerably denser than the Martinez refinery observation ( $932\text{ kg/m}^3$ ), which appears near the middle of the yellow band shown in the chart.

63. Analysis that separated crude quality effects on emissions from those of other factors demonstrated that crude density (shown in Chart 5) and sulfur content (not shown) can explain 85–96% of observed variability in emissions among refining regions and years, allowing the prediction of average emissions from crude slates.<sup>113</sup> Predictions based on the U.S. observations suggest that an industry-wide switch to refining “heavy oil” (shown) and bitumen (not shown) could double or triple current U.S. refining emissions.<sup>114</sup> More recent work using different methods estimates emission increments that are generally consistent with these predictions.<sup>115</sup> Also, the U.S. data and methods used in these predictions were found to predict the observed emissions from the Martinez refinery within  $\approx 7\%$  and the long-term 2004–2009 average California industry emissions within  $\approx 1\%$ .<sup>116</sup> Based on these same data and methods, the project increase in SFR crude

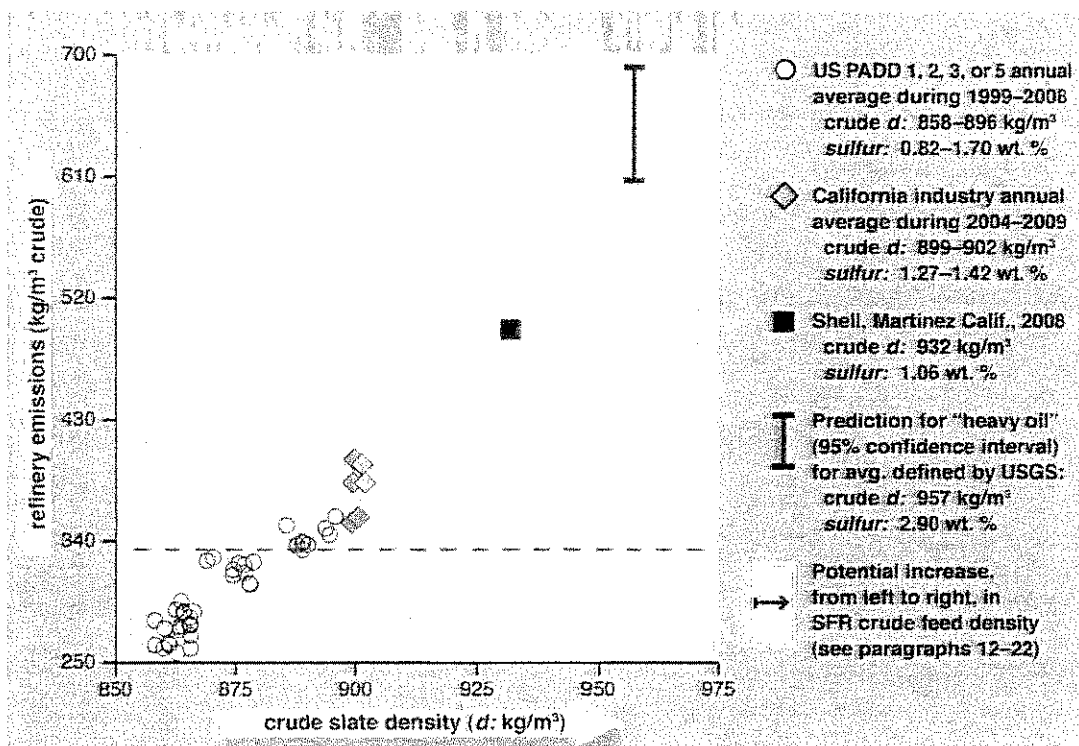
<sup>112</sup> Heavy oil average density ( $957\text{ kg/m}^3$ ) and sulfur content (2.9 wt. %) from Meyers et al., 2007.

<sup>113</sup> Karras, 2010; UCS, 2011.

<sup>114</sup> Karras, 2010.

<sup>115</sup> See Abella and Bergerson, 2012 (bitumen and dilbit vs. light conventional oils in Figure 1).

<sup>116</sup> UCS, 2011. See pages 9, 12 and 13, and Table 1-1. Four other refinery-specific predictions were tested as well (not shown in chart). When uncertainties caused by the lack of facility products reporting were considered, observed emissions from 4 of the 5 plants were predicted successfully, and emissions were underpredicted in 1 test. These predictions were tested by withholding the California energy and emission observations from the predictive model.



**Chart 5. Refinery GHG emission intensity vs. crude feed density.** CO<sub>2</sub> emissions increase from ≈260–500 kg per m<sup>3</sup> crude feed as crude density increases from 860–932 kg/m<sup>3</sup>. Density (shown) and sulfur (not shown) explain 85–96% of these changes in emissions among refining regions and years. Emissions of ≈610–690 kg/m<sup>3</sup> are predicted from refining the average "heavy oil" (d, 957 kg/m<sup>3</sup>; S, 2.9%). Plant-specific emissions also vary with other properties of oil feeds, products, process configurations and fuels burned, however, the WCS/ANS crude feed shown in Table 4 (d, 952 kg/m<sup>3</sup>; S, 3.4%) is nearly as dense as this heavy oil and denser than a dozen feeds with observed emissions greater than current SFR emissions reported (334 kg/m<sup>3</sup> 2009–2011; shown on the vertical scale by the dashed red line). The potential increase in SFR crude feed density (≈915–952 kg/m<sup>3</sup>) is shown on the horizontal scale by the width of the yellow band. Each 90 kg/m<sup>3</sup> increment shown on the vertical scale represents emitting 627,000 tonnes/yr at SFR's 120,000 b/d capacity. Data from Karras (2010) and UCS (2011) except SFR emissions (CARB, 2013 for Rodeo and Santa Maria refining and Rodeo Air Liquide H<sub>2</sub> at *Oil & Gas Journal*, 2012 crude capacity).

slate density from 915–952 kg/m<sup>3</sup> and sulfur from 1.5–3.4% could increase the average refinery's energy intensity by ≈2.75 GJ/m<sup>3</sup> crude refined.<sup>117</sup> Assuming the refinery fuels reported in the DEIR,<sup>118</sup> and this average energy increment, SFR emissions of CO<sub>2</sub> would increase by ≈135 kg/m<sup>3</sup>, or ≈940,000 tonnes/year. (Each 90 kg/m<sup>3</sup> increment on the vertical scale in Chart 5 represents emission of 627,000 tonnes/yr at SFR's 120,000 b/d capacity.) This ≈940,000 tonnes/yr value indicates the scale of potential impact rather than its precise quantification, as discussed directly below.

<sup>117</sup> Based on baseline and potential central predictions; confidence of increase > 95%.

<sup>118</sup> Based on fuel mix emission intensity ≈64.23 kg/GJ before and ≈59.45 kg/GJ after project fuel switch, from data in DEIR chapters 4.6 and 4.5; emission factors in UCS (2011) Table 2-1.

64. Plant-specific GHG emissions can vary from industry-average increments with differences in fuels burned, product slates, process configuration, and other properties of oils refined.<sup>119</sup> The DEIR's fuel mix assumption is an example of this variability. The relatively less-dirty current refinery fuel mix it reports<sup>120</sup> appears consistent with SFR's current emission estimate that appears somewhat low in Chart 5 (see dashed red line).<sup>121</sup> However, the DEIR's assumption that *only* natural gas will replace the LPG taken from refinery fuel ignores the potential for burning more petroleum coke in the refinery. See paragraph 46. The 940,000 tonnes/yr figure above could underestimate refinery emissions if any of this LPG is replaced by burning the project's extra coke.

65. Anomalous product slates must be considered, in general, because a refinery that makes much less (or much more) of its crude feed into light liquid fuels,<sup>122</sup> requires less (or more) energy for the severe carbon rejection and hydrogen addition processing needed to make these fuels from crude. This refinery, however, reports light liquid fuels production totaling more than 80% of its feedstock volume,<sup>123</sup> and project LPG would boost its light liquids product ratio still higher. The SFR products slate should be quantified and analyzed based on more data than the DEIR reported, but it is unlikely to decrease refinery GHG emissions relative to the industry average products slate.

66. SFR's process configuration could run the denser and more contaminated crude slate that likely would result from the project (see Table 4), but whether it would use more, or less, energy than the average refinery to do so is a more nuanced question. SFR has no catalytic cracker. Although it has very substantial carbon rejection (coking) capacity, this nevertheless makes it more reliant on severe hydrogen addition (hydro-

<sup>119</sup> Karras, 2010; Bredeson et al., 2010; UCS, 2011; Abella and Bergerson, 2012.

<sup>120</sup> See DEIR at 4.6-1, 4.6-2.

<sup>121</sup> This current SFR fuel mix emission estimate ( $\approx 64.23$  kg/GJ; see note 118) is significantly less than the U.S. industry average ( $\approx 73.77$  kg/GJ; see Karras, 2010 Table S1), but the SFR emissions reported by the company might be underestimated as well. SFR's emission reports received at least one "adverse" verification finding (CARB, 2013) and its Rodeo facility estimate appears slightly lower than that suggested by DEIR fuels data and UCS (2011) emission factors. These reported emissions (2009–2011 avg. including the Air Liquide Rodeo H<sub>2</sub> plant and Santa Maria facility based on CARB, 2013; kg/m<sup>3</sup> crude based on capacity from *Oil & Gas Journal*, 2012) are shown in Chart 5 because this is the emissions report available. Remarkably, the DEIR did not report *any* GHG emission estimate for the SFR refinery or even the Rodeo facility as a whole—a stark example of its failure to analyze this impact.

<sup>122</sup> Light liquid fuels: gasoline; diesel, jet fuel and similar distillates; LPG.

<sup>123</sup> See Phillips, 2012b at Table 1; EIR SCH #2005092028 at Table 3-4; EIR SCH #2002122017 at Table 4.5-2.

cracking, and associated H<sub>2</sub> production), and less reliant on carbon rejection processing, than a refinery with equivalent coking capacity *and* catalytic cracking. Several studies report that refinery configuration can affect energy intensity, emission intensity, or both—but they do not report specific evidence that substituting hydrocracking for catalytic cracking in a coking-based refinery reduces GHG emissions.<sup>124</sup> Instead, they cite hydrogen addition as a key factor increasing refinery energy intensity.<sup>124</sup> Further, the SFR process intensity exceeds reported averages in major U.S. PADDs by 22–78%.<sup>125</sup> Analysis across the U.S. PADDs did find a shift to a slightly less-dirty refinery fuel mix as refiners shifted from catalytic cracking to hydrocracking,<sup>126</sup> but this effect is accounted for already by plant-specific fuels data (*see* paragraphs 63–64). More detailed data on the SFR process configuration should be gathered and analyzed to better quantify potential emissions.<sup>127</sup> However, beyond the fuel mix (already addressed), there is little evidence that the SFR configuration will uniquely limit emission impacts from a denser and dirtier crude slate, and no evidence that denser crude can be converted to lighter products without energy—and resultant fuel combustion emission—costs.

67. Other properties of crude oils that affect processing may not be predicted reliably by density and sulfur in a poorly mixed crude slate. Many such properties are analyzed and reported (*see* Crude Assays). This data could have been included in the DEIR. For example, Abella and Bergerson's public domain estimation method calls for distillation, hydrogen content, and carbon residue data along with crude density and sulfur.<sup>127</sup> The project's coking dependence indirectly provides the key part of this distillation data (*see* paragraphs 14–20). However, hydrogen is a critical energy and emission driver.<sup>124</sup> Tar sands-derived oils tend to be H<sub>2</sub>-poor, and refining them has, in some cases, increased energy use and emissions beyond those predicted by density and sulfur.<sup>128</sup> The project's likely use of these oils may emit more than the industry-average prediction suggests.

<sup>124</sup> *See* Bredeson et al., 2010; Abella and Bergerson, 2012; Karras, 2010; UCS, 2011.

<sup>125</sup> Process intensity (*PI*): the ratio by volume of vacuum distillation capacity, conversion capacity (catalytic, thermal, and hydrocracking), and crude stream (gas oil and residua) hydrotreating capacity to atmospheric crude distillation capacity. SFR *PI* (1.60) based on data from *Oil & Gas Journal* (2012); U.S. *PI* (0.9–1.31) for PADDs 1, 2, 3, and 5 in 1999–2008 from Karras, 2010.

<sup>126</sup> Karras, 2010.

<sup>127</sup> The County could quantify potential emissions from the crude switch using non-confidential information and readily available analysis tools. Karras (2010) and Abella and Bergerson (2012) each present methods that are designed to be used with publicly verifiable data. Each method appears to have strengths and weaknesses relative to the other, and ideally, both should be used.

<sup>128</sup> *See* Abella and Bergerson, 2012; Fox, 2013; Karras, 2010.

68. Evidence discussed in paragraphs 62–67 shows that the crude switch likely to result from the project would increase GHG emissions substantially, and could increase them on the order of  $\approx 1,000,000$  tonnes/yr, but the actual increment might be half, or twice, that amount, and the DEIR failed to report data that could narrow this uncertainty. If even half ( $\approx 500,000$  tonnes/yr) or only one-quarter ( $\approx 250,000$  tonnes/yr) of this emission potential is realized, the emission increment would exceed the 10,000 tonnes/yr threshold of significance for GHG emissions asserted by the DEIR substantially.

69. Emissions of toxic and smog-forming combustion products could increase along with  $\text{CO}_2$  as the project crude switch increases refinery energy intensity, requiring the SFR to burn more fuel per barrel of oil processed.<sup>129</sup> Emission of particulate matter air pollution (PM) is of specific concern. Fine particulate matter ( $\text{PM}_{2.5}$ ) is associated with  $\approx 14,000$ – $24,000$  premature deaths each year statewide, and  $\text{PM}_{2.5}$  exceeds air quality standards in the project area, as the DEIR acknowledges.<sup>130</sup> Refinery emissions dominate PM exposures locally, and a statewide analysis of PM as a “GHG co-pollutant” found elevated, localized, and disparate health risks associated with refinery PM emissions.<sup>131</sup> The DEIR does not analyze PM emissions from the project crude switch or propose any additional abatement to address them. However, based on the emission factor Phillips reported for 100% natural gas boiler firing,<sup>132</sup> and the energy increment discussed above ( $\approx 2.75$  GJ/ $\text{m}^3$ ), the project crude switch could increase SFR emissions of  $\text{PM}_{2.5}$  by an amount much greater than the significance threshold given in the DEIR.<sup>133</sup>

70. Cumulative impacts of the project with other projects that create long-term commitments to future emissions have the potential to result in failure to achieve the cut in emissions that will be necessary before 2050 to avert extreme climate disruption.<sup>134</sup> Indeed, substantial evidence indicates that stabilizing climate at a societally sustainable greenhouse impact level will require leaving approximately half of current fossil energy reserves underground.<sup>134</sup> Among other important implications of this evidence, it argues

<sup>129</sup> See Karras, 2010; Pastor et al., 2010.

<sup>130</sup> DEIR at 4.3-4, 4.3-5, 4.3-6.

<sup>131</sup> Pastor et al., 2010.

<sup>132</sup> See Air Permit Application at 10, 11 (0.0075 lb  $\text{PM}_{2.5}$  per MMBtu, which is 3.42 grams/GJ).

<sup>133</sup> Potential emission increment is  $\approx 9.4$  g/ $\text{m}^3$  crude refined ( $2.75$  GJ/ $\text{m}^3 \cdot 3.42$  g/GJ as  $\text{PM}_{2.5}$ ) or  $\approx 65.4$  tonnes/yr at SFR’s 120,000 b/d (6.96 million  $\text{m}^3$ /yr) capacity. Even one fourth of this increment ( $\approx 16$  tonnes/yr) exceeds the DEIR’s  $\text{PM}_{2.5}$  significance threshold (10 tons/yr). Other refinery fuel mix scenarios also result in  $\text{PM}_{2.5}$  estimates exceeding this threshold.

<sup>134</sup> See Davis et al., 2010; Hoffert, 2010; Meinshausen et al., 2009; Allen et al., 2009.

for limiting impacts by choosing to use the least hazardous and least polluting portion of the remaining petroleum resource in the interim.

71. The County could consider a measure that results in using SFR hydrocracking to meet the project's LPG objective without relying on coking a low-quality crude slate. Hydrocracking can be operated to "swing" between product slates, allowing diesel or gasoline or LPG to be its main output, and unlike coking, hydrocracking treats (cleans) its products.<sup>135</sup> Making project LPG from SFR's existing hydrocracking while retaining the project's coker fuel gas hydrotreating is technically feasible and could meet all project objectives stated in the DEIR while avoiding impacts of its potential crude switch. However, increasing LPG output from SFR hydrocracking will limit its gasoline or diesel output,<sup>135</sup> while coker-based LPG production will not—and the proposed project would thereby further boost profits from total light liquids production. In fact, this is one of the reasons the project as proposed would lock the refinery into a denser, more contaminated crude slate. To support this feasible measure, the County could find that boosting profits in a way that makes the project unable to achieve its stated objectives to reduce emissions or to reduce the likelihood of flaring events is not a stated objective of the project.

72. The County also could consider other measures that may lessen impacts from the project's crude switch. However, many different measures may need to be developed to address the myriad potential impacts from refining denser, more contaminated crude. In addition, the relative efficacy of such measures to lessen these impacts cannot, in many cases, be known until the data and analysis that the DEIR could and should have provided to better estimate the scale or severity of these impacts is available for review.

73. On 13 June 2013 the Refinery Action Collaborative, a labor-community collaborative focused on addressing safety and health concerns shared by refinery workers and residents in the Bay Area, submitted to BAAQMD a "recommendation to ensure prevention of feedstock-related emissions increase" that reads in relevant part:

To prevent new harm from feedstock-related emission increases, each refinery would be required to monitor and report its oil feedstock, and any proposed equipment change related to enabling a change in feedstock quantity or quality. Any proposed change in equipment related to enabling the refining of more oil, lower quality oil, or both, or any actual worsening of oil quality or increase in total oil throughput or both, would trigger a requirement to demonstrate that:

<sup>135</sup> See Robinson and Dolbear, 2007.

- the change in oil quantity, quality, or both (of the blend, of “slate” of oils refined) will not increase incident emission risk;<sup>††</sup>
- the change in oil quantity, quality, or both will not increase routine emissions of any pollutant; *and*
- the change in oil quantity, quality, or both will not use up any emission reduction measure that is needed to reduce the refinery’s ongoing emission of any pollutant that currently causes or contributes to air quality or environmental health harm.

Refiners would bear the burden of making each of these demonstrations. The Air District would bear the burden of ensuring transparent reporting and third-party verification through an independent community/worker oversight board that selects and oversees experts. Refiners would bear the burden of funding this independent verification (the independent oversight board and the experts it selects).

*Non reporting consequences:* Non reporting must not be allowed to defeat prevention. Equipment changes enabling the refining of more oil, lower quality oil, or both that are not reported before installation (1) cannot be considered in a feasibility analysis as a reason for failure to return to baseline emissions, (2) trigger all required demonstrations retroactively, and (3) require refiner-financed Air District monitoring in place of self-monitoring.

<sup>††</sup> *We anticipate that this would be demonstrated through a Process Hazard Analysis or similar documented, verifiable analysis.*<sup>136</sup>

74. The foregoing recommendation<sup>136</sup> is the first specific blueprint for action to evaluate and prevent environmental health and safety impacts from refining lower quality oil that was developed jointly by refinery worker- and community-based organizations. This jointly-developed proposal could thus be considered a critically important step toward solving this problem as presented by the subject project, as well as many other refinery projects regionally and nationwide. Although the BAAQMD is considering this recommendation in the context of a proposed regional air quality rule that could address emissions from refining lower quality oil specifically, at present no such requirement is in place. Importantly, the recommendation describes in significant detail a comprehensive approach to data reporting, evaluation, catastrophic hazard prevention, and emission impact prevention problems presented by this project’s potential crude switch. See paragraphs 12–23, 56–72. The County could consider this recommended approach as it completes its analysis, public review process, and decisions regarding the project.

<sup>136</sup> Refinery Action Collaborative, June 2013. Members include the Asian Pacific Environmental Network; BlueGreen Alliance; Communities for a Better Environment; Labor Occupational Health Program at U.C. Berkeley; the Natural Resources Defense Council; United Steelworkers International Union; United Steelworkers Local 5, and United Steelworkers Local 326.

## Conclusions

75. Catastrophic failure hazard associated with pressurized storage of propane and butane that would be produced and stored without adequate safeguards as a result of the project should be considered a significant potential impact. The DEIR presented an incomplete analysis of this impact, did not identify it as significant, and rejected the consideration required by safety policy of a feasible measure to avoid this impact.
76. Catastrophic failure hazard associated with greater amounts of corrosive, toxic, and flammable materials under high heat and pressure that would be caused by the processing of lower quality oil without adequate safeguards as a result of the project should be considered a significant potential impact. The DEIR did not analyze or identify this impact, and did not consider any measure to lessen or avoid it, although a measure to avoid this impact appears feasible.
77. Acute exposures to air pollutants emitted by flaring to control upsets caused by the processing of lower quality oil resulting from the project should be considered a significant potential impact. The DEIR did not analyze or identify this impact, and did not consider any measure to lessen or avoid it, although a measure that could avoid this impact appears feasible.
78. Acute exposures to air pollutants emitted by flaring associated with feeding fuel gases that have lower heat content to equipment designed to burn fuel gases that have higher heat content as a result of the project *may* be considered a significant potential impact—when data the DEIR did not include are reported and reviewed. The DEIR did not analyze or identify this impact, and did not consider any measure to lessen or avoid it, although such measures are feasible.
79. Exposures to localized air pollution from continuous emissions of fine particulate matter caused by increased fuel combustion associated with the processing of lower quality oil as a result of the project should be considered a significant potential impact. The DEIR did not analyze or identify this impact, and did not consider any measure to lessen or avoid it, although a measure that could avoid this impact appears feasible.
80. Sulfur dioxide (SO<sub>2</sub>) emissions could increase, instead of decreasing as the DEIR claims, if “emission reduction credits” resulting from the project are overestimated, and this *may* be considered a significant potential impact—when data the DEIR did not



include are reported and reviewed. The DEIR did not disclose these credits for a future emissions increase that could overwhelm the claimed emissions reduction from another part of the project. It did not analyze that emissions reduction claim against these credits to check on whether the credits are overestimated and could thus result in a net emissions increase. It did not consider any measure to lessen or avoid this potential impact, although a measure that could avoid this impact appears feasible.

81. Destruction of aquatic life and San Francisco Bay-Delta habitat caused by the expansion and continued operation of an outdated once-through cooling system as a result of the project should be considered a significant potential impact. The DEIR did not disclose state efforts that could replace the cooling system—thereby avoiding this impact—or that the project would conflict with and foreclose those efforts. The DEIR presented an incomplete, erroneous, and misleading discussion of this impact, did not identify it as significant, and did not consider any measure to lessen or avoid this impact.

82. Greenhouse gas emissions caused by burning propane and butane that would be produced and sent out of the refinery for this purpose as a result of the project should be considered a significant potential impact. The DEIR presented an erroneous analysis of these emissions, did not identify this impact, and did not consider any measure to lessen or avoid it, although such measures appear feasible.

83. Greenhouse gas emissions caused by increased refinery fuel combustion associated with the processing of lower quality oil resulting from the project should be considered a significant potential impact. The DEIR did not analyze or identify this impact, and did not consider any measure to lessen or avoid it, although a measure that could avoid this impact appears feasible.

84. The June 2013 DEIR did not include the information necessary to understand and evaluate the environmental implications of the project. It did not describe the duration, setting, geographic or processing scope, feedstock, operation, or potential environmental effects of the project accurately or, in many cases, did not describe them at all. These informational deficiencies are so profound, and the revisions needed to cure them so extensive, that full independent review of a comprehensively revised draft would be necessary before public decisions could be based with confidence on this project's environmental review.

85. I have given my opinions on these matters based on my knowledge, experience and expertise and the data, information and analysis discussed in this report.

I declare under penalty of perjury that the foregoing is true of my own knowledge, except as to those matters stated on information and belief, and as to those matters, I believe them to be true.

Executed this \_\_\_\_\_ day of September 2013 at Oakland, California

\_\_\_\_\_  
Greg Karras

## Attachments List

<i>Descriptor</i>	<i>Attachment</i>
Abella and Bergerson, 2012	Abella and Bergerson, 2012. Model to investigate energy and greenhouse gas emission implications of refining petroleum: impacts of crude quality and refinery configuration. <i>Env. Sci. Technol.</i> DOI: 10.1021/es30186821.
AICE, 1989 (excerpts)	American Institute of Chemical Engineers, Center for Chemical Process Safety, 1989. Guidelines for process equipment reliability data, with data tables. (Excerpts: pp. 183, 205).
Air Permit App.	ERM, 2013. Rodeo Propane Recovery Project BAAQMD Authority to Construct and Significant Revision to Major Facility Review Permit Application, Rodeo Refinery. February 2013.
Air Permit App. Atts 4 and 7	ERM, 2013 (Permit Application). Attachment A-4. Fugitive component TAC emissions; and Attachment A-7. Daily U233 fuel gas data.
Air Permit Correspondence	Correspondence regarding incomplete permit application for the project including: 30 April 2013 letter to Brian Lusher, Bay Area Air Quality Management District, from Don Bristol, Phillips 66 San Francisco Refinery (4/30/13 Phillips letter); 6/28/13 Phillips letter; 3/1/13 Phillips letter; 1 March 2013 letter to Brent Eastep, Phillips 66 Rodeo Refinery, from Brian Lusher, Bay Area Air Quality Management District (3/1/13 BAAQMD letter); 3/21/13 BAAQMD letter; 7/18/13 BAAQMD letter.
Allen et al., 2009	Allen et al., 2009. Warming caused by cumulative carbon emissions towards the trillionth tonne. <i>Nature</i> 458: 1163–1166.
API, 2009	American Petroleum Institute, 2009. Guidelines for avoiding sulfidation (sulfidic) corrosion failures in oil refineries. API Recommended Practice 939–C, First Edition.
BAAQMD, 2006	Staff Report, Proposed Amendments to Regulation 12, Miscellaneous Standards of Performance, Rule 12, Flares at Petroleum Refineries. Bay Area Air Quality Management District. 3 March 2006.
BAAQMD, 2009	Bay Area Air Quality Management District 18 September 2009 response to request for facility information by CBE (listing of Chevron Richmond Refinery dates of first operation by equipment source number; includes summary table by CBE).
BAAQMD, 2011	Major Facility Review Permit, Chevron Products Company, Facility #A0010. Bay Area Air Quality Management District. 11

August 2011.

BAAQMD, 2013	Major Facility Review Permit, Phillips 66–San Francisco Refinery, Facility #A0016. Bay Area Air Quality Management District. 4 March 2013.
Brandt, 2012	Brandt, 2012. Variability and uncertainty in life cycle assessment models for greenhouse gas emissions from Canadian oil sands production. <i>Env. Sci. Technol.</i> 46: 1253–1261.
Bredeson et al., 2010	Bredeson et al., 2010. Factors driving refinery CO <sub>2</sub> intensity, with allocation into products. <i>Int. J. Life Cycle Assess.</i> 15: 817–826.
CARB, 2013	Mandatory GHG Reporting Data. Emissions reported for calendar years 2009, 2010, 2011. California Air Resources Board. (Dnlldd 28 August 2013: <a href="https://ghgreport.arb.ca.gov/eats/carb">https://ghgreport.arb.ca.gov/eats/carb</a> ).
CBE, 1994	CBE, 1994. Dirty crude: The first oil industry-wide analysis of selenium discharge trends impacting San Francisco Bay. CBE Report No. 94–1. March 1994.
CBE, 2006	CBE, 2006. Analysis of Potrero Unit 3 entrainment impact evidence. March 2006.
CCHMP–Phillips 071113	Letter to Jim Ferris, Phillips 66 San Francisco Refinery, from Michael Dossey, Contra Costa Health Services Hazardous Materials Program. 11 July 2013.
Chevron R2-2011-0049	NPDES Permit No. CA0005134. Chevron Richmond Refinery. Issued in 2011.
City of Richmond, 2008	Chevron Energy and Hydrogen Renewal Project Final Environmental Impact Report SCH #2005072117 Volume 3–Responses to Comments. January 2008.
Crude Assays	Compilation of publicly reported crude oil assay reports.
CSB, 2005	CSB, 2005. Investigation Report: Refinery Explosion and Fire (15 Killed, 180 Injured); BP Texas City, Texas, March 23, 2005. Report No. 2005–04-I-TX. U.S. Chemical Safety and Hazard Investigation Board. March 2007.
CSB, 2013	CSB, 2005. Interim Investigation Report: Chevron Richmond Refinery Fire; Chevron Richmond Refinery, Richmond, California, August 6, 2012. U.S. Chemical Safety and Hazard Investigation Board. April 2013.
CV and Publications	Curriculum vitae and publications list
Davis et al., 2010	Davis et al., 2009. Future CO <sub>2</sub> emissions and climate change from existing energy infrastructure. <i>Science</i> 329: 1330–1333.

DOE COA 2013	DOE, 2013. Crude Oil Analysis Database. U.S. Department of Energy. Data table in Excel. ( <a href="http://www.netl.doe.gov/technologies/oil-gas/Software/database.html">www.netl.doe.gov/technologies/oil-gas/Software/database.html</a> ). Downloaded 8 August 2013.
DOE, 2002.	DOE, 2002. Strategic Petroleum Reserve Crude Oil Assay Manual, 2 <sup>nd</sup> Edition, Revision 2. U.S. Department of Energy. Revised November 2002.
Dolbear AG Summary	Email from Rose Fua, California Deputy Attorney General summarizing and quoting from a review by Dr. Geoff Dolbear regarding the Chevron Richmond refinery (other Bay Area data were reviewed as well). Forwarded to CBE 16 July 2008.
EIA Imports Analysis	Tables of data for foreign oils processed by the San Francisco Refinery reported by the U.S. Energy Information Administration ( <a href="http://www.eia.gov/petroleum/imports/comanylevel/archive">www.eia.gov/petroleum/imports/comanylevel/archive</a> )
EIA Ref. Cap. 2013	U.S. Energy Information Administration, 2013. Refinery Capacity Data by Individual Refinery as of January 1, 2013 ( <a href="http://www.eia.gov/petroleum/data">www.eia.gov/petroleum/data</a> ). Downloaded 26 August 2013.
EIA Refinery Yield	U.S. Energy Information Administration, 2013. U.S. Refinery Yield. ( <a href="http://www.eia.gov/dnav/pet/pet_pnp_pct_dc_nus_pct_m.htm">www.eia.gov/dnav/pet/pet_pnp_pct_dc_nus_pct_m.htm</a> )
ERCB st98-2009	ERCB, 2009. Alberta's Energy Reserves 2008 and Supply/Demand Outlook 2009-2018. Report ST98-2009. Energy Resources Conservation Board, Alberta, Canada. June 2009.
ERM & BAAQMD, 2012	CEQA Initial Study: Marine Terminal Offload Limit Revision Project, Phillips 66 Refinery, Rodeo, California, BAAQMD Permit Application 22904. Bay Area Air Quality Management District (prepared by ERM). December 2012.
Flare Causal Analysis excerpts	Phillips 66, various dates. Determination and Reporting of Cause reports pursuant to BAAQMD Rule 12-12 §406 for flaring initiating on 3/16/12, 4/25/12, 5/23/12, 5/31/12, 8/27/12.
Flaring Hot Spots	Karras and Hernandez, 2005. Flaring hot spots: Assessment of episodic air pollution associated with oil refinery flaring using sulfur as a tracer. A CBE Report. July 2005.
Flaring Prevention Measures	Karras et al., 2007. Flaring Prevention Measures. A CBE Report. April 2007.
Fox, 2013	Fox, 2013. Comments on Initial Study/Mitigated Negative Declaration for the Valero Crude by Rail Project, Benicia, California, Use Permit Application 12PLN-00063. July 2013.
Goodman, 2013	Goodman and Rowan, 2013. Comments of the Goodman Group, Ltd., on Initial Study/Mitigated Negative Declaration, Valero

	Crude by Rail Project, Benicia, California, Use Permit Application 12PLN-00063.
Hoffert, 2010	Hoffert, 2009. Farewell to fossil fuels? <i>Science</i> 329: 1292–1294.
Karras, 2008	Karras, 2008. Chevron Renewal Project, SCH #2005072117, City #1101974 Agenda Report, Consolidated EIR and Staff-recommended EIR and Conditional Use conditions and findings related to oil quality cap; expert report.
Karras, 2010	Karras, 2010. Combustion emissions from refining lower quality oil: What is the global warming potential? <i>Env. Sci. Technol.</i> 44(24): 9584–9589.
Karras, 2013	Testimony of Greg Karras, Senior Scientist, CBE, before the U.S. Chemical Safety and Hazard Investigation Board (CSB), 19 April 2013, Memorial Auditorium, Richmond, CA.
LOHP, 2013	Wilson, 2013. Refinery Safety in California: Labor, community and fire agency views. Summary report prepared for the Office of Governor Jerry Brown, Interagency Task Force on Refinery Safety, by the Labor Occupational Health Program at U.C. Berkeley. Revised 4 June 2013.
Meinshausen et al., 2009	Greenhouse-gas emission targets for limiting global warming to 2 °C. <i>Nature</i> 458: 1158–1162.
Meyer et al., 2007	Meyer, 2007. Heavy oil and natural bitumen resources in geological basins of the world: U.S. Geological Survey Open-File Report 2007-1084.
Meyers, 1986	Handbook of petroleum refining processes. Meyers, Robert A., ed. ISBN 0-07-041763-6. McGraw-Hill. 1986.
NPDES Permit R2-1985-029	NPDES Permit No. CA0005053. Union Oil Co. San Francisco Refinery, Rodeo. Issued in 1985.
NPDES Permit R2-1989-002	NPDES Permit No. CA0005053. Union Oil Co. San Francisco Refinery, Rodeo. Issued in 1989.
NPDES Permit R2-2000-015	NPDES Permit No. CA0005053. Tosco Corp. San Francisco Refinery at Rodeo. Issued in 2000.
NPDES Permit R2-2005-0030	NPDES Permit No. CA0005053. ConocoPhillips Corp. San Francisco Refinery at Rodeo. Issued 2005.
NPDES Permit R2-2011-0027	NPDES Permit No. CA0005053. ConocoPhillips Corp. San Francisco Refinery at Rodeo. Issued in 2011.
NPDES Permit R3-2007-0002	NPDES Permit No. CA0000051. ConocoPhillips Corp. Santa Maria Refinery. Issued in 2007.

Oil & Gas Journal, 2012	Koottungal, 2012. 2012 Worldwide Refining Survey. <i>Oil &amp; Gas Journal</i> . 3 December 2012 (All figures are as of January 1, 2013).
Pastor et al., 2010	Pastor et al., 2020. <i>Minding the climate gap: What's at stake if California's climate law isn't done right and right away</i> . USC Program for Environmental and Regional Equity: Los Angeles, CA. <a href="http://college.usc.edu/pere/publications">http://college.usc.edu/pere/publications</a> .
Phillips Cooling Tower	<i>Cooling Tower Replacement Feasibility Evaluation, Order R2-2011-0027; Provision VI.C.2.f., Phillips 66 San Francisco Refinery at Rodeo</i> . Submitted by Don Bristol, Superintendent, Environmental Services, Phillips 66 San Francisco Refinery, no 30 September 2013. (13-page report)
Phillips Intake Rpt.	<i>Waste Water Annual Report for 2012, Phillips 66, San Francisco Refinery</i> .
Phillips Thermal ext. 1	8 August 2012 letter from Don Bristol, Phillips 66 San Francisco Refinery, to Regional Water Quality Control Board, San Francisco Bay Region, regarding: <i>Phase 2 Thermal Plume Study Final Report, NPDES Order #R2-2011-0027, Provision VIC2d; Task 3 Request for Due Date Extension</i> .
Phillips Thermal ext. 2	4 September 2012 letter from Bruce Wolfe, Regional Water Quality Control Board, San Francisco Bay Region, to Don Bristol, Phillips 66 San Francisco Refinery, regarding: <i>Phase 2 Thermal Plume Study Final Report Compliance Date Extension</i> .
Phillips, 2012a	Phillips 66, 2012. <i>Propane Recovery Project Overview, August 13 2012, Phillips 66 San Francisco Refinery</i> . Submitted to BAAQMD. Provided by BAAQMD to CBE (slides presentation).
Phillips, 2012b	Phillips 66, 2012. <i>Rodeo Propane Recovery Project, Project Description</i> . August 2012. Submitted to BAAQMD. Provided by BAAQMD to CBE (32-page document).
Refinery Action Collaborative, June 2013	Letter to Jack Broadbent, Bay Area Air Quality Management District, from the Refinery Action Collaborative regarding: <i>Bay Area Air Quality Management District Proposed Regulation 12, Rule 15; March 2013 Preliminary Draft Petroleum Refining Emissions Tracking Rule</i> . 13 June 2013.
Regional Monitoring Program	Regional Monitoring Program (RMP) Results. San Francisco Estuary Institute. Data tables report generated by the RMP Web Query ( <a href="http://www.sfei.org/mp/mp_data_access.html">www.sfei.org/mp/mp_data_access.html</a> ). Report generated 17 August 2013.
Robinson and Dolbear, 2007	Robinson and Dolbear, 2007. Commercial hydrotreating and hydrocracking. In <i>Hydroprocessing of heavy oils and residua</i> ;

- Ancheyta, J., Speight, J.G., Eds.; CRC Press, Taylor & Francis Group: Boca Raton, FL. Vol. 117: 281-311.
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- Valero R2-2009-0079 NPDES Permit No. CA0005550. Valero Benicia Refinery. Issued in 2009.
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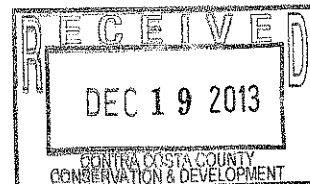
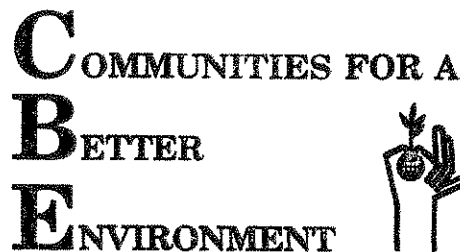


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12 December 2013

Clerk of the Board  
Contra Costa County Board of Supervisors  
651 Pine Street, Room 106  
Martinez, CA 94553

Attention: Tiffany Lennear (Tiffany.Lennear@cob.cccounty.us)



**Appeal of Environmental Impact Report and Land Use Permit Filed 2 Dec 2013:**

**Phillips 66 Company Propane Recovery Project, Environmental Impact Report (EIR) and Land Use Permit, EIR SCH #2012072046, County File LP12-2073;**

**Communities for a Better Environment (CBE) Supplemental Evidence-A**

Dear Clerk of the Board,

In support of our appeal, CBE respectfully submits the 3 December 2013 comment of the Governor's Office of Planning and Research (OPR) entitled "WesPac Pittsburg Energy Infrastructure Project, Tar Sands." This new evidence is appended hereto as Attachment 1.

OPR is California's comprehensive state planning agency. The WesPac proposal would be located in Contra Costa County and transfer oils received by train and boat to nearby refineries via means including a pipeline connected to the Rodeo facility.<sup>1</sup> It is thus a potential new source of San Francisco Refinery (SFR) oil feedstock.<sup>2</sup> This new feedstock source "may impact planning for greenhouse gas emission reduction and infrastructure" as OPR correctly notes. Feedstock and products are key process variables that are fundamentally interrelated. Propane and butane (LPG) are among the products of processing oil feedstock. Therefore, the OPR comment is relevant to environmental review of the Phillips 66 SFR "Propane Recovery Project" at Rodeo.

Refinery oil feedstock quality has been reported publicly by individual facilities and can, in any case, be estimated for individual facilities by independent experts—and thus by competing oil companies—using public data.<sup>3</sup>

<sup>1</sup> WesPac RDEIR SCH #2011072053. See Executive Summary and Section 2.0.

<sup>2</sup> Other new sources of oil, e.g., the Phillips 66 SFR Rodeo wharf throughput and Santa Maria rail expansions, are documented and addressed elsewhere in CBE's and others' comments.

<sup>3</sup> See table submitted to CalEPA on 16 October 2013; appended hereto as Attachment 2.

CBE seeks an adequate environmental review that, among other things, resolves the EIR's failure to include information on the sources, types, or quality of Rodeo facility oil feedstock now, or after implementation of the proposed project.<sup>4</sup> Failing to include this information, the EIR fails to answer even the most straightforward questions about whether tar sands oils could be a new feedstock, what changes in oil feedstock are anticipated, potential environmental impacts of those changes, and how those impacts will be addressed. Attachment 1 clearly states OPR's authoritative opinion that these questions "should be answered in the course of review" under the state's Environmental Quality Act. This new evidence further strongly supports CBE's appeal.

Respectfully Submitted,



Roger Lin  
Staff Attorney

Attachments: 1. Comments of Ken Alex, Director, State of California Governor's Office of Planning and Research, to Kristin Pollot, Associate Planner, City of Pittsburg Planning Department, *Re: WesPac Pittsburg Energy Infrastructure Project, Tar Sands*; 3 December 2013.

2. Table submitted to CalEPA on 16 October 2013 supporting Refinery Action Collaborative recommendations on the Governor's Interagency Working Group draft report.

Copy: Ken Alex, Director, Governor's Office of Planning and Research  
Lashun Cross, Principal Planner, Department of Conservation and Development  
Diane Bailey, Senior Scientist, Natural Resources Defense Council  
Laurel L. Impett, AICP, Urban Planner, Shute, Mihaly & Weinberger LLP  
Interested Organizations and Individuals

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<sup>4</sup> The EIR admits it does not include this information, arguing against disclosure. Its argument, that LPG production has no relationship to feedstock, fails on four independent grounds: (1) It suffers from the logical fallacy that products are unrelated to feedstock. (2) It is improperly based on a conclusory statement supported by no evidence or data. (3) It is contradicted by substantial evidence that baseline feedstock processing makes insufficient LPG to implement the project. (4) It ignores capacity to make more LPG from lower quality oils, e.g., tar sands "dilbits," via concurrent SFR wharf, rail, and process throughput expansions. See comments, expert reports, and appeals of CBE, Rodeo Citizens Association, for supporting evidence and details of these points.



EDMOND G. BROWN JR.  
GOVERNOR

STATE OF CALIFORNIA  
GOVERNOR'S OFFICE *of* PLANNING AND RESEARCH



KEN ALEX  
DIRECTOR

December 3, 2013

Kristin Pollot, Associate Planner  
City of Pittsburg, Planning Department  
65 Civic Avenue  
Pittsburg, CA 94565  
[kpollot@ci.pittsburg.ca.us](mailto:kpollot@ci.pittsburg.ca.us)

Re: WesPac Pittsburg Energy Infrastructure Project, Tar Sands

Dear Ms. Pollot:

The public comment period for the Recirculated Draft Environmental Impact Report for the WesPac Pittsburg Energy Infrastructure Project closed on September 13, 2013. We apologize for missing that deadline, but ask that this letter be included in the record before the City Council at the time the WesPac project comes before the Council.

The Governor's Office of Planning and Research (OPR) is California's comprehensive state planning agency and serves the Governor and his Cabinet as staff for long-range planning and research. The RDEIR includes the following information:

1. WesPac proposes to modernize and reactivate the existing oil storage and transfer facilities located at the NRG Energy, Inc. Pittsburg Generating Station. The proposed Terminal "would be designed to receive crude oil and partially refined crude oil from trains, marine vessels, and pipelines, store oil in existing or new storage tanks, and then transfer oil to nearby refineries."
2. The total annual throughput for the Terminal would be approximately 88.3 million barrels of crude oil or partially refined crude oil per year.

The WesPac project may impact planning for greenhouse gas emission reduction and infrastructure and is therefore of interest to OPR. As a result, we pose three straight-forward questions that we believe should be answered in the course of review of the project:

1. Can the WesPac project receive, store, or transfer crude oil or partially refined crude oil from tar sands?
2. What are the anticipated sources of crude oil or partially refined crude oil that WesPac will receive, store, or transfer?
3. If the anticipated sources of crude change, who makes that decision, and if the crude mix change results in increased environmental impacts, how will those impacts be addressed?

Kristin Pollot, Associate Planner  
Page 2

Many thanks for your consideration of these issues.

Sincerely,

--S--

Ken Alex  
Director

Cc Members of the Pittsburg City Council

Refinery crude feed quality has been reported publicly by individual facilities and can, in any case, be estimated for individual facilities by independent experts *and* competing oil companies using public data—examples:

Reporting for	Every plant	Richmond	Santa Maria	Each in BA <sup>4</sup>	Each in BA <sup>5</sup>
Reported for:	Import slate	Total slate	Total slate	Total slate	Total slate
Parameters reported:	Density, sulfur, and volume	Density, sulfur, and volume	Density, sulfur, and volume	Density, sulfur, and volume	Selenium, volume, [and See note <sup>5</sup> ]
Oils reported:	By country	By name	By field	By country, stream or name	
Averaging:	Monthly	Annual	Annual	Annual	Annual
Data source:	EIA <sup>1</sup>	Chevron <sup>2</sup>	Phillips 66 <sup>3</sup>	UCS, CBE <sup>4</sup>	CBE <sup>5</sup>

**Table by CBE (9/25/13). Data referenced and notes:**

<sup>1</sup> Reports by each individual U.S. plant from U.S. Energy Information Administration, various dates to present. *Company Level Imports* (<http://www.eia.gov/petroleum/imports/companylevel>).

<sup>2</sup> EIR SCH#2005072117. See City of Richmond Planning Department; 10 April 2008 Planning Commission Agenda Report Attachment 6. Response to CBE comment and Lead Agency information request by Robert Chamberlin, Chevron. April 2008.

<sup>3</sup> EIR SCH #20081010111. See *Phillips 66 Santa Maria Refinery Throughput Increase Project Final Environmental Impact Report*; pp. 2-5 through 2-10. October 2012.

<sup>4</sup> Estimates for each individual San Francisco Bay Area refinery including Chevron-Richmond (1994–2012) and Phillips-Rodeo, Shell-Martinez, Tesoro-Avon, and Valero-Benicia (2008). See UCS, 2011. *Oil refinery CO<sub>2</sub> performance measurement*. Technical analysis prepared for the Union of Concerned Scientists by Communities for a Better Environment. See esp. Table 2-7. ([www.ucsusa.org/assets/documents/global\\_warming/oil-refinery-CO2-performance.pdf](http://www.ucsusa.org/assets/documents/global_warming/oil-refinery-CO2-performance.pdf)); and CBE, 2013. *Documentation of sulfur in crude refined at Richmond, California*. Memorandum to Daniel Horowitz, Managing Director, U.S. Chemical Safety Board, from Greg Karras, Senior Scientist, Communities for a Better Environment. 9 April 2013.

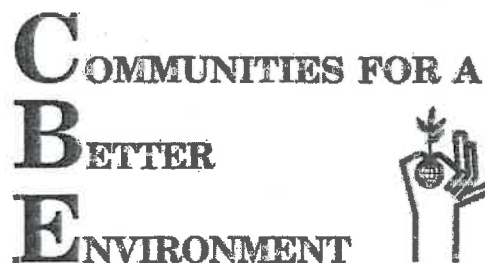
<sup>5</sup> Estimates for each individual San Francisco Bay Area refinery. See CBE, 1994. *Dirty Crude: The first oil industry-wide analysis of selenium discharge trends impacting San Francisco Bay*; CBE Report No. 94–1. See also Chevron, 1992. *Response to the RWQCB request for information regarding the WSPA selenium proposal*; Cal. Reg. Water Quality Control Board, San Francisco Bay Region. [Oil density/sulfur notes; reported crude density and sulfur content was used as secondary supporting data for this report's analysis focused on and reporting on selenium (Se).]

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7 January 2013

Clerk of the Board  
Contra Costa County Board of Supervisors  
651 Pine Street, Room 106  
Martinez, CA 94553

Attention: Tiffany Lennear (Tiffany.Lennear@cob.cccounty.us)



**Appeal of Environmental Impact Report and Land Use Permit Filed 2 Dec 2013:**

**Phillips 66 Company Propane Recovery Project, Environmental Impact Report (EIR) and Land Use Permit, EIR SCH #2012072046, County File LP12-2073;**

**Communities for a Better Environment (CBE) Supplemental Evidence-B**

Dear Clerk of the Board,

In support of our appeal, CBE respectfully submits flow and heat data reported by Phillips 66 for once-through cooling (OTC) at Rodeo. This new evidence is appended hereto as Attachment 3.

OTC is an antiquated industrial cooling technology that is no longer used by any other Bay Area oil refinery.<sup>1</sup> The state has ordered Phillips 66 to investigate replacing OTC with modern cooling technology, and Phillips has submitted a report indicating that this is feasible.<sup>1</sup> The proposed project would instead expand the Rodeo OTC system, increasing its San Francisco Bay water flow to 57.6 million gallons per day (MGD).<sup>2</sup> OTC harms aquatic organisms by sucking them into the industrial plants cooled by the water they live in (entrainment), pinning them against the water intake screens (impingement), and degrading their habitat via the discharge of the heated water as thermal waste.<sup>1</sup> The severity of these impacts is related to the amount of water drawn for cooling and discharged as thermal waste. Thus, an accurate evaluation of potential impacts from continuing and expanding this use of Bay water requires an accurate estimate of current "baseline" OTC flow. However, the EIR fails to include data Phillips reported from monitoring OTC flow.<sup>1</sup> Therefore, the evidence given in Attachment 3 is relevant to review of this project.

<sup>1</sup> CBE documented these facts previously. See esp. Karras Report at 14-21 and NPDES permit, Phillips Cooling Tower, and Regional Monitoring Program attachments thereto. The EIR's omission of these facts, and its deferral of analysis and mitigation to future state (RWQCB) actions, are improper.

<sup>2</sup> See DEIR at 3-27 (project proposes ≈40,000 gallons per minute, or 57.6 MGD).

7 January 2013

**CBE Appeal Supplemental Evidence–B  
(SCH#2012072046; LP12-2073)**

**Page Two**

In particular, the EIR asserts that a single recent year represents an accurate baseline for OTC average flow;<sup>3</sup> that this flow baseline is  $\approx 45.4$  MGD;<sup>4</sup> that the project will increase OTC flow from this baseline by  $\approx 25\%$ ;<sup>5</sup> and that this flow increase ( $+25\%$ ) is not underestimated because, it asserts, this baseline (45.4 MGD) is not overestimated.<sup>3</sup> None of these assertions is supported by any data that is included in the EIR, which excludes OTC monitoring data Phillips reported as well as Regional Water Quality Control Board (RWQCB) permit findings based on those data. Further, each of these conclusory assertions is contradicted by those data, as discussed below.

**The Rodeo OTC Data**

Phillips 66 is required to study and monitor Rodeo facility activities that may affect water quality and report results to the RWQCB.<sup>6</sup> Among other things, Phillips is required to report results of direct measurements, taken daily by specified methods, of flow and temperature at outfall E-003, the discharge carrying OTC flow and heat to the Bay.<sup>6</sup> Pursuant to the California Public Records Act, CBE reviewed those daily monitoring results submitted by Phillips to the RWQCB for the period from 1 January 2010 through 30 November 2013, the most recent 47 months reported.<sup>7</sup> These data, along with summary values based on Phillips' past reports that the RWQCB included in permit findings,<sup>8</sup> are given in Attachment 3 and summarized in Chart S-1.

**EIR OTC Baseline Errors**

Rodeo OTC flow (0–63.4 MGD daily avg.) and discharge temperature (52.4–109 °F daily max.) range widely and vary daily, seasonally, and year-to-year.<sup>9</sup> See Chart S-1, Plate A. Thus, an accurate estimate of baseline conditions must account for multiple years. Therefore, the EIR's assertion that a single year represents an accurate baseline for OTC average flow is in error.

Multi-year average OTC flows calculated from Phillips' monitoring data since 2009 range from  $\approx 35$  MGD (2005–2009) to  $\approx 39$ –41 MGD (three-year running avg. as of Jan–Nov 2013).<sup>9</sup> See Chart S-1, plates B and C. Thus, the 45.4 MGD OTC average flow baseline claimed by the EIR overestimates all recently observed multi-year average flows. Therefore, the EIR's unsupported assertion that it does not overestimate baseline OTC flow—and does not thereby underestimate the OTC flow increase—is contradicted by available data that the EIR has failed to disclose.

<sup>3</sup> FEIR at 3.2-135, 3.2-137.

<sup>4</sup> DEIR at 3-27 (the EIR asserts a baseline of  $\approx 31,500$  gallons per minute, or 45.4 MGD).

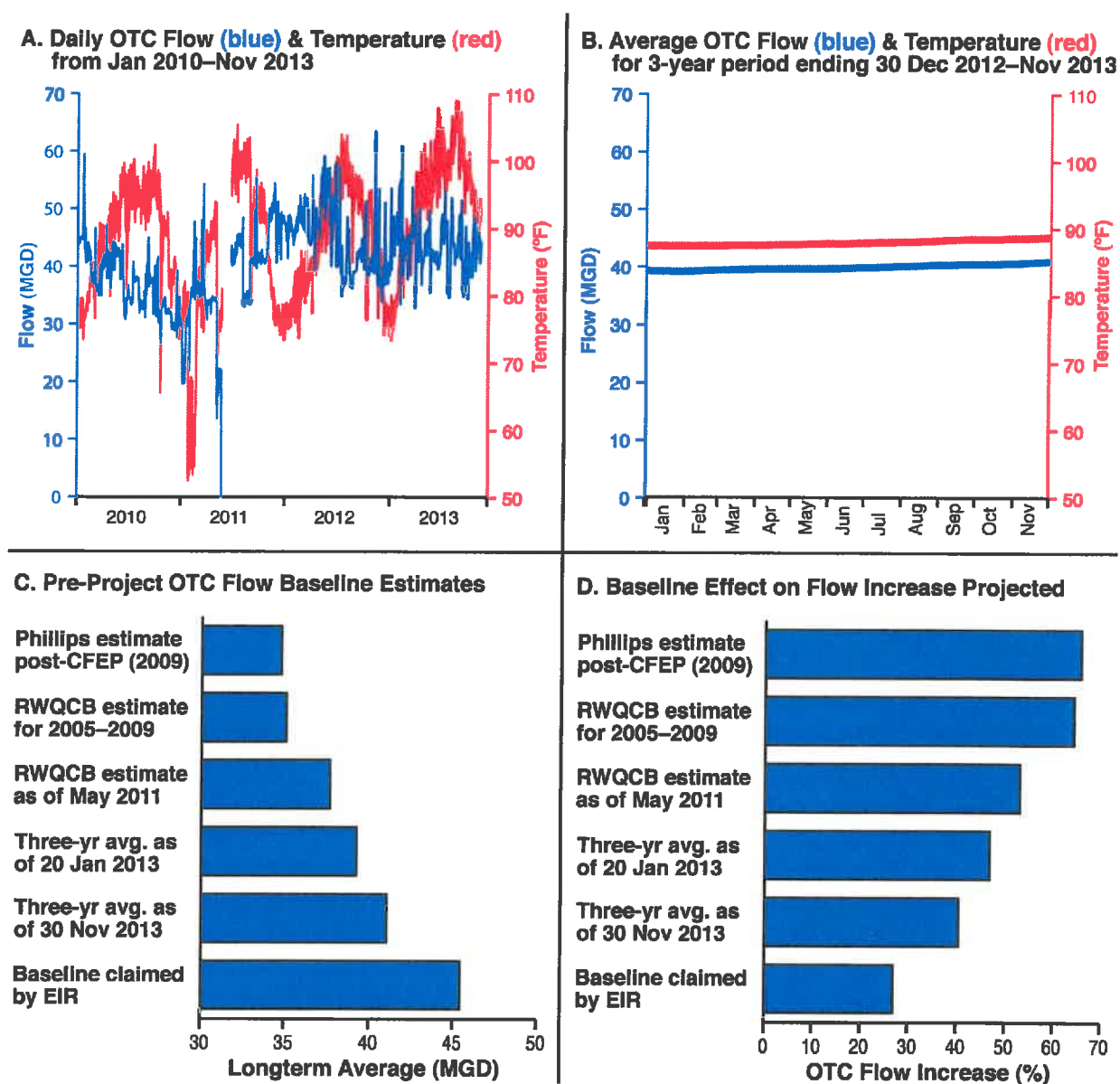
<sup>5</sup> DEIR at 4.4-22, 4.4-27, 4.10-22; FEIR at 3.2-122, 3.2-136, 3.2-138.

<sup>6</sup> NPDES Permit Order R2-2011-0027; see esp. required monitoring, Finding II.B.2. Non-OTC water is only 0.65 MGD of E-003 average flow (Finding II.B.2), and is excluded from OTC flow analysis herein.

<sup>7</sup> All of these daily records were reviewed except for those from June 2011: the data from this month was missing from RWQCB records, according to RWQCB staff aiding CBE's records review on 18 Dec 2013.

<sup>8</sup> These findings were submitted previously: see Karras Report Att. "NPDES Permit R2-2011-0027."

<sup>9</sup> See Attachment 3. Also important, temperature increased recently along with flow (see Chart S-1, plates A and B). The recent daily maximum of 109 °F exceeds the 105.4 °F maximum reported by the EIR (DEIR at 4.4-27, 4.10-22). This compares with Bay temperatures  $\approx 55$  °F (see Karras Report) and further suggests that the EIR underestimates OTC impacts. The EIR's assertion of "continued compliance" with water quality requirements (DEIR at 4.10-22; FEIR at 3.2-122, 3.2-125, 3.2-137, 3.2-138) is unsupported.



**Chart S-1. Rodeo Once-Through Cooling (OTC) data and EIR baseline error.** MGD: million gallons/day. **Plate A:** Cooling water flow and outfall E-003 discharge temperature vary daily, seasonally and annually; thus an accurate estimate of current “baseline” conditions must consider data from multiple years. **Plate B:** Long-term (3-year) average flow and temperature varied little during 2013, and both increased slightly, indicating increased use of OTC since 2010. **Plate C:** Phillips’ estimate of OTC flow following startup of its prior, “Clean Fuels Expansion” (CFEP) project in 2009 is close to the average for 2005–2009 observed by the RWQCB (~35 MGD) and less than the three-year averages from 2010–2012 and 2011–2013 (~39–41 MGD), and all of these long-term flow estimates are smaller than the baseline claimed by the EIR (45.4 MGD). **Plate D:** The EIR’s inflated baseline underestimates the increase in OTC flow from the project. Overestimating current average flow, the EIR underestimates the increase in flow represented by the proposed total post-project flow (57.6 MGD), and this cumulative error—in both the numerator and denominator of its calculated percentage increase—underestimates potential project impacts substantially. **Data sources:** Jan 2010–Nov 2013 data from measurements reported by Phillips’ to RWQCB (see Attachment 3). Phillips’ and RWQCB’s flow estimates from RWQCB findings reported in NPDES Permit CA0005053, attached to CBE’s previous comments (see also Karras Report, esp. page 14). Flow shown excludes non-OTC flows that are discharged with the cooling water from outfall E-003 (0.65 MGD; see NPDES Permit Finding II.B.2).



Increasing multi-year average flow did not lower discharge temperature and is not explained by reviews of prior projects. See Chart S-1, plates B and C.<sup>10</sup> This indicates increasing transfer of process heat from undisclosed sources—possibly from increased firing rates, reduced cooling tower use, or both—that might be part of the project Phillips has already begun to implement.<sup>11</sup> Instead of describing these heat sources, the EIR states “it should be expected that the capacity of an engineered cooling system would exceed not only the normal average, but also the largest heat load that the *Refinery* could impose on the system.” FEIR at 3.2-136; *emphasis added*. Thus, the EIR’s description of the project allows for the possibility that the recent flow increase is related to the project: recent flow might include project flow. Therefore, its assertion that one recent year represents the OTC baseline accurately is inconsistent with its project description.

Overestimating baseline OTC flow, the EIR also underestimates the increment from baseline to total post-project OTC flow. These errors in both the numerator (increment) and denominator (baseline) of its calculated percentage increase in flow are cumulative. Thus, instead of the EIR’s erroneous assertion that the proposed OTC expansion would increase flow from its inflated baseline by  $\approx 25\%$ , this expansion to 57.6 MGD would increase OTC flow from the observed multi-year averages of 35–41 MGD by  $\approx 40\text{--}65\%$ . See Chart S-1, plates C and D. Therefore, the EIR underestimates potential project impacts substantially. As a result, it ignores substantial impacts.

### Conclusion

CBE seeks an adequate environmental review that, among other things, resolves the EIR’s failure to identify, analyze, or mitigate significant potential impacts on the San Francisco Bay from the project’s proposed expansion of antiquated technology that could otherwise be replaced with modern cooling technology. This new evidence further strongly supports CBE’s appeal.

Respectfully Submitted,

  
Roger Lin  
Staff Attorney

  
Greg Karras  
Senior Scientist

Attachment: CBE Supp. Attachment 3. Flow and heat data reported by Phillips 66 for Rodeo facility once-through cooling (OTC)

Copy: Lashun Cross, Principal Planner, Department of Conservation and Development  
Laurel L. Impett, AICP, Urban Planner, Shute, Mihaly & Weinberger LLP  
Interested Organizations and Individuals

<sup>10</sup> See also NPDES Permit CA0005053, Order R2-2011-0027 at page F-53.

<sup>11</sup> See also Karras Report at 14–16.

## **CBE Supplemental Attachment 3**

### **Flow and Heat Data Reported by Phillips 66 for Rodeo Facility Once-Through Cooling (OTC)**

#### **Contents**

- Part 1: Rodeo Facility Once-Through Cooling (OTC)  
daily data, Jan 2010–Nov 2013  
(27 pages)**
- Part 2: Rodeo Facility Once-Through Cooling (OTC) data,  
Jan 2010–Nov 2013  
Three-year avg. flow (12/30/12–11/30/13)  
(7 pages)**
- Part 3: E-003 Average Flow findings by date,  
and OTC portion, various dates  
(1 page)**

**Attachment 3 Part 1.** Rodeo Facility Once-Through Cooling (OTC) daily data, Jan 2010–Nov 2013  
CBE Records Review, San Francisco Bay Regional Water Quality Control Board Records, Dec 2013  
Includes paper and electronic (<http://ciwqs.waterboards.ca.gov/ciwqs>, dnldd 12/2013) records.

Year	Month	Day	Daily Avg. Flow E-003A (MGD)	Daily Temperature E-003A (°F)
2010	1	1	44.1	78.4
2010	1	2	44.6	78.4
2010	1	3	44.4	77.6
2010	1	4	44.0	77.8
2010	1	5	44.0	77.3
2010	1	6	44.0	76.3
2010	1	7	44.9	76.2
2010	1	8	44.7	76.8
2010	1	9	44.8	75.1
2010	1	10	44.6	76.2
2010	1	11	45.0	75.6
2010	1	12	44.6	79.5
2010	1	13	44.7	79.3
2010	1	14	44.8	78.3
2010	1	15	44.7	76.1
2010	1	16	44.9	78.9
2010	1	17	44.8	79.6
2010	1	18	47.1	78.4
2010	1	19	56.3	76.1
2010	1	20	59.5	74.0
2010	1	21	48.8	73.4
2010	1	22	49.3	74.9
2010	1	23	45.4	76.2
2010	1	24	43.0	76.3
2010	1	25	45.3	76.3
2010	1	26	46.6	76.5
2010	1	27	42.4	77.6
2010	1	28	41.3	76.6
2010	1	29	40.6	77.5
2010	1	30	40.6	78.2
2010	1	31	41.2	78.7
2010	2	1	41.9	78.4
2010	2	2	41.1	78.4
2010	2	3	40.8	80.2
2010	2	4	41.1	77.6
2010	2	5	42.3	80.4
2010	2	6	44.1	79.4
2010	2	7	42.7	80.3
2010	2	8	42.2	80.0
2010	2	9	43.4	80.0
2010	2	10	42.5	78.8
2010	2	11	42.3	81.6
2010	2	12	42.6	82.6
2010	2	13	42.6	82.8
2010	2	14	42.5	82.9
2010	2	15	41.0	84.7
2010	2	16	39.5	85.6
2010	2	17	37.4	85.0
2010	2	18	37.7	83.7
2010	2	19	37.9	82.1
2010	2	20	38.0	81.6
2010	2	21	37.5	81.3

**Attachment 3 Part 1, continued.**

Year	Month	Day	Daily Avg. Flow E-003A (MGD)	Daily Temperature E-003A (°F)
2010	2	22	37.1	83.5
2010	2	23	38.2	81.7
2010	2	24	37.9	84.8
2010	2	25	36.9	84.1
2010	2	26	38.8	81.0
2010	2	27	37.8	79.4
2010	2	28	37.8	85.3
2010	3	1	37.7	82.9
2010	3	2	38.8	81.9
2010	3	3	46.6	76.5
2010	3	4	38.4	83.2
2010	3	5	36.3	85.0
2010	3	6	36.2	88.1
2010	3	7	35.7	84.1
2010	3	8	36.2	83.0
2010	3	9	36.0	81.6
2010	3	10	36.2	82.6
2010	3	11	36.0	80.8
2010	3	12	36.8	80.9
2010	3	13	36.0	81.8
2010	3	14	35.4	84.4
2010	3	15	35.0	85.0
2010	3	16	34.9	86.1
2010	3	17	35.5	88.4
2010	3	18	38.7	90.7
2010	3	19	40.2	86.5
2010	3	20	39.0	83.4
2010	3	21	38.1	87.0
2010	3	22	38.2	85.6
2010	3	23	38.0	89.0
2010	3	24	38.4	86.9
2010	3	25	34.9	84.8
2010	3	26	40.3	87.2
2010	3	27	41.1	90.4
2010	3	28	39.9	87.7
2010	3	29	39.3	86.4
2010	3	30	39.7	88.3
2010	3	31	41.9	84.9
2010	4	1	41.0	88.3
2010	4	2	39.7	85.6
2010	4	3	40.0	85.6
2010	4	4	41.0	83.8
2010	4	5	41.8	86.6
2010	4	6	42.0	88.0
2010	4	7	41.6	90.3
2010	4	8	40.0	88.0
2010	4	9	42.1	89.4
2010	4	10	42.9	85.9
2010	4	11	44.3	83.6
2010	4	12	47.3	84.0
2010	4	13	37.9	90.1
2010	4	14	37.9	88.9
2010	4	15	39.0	87.8
2010	4	16	38.8	90.4

Attachment 3 Part 1, continued.

Year	Month	Day	Daily Avg. Flow E-003A (MGD)	Daily Temperature E-003A (°F)
2010	4	17	38.1	91.3
2010	4	18	40.7	91.7
2010	4	19	42.5	88.9
2010	4	20	42.1	89.1
2010	4	21	41.5	88.5
2010	4	22	41.0	92.0
2010	4	23	41.3	93.5
2010	4	24	39.7	91.3
2010	4	25	36.1	79.8
2010	4	26	36.1	92.4
2010	4	27	39.0	86.9
2010	4	28	37.8	84.0
2010	4	29	39.8	89.9
2010	4	30	43.6	90.7
2010	5	1	43.4	90.2
2010	5	2	43.2	93.3
2010	5	3	43.2	93.2
2010	5	4	43.4	95.3
2010	5	5	44.3	94.6
2010	5	6	44.3	92.3
2010	5	7	41.3	93.4
2010	5	8	39.6	92.0
2010	5	9	39.3	90.3
2010	5	10	39.4	88.3
2010	5	11	44.0	93.5
2010	5	12	43.0	91.5
2010	5	13	41.8	94.7
2010	5	14	42.0	91.6
2010	5	15	43.4	91.7
2010	5	16	41.8	92.7
2010	5	17	41.7	92.3
2010	5	18	42.2	92.6
2010	5	19	42.6	92.2
2010	5	20	43.1	93.9
2010	5	21	43.0	89.4
2010	5	22	42.0	91.8
2010	5	23	42.0	90.1
2010	5	24	42.6	88.0
2010	5	25	43.1	88.7
2010	5	26	41.6	91.1
2010	5	27	41.5	88.6
2010	5	28	42.2	94.4
2010	5	29	40.9	97.9
2010	5	30	38.5	96.1
2010	5	31	37.7	93.0
2010	6	1	38.5	95.1
2010	6	2	38.7	96.0
2010	6	3	39.9	95.7
2010	6	4	39.0	94.5
2010	6	5	38.0	99.0
2010	6	6	43.8	96.6
2010	6	7	41.4	98.0
2010	6	8	43.6	96.3
2010	6	9	41.6	94.8

**Attachment 3 Part 1, continued.**

Year	Month	Day	Daily Avg. Flow E-003A (MGD)	Daily Temperature E-003A (°F)
2010	6	10	38.3	97.6
2010	6	11	38.0	99.7
2010	6	12	35.2	98.1
2010	6	13	34.4	97.8
2010	6	14	33.1	96.4
2010	6	15	31.5	93.6
2010	6	16	31.2	98.0
2010	6	17	31.6	95.2
2010	6	18	30.9	89.4
2010	6	19	30.8	92.3
2010	6	20	31.6	90.7
2010	6	21	31.4	91.2
2010	6	22	31.6	80.9
2010	6	23	34.4	92.1
2010	6	24	34.5	93.4
2010	6	25	34.5	86.3
2010	6	26	34.7	90.2
2010	6	27	35.4	98.6
2010	6	28	36.7	96.9
2010	6	29	36.1	89.6
2010	6	30	35.2	92.0
2010	7	1	35.0	96.0
2010	7	2	34.6	96.2
2010	7	3	34.6	97.5
2010	7	4	34.4	99.4
2010	7	5	34.2	95.7
2010	7	6	34.3	92.8
2010	7	7	34.1	95.3
2010	7	8	33.6	97.5
2010	7	9	33.3	94.6
2010	7	10	33.6	96.6
2010	7	11	33.6	96.4
2010	7	12	34.1	92.7
2010	7	13	33.8	94.0
2010	7	14	33.7	99.3
2010	7	15	35.6	100.1
2010	7	16	40.8	99.7
2010	7	17	38.0	100.3
2010	7	18	38.2	98.7
2010	7	19	38.1	98.5
2010	7	20	37.7	93.1
2010	7	21	37.7	90.8
2010	7	22	37.3	95.5
2010	7	23	37.3	96.2
2010	7	24	37.4	95.0
2010	7	25	37.6	96.1
2010	7	26	38.0	93.9
2010	7	27	38.0	93.0
2010	7	28	38.2	96.3
2010	7	29	38.1	97.6
2010	7	30	38.0	94.9
2010	7	31	37.9	94.3
2010	8	1	38.0	95.6
2010	8	2	38.0	95.3

**Attachment 3 Part 1, continued.**

Year	Month	Day	Daily Avg. Flow E-003A (MGD)	Daily Temperature E-003A (°F)
2010	8	3	37.8	96.3
2010	8	4	37.8	95.0
2010	8	5	35.6	94.0
2010	8	6	34.1	95.3
2010	8	7	33.4	94.9
2010	8	8	31.9	93.1
2010	8	9	34.0	95.5
2010	8	10	34.1	93.9
2010	8	11	34.0	90.6
2010	8	12	34.0	94.1
2010	8	13	33.7	94.2
2010	8	14	33.5	93.1
2010	8	15	33.8	95.2
2010	8	16	33.7	97.1
2010	8	17	33.7	93.3
2010	8	18	33.4	97.2
2010	8	19	33.1	99.2
2010	8	20	32.5	92.1
2010	8	21	33.6	93.1
2010	8	22	33.8	97.8
2010	8	23	33.6	97.1
2010	8	24	33.4	97.8
2010	8	25	35.5	95.7
2010	8	26	35.7	91.4
2010	8	27	33.7	92.4
2010	8	28	31.1	89.7
2010	8	29	36.7	92.7
2010	8	30	38.6	92.0
2010	8	31	37.6	93.4
2010	9	1	35.1	96.9
2010	9	2	36.7	98.5
2010	9	3	40.5	98.5
2010	9	4	38.6	97.8
2010	9	5	38.4	97.6
2010	9	6	39.5	99.8
2010	9	7	44.5	92.0
2010	9	8	45.0	90.9
2010	9	9	39.0	95.9
2010	9	10	36.5	97.4
2010	9	11	38.8	98.6
2010	9	12	38.6	96.7
2010	9	13	37.0	92.1
2010	9	14	37.9	93.9
2010	9	15	37.8	94.5
2010	9	16	37.2	98.2
2010	9	17	37.4	96.6
2010	9	18	37.5	96.0
2010	9	19	37.2	97.5
2010	9	20	37.4	96.7
2010	9	21	37.8	95.7
2010	9	22	37.9	94.6
2010	9	23	37.6	98.9
2010	9	24	37.7	100.5
2010	9	25	35.5	99.5

**Attachment 3 Part 1, continued.**

Year	Month	Day	Daily Avg. Flow E-003A (MGD)	Daily Temperature E-003A (°F)
2010	9	26	31.7	100.4
2010	9	27	34.8	101.5
2010	9	28	33.9	101.9
2010	9	29	36.3	102.4
2010	9	30	38.0	97.0
2010	10	1	40.0	96.7
2010	10	2	39.1	95.9
2010	10	3	35.0	95.1
2010	10	4	32.9	94.1
2010	10	5	32.0	95.9
2010	10	6	31.3	96.2
2010	10	7	31.4	92.8
2010	10	8	36.3	93.8
2010	10	9	40.9	97.6
2010	10	10	40.9	96.8
2010	10	11	40.4	98.6
2010	10	12	41.6	96.1
2010	10	13	40.4	96.3
2010	10	14	30.3	96.8
2010	10	15	30.6	98.1
2010	10	16	30.7	93.0
2010	10	17	31.0	91.0
2010	10	18	30.3	95.7
2010	10	19	30.0	94.1
2010	10	20	29.9	93.3
2010	10	21	29.9	91.6
2010	10	22	28.1	92.2
2010	10	23	26.6	65.5
2010	10	24	31.7	71.0
2010	10	25	32.6	76.6
2010	10	26	33.0	87.6
2010	10	27	32.9	86.0
2010	10	28	33.0	85.0
2010	10	29	34.0	85.2
2010	10	30	34.1	89.0
2010	10	31	33.8	90.7
2010	11	1	33.8	91.7
2010	11	2	33.9	90.6
2010	11	3	33.7	90.7
2010	11	4	33.9	90.7
2010	11	5	34.4	90.5
2010	11	6	34.3	88.9
2010	11	7	34.6	90.0
2010	11	8	33.6	90.8
2010	11	9	32.2	89.0
2010	11	10	31.8	90.7
2010	11	11	31.8	88.7
2010	11	12	31.7	91.1
2010	11	13	32.1	90.4
2010	11	14	31.9	90.5
2010	11	15	31.8	92.3
2010	11	16	31.9	90.7
2010	11	17	31.8	88.6
2010	11	18	31.8	88.3



**Attachment 3 Part 1, continued.**

Year	Month	Day	Daily Avg. Flow E-003A (MGD)	Daily Temperature E-003A (°F)
2010	11	19	32.0	84.8
2010	11	20	32.7	82.6
2010	11	21	32.0	81.4
2010	11	22	31.9	81.6
2010	11	23	31.9	81.0
2010	11	24	31.9	82.9
2010	11	25	31.8	81.7
2010	11	26	31.7	82.2
2010	11	27	32.1	82.5
2010	11	28	31.9	83.8
2010	11	29	31.8	81.3
2010	11	30	31.8	78.1
2010	12	1	29.8	80.7
2010	12	2	29.1	82.3
2010	12	3	29.1	81.4
2010	12	4	29.3	83.7
2010	12	5	29.9	81.6
2010	12	6	29.4	83.7
2010	12	7	29.5	83.6
2010	12	8	30.2	82.6
2010	12	9	29.4	85.2
2010	12	10	29.0	84.9
2010	12	11	29.2	85.7
2010	12	12	28.9	85.1
2010	12	13	29.1	85.1
2010	12	14	29.2	84.5
2010	12	15	29.2	84.7
2010	12	16	29.1	83.5
2010	12	17	29.6	77.8
2010	12	18	29.7	78.6
2010	12	19	38.2	74.9
2010	12	20	39.3	78.4
2010	12	21	27.6	80.1
2010	12	22	29.0	80.9
2010	12	23	29.5	82.4
2010	12	24	29.4	80.3
2010	12	25	31.1	78.4
2010	12	26	30.9	78.1
2010	12	27	30.1	78.7
2010	12	28	32.8	76.5
2010	12	29	34.7	73.5
2010	12	30	30.2	77.4
2010	12	31	29.7	78.7
2011	1	1	31.3	76.2
2011	1	2	31.3	75.0
2011	1	3	30.4	76.9
2011	1	4	30.2	77.6
2011	1	5	30.3	76.8
2011	1	6	30.3	75.5
2011	1	7	30.0	75.1
2011	1	8	23.0	77.0
2011	1	9	19.6	75.3
2011	1	10	19.7	75.9
2011	1	11	19.9	75.3

**Attachment 3 Part 1, continued.**

Year	Month	Day	Daily Avg. Flow E-003A (MGD)	Daily Temperature E-003A (°F)
2011	1	12	19.6	81.0
2011	1	13	20.0	78.8
2011	1	14	19.7	81.3
2011	1	15	19.6	80.1
2011	1	16	19.7	80.3
2011	1	17	19.9	82.0
2011	1	18	19.7	80.2
2011	1	19	23.1	78.7
2011	1	20	25.4	72.2
2011	1	21	30.4	76.8
2011	1	22	31.0	78.9
2011	1	23	30.4	78.2
2011	1	24	30.6	78.0
2011	1	25	29.8	79.5
2011	1	26	30.2	77.3
2011	1	27	30.0	76.5
2011	1	28	31.3	78.4
2011	1	29	31.4	80.5
2011	1	30	32.5	76.4
2011	1	31	31.6	60.8
2011	2	1	32.6	53.9
2011	2	2	24.6	52.4
2011	2	3	21.9	53.7
2011	2	4	33.6	53.1
2011	2	5	33.7	53.6
2011	2	6	34.4	55.4
2011	2	7	35.4	57.2
2011	2	8	35.6	62.3
2011	2	9	35.5	64.4
2011	2	10	36.2	66.7
2011	2	11	35.2	67.8
2011	2	12	35.1	66.4
2011	2	13	35.3	66.4
2011	2	14	34.9	67.2
2011	2	15	34.7	67.2
2011	2	16	38.4	62.2
2011	2	17	42.5	54.1
2011	2	18	40.5	58.1
2011	2	19	47.7	53.3
2011	2	20	38.9	59.8
2011	2	21	36.4	60.6
2011	2	22	34.2	59.7
2011	2	23	34.3	60.8
2011	2	24	36.0	61.7
2011	2	25	44.9	54.5
2011	2	26	37.0	61.1
2011	2	27	35.8	62.4
2011	2	28	35.5	63.4
2011	3	1	35.5	76.3
2011	3	2	35.6	76.3
2011	3	3	35.6	79.5
2011	3	4	35.4	80.3
2011	3	5	35.3	82.8
2011	3	6	37.4	79.2

**Attachment 3 Part 1, continued.**

Year	Month	Day	Daily Avg. Flow E-003A (MGD)	Daily Temperature E-003A (°F)
2011	3	7	36.6	79.1
2011	3	8	35.5	82.9
2011	3	9	35.0	84.1
2011	3	10	34.5	82.1
2011	3	11	34.6	78.4
2011	3	12	34.8	81.8
2011	3	13	34.8	81.3
2011	3	14	35.0	88.2
2011	3	15	36.3	82.3
2011	3	16	37.0	82.0
2011	3	17	34.8	84.7
2011	3	18	48.0	80.6
2011	3	19	46.6	75.2
2011	3	20	45.9	76.5
2011	3	21	35.6	79.1
2011	3	22	35.1	79.4
2011	3	23	35.2	77.7
2011	3	24	54.3	75.1
2011	3	25	41.0	77.2
2011	3	26	39.6	74.5
2011	3	27	36.6	75.3
2011	3	28	35.7	78.8
2011	3	29	35.0	82.2
2011	3	30	34.5	84.3
2011	3	31	33.3	84.6
2011	4	1	32.9	87.4
2011	4	2	33.1	89.5
2011	4	3	32.5	88.4
2011	4	4	32.2	89.7
2011	4	5	31.2	86.3
2011	4	6	30.7	89.0
2011	4	7	33.4	86.0
2011	4	8	33.9	86.3
2011	4	9	34.0	87.1
2011	4	10	34.1	88.3
2011	4	11	34.1	88.7
2011	4	12	34.1	84.9
2011	4	13	33.4	86.8
2011	4	14	33.9	86.0
2011	4	15	33.6	86.0
2011	4	16	33.4	89.3
2011	4	17	34.1	88.5
2011	4	18	33.9	86.6
2011	4	19	33.3	90.9
2011	4	20	31.7	89.3
2011	4	21	33.3	90.7
2011	4	22	34.4	88.2
2011	4	23	33.7	88.6
2011	4	24	34.1	88.5
2011	4	25	34.1	90.3
2011	4	26	34.8	91.0
2011	4	27	34.6	88.3
2011	4	28	34.3	89.0
2011	4	29	34.6	91.5

Attachment 3 Part 1, continued.

Year	Month	Day	Daily Avg. Flow E-003A (MGD)	Daily Temperature E-003A (°F)
2011	4	30	34.4	88.6
2011	5	1	34.3	91.1
2011	5	2	34.3	92.6
2011	5	3	34.2	92.3
2011	5	4	34.1	93.9
2011	5	5	34.2	93.8
2011	5	6	33.9	88.3
2011	5	7	34.4	87.3
2011	5	8	34.7	88.2
2011	5	9	34.3	93.7
2011	5	10	34.1	90.8
2011	5	11	34.1	82.1
2011	5	12	32.3	72.7
2011	5	13	17.1	79.4
2011	5	14	13.6	73.2
2011	5	15	19.1	73.8
2011	5	16	19.2	71.3
2011	5	17	21.0	71.2
2011	5	18	17.6	76.9
2011	5	19	21.8	77.6
2011	5	20	22.2	76.6
2011	5	21	21.4	77.5
2011	5	22	22.2	76.7
2011	5	23	22.2	77.5
2011	5	24	22.2	77.1
2011	5	25	20.8	74.6
2011	5	26	22.1	77.5
2011	5	27	22.1	78.0
2011	5	28	21.8	75.2
2011	5	29	22.0	76.9
2011	5	30	9.9	81.0
2011	5	31	0.0	76.3
2011	6	1	--	-- NA: Self-
2011	6	2	--	-- Monitoring
2011	6	3	--	-- Report (SMR)
2011	6	4	--	-- missing from
2011	6	5	--	-- Regional
2011	6	6	--	-- Board records
2011	6	7	--	-- (searched on
2011	6	8	--	-- 12/18/2013).
2011	6	9	--	-- NA: see above
2011	6	10	--	-- NA: see above
2011	6	11	--	-- NA: see above
2011	6	12	--	-- NA: see above
2011	6	13	--	-- NA: see above
2011	6	14	--	-- NA: see above
2011	6	15	--	-- NA: see above
2011	6	16	--	-- NA: see above
2011	6	17	--	-- NA: see above
2011	6	18	--	-- NA: see above
2011	6	19	--	-- NA: see above
2011	6	20	--	-- NA: see above
2011	6	21	--	-- NA: see above
2011	6	22	--	-- NA: see above

Attachment 3 Part 1, continued.

Year	Month	Day	Daily Avg. Flow E-003A (MGD)	Daily Temperature E-003A (°F)
2011	6	23	--	-- NA: see above
2011	6	24	--	-- NA: see above
2011	6	25	--	-- NA: see above
2011	6	26	--	-- NA: see above
2011	6	27	--	-- NA: see above
2011	6	28	--	-- NA: see above
2011	6	29	--	-- NA: see above
2011	6	30	--	-- NA: see above
2011	7	1	40.7	97.2
2011	7	2	43.6	94.8
2011	7	3	42.4	100.3
2011	7	4	43.1	99.0
2011	7	5	40.1	99.9
2011	7	6	40.5	101.2
2011	7	7	42.8	101.6
2011	7	8	42.6	103.1
2011	7	9	42.5	97.1
2011	7	10	42.1	101.8
2011	7	11	41.0	99.6
2011	7	12	40.4	98.5
2011	7	13	41.2	99.2
2011	7	14	41.1	102.7
2011	7	15	42.1	95.0
2011	7	16	44.1	100.2
2011	7	17	43.6	102.2
2011	7	18	44.0	101.0
2011	7	19	43.1	102.8
2011	7	20	42.0	105.4
2011	7	21	44.5	100.0
2011	7	22	45.4	101.9
2011	7	23	44.4	101.5
2011	7	24	44.6	93.8
2011	7	25	44.3	97.7
2011	7	26	45.6	99.2
2011	7	27	44.1	98.9
2011	7	28	45.3	98.7
2011	7	29	45.3	98.5
2011	7	30	44.5	98.0
2011	7	31	45.6	99.3
2011	8	1	43.5	101.3
2011	8	2	43.9	100.6
2011	8	3	45.0	98.8
2011	8	4	44.8	101.4
2011	8	5	43.2	97.3
2011	8	6	43.7	99.4
2011	8	7	43.7	100.6
2011	8	8	43.8	98.7
2011	8	9	44.1	99.4
2011	8	10	46.4	99.9
2011	8	11	48.5	98.2
2011	8	12	37.2	98.4
2011	8	13	33.4	102.7
2011	8	14	33.2	101.4
2011	8	15	33.2	102.4

**Attachment 3 Part 1, continued.**

Year	Month	Day	Daily Avg. Flow E-003A (MGD)	Daily Temperature E-003A (°F)
2011	8	16	33.3	102.3
2011	8	17	33.1	99.7
2011	8	18	34.5	100.3
2011	8	19	34.8	98.2
2011	8	20	34.7	96.8
2011	8	21	34.2	99.5
2011	8	22	34.1	102.7
2011	8	23	34.7	100.9
2011	8	24	35.3	99.3
2011	8	25	34.5	103.2
2011	8	26	34.4	97.6
2011	8	27	35.7	97.8
2011	8	28	34.4	101.0
2011	8	29	33.6	98.6
2011	8	30	33.6	100.3
2011	8	31	33.6	99.7
2011	9	1	34.1	99.7
2011	9	2	34.6	103.5
2011	9	3	35.7	101.2
2011	9	4	34.0	99.7
2011	9	5	33.7	100.5
2011	9	6	33.4	96.5
2011	9	7	41.1	88.0
2011	9	8	41.0	80.1
2011	9	9	41.3	79.1
2011	9	10	40.6	78.9
2011	9	11	41.5	79.2
2011	9	12	41.4	88.7
2011	9	13	41.2	93.5
2011	9	14	41.1	89.9
2011	9	15	41.3	90.5
2011	9	16	41.5	90.8
2011	9	17	41.2	92.0
2011	9	18	40.6	92.4
2011	9	19	40.3	93.4
2011	9	20	40.1	96.1
2011	9	21	40.5	92.9
2011	9	22	49.7	94.4
2011	9	23	45.1	95.9
2011	9	24	43.7	92.3
2011	9	25	45.1	93.1
2011	9	26	48.0	96.6
2011	9	27	55.4	95.4
2011	9	28	50.6	98.7
2011	9	29	39.7	95.1
2011	9	30	40.3	92.9
2011	10	1	40.5	94.7
2011	10	2	41.0	96.4
2011	10	3	41.3	93.4
2011	10	4	41.2	95.3
2011	10	5	42.4	92.9
2011	10	6	41.5	94.0
2011	10	7	40.8	92.2
2011	10	8	40.8	92.0

**Attachment 3 Part 1, continued.**

Year	Month	Day	Daily Avg. Flow E-003A (MGD)	Daily Temperature E-003A (°F)
2011	10	9	41.3	93.7
2011	10	10	41.1	91.0
2011	10	11	41.3	90.7
2011	10	12	41.8	93.4
2011	10	13	41.1	95.0
2011	10	14	40.4	96.7
2011	10	15	40.7	93.5
2011	10	16	41.8	93.0
2011	10	17	42.9	92.7
2011	10	18	42.0	94.1
2011	10	19	41.5	93.7
2011	10	20	41.7	90.9
2011	10	21	41.3	93.2
2011	10	22	40.9	95.7
2011	10	23	41.2	95.2
2011	10	24	41.2	92.4
2011	10	25	40.9	90.7
2011	10	26	41.2	92.1
2011	10	27	40.5	90.9
2011	10	28	40.7	92.2
2011	10	29	41.0	91.1
2011	10	30	40.5	91.6
2011	10	31	40.8	92.3
2011	11	1	41.2	91.6
2011	11	2	41.0	89.9
2011	11	3	41.1	90.0
2011	11	4	41.8	88.4
2011	11	5	43.1	85.7
2011	11	6	42.1	88.5
2011	11	7	45.3	87.5
2011	11	8	43.0	85.9
2011	11	9	44.9	85.6
2011	11	10	49.1	86.4
2011	11	11	48.5	85.0
2011	11	12	48.9	83.3
2011	11	13	49.3	84.8
2011	11	14	50.1	84.2
2011	11	15	49.2	85.3
2011	11	16	47.8	84.0
2011	11	17	48.1	83.6
2011	11	18	48.1	82.8
2011	11	19	48.6	82.6
2011	11	20	48.2	80.7
2011	11	21	49.7	82.6
2011	11	22	50.9	81.3
2011	11	23	50.7	80.0
2011	11	24	49.3	79.7
2011	11	25	50.4	79.5
2011	11	26	49.9	80.0
2011	11	27	51.8	80.1
2011	11	28	52.4	80.3
2011	11	29	52.8	81.1
2011	11	30	51.1	80.7
2011	12	1	54.4	79.7

**Attachment 3 Part 1, continued.**

Year	Month	Day	Daily Avg. Flow E-003A (MGD)	Daily Temperature E-003A (°F)
2011	12	2	52.1	79.2
2011	12	3	50.9	76.3
2011	12	4	50.1	78.0
2011	12	5	49.4	75.8
2011	12	6	48.6	77.3
2011	12	7	44.0	77.7
2011	12	8	40.6	75.6
2011	12	9	40.8	76.9
2011	12	10	40.9	77.1
2011	12	11	45.0	76.9
2011	12	12	49.4	76.9
2011	12	13	51.3	76.4
2011	12	14	49.2	76.2
2011	12	15	48.7	76.7
2011	12	16	47.5	78.4
2011	12	17	47.3	77.0
2011	12	18	47.3	76.9
2011	12	19	47.3	77.4
2011	12	20	46.7	76.0
2011	12	21	46.9	75.9
2011	12	22	46.9	76.0
2011	12	23	42.3	74.8
2011	12	24	41.2	74.7
2011	12	25	49.4	74.2
2011	12	26	48.6	74.4
2011	12	27	48.2	75.0
2011	12	28	48.6	76.1
2011	12	29	48.5	76.9
2011	12	30	48.5	76.9
2011	12	31	48.7	76.8
2012	1	1	48.8	75.7
2012	1	2	48.6	78.1
2012	1	3	48.7	78.5
2012	1	4	47.9	76.1
2012	1	5	47.4	75.9
2012	1	6	47.5	73.5
2012	1	7	47.6	73.7
2012	1	8	47.2	73.9
2012	1	9	47.4	75.3
2012	1	10	46.2	76.8
2012	1	11	45.8	77.0
2012	1	12	44.5	76.3
2012	1	13	44.6	76.8
2012	1	14	44.7	78.7
2012	1	15	45.4	76.0
2012	1	16	47.6	78.6
2012	1	17	41.4	75.7
2012	1	18	48.7	76.5
2012	1	19	44.8	77.5
2012	1	20	47.2	76.1
2012	1	21	47.7	75.1
2012	1	22	46.1	75.7
2012	1	23	48.9	75.8
2012	1	24	47.2	77.1



**Attachment 3 Part 1, continued.**

Year	Month	Day	Daily Avg. Flow E-003A (MGD)	Daily Temperature E-003A (°F)
2012	1	25	47.7	78.6
2012	1	26	48.4	77.7
2012	1	27	47.2	77.5
2012	1	28	46.9	75.4
2012	1	29	46.8	78.1
2012	1	30	47.3	79.3
2012	1	31	46.1	77.0
2012	2	1	46.2	77.1
2012	2	2	46.3	78.8
2012	2	3	45.2	79.5
2012	2	4	45.5	77.7
2012	2	5	45.3	78.8
2012	2	6	43.7	76.9
2012	2	7	44.7	77.3
2012	2	8	44.5	81.3
2012	2	9	44.7	81.1
2012	2	10	45.0	80.6
2012	2	11	45.3	82.9
2012	2	12	47.0	81.4
2012	2	13	46.5	79.9
2012	2	14	46.6	83.6
2012	2	15	45.9	76.0
2012	2	16	48.0	78.8
2012	2	17	48.5	78.8
2012	2	18	47.1	79.8
2012	2	19	46.0	79.5
2012	2	20	46.7	81.5
2012	2	21	48.4	83.4
2012	2	22	49.2	81.2
2012	2	23	47.6	84.0
2012	2	24	50.5	79.6
2012	2	25	50.3	78.7
2012	2	26	48.2	77.2
2012	2	27	49.0	73.8
2012	2	28	50.0	77.7
2012	2	29	52.3	77.6
2012	3	1	51.1	79.4
2012	3	2	49.7	84.5
2012	3	3	50.2	84.6
2012	3	4	48.9	82.0
2012	3	5	47.4	86.6
2012	3	6	48.0	79.5
2012	3	7	47.6	82.0
2012	3	8	47.3	84.4
2012	3	9	47.0	84.7
2012	3	10	47.1	83.5
2012	3	11	46.9	85.4
2012	3	12	47.1	82.3
2012	3	13	46.4	80.2
2012	3	14	52.0	80.3
2012	3	15	48.0	82.8
2012	3	16	52.5	81.4
2012	3	17	49.3	81.9
2012	3	18	46.3	80.3

**Attachment 3 Part 1, continued.**

Year	Month	Day	Daily Avg. Flow E-003A (MGD)	Daily Temperature E-003A (°F)
2012	3	19	46.5	78.9
2012	3	20	45.9	84.6
2012	3	21	46.3	86.5
2012	3	22	46.1	83.4
2012	3	23	46.5	84.0
2012	3	24	48.0	80.1
2012	3	25	51.9	79.9
2012	3	26	45.3	80.8
2012	3	27	48.8	80.4
2012	3	28	49.7	83.7
2012	3	29	44.5	83.2
2012	3	30	44.1	82.9
2012	3	31	44.5	81.4
2012	4	1	44.1	83.1
2012	4	2	43.9	84.0
2012	4	3	43.8	84.8
2012	4	4	43.7	84.6
2012	4	5	44.0	85.4
2012	4	6	44.0	85.3
2012	4	7	44.4	84.8
2012	4	8	44.6	84.6
2012	4	9	44.9	85.6
2012	4	10	46.2	82.6
2012	4	11	47.0	83.4
2012	4	12	49.1	83.6
2012	4	13	55.8	77.4
2012	4	14	48.2	85.8
2012	4	15	47.7	83.5
2012	4	16	47.2	84.0
2012	4	17	47.2	85.1
2012	4	18	47.1	85.1
2012	4	19	44.3	89.3
2012	4	20	39.6	90.4
2012	4	21	39.1	92.1
2012	4	22	45.3	92.4
2012	4	23	48.9	86.6
2012	4	24	50.2	89.3
2012	4	25	50.0	90.9
2012	4	26	48.5	83.0
2012	4	27	48.1	86.9
2012	4	28	47.3	87.8
2012	4	29	47.4	89.9
2012	4	30	47.1	84.0
2012	5	1	47.2	90.0
2012	5	2	48.2	84.8
2012	5	3	46.5	85.5
2012	5	4	46.9	85.6
2012	5	5	46.7	89.3
2012	5	6	46.9	91.3
2012	5	7	44.9	90.5
2012	5	8	46.6	94.9
2012	5	9	49.7	88.6
2012	5	10	50.4	94.2
2012	5	11	50.8	92.3

**Attachment 3 Part 1, continued.**

Year	Month	Day	Daily Avg. Flow E-003A (MGD)	Daily Temperature E-003A (°F)
2012	5	12	53.1	91.4
2012	5	13	55.8	91.4
2012	5	14	54.4	88.9
2012	5	15	51.0	86.5
2012	5	16	54.7	89.7
2012	5	17	57.2	88.5
2012	5	18	55.2	93.6
2012	5	19	50.4	92.3
2012	5	20	51.5	94.2
2012	5	21	54.1	91.1
2012	5	22	59.2	94.4
2012	5	23	59.2	92.8
2012	5	24	54.7	89.8
2012	5	25	49.2	89.6
2012	5	26	48.1	90.6
2012	5	27	49.2	89.3
2012	5	28	49.3	86.4
2012	5	29	50.4	90.2
2012	5	30	51.2	93.3
2012	5	31	53.0	90.8
2012	6	1	53.2	91.3
2012	6	2	56.3	89.7
2012	6	3	57.0	90.7
2012	6	4	53.2	87.6
2012	6	5	52.3	90.1
2012	6	6	53.8	91.2
2012	6	7	54.9	90.7
2012	6	8	54.1	90.5
2012	6	9	56.6	93.7
2012	6	10	57.2	95.6
2012	6	11	54.8	95.7
2012	6	12	47.1	96.9
2012	6	13	48.1	94.4
2012	6	14	48.8	95.8
2012	6	15	49.7	94.3
2012	6	16	47.3	97.4
2012	6	17	40.6	94.1
2012	6	18	40.1	92.1
2012	6	19	42.2	93.9
2012	6	20	50.8	91.4
2012	6	21	47.5	88.7
2012	6	22	52.3	88.1
2012	6	23	50.6	89.7
2012	6	24	50.1	89.7
2012	6	25	47.7	92.9
2012	6	26	47.8	94.3
2012	6	27	49.5	98.5
2012	6	28	49.8	94.8
2012	6	29	50.0	99.4
2012	6	30	50.0	98.6
2012	7	1	56.2	96.5
2012	7	2	58.0	98.4
2012	7	3	58.1	100.0
2012	7	4	40.3	97.0

**Attachment 3 Part 1, continued.**

Year	Month	Day	Daily Avg. Flow E-003A (MGD)	Daily Temperature E-003A (°F)
2012	7	5	40.0	97.8
2012	7	6	39.9	100.7
2012	7	7	39.9	97.1
2012	7	8	40.2	97.9
2012	7	9	40.2	97.9
2012	7	10	40.5	97.9
2012	7	11	40.4	99.4
2012	7	12	40.7	100.3
2012	7	13	46.5	93.9
2012	7	14	50.5	97.1
2012	7	15	49.6	96.7
2012	7	16	57.6	92.9
2012	7	17	43.0	93.5
2012	7	18	41.4	98.1
2012	7	19	41.2	95.6
2012	7	20	39.8	103.0
2012	7	21	38.8	104.0
2012	7	22	43.6	99.1
2012	7	23	43.6	100.1
2012	7	24	43.3	103.2
2012	7	25	41.1	94.4
2012	7	26	34.9	99.0
2012	7	27	36.0	100.9
2012	7	28	36.2	98.6
2012	7	29	36.4	99.2
2012	7	30	36.5	102.8
2012	7	31	38.1	99.3
2012	8	1	36.8	100.7
2012	8	2	37.0	101.4
2012	8	3	36.9	98.6
2012	8	4	36.8	96.7
2012	8	5	36.9	100.5
2012	8	6	37.0	102.2
2012	8	7	37.4	102.1
2012	8	8	37.4	103.8
2012	8	9	41.4	100.3
2012	8	10	41.9	100.3
2012	8	11	46.2	101.2
2012	8	12	48.6	99.0
2012	8	13	46.4	100.8
2012	8	14	44.3	94.8
2012	8	15	41.0	97.8
2012	8	16	41.8	99.3
2012	8	17	46.5	99.2
2012	8	18	46.4	98.7
2012	8	19	41.0	99.8
2012	8	20	40.6	97.4
2012	8	21	38.7	96.7
2012	8	22	38.5	98.9
2012	8	23	38.2	98.3
2012	8	24	36.6	94.6
2012	8	25	36.7	95.1
2012	8	26	36.8	97.2
2012	8	27	36.4	98.7

**Attachment 3 Part 1, continued.**

Year	Month	Day	Daily Avg. Flow E-003A (MGD)	Daily Temperature E-003A (°F)
2012	8	28	36.4	99.3
2012	8	29	36.6	91.9
2012	8	30	36.7	84.9
2012	8	31	36.5	86.6
2012	9	1	36.2	94.4
2012	9	2	38.1	97.3
2012	9	3	39.1	92.5
2012	9	4	39.1	94.3
2012	9	5	39.1	94.9
2012	9	6	38.9	95.7
2012	9	7	38.9	94.3
2012	9	8	39.1	97.0
2012	9	9	39.2	98.1
2012	9	10	39.2	95.3
2012	9	11	39.3	96.6
2012	9	12	39.2	97.4
2012	9	13	39.4	95.5
2012	9	14	39.3	95.9
2012	9	15	39.7	97.6
2012	9	16	42.5	94.7
2012	9	17	42.3	96.4
2012	9	18	41.8	95.1
2012	9	19	41.6	92.1
2012	9	20	41.7	97.7
2012	9	21	41.5	97.8
2012	9	22	41.5	96.2
2012	9	23	42.5	97.0
2012	9	24	43.0	96.8
2012	9	25	42.3	93.8
2012	9	26	42.3	94.3
2012	9	27	42.3	96.7
2012	9	28	41.7	92.8
2012	9	29	41.7	94.2
2012	9	30	41.7	97.2
2012	10	1	41.7	95.4
2012	10	2	40.9	97.0
2012	10	3	44.8	94.8
2012	10	4	43.7	91.6
2012	10	5	44.0	94.0
2012	10	6	42.9	94.0
2012	10	7	42.9	92.8
2012	10	8	42.9	91.4
2012	10	9	43.9	91.1
2012	10	10	44.0	88.4
2012	10	11	39.5	86.5
2012	10	12	40.6	88.9
2012	10	13	44.2	91.0
2012	10	14	50.6	92.4
2012	10	15	40.9	89.9
2012	10	16	40.0	91.6
2012	10	17	43.7	91.2
2012	10	18	51.4	90.9
2012	10	19	39.6	90.4
2012	10	20	39.8	88.6

**Attachment 3 Part 1, continued.**

Year	Month	Day	Daily Avg. Flow E-003A (MGD)	Daily Temperature E-003A (°F)
2012	10	21	40.0	76.4
2012	10	22	39.9	76.4
2012	10	23	38.8	78.7
2012	10	24	38.5	81.5
2012	10	25	38.4	92.1
2012	10	26	38.4	93.3
2012	10	27	38.6	95.5
2012	10	28	38.6	93.8
2012	10	29	39.0	92.5
2012	10	30	39.2	93.0
2012	10	31	39.0	92.3
2012	11	1	39.3	94.0
2012	11	2	41.5	93.4
2012	11	3	39.3	93.5
2012	11	4	39.3	95.7
2012	11	5	39.3	91.7
2012	11	6	39.4	92.8
2012	11	7	39.6	90.3
2012	11	8	40.1	85.3
2012	11	9	42.1	86.9
2012	11	10	39.4	87.8
2012	11	11	40.0	86.0
2012	11	12	39.8	86.2
2012	11	13	40.8	86.6
2012	11	14	38.9	85.7
2012	11	15	39.0	86.8
2012	11	16	41.8	86.4
2012	11	17	52.1	86.5
2012	11	18	63.4	87.1
2012	11	19	60.9	84.8
2012	11	20	46.5	88.7
2012	11	21	43.4	91.1
2012	11	22	42.4	89.7
2012	11	23	42.1	87.4
2012	11	24	41.8	88.4
2012	11	25	38.6	88.0
2012	11	26	39.3	88.6
2012	11	27	38.8	87.3
2012	11	28	36.6	84.0
2012	11	29	38.7	86.9
2012	11	30	51.1	76.6
2012	12	1	40.8	85.4
2012	12	2	53.5	84.0
2012	12	3	38.4	86.8
2012	12	4	37.1	86.9
2012	12	5	37.9	85.9
2012	12	6	36.9	85.7
2012	12	7	36.9	86.1
2012	12	8	37.2	84.3
2012	12	9	37.1	86.9
2012	12	10	36.9	86.4
2012	12	11	35.6	84.7
2012	12	12	34.5	82.8
2012	12	13	33.9	83.1

**Attachment 3 Part 1, continued.**

Year	Month	Day	Daily Avg. Flow E-003A (MGD)	Daily Temperature E-003A (°F)
2012	12	14	35.1	82.6
2012	12	15	40.1	81.6
2012	12	16	39.3	81.2
2012	12	17	38.7	81.9
2012	12	18	37.9	79.0
2012	12	19	37.2	78.8
2012	12	20	36.7	80.3
2012	12	21	37.3	79.2
2012	12	22	45.7	74.2
2012	12	23	51.1	77.1
2012	12	24	40.6	77.9
2012	12	25	44.1	77.9
2012	12	26	42.5	75.4
2012	12	27	38.5	76.1
2012	12	28	38.0	75.3
2012	12	29	37.0	77.2
2012	12	30	37.0	78.8
2012	12	31	37.1	76.3
2013	1	1	37.2	76.5
2013	1	2	37.2	76.8
2013	1	3	37.3	77.1
2013	1	4	37.1	76.9
2013	1	5	40.5	76.2
2013	1	6	40.7	77.3
2013	1	7	40.4	76.8
2013	1	8	40.1	78.3
2013	1	9	38.7	76.3
2013	1	10	38.5	74.1
2013	1	11	39.5	74.5
2013	1	12	42.7	75.4
2013	1	13	48.2	74.8
2013	1	14	53.6	74.9
2013	1	15	43.5	76.2
2013	1	16	39.5	80.0
2013	1	17	45.3	73.4
2013	1	18	47.0	75.1
2013	1	19	46.4	75.4
2013	1	20	45.3	77.0
2013	1	21	45.9	77.5
2013	1	22	46.6	76.2
2013	1	23	48.6	74.9
2013	1	24	48.7	76.7
2013	1	25	43.5	79.2
2013	1	26	41.9	78.2
2013	1	27	46.2	75.9
2013	1	28	45.8	77.5
2013	1	29	45.8	78.7
2013	1	30	45.7	76.7
2013	1	31	46.2	78.2
2013	2	1	45.3	79.3
2013	2	2	46.6	80.0
2013	2	3	47.9	80.2
2013	2	4	49.4	78.3
2013	2	5	46.3	79.5

**Attachment 3 Part 1, continued.**

Year	Month	Day	Daily Avg. Flow E-003A (MGD)	Daily Temperature E-003A (°F)
2013	2	6	43.8	79.2
2013	2	7	44.1	80.3
2013	2	8	44.8	79.6
2013	2	9	47.8	81.8
2013	2	10	53.5	84.0
2013	2	11	54.2	83.5
2013	2	12	53.3	85.9
2013	2	13	53.7	84.2
2013	2	14	54.3	86.6
2013	2	15	55.1	88.3
2013	2	16	49.0	85.9
2013	2	17	33.5	88.9
2013	2	18	45.3	84.1
2013	2	19	56.6	83.2
2013	2	20	51.8	80.7
2013	2	21	60.9	80.4
2013	2	22	45.3	85.2
2013	2	23	45.6	86.7
2013	2	24	45.0	84.5
2013	2	25	42.7	87.9
2013	2	26	38.6	79.8
2013	2	27	41.5	84.1
2013	2	28	40.9	86.8
2013	3	1	43.4	88.7
2013	3	2	43.8	88.6
2013	3	3	42.2	88.2
2013	3	4	42.2	85.3
2013	3	5	42.7	87.8
2013	3	6	44.0	88.9
2013	3	7	44.7	87.1
2013	3	8	44.1	89.0
2013	3	9	43.5	91.4
2013	3	10	43.4	90.9
2013	3	11	43.4	86.3
2013	3	12	45.4	84.3
2013	3	13	45.5	84.5
2013	3	14	37.8	85.8
2013	3	15	42.0	85.8
2013	3	16	40.9	89.5
2013	3	17	40.8	88.7
2013	3	18	41.3	90.0
2013	3	19	42.4	87.1
2013	3	20	38.7	86.6
2013	3	21	40.5	89.0
2013	3	22	43.1	89.5
2013	3	23	45.7	90.4
2013	3	24	43.8	87.8
2013	3	25	44.2	83.0
2013	3	26	45.0	83.5
2013	3	27	46.4	86.8
2013	3	28	45.0	86.2
2013	3	29	47.6	89.5
2013	3	30	53.8	88.7
2013	3	31	45.6	88.9



**Attachment 3 Part 1, continued.**

Year	Month	Day	Daily Avg. Flow E-003A (MGD)	Daily Temperature E-003A (°F)
2013	4	1	46.5	90.1
2013	4	2	45.2	87.9
2013	4	3	45.2	87.9
2013	4	4	45.2	87.9
2013	4	5	45.2	87.9
2013	4	6	45.2	87.9
2013	4	7	45.2	87.9
2013	4	8	45.7	93.3
2013	4	9	48.9	89.3
2013	4	10	40.8	95.4
2013	4	11	33.0	98.5
2013	4	12	36.1	92.2
2013	4	13	41.1	94.3
2013	4	14	40.8	98.1
2013	4	15	41.7	88.9
2013	4	16	40.8	87.8
2013	4	17	43.3	89.1
2013	4	18	42.6	97.4
2013	4	19	41.0	94.9
2013	4	20	45.9	93.1
2013	4	21	44.9	98.4
2013	4	22	40.9	98.1
2013	4	23	50.1	97.7
2013	4	24	50.3	89.5
2013	4	25	46.7	89.7
2013	4	26	46.5	95.7
2013	4	27	47.0	89.4
2013	4	28	41.4	96.2
2013	4	29	42.2	101.4
2013	4	30	43.0	94.7
2013	5	1	42.1	95.4
2013	5	2	41.6	94.8
2013	5	3	36.9	95.5
2013	5	4	40.0	98.5
2013	5	5	40.1	96.6
2013	5	6	39.9	95.6
2013	5	7	40.8	93.1
2013	5	8	41.4	94.7
2013	5	9	40.7	92.9
2013	5	10	41.8	95.9
2013	5	11	41.7	102.6
2013	5	12	41.9	101.3
2013	5	13	42.8	94.1
2013	5	14	45.7	97.0
2013	5	15	45.6	94.0
2013	5	16	45.2	95.3
2013	5	17	45.1	100.6
2013	5	18	43.7	99.0
2013	5	19	42.2	93.3
2013	5	20	46.3	98.6
2013	5	21	44.2	95.3
2013	5	22	42.0	91.3
2013	5	23	44.1	98.5
2013	5	24	45.1	98.8

**Attachment 3 Part 1, continued.**

Year	Month	Day	Daily Avg. Flow E-003A (MGD)	Daily Temperature E-003A (°F)
2013	5	25	43.5	97.7
2013	5	26	43.6	93.6
2013	5	27	46.2	97.8
2013	5	28	47.0	95.0
2013	5	29	45.5	100.4
2013	5	30	47.5	98.4
2013	5	31	49.8	95.4
2013	6	1	44.0	103.1
2013	6	2	44.6	99.1
2013	6	3	35.5	92.8
2013	6	4	38.2	93.7
2013	6	5	41.6	92.3
2013	6	6	41.8	93.3
2013	6	7	42.7	94.5
2013	6	8	42.7	99.8
2013	6	9	43.0	94.7
2013	6	10	41.9	97.0
2013	6	11	42.3	95.6
2013	6	12	42.0	97.2
2013	6	13	41.9	95.5
2013	6	14	41.4	102.4
2013	6	15	41.3	103.1
2013	6	16	41.0	103.2
2013	6	17	41.4	100.7
2013	6	18	42.5	97.2
2013	6	19	41.9	102.6
2013	6	20	41.9	98.4
2013	6	21	42.6	104.2
2013	6	22	40.6	104.9
2013	6	23	40.7	99.5
2013	6	24	42.5	97.5
2013	6	25	42.6	93.2
2013	6	26	41.2	100.0
2013	6	27	41.1	99.8
2013	6	28	41.3	107.9
2013	6	29	39.6	103.1
2013	6	30	40.5	96.1
2013	7	1	40.4	101.2
2013	7	2	40.0	103.1
2013	7	3	39.7	106.7
2013	7	4	42.2	94.6
2013	7	5	40.5	99.5
2013	7	6	41.9	101.6
2013	7	7	41.9	102.7
2013	7	8	42.4	102.0
2013	7	9	42.3	104.8
2013	7	10	45.9	102.8
2013	7	11	47.4	98.8
2013	7	12	48.3	99.9
2013	7	13	48.0	104.8
2013	7	14	49.1	105.0
2013	7	15	44.9	97.7
2013	7	16	45.1	100.1
2013	7	17	44.5	104.2

**Attachment 3 Part 1, continued.**

Year	Month	Day	Daily Avg. Flow E-003A (MGD)	Daily Temperature E-003A (°F)
2013	7	18	46.5	101.1
2013	7	19	48.0	103.3
2013	7	20	44.0	102.0
2013	7	21	46.5	96.8
2013	7	22	49.4	95.7
2013	7	23	49.2	100.7
2013	7	24	53.1	100.0
2013	7	25	46.9	97.0
2013	7	26	45.3	96.4
2013	7	27	47.1	97.3
2013	7	28	47.0	101.2
2013	7	29	47.0	95.6
2013	7	30	45.1	97.0
2013	7	31	44.9	101.5
2013	8	1	48.0	101.8
2013	8	2	35.6	99.7
2013	8	3	35.4	97.2
2013	8	4	36.3	100.5
2013	8	5	36.4	97.2
2013	8	6	37.0	97.8
2013	8	7	38.2	100.4
2013	8	8	37.1	98.6
2013	8	9	34.7	97.9
2013	8	10	34.8	101.6
2013	8	11	35.2	99.7
2013	8	12	36.4	97.2
2013	8	13	41.1	104.6
2013	8	14	46.6	102.7
2013	8	15	44.1	105.2
2013	8	16	50.6	106.8
2013	8	17	52.0	103.9
2013	8	18	50.4	106.2
2013	8	19	45.5	105.3
2013	8	20	49.0	99.7
2013	8	21	45.1	103.9
2013	8	22	43.6	103.3
2013	8	23	43.9	101.1
2013	8	24	43.8	105.1
2013	8	25	44.1	106.0
2013	8	26	44.0	102.4
2013	8	27	43.6	106.6
2013	8	28	42.8	106.5
2013	8	29	40.4	104.7
2013	8	30	41.0	109.0
2013	8	31	41.9	107.9
2013	9	1	41.6	105.0
2013	9	2	41.8	108.4
2013	9	3	42.3	106.5
2013	9	4	41.8	104.5
2013	9	5	41.7	106.7
2013	9	6	41.9	108.9
2013	9	7	43.5	105.8
2013	9	8	42.4	107.0
2013	9	9	44.8	102.8

**Attachment 3 Part 1, continued.**

Year	Month	Day	Daily Avg. Flow E-003A (MGD)	Daily Temperature E-003A (°F)
2013	9	10	45.4	99.1
2013	9	11	45.9	97.5
2013	9	12	45.8	102.7
2013	9	13	48.8	97.4
2013	9	14	48.6	103.0
2013	9	15	49.1	105.1
2013	9	16	48.2	106.1
2013	9	17	44.0	101.7
2013	9	18	41.4	104.8
2013	9	19	41.8	107.4
2013	9	20	46.4	102.2
2013	9	21	51.5	99.5
2013	9	22	48.0	103.9
2013	9	23	41.2	103.8
2013	9	24	41.4	103.0
2013	9	25	40.5	100.7
2013	9	26	36.8	98.7
2013	9	27	35.7	102.6
2013	9	28	35.7	103.5
2013	9	29	35.0	99.5
2013	9	30	34.9	99.5
2013	10	1	35.4	92.9
2013	10	2	35.4	92.3
2013	10	3	35.4	92.3
2013	10	4	36.3	100.0
2013	10	5	41.3	100.2
2013	10	6	47.0	100.1
2013	10	7	46.9	99.8
2013	10	8	39.0	98.2
2013	10	9	36.3	98.2
2013	10	10	38.2	97.5
2013	10	11	39.9	95.7
2013	10	12	38.2	97.3
2013	10	13	35.8	100.1
2013	10	14	36.3	96.9
2013	10	15	34.5	98.4
2013	10	16	38.3	99.6
2013	10	17	44.2	97.8
2013	10	18	39.6	100.5
2013	10	19	39.1	101.3
2013	10	20	39.0	99.4
2013	10	21	39.2	96.7
2013	10	22	38.9	98.1
2013	10	23	38.7	98.0
2013	10	24	38.4	93.7
2013	10	25	41.1	97.0
2013	10	26	39.3	97.3
2013	10	27	38.2	96.0
2013	10	28	42.5	96.4
2013	10	29	38.2	95.5
2013	10	30	38.3	93.8
2013	10	31	42.6	96.6
2013	11	1	44.4	95.8
2013	11	2	46.0	94.0

**Attachment 3 Part 1, continued.**

Year	Month	Day	Daily Avg. Flow E-003A (MGD)	Daily Temperature E-003A (°F)
2013	11	3	46.5	94.1
2013	11	4	47.8	91.2
2013	11	5	45.7	93.7
2013	11	6	41.7	93.7
2013	11	7	48.7	93.1
2013	11	8	45.8	93.5
2013	11	9	45.4	95.8
2013	11	10	39.3	92.9
2013	11	11	40.0	93.8
2013	11	12	41.1	94.6
2013	11	13	41.4	94.1
2013	11	14	41.6	92.5
2013	11	15	42.9	92.6
2013	11	16	43.4	92.4
2013	11	17	44.0	92.8
2013	11	18	44.0	90.8
2013	11	19	44.9	91.1
2013	11	20	46.9	91.6
2013	11	21	44.8	91.9
2013	11	22	43.6	85.5
2013	11	23	43.0	89.3
2013	11	24	45.2	91.7
2013	11	25	43.5	91.9
2013	11	26	40.6	92.3
2013	11	27	40.9	92.9
2013	11	28	41.7	94.4
2013	11	29	42.3	91.2
2013	11	30	44.4	92.8

**Attachment 3 Part 2.** Rodeo Facility Once-Through Cooling (OTC) data, Jan 2010–Nov 2013  
Three-year avg. flow excludes 0.65 MGD demineralizer, storm, water per NPDES Finding II.B.2.

Year	Month	Day	3-yr average E-003A (MGD)	3-yr average E-003A (°F)
2012	12	30	39.32	87.45
2012	12	31	39.31	87.45
2013	1	1	39.31	87.44
2013	1	2	39.30	87.44
2013	1	3	39.29	87.44
2013	1	4	39.29	87.44
2013	1	5	39.29	87.44
2013	1	6	39.28	87.44
2013	1	7	39.28	87.44
2013	1	8	39.27	87.45
2013	1	9	39.27	87.45
2013	1	10	39.26	87.45
2013	1	11	39.26	87.44
2013	1	12	39.25	87.44
2013	1	13	39.26	87.43
2013	1	14	39.27	87.43
2013	1	15	39.26	87.43
2013	1	16	39.26	87.43
2013	1	17	39.26	87.43
2013	1	18	39.25	87.42
2013	1	19	39.24	87.43
2013	1	20	39.23	87.43
2013	1	21	39.23	87.43
2013	1	22	39.23	87.43
2013	1	23	39.24	87.43
2013	1	24	39.24	87.43
2013	1	25	39.24	87.43
2013	1	26	39.24	87.43
2013	1	27	39.24	87.43
2013	1	28	39.25	87.43
2013	1	29	39.25	87.43
2013	1	30	39.26	87.43
2013	1	31	39.26	87.43
2013	2	1	39.26	87.43
2013	2	2	39.27	87.43
2013	2	3	39.27	87.43
2013	2	4	39.28	87.43
2013	2	5	39.28	87.43
2013	2	6	39.28	87.43
2013	2	7	39.29	87.43
2013	2	8	39.29	87.43
2013	2	9	39.29	87.43
2013	2	10	39.30	87.44
2013	2	11	39.31	87.44
2013	2	12	39.32	87.44
2013	2	13	39.33	87.44
2013	2	14	39.35	87.44
2013	2	15	39.36	87.45
2013	2	16	39.37	87.45
2013	2	17	39.37	87.45
2013	2	18	39.38	87.45
2013	2	19	39.39	87.46
2013	2	20	39.41	87.45

**Attachment 3 Part 2, continued.**

Year	Month	Day	3-yr average E-003A (MGD)	3-yr average E-003A (°F)
2013	2	21	39.43	87.45
2013	2	22	39.44	87.45
2013	2	23	39.44	87.46
2013	2	24	39.45	87.46
2013	2	25	39.45	87.46
2013	2	26	39.45	87.46
2013	2	27	39.46	87.46
2013	2	28	39.46	87.47
2013	3	1	39.47	87.47
2013	3	2	39.46	87.48
2013	3	3	39.47	87.49
2013	3	4	39.47	87.49
2013	3	5	39.48	87.49
2013	3	6	39.49	87.49
2013	3	7	39.49	87.50
2013	3	8	39.50	87.50
2013	3	9	39.51	87.51
2013	3	10	39.52	87.52
2013	3	11	39.52	87.53
2013	3	12	39.53	87.53
2013	3	13	39.54	87.53
2013	3	14	39.54	87.53
2013	3	15	39.55	87.53
2013	3	16	39.55	87.53
2013	3	17	39.56	87.53
2013	3	18	39.56	87.53
2013	3	19	39.56	87.54
2013	3	20	39.56	87.54
2013	3	21	39.56	87.54
2013	3	22	39.57	87.54
2013	3	23	39.57	87.54
2013	3	24	39.58	87.55
2013	3	25	39.59	87.54
2013	3	26	39.59	87.53
2013	3	27	39.60	87.53
2013	3	28	39.60	87.53
2013	3	29	39.61	87.53
2013	3	30	39.62	87.54
2013	3	31	39.63	87.54
2013	4	1	39.63	87.54
2013	4	2	39.64	87.55
2013	4	3	39.64	87.55
2013	4	4	39.64	87.55
2013	4	5	39.65	87.55
2013	4	6	39.65	87.55
2013	4	7	39.65	87.55
2013	4	8	39.66	87.55
2013	4	9	39.66	87.55
2013	4	10	39.66	87.57
2013	4	11	39.65	87.58
2013	4	12	39.65	87.58
2013	4	13	39.65	87.59
2013	4	14	39.65	87.60
2013	4	15	39.65	87.59

**Attachment 3 Part 2, continued.**

Year	Month	Day	3-yr average E-003A (MGD)	3-yr average E-003A (°F)
2013	4	16	39.66	87.59
2013	4	17	39.66	87.59
2013	4	18	39.66	87.60
2013	4	19	39.66	87.60
2013	4	20	39.66	87.61
2013	4	21	39.66	87.61
2013	4	22	39.66	87.62
2013	4	23	39.67	87.62
2013	4	24	39.69	87.63
2013	4	25	39.70	87.63
2013	4	26	39.70	87.64
2013	4	27	39.71	87.64
2013	4	28	39.71	87.65
2013	4	29	39.71	87.66
2013	4	30	39.71	87.66
2013	5	1	39.71	87.67
2013	5	2	39.71	87.67
2013	5	3	39.70	87.67
2013	5	4	39.70	87.67
2013	5	5	39.70	87.67
2013	5	6	39.69	87.68
2013	5	7	39.70	87.68
2013	5	8	39.70	87.68
2013	5	9	39.70	87.69
2013	5	10	39.70	87.69
2013	5	11	39.70	87.70
2013	5	12	39.70	87.71
2013	5	13	39.70	87.71
2013	5	14	39.70	87.71
2013	5	15	39.70	87.71
2013	5	16	39.71	87.72
2013	5	17	39.71	87.72
2013	5	18	39.71	87.73
2013	5	19	39.71	87.73
2013	5	20	39.71	87.74
2013	5	21	39.71	87.74
2013	5	22	39.71	87.74
2013	5	23	39.72	87.75
2013	5	24	39.72	87.76
2013	5	25	39.72	87.77
2013	5	26	39.72	87.77
2013	5	27	39.72	87.78
2013	5	28	39.73	87.77
2013	5	29	39.74	87.78
2013	5	30	39.75	87.78
2013	5	31	39.76	87.78
2013	6	1	39.76	87.79
2013	6	2	39.77	87.79
2013	6	3	39.76	87.79
2013	6	4	39.76	87.79
2013	6	5	39.76	87.78
2013	6	6	39.76	87.78
2013	6	7	39.76	87.78
2013	6	8	39.76	87.78



**Attachment 3 Part 2, continued.**

Year	Month	Day	3-yr average E-003A (MGD)	3-yr average E-003A (°F)
2013	6	9	39.77	87.78
2013	6	10	39.77	87.78
2013	6	11	39.78	87.77
2013	6	12	39.78	87.77
2013	6	13	39.79	87.77
2013	6	14	39.80	87.78
2013	6	15	39.81	87.78
2013	6	16	39.82	87.79
2013	6	17	39.83	87.80
2013	6	18	39.84	87.81
2013	6	19	39.85	87.82
2013	6	20	39.86	87.83
2013	6	21	39.87	87.85
2013	6	22	39.88	87.86
2013	6	23	39.88	87.87
2013	6	24	39.89	87.88
2013	6	25	39.90	87.88
2013	6	26	39.90	87.88
2013	6	27	39.91	87.88
2013	6	28	39.91	87.90
2013	6	29	39.92	87.91
2013	6	30	39.92	87.91
2013	7	1	39.93	87.91
2013	7	2	39.93	87.92
2013	7	3	39.94	87.93
2013	7	4	39.94	87.93
2013	7	5	39.95	87.93
2013	7	6	39.96	87.94
2013	7	7	39.96	87.94
2013	7	8	39.97	87.95
2013	7	9	39.98	87.96
2013	7	10	39.99	87.96
2013	7	11	40.00	87.97
2013	7	12	40.02	87.98
2013	7	13	40.03	87.98
2013	7	14	40.04	87.98
2013	7	15	40.05	87.98
2013	7	16	40.06	87.98
2013	7	17	40.06	87.99
2013	7	18	40.07	87.99
2013	7	19	40.08	88.00
2013	7	20	40.08	88.01
2013	7	21	40.09	88.01
2013	7	22	40.10	88.01
2013	7	23	40.12	88.02
2013	7	24	40.13	88.02
2013	7	25	40.14	88.02
2013	7	26	40.15	88.03
2013	7	27	40.15	88.03
2013	7	28	40.16	88.03
2013	7	29	40.17	88.03
2013	7	30	40.18	88.03
2013	7	31	40.18	88.04
2013	8	1	40.19	88.05

**Attachment 3 Part 2, continued.**

Year	Month	Day	3-yr average E-003A (MGD)	3-yr average E-003A (°F)
2013	8	2	40.19	88.05
2013	8	3	40.19	88.05
2013	8	4	40.19	88.06
2013	8	5	40.19	88.06
2013	8	6	40.20	88.06
2013	8	7	40.20	88.07
2013	8	8	40.20	88.07
2013	8	9	40.20	88.07
2013	8	10	40.21	88.09
2013	8	11	40.21	88.09
2013	8	12	40.21	88.09
2013	8	13	40.22	88.10
2013	8	14	40.23	88.11
2013	8	15	40.24	88.12
2013	8	16	40.25	88.13
2013	8	17	40.27	88.14
2013	8	18	40.29	88.14
2013	8	19	40.30	88.16
2013	8	20	40.31	88.16
2013	8	21	40.32	88.17
2013	8	22	40.33	88.17
2013	8	23	40.34	88.18
2013	8	24	40.35	88.19
2013	8	25	40.36	88.20
2013	8	26	40.37	88.21
2013	8	27	40.38	88.23
2013	8	28	40.39	88.24
2013	8	29	40.39	88.25
2013	8	30	40.39	88.26
2013	8	31	40.40	88.28
2013	9	1	40.40	88.28
2013	9	2	40.40	88.29
2013	9	3	40.41	88.30
2013	9	4	40.41	88.31
2013	9	5	40.41	88.31
2013	9	6	40.41	88.33
2013	9	7	40.41	88.34
2013	9	8	40.41	88.35
2013	9	9	40.42	88.36
2013	9	10	40.43	88.36
2013	9	11	40.43	88.36
2013	9	12	40.44	88.37
2013	9	13	40.45	88.37
2013	9	14	40.46	88.38
2013	9	15	40.47	88.39
2013	9	16	40.48	88.39
2013	9	17	40.49	88.40
2013	9	18	40.49	88.41
2013	9	19	40.50	88.42
2013	9	20	40.50	88.42
2013	9	21	40.52	88.43
2013	9	22	40.53	88.43
2013	9	23	40.53	88.44
2013	9	24	40.54	88.44

**Attachment 3 Part 2, continued.**

Year	Month	Day	3-yr average E-003A (MGD)	3-yr average E-003A (°F)
2013	9	25	40.54	88.44
2013	9	26	40.55	88.44
2013	9	27	40.55	88.44
2013	9	28	40.55	88.44
2013	9	29	40.54	88.44
2013	9	30	40.54	88.44
2013	10	1	40.54	88.44
2013	10	2	40.54	88.44
2013	10	3	40.54	88.44
2013	10	4	40.54	88.44
2013	10	5	40.55	88.44
2013	10	6	40.57	88.45
2013	10	7	40.58	88.46
2013	10	8	40.58	88.46
2013	10	9	40.57	88.46
2013	10	10	40.57	88.46
2013	10	11	40.57	88.46
2013	10	12	40.57	88.46
2013	10	13	40.57	88.46
2013	10	14	40.58	88.46
2013	10	15	40.58	88.46
2013	10	16	40.59	88.47
2013	10	17	40.60	88.47
2013	10	18	40.61	88.48
2013	10	19	40.62	88.49
2013	10	20	40.63	88.50
2013	10	21	40.64	88.50
2013	10	22	40.65	88.53
2013	10	23	40.65	88.56
2013	10	24	40.66	88.57
2013	10	25	40.67	88.58
2013	10	26	40.67	88.59
2013	10	27	40.68	88.60
2013	10	28	40.69	88.61
2013	10	29	40.69	88.62
2013	10	30	40.69	88.62
2013	10	31	40.70	88.63
2013	11	1	40.71	88.63
2013	11	2	40.72	88.63
2013	11	3	40.74	88.64
2013	11	4	40.75	88.64
2013	11	5	40.76	88.64
2013	11	6	40.77	88.65
2013	11	7	40.78	88.65
2013	11	8	40.79	88.65
2013	11	9	40.81	88.66
2013	11	10	40.81	88.66
2013	11	11	40.82	88.66
2013	11	12	40.83	88.67
2013	11	13	40.84	88.67
2013	11	14	40.85	88.67
2013	11	15	40.86	88.67
2013	11	16	40.87	88.68
2013	11	17	40.88	88.68

**Attachment 3 Part 2, continued.**

Year	Month	Day	3-yr average E-003A (MGD)	3-yr average E-003A (°F)
2013	11	18	40.89	88.69
2013	11	19	40.90	88.69
2013	11	20	40.92	88.70
2013	11	21	40.93	88.71
2013	11	22	40.94	88.72
2013	11	23	40.95	88.72
2013	11	24	40.96	88.73
2013	11	25	40.97	88.74
2013	11	26	40.98	88.75
2013	11	27	40.99	88.76
2013	11	28	41.00	88.77
2013	11	29	41.01	88.78
2013	11	30	41.02	88.80

**Attachment 3 Part 3. E-003 Average Flow findings by date, and OTC portion, various dates**

*Note: E-003 includes 0.2 MGD demineralizer regeneration wastewater and 0.45 MGD stormwater runoff from various nonindustrial sources (Permit Finding II.B.2)*

Reference	Description	Date	E-003 (MGD)	OTC (MGD)
Permit page F-53	Phillips post CFEP* projection	2009 (Nov)	35.40	34.75
Permit page F-53	RWQCB Estimate	2005–2009	35.70	35.05
Permit Finding II.B.2	RWQCB Estimate	2011 (May)	38.30	37.65
Att. 3 Part 2	Longterm (3-yr) average	20-Jan-13	39.88	39.23
Att. 3 Part 2	Longterm (3-yr) average	30-Nov-13	41.67	41.02
DEIR page 3-27	Baseline asserted by EIR	2013 (June)	--	45.40
DEIR page 3-27	Project potential asserted by EIR	--	--	57.60

Effect of baseline assumption	Baseline (MGD)	Post-project (MGD)	Increase (MGD)	Increase (%)
Baseline assumption				
Phillips post-CFEP*	34.75	57.60	22.85	65.8%
RWQCB 2005–2009	35.05	57.60	22.55	64.3%
RWQCB May 2011	37.65	57.60	19.95	53.0%
Three-yr average as of 12 Jan 2013	39.23	57.60	18.37	46.8%
Three-yr average as of 30 Nov 2013	41.02	57.60	16.58	40.4%
Baseline asserted by EIR	45.40	57.60	12.20	26.9%

Permit: NPDES Permit CA0005053, Order R2-2011-0027, issued May 2011

\* CFEP: "Clean Fuels Expansion Project" that became operational Jul–Oct 2009. See also DEIR at 3-19, 3-20.

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Abbreviations: Bay Area Air Quality Management District (BAAQMD) Most Likely Descendent (MLD)  
California Environmental Quality Act (CEQA) Nitrogen Oxides (NOx)  
California Native American Heritage Commission (NAHC)

Environmental Impact	Mitigation Measures	Implementing Action	Timing of Implementation	Responsible Department or Agency	Related Conditions of Approval	Compliance Verification
<b>Air Quality</b>						
<b>Impact 4.3-1:</b> The Project would result in short-term construction emissions of criteria pollutants that could contribute to existing air quality violations.	<p><b>Mitigation Measure 4.3-1:</b> Phillips 66 and its construction contractors shall implement the following applicable BAAQMD basic control measures:</p> <ul style="list-style-type: none"> <li>a) Water all exposed surfaces of active construction areas at least twice daily (using reclaimed water if possible). Watering should be sufficient to prevent airborne dust from leaving the site.</li> <li>b) Cover all trucks hauling soil, sand, and other loose materials or require all trucks to maintain at least two feet of freeboard (i.e., the minimum required space between the top of the load and the top of the trailer).</li> <li>c) All visible mud or dirt track-out onto adjacent public roads shall be removed using wet power vacuum street sweepers at least once per day, or more if needed. The use of dry power sweeping is prohibited.</li> <li>d) Limit vehicle speeds on unpaved roads to 15 miles per hour.</li> <li>e) Pave all roadways, driveways, sidewalks, etc. as soon as feasible. In addition, building pads should be laid as soon as possible after grading unless seeding or soil binders are used.</li> <li>f) Idling times shall be minimized either by shutting equipment off when not in use or reducing the maximum idling time to five minutes (as required by the California airborne toxics control measure Title 13, Section 2485, of the California Code of Regulations. Clear signage to this effect shall be provided for construction workers at all access points.</li> <li>g) All construction equipment shall be maintained and properly tuned in accordance with the manufacturer's specifications. All equipment shall be checked by a certified mechanic and determined to be running in proper condition prior to operation.</li> <li>h) Post a publicly visible sign with the telephone number and person to contact at the County regarding dust complaints. This person shall respond and require Phillips 66 to take corrective action within 48 hours. The telephone numbers of contacts at the BAAQMD shall also be visible.</li> </ul>	Contractor to comply with basic BAAQMD measures	During duration of construction activities	Department of Conservation and Development Zoning Administrator		
<b>Impact 4.3-2:</b> The Project would result in long-term emissions of criteria pollutants.	<p><b>Mitigation Measure 4.3-2:</b> Phillips 66 shall permanently decommission the B-401 process heater in Unit 240 to offset significant NOx emissions related to the proposed Propane Recovery Project. Prior to operations of the Project, Phillips 66 shall provide documentation to the Department of Conservation and Development that the BAAQMD has relinquished its permit to operate for the process heater.</p>	Project sponsor to provide evidence that has accepted new conditions from BAAQMD	Prior to operation of project	Department of Conservation and Development Zoning Administrator		

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Environmental Impact	Mitigation Measures	Implementing Action	Timing of Implementation	Responsible Department or Agency	Related Conditions of Approval	Compliance Verification
<b>Cultural Resources</b>						
<b>Impact 4.5-1:</b> Inadvertent discovery of a historical resource.	<p><b>Mitigation Measure 4.5-1:</b> Pursuant to CEQA Guidelines Section 15064.5(f), "provisions for historical or unique archaeological resources accidentally discovered during construction" shall be instituted. In the event that any prehistoric or historic-period subsurface cultural resources are discovered during ground-disturbing activities, all work within 100 feet of the find shall be halted and Phillips 66 shall consult with the County and a qualified archaeologist (as approved by the County) to assess the significance of the find per CEQA Guidelines Section 15064.5. If any find is determined to be significant, representatives of the County and the qualified archaeologist would meet to determine the appropriate course of action.</p> <p>Avoidance is always the preferred course of action for archaeological sites. In considering any suggestion proposed by the consulting archaeologist to reduce impacts to historical resources or unique archaeological resources, the County would determine whether avoidance is feasible in light of factors such as the nature of the find, project design, costs, and other considerations. If avoidance is infeasible, other appropriate measures (e.g., data recovery, interpretation of finds in a public venue) would be instituted. Work may proceed on other parts of the Project site while mitigation for historical resources or unique archaeological resources is carried out.</p> <p>All significant cultural materials recovered shall be, at the discretion of the consulting archaeologist, subject to scientific analysis, professional museum curation, and documented according to current professional standards.</p>	Contractor to cease activities in archeological resources are found. Resources to be evaluated by resource specialist.	Contractor to contact Project sponsor immediately after finding archeological resources	Department of Conservation and Development Zoning Administrator Archeological specialist at the discretion of DCD		
<b>Impact 4.5-2:</b> Inadvertent discovery of a unique archaeological resource.	Implement Mitigation Measure 4.5-1.	Contractor to cease activities in archeological resources are found. Resources to be evaluated by resource specialist.	Contractor to contact Project sponsor immediately after finding archeological resources.	Department of Conservation and Development Zoning Administrator Archeological specialist at the discretion of DCD		
<b>Impact 4.5-3:</b> Inadvertent discovery of a unique paleontological resource or site or unique geological feature.	<b>Mitigation Measure 4.5-3:</b> Phillips 66 shall notify both a qualified paleontologist (as approved by the County) and the County of unanticipated discoveries. The qualified paleontologist, under contract to Phillips 66, shall subsequently document the discovery. In the event of an unanticipated discovery of a fossil or fossilized deposit during construction, excavations within 100 feet of the find shall be temporarily halted or diverted until a qualified paleontologist examines the discovery. The paleontologist shall notify the appropriate agencies to determine procedures that would be followed before construction is allowed to resume at the location of the find. The paleontologist shall oversee implementation of these procedures once they have been determined.	Contractor to halt construction activities within 100 feet of the find until qualified paleontologist provided assessment	Immediately after the find	Department of Conservation and Development Zoning Administrator Paleontologist specialist at the discretion of DCD		

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Environmental Impact	Mitigation Measures	Implementing Action	Timing of Implementation	Responsible Department or Agency	Related Conditions of Approval	Compliance Verification
<b>Cultural Resources (cont.)</b>						
<b>Impact 4.5-4:</b> Inadvertent Discovery of Human Remains located at the proposed Project sites.	<p><b>Mitigation Measure 4.5-4:</b> In the event that any prehistoric or historic subsurface human remains are discovered during ground disturbing activities, all work within 100 feet of the resources shall be halted and Phillips 66 shall consult with the County and a qualified archaeologist (as approved by the County) to assess the significance of the find per CEQA Guidelines Section 15064.5. If any find is determined to be significant, representatives of the County and the qualified archaeologist would meet to determine the appropriate avoidance measures or other appropriate mitigation. In considering any suggested mitigation proposed by the consulting archaeologist to mitigate impacts to historical resources or unique archaeological resources, the County would determine whether avoidance is feasible in light of factors such as the nature of the find, project design, costs, and other considerations. If avoidance is infeasible, other appropriate measures (e.g., data recovery) would be instituted. Work may proceed on other parts of the project site while mitigation is carried out. All significant cultural materials recovered shall be, at the discretion of the consulting archaeologist, subject to scientific analysis, professional museum curation, and documented according to current professional standards. CEQA Guidelines Section 15064.5(e)(1), below, shall also be followed:</p> <p>(e) In the event of the accidental discovery or recognition of any human remains in any location other than a dedicated cemetery, the following steps should be taken:</p> <p>(1) There shall be no further excavation or disturbance of the site or any nearby area reasonably suspected to overlie adjacent human remains until:</p> <p>(A) The coroner of the county in which the remains are discovered must be contacted to determine that no investigation of the cause of death is required, and</p> <p>(B) If the coroner determines the remains to be Native American:</p> <ol style="list-style-type: none"> <li>1. The coroner shall contact the Native American Heritage Commission within 24 hours;</li> <li>2. The Native American Heritage Commission shall identify the person or persons it believes to be the most likely descended from the deceased Native American;</li> <li>3. The most likely descendent may make recommendations to the landowner or the person responsible for the excavation work for means of treating or disposing of, with appropriate dignity, the human remains and any associated grave goods as provided in Public Resources Code Section 5097.98; or</li> </ol>	Contract to provide immediate notification to the County coroner	Immediately after the find	Department of Conservation and Development Zoning Administrator County Coroner		



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Environmental Impact	Mitigation Measures	Implementing Action	Timing of Implementation	Responsible Department or Agency	Related Conditions of Approval	Compliance Verification
<b>Cultural Resources (cont.)</b>						
<b>Impact 4.5-4 (cont.)</b>	<p>(2) Where the following conditions occur, the landowner or his authorized representative shall rebury the Native American human remains and associated grave goods with appropriate dignity on the property in a location not subject to further subsurface disturbance:</p> <p>(A) The Native American Heritage Commission is unable to identify a most likely descendent or the most likely descendent failed to make a recommendation within 24 hours after being notified by the Commission;</p> <p>(B) The identified descendant fails to make a recommendation; or</p> <p>(C) The landowner or his authorized representative rejects the recommendation of the descendant, and the mediation by the Native American Heritage Commission fails to provide measures acceptable to the landowner.</p>					
<b>Noise</b>						
<b>Impact 4.13-1:</b> Project construction activities could result in exposure of persons to noise levels in excess of standards established by Contra Costa County.	<p><b>Mitigation Measure 4.13-1a:</b> The applicant shall implement the following construction noise nuisance control measures for the duration of construction:</p> <ul style="list-style-type: none"> <li>• Ensure that construction equipment and trucks are well tuned and maintained according to the manufacturer's specifications, and that the equipment's standard noise reduction devices are in good working order;</li> <li>• Place construction equipment at locations to maximize the distance to the nearest residences; and</li> <li>• Notify nearby residents along Old County Road of the planned construction schedule at least one month prior to construction. Notification shall include the shift hours and include contact information of a designated construction noise coordinator who will maintain communication with affected residences throughout the construction period.</li> </ul> <p><b>Mitigation Measure 4.13-1b:</b> The applicant shall coordinate with Contra Costa County to establish a daytime construction shift limited to between 7:00 a.m. and 5:30 p.m. as a Project-specific condition of approval.</p>	<p>Contractor to observe noise control measures</p> <p>Contractor to obey construction hours restrictions</p>	During construction period	Department of Conservation and Development Zoning Administrator		
<b>Impact 4.13-4:</b> Project construction activities could result in exposure of persons to a temporary increase in ambient noise levels.	Implement Mitigation Measures 4.13-1a and 4.13-1b.	<p>Contractor to observe noise control measures</p> <p>Contractor to obey construction hours restrictions</p>	During construction period	Department of Conservation and Development Zoning Administrator		

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Environmental Impact	Mitigation Measures	Implementing Action	Timing of Implementation	Responsible Department or Agency	Related Conditions of Approval	Compliance Verification
<b>Transportation/Traffic</b>						
<b>Impact 4.17-2:</b> Traffic generated by the Project could contribute to pavement wear-and-tear on area roadways.	<b>Mitigation Measure 4.17-2a:</b> Prior to Project construction, Phillips 66 shall document road conditions for all routes that will be used by Project-related vehicles. Phillips 66 shall also document road conditions after Project construction is completed. The pre- and post-construction conditions of the haul routes shall be reviewed by Public Works Department staff. Phillips 66 shall enter into an agreement prior to construction that will detail the pre-construction conditions and the post-construction requirements of a rehabilitation program. Roads damaged by construction would be repaired to a structural condition equal to that which existed prior to construction activity. A cash bond/deposit to finance damage to County roadways shall be required. An encroachment permit may be required from the County and a transportation/haul permit may be also required for any extra-legal loads used during construction. A pavement monitoring plan that describes measures that will be implemented to revitalize pavement along the proposed haul route(s) deteriorated by Project-related construction traffic shall also be included and be submitted for review by the Public Works Department prior to the commencement of any construction on-site.	Project sponsor to document pre and post construction roadways.	Documentation to be provided prior and after construction.	Department of Conservation and Development		
		Provide cash/bond	Bond to be provided prior to issuance of grading/building permits	Zoning Administrator		
		Roads to be repaired if applicable		Public Works Engineering/Traffic		
	<b>Mitigation Measure 4.17-2b:</b> Access and hauling routes shall be specified to minimize traffic impact to the area wide roadways. Construction traffic should not deviate from this route, except in the event that the route is rendered impassable due to accidents or other unanticipated road closures. In such instances, Phillips 66 shall submit a traffic control plan to the Public Works Department staff for review.					

## EXHIBIT # 6

### DETAILED RESPONSE TO APPEAL POINTS RAISED BY SHUTE MIHALY & WEINBERGER (SMW) AND COMMUNITIES FOR A BETTER ENVIRONMENT (CBE)

#### Introduction:

As previously discussed, most of the appeal points raised by the appellants have already been addressed in the Final EIR. Nonetheless, the County determined that some points raised in the appeal letters required additional clarification. The new clarification provided herein confirms the analyses and conclusions performed in both Draft and Final EIR. The responses below are the ones in which the County is providing additional clarification. See margins of Exhibits # 3 (SMW appeal documents) and Exhibit #4 (CBE appeal documents) for corresponding appeal points.

#### SMW-8. *The EIR is silent on carbon monoxide (CO) emissions from the entire Project.*

Analysis of the Project-related CO emissions was not included in the EIR discussion of impacts because the Bay Area Air Quality Management District (BAAQMD) CEQA guidelines do not recommend the use of mass emission significance thresholds for project-related CO emissions. This is the case because such emissions tend not to be a concern in the Bay Area relative to regional air quality.

Nonetheless, emissions of CO estimated to be generated by the Project are disclosed in Final EIR Appendix A, *Air Quality and Greenhouse Gas Emissions Documentation*. The total Project-related CO emissions for the proposed boiler, increased locomotive trips, and increased vehicle exhaust is estimated to be approximately 39 pounds per day (see Final EIR Appendix A, Table 2, page 3). The potential for these Project-related emissions to cause or contribute to a violation of a CO ambient air quality standard is extremely low given that existing CO concentrations in the Project area, and the Bay Area Air Basin as a whole, are many orders of magnitude lower than the State and federal ambient air quality standards for CO (see DEIR Table 4.3-1).

It should be noted that the BAAQMD CEQA guidelines have identified screening levels to identify potentially significant local CO emission *concentrations* at affected roadway intersections. For the proposed Project, the applicable screening level for potential significant local CO concentrations at affected intersections is an increase in trips at an intersection that experiences more than 44,000 vehicles per hour. Existing traffic at

Project area intersections are less than 900 trips per hour and Project-related construction and operational trips would total up to 384 trips per the peak hour and 8 trips per day, respectively (see DEIR Figure 4.17-2 and DEIR Section 4.17.5). Therefore, there would be no potential for the Project to result in CO concentrations at affected roadways that would result in a significant impact.

SMW-10: *The EIR fails to include criteria pollutant emissions from burning propane/butane.*

As a general rule, “[a] project applicant has traditionally been expected to only address emissions that are closely related and within the capacity of the project to control and/or influence.”<sup>1</sup> With respect to the proposed Project, it is unclear where, how, or by whom the propane/butane produced by the Project might be used. Butane may be used as an additive in chemical manufacturing, which does not involve combustion. Further uncertainty exists relative to the baseline concerning the locations, quantities, and types of fuel that might be replaced by the propane/butane that would be sold by Phillips 66 and whether such production could have the potential to affect the overall consumption of propane/butane or the use or non-use of another fuel for which butane or propane may be substituted. These issues are not within the capacity or control of the Project or of the County and are too speculative for inclusion in the EIR analysis.

SMW-12: *The EIR’s Analysis of the Project’s Potential to Impact Public Health is Flawed.*

Sections 4.3 and 4.9 of the DEIR, provide the general discussion of both air emissions and hazards related to toxic air contaminants (TACs). Sensitive receptors are described in Section 4.3.2.4 of the DEIR as follows:

*“The Bayo Vista community contains the nearest sensitive receptors to the active area of the Refinery (e.g., schools, day care centers, libraries). The closest such sensitive receptor is a day care center, located approximately 2,000 feet south of the Refinery. The closest residences in the Bayo Vista neighborhood to the south are approximately 2,300 feet away from the Refinery fuel gas processing unit and approximately 4,000 feet from the proposed propane storage area and propane/butane loading rack.”*

This information was summarized from information contained in the Public Health Supplement (December, 2012) available as part of the cited public administrative record for the EIR. Figure 3 of that supplement provided a figure showing the exact locations of sensitive receptors considered for the Health Risk Assessment for the project. For the purposes of the EIR analysis, summaries of information contained this supplement provide more than adequate disclosure of the underlying analysis in the EIR.

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<sup>1</sup> California Air Pollution Control Officers Association, “CEQA & Climate Change – Evaluating and Addressing Greenhouse Gas Emissions from Projects Subject to the California Environmental Quality Act,” pg. 50 (January 2008).

Furthermore, there is no need to provide any discussion on the condition of these nearby sensitive receptors for the purposes of the CEQA analysis as this is part of the existing baseline conditions present in the area. The EIR does describe the impact of the proposed Project on these receptors as is required by CEQA.

The appellants imply that the area surrounding the Refinery is already considered an 'impacted community' per BAAQMD guidelines. Examination of the documents that the appellants cite reveals that this is not the case for the Rodeo area. The BAAQMD guidelines cited by the appellants indicated that the Richmond/San Pablo area is an impacted community and the Rodeo (Selby and Crockett) area is not listed nor mapped as impacted.

In a letter dated January 6, 2014, from Phillips, TAC data from stations nearby the Project area is presented in response to the appellants concerns (See Table 1 and 2 in Phillips66 Exhibit B). These data provides no new significant information and reveal no new environmental impact from the proposed Project. Impact 4.3-3, DEIR page 4.3-22 includes analysis of how the project will have a less than significant impact on TAC emissions.

Additionally, as discussed in the DEIR, the proposed project will remove sulfur from the RFG, which will result in decreased SO<sub>2</sub> emission from combustion of the RFG in refinery heaters and boilers. In regards to the Steam Power Plant, this plant is equipped with selected catalytic reduction (SCR) for nitrogen oxide (NOX) control. The NOX emission estimates reported to the BAAQMD are accurate and the emissions from this plant are less than those of a new boiler. See discussion in DEIR, page 4.3-18 Impact 4.3-2.

*SMW-13: The EIR provides no explanation as to why the Project would not result in any odorous emissions.*

The Project would add no new sources of odorous emissions, nor would it result in an increase in any odor-causing compounds to the atmosphere, such as H<sub>2</sub>S, SO<sub>2</sub>, or ammonia relative to baseline conditions. Therefore, there would be no change from existing conditions at the Refinery relative to odors. As stated in the DEIR, Section 4.3.4, the proposed Project represents an odor improvement over current conditions, since sulfur compounds would be removed from the RFG stream. Therefore, there would be no odor impacts associated with the Project.

*SMW-19: The EIR Fails to Adequately Analyze the Project's Impacts Related to Geologic Hazards.*

As described in Section 4.7.2.3 of the DEIR and Section 2.5 of the FEIR, the mere presence of liquefiable soils and/or seismic hazards does not preclude safe construction

of critical improvements. These adverse site conditions can easily be overcome by appropriate engineering design, correct site preparation, and proper construction. The DEIR states that each of the proposed Project components will receive a site-specific geotechnical investigation as required by Law. The investigations and resultant recommendations made by a state licensed geotechnical engineer would include design parameters to mitigate potential effects of liquefaction, which would be approved by the County Department of Conservation and Development, Building Inspection Division in accordance with the most recent version of the California Building Code. Construction would be in accordance with objective standards and performance criteria embodied in the regulatory codes.

*SMW-22: The EIR Contains an Inadequate Description of the Project Area's Existing Biological Resources.*

The appellant asserts that the EIR fails to accurately portray the site's underlying environmental conditions, despite also providing page references from the EIR indicating where these conditions are described. The appellant continues that the Project site and vicinity contain several types of wetlands, including northern coastal salt marsh, coastal brackish marsh, and coastal and valley freshwater marsh; that a number of species depend on these habitats, including salt marsh harvest mouse, California clapper rail, and black rail; the Project site drains into San Pablo Bay, which supports diverse marine biota including several federally threatened species. As the appellant admits with page references included in the comment, the EIR does identify and describe all of these habitats types and special-status species in Section 4.4, Biological Resources pages 4.4-2 through 4.4-18.

The appellant asserts that the EIR relies on insufficient biological surveys that are outdated or entirely absent, that a review of high-resolution satellite imagery in 2013 to augment surveys performed in 1993, 2003, and 2006 is insufficient to identify species occurrences, and the United State Fish and Wildlife Service (USFWS) list of species clearly indicates that surveys should be performed for the species and habitats within the project area. Beginning on page 4.4-2, the EIR identifies the habitats present in the Refinery Complex Vicinity (RCV), the Refinery Complex (RC), and the Proposed Project Area (PA), and the species potentially present in these habitats. The EIR appropriately reduces the scope of the discussion to the habitats and species that could be directly and indirectly impacted by the Project. With all terrestrial impacts occurring within developed areas of the Refinery, the EIR adequately relies on a variety of information including past surveys, a review of the California Natural Diversity Database (CNDDB) and high-resolution satellite imagery, to confirm the habitats present and infer the

potential for encountering any particular species. Additional terrestrial surveys would not contribute to an improved understanding of the biological resources present and/or the project's potential impacts on these resources because the project area (PA) is already developed by industrial facilities and secondary (e.g., noise and visual disturbance impacts) would not significantly increase baseline disturbance levels and may not extend beyond the industrial area. A Phase II aquatic study further evaluating the impact of the thermal plume on aquatic life was underway at the time of the EIR and was not available for review or discussion during the EIR process. The 2006 Tena Environmental Study demonstrated that the submerged cylindrical wedgewire screens installed on the once-through cooling water intake structure complied with requirements to reduce impingement and entrainment of aquatic organisms and estimated that the configuration significantly reduced entrainment of larval fishes and virtually eliminated impingement of adult fishes. The increase in intake volume under the proposed project is within the operating parameters of the once-through cooling system that was sufficiently proven in the 2006 study; thus, no additional study on the wedgewire system was necessary.

The appellant misapplies the language provided by the USFWS in their species list (DEIR Appendix B); all species on the list were considered in the EIR analysis, and those with potential to occur in the Project area are described in Table 4.4-1 and, where appropriate, discussed in the Impacts section of the DEIR.

**SMW-23: *The EIR Fails to Adequately Analyze the Project's Impacts on Biological Resources.***

The appellant asserts that the EIR fails to analyze impacts to sensitive species that it acknowledges may be present in habitat areas described in the EIR (specifically salt marsh harvest mouse, California clapper rail, and black rail), and further states that the EIR erroneously dismisses impacts to these species based on the Refinery's baseline disturbance levels. The EIR correctly measures impacts against the Refinery's baseline disturbance levels consistent with CEQA Guidelines Section 15125, which states that the physical environmental conditions in the vicinity of the project, as they exist at the time the notice of preparation is published, will normally constitute the baseline physical conditions by which a lead agency determines whether an impact is significant. As stated in the response to SMW-22, above, the DEIR in Section 4.4, Biological Resources, pages 4.4-2 through 4.4-18, identifies the habitats present in the Refinery Complex Vicinity (RCV), the Refinery Complex (RC), and the proposed Project Area (PA); identifies the species potentially present in these habitats; and appropriately reduces the scope of the impact discussion to the habitats and species that could be directly and indirectly impacted by the Project. In the impact discussions beginning on page 4.4-25, the DEIR

analyzes potential impacts to salt marsh harvest mouse, California clapper rail, and black rail, among other species, and finds that impacts would be less than significant based on the environmental baseline and distance from potentially sensitive habitats: the Project would not significantly increase the Refinery's baseline disturbance levels, and potentially sensitive habitats are spatially separated from the PA by existing Refinery operational structures and features.

The appellant erroneously asserts that the EIR does not analyze impacts to sensitive fish species. Species are identified in Section 4.4, Biological Resources, in Table 4.4-1, and potential impacts are discussed on page 4.4-27 in *Impact 4.4-2: Special-status fishes could be adversely impacted by an increase in once-through intake water piped in from San Pablo Bay to use as coolant in the Refinery processes* and *Impact 4.4-3: Special-status fishes could be adversely impacted by an increase in effluent temperature*. The DEIR in Section 4.4, Biological Resources, pages 4.4-27 through 4.4-28, and the FEIR in Section 3.2, Response to Organization Comments, pages 3.2-121 through 3.2-123, discuss the baseline and future Project conditions relative to once-through cooling and effluent temperatures and, while referring to maximum thresholds allowed in the Project-specific National Pollutant Discharge Elimination System (NPDES) permit, identify that thresholds in the NPDES permit are based on several plans and scientific studies including the *Water Quality Control Plan for Control of Temperature in the Coastal and Interstate Water and Enclosed Bays and Estuaries of California; Policy for Implementation of Toxics Standards for Inland Surface Waters, Enclosed Bays, and Estuaries of California; Policy for Compliance Schedules in National Pollutant Discharge Elimination System Permits*; and the project-specific studies *Cooling Water Discharge Thermal Plume Study* (Tenera Environmental, 2007) and *Technology Installation and Operation Plan* (Tenera Environmental, 2006 in RWQCB, 2011). These plans serve to guide activities in San Francisco Bay and protect aquatic species from unsafe temperatures and other environmental conditions; the project-specific studies do the same for the Refinery environment. The finding of no significant impact to special-status fishes (page 4.4-27) incorporates the existing baseline intake volumes and effluent temperatures relative to the changes under the proposed project and relative to thresholds identified in the plans and studies upon which the project-specific NPDES thresholds are based (e.g., upon the Tenera 2007 Cooling Water Discharge Thermal Plume Study, which concluded that thermal plume effects would be of a minor nature due to their being a surface phenomena that dissipates rapidly in the nearshore area of the discharge and the study's documentation of natural solar heating of nearby tidal flats that produce natural thermal plumes that significantly exceed temperatures of the ConocoPhillips thermal plume). The finding is further based on existing or proposed design features that avoid and minimize impacts, such as use of a wedgewire screen



configuration and low through-screen velocity that virtually eliminates impingement of adult and juvenile fishes and significantly reduces the entrainment of larval fishes and use of sufficient cooling water to lower effluent temperatures.

The appellant states that CEQA mandates a finding of significance for any impacts that “restrict[s] the range of an endangered, rare, or threatened species” and continues to reference various case law and CEQA guidelines. Nowhere does the appellant suggest how the proposed Project would restrict the range of an endangered, rare, or threatened species or what species is/are being referred to. The EIR does not make findings regarding whether the proposed Project would restrict the range of an endangered, rare, or threatened species because this is not a potential outcome of the Project.

SMW-23: *The EIR Fails to Analyze Cumulative Impacts to Biological Resources.*

The appellant states that the EIR fails to disclose the extent and quality of biological resources that historically occurred in the Project area, or the amount of resources already lost in the region, and fails to evaluate the cumulative impacts of this Project and other projects on this habitat and the listed species that use it. As described in the response to SMW-22, the EIR identifies the habitats present in the Refinery Complex Vicinity (RCV), the Refinery Complex (RC), and the proposed Project Area (PA), and the species potentially present in these habitats. The EIR appropriately reduces the scope of the discussion to the habitats and species that could be directly and indirectly impacted by the Project. The impact discussion is thus limited to a discussion of potential indirect impacts (e.g. noise and visual disturbances) on marsh birds and nesting birds, and potential direct impacts on fishes.

The cumulative impact discussion considers the Project’s potential for “cumulatively considerable” impacts on fishes in San Pablo Bay and, following the guidance of CEQA Section 15130 (b) to follow standards of practicality and reasonableness in the cumulative analysis, finds the Project’s incremental contribution to once-through cooling volume and thermal plume temperature is not cumulatively considerable. This is because the project’s anticipated increases in thermal plume temperature and once-through cooling volume are within the operational parameters of the existing Refinery, very localized, and considered less than significant (DEIR at pages 4.4-23, 4.4-27, 4.4-28, and 5-9; FEIR at pages 3.2-137 and 3.2-138). The Bay is a highly regulated environment where individual and cumulative project impacts on water quality are carefully monitored, as described on Page 5-9 of the DEIR. The San Francisco Bay Basin (Region 2) Water Quality Control Plan (Basin Plan) is the Regional Water Board’s master water quality control planning document, designating beneficial uses and water quality

objectives for the Bay and providing a definitive program of actions designed to preserve and enhance water quality and to protect beneficial uses for the maximum benefit to the people of California. These water quality objectives are, in fact, controls on cumulative effects to water quality from all sources, natural and man-made. Industrial wastewater point source discharges are regulated through the NPDES program, and the management approach includes a Strategic Plan and Watershed Management Initiative that finds integrated solutions through the expertise and authority of multiple agencies and organizations, and measures success through monitoring and other data collection. The NPDES program includes project oversight by agencies such as the National Marine Fisheries Service and California Department of Fish and Wildlife with specific interest in protecting fisheries resources and direct input into NPDES permit conditions. As stated on Page 5-10 of the DEIR, permit maximums are based on scientific studies and data collected by the RWQCB and other regulatory and research agencies. As long as the individual permit maximums of projects in the Bay, which themselves take into account the potential cumulative effects of each point source discharge, are not breached, it follows that cumulatively considerable impacts are not likely to occur.

SMW-24: 2. *The EIR Fails to Adequately Analyze the Project's Cumulative Environmental Impacts From Other Refining-Related Projects.*

The appellants assert that the EIR fails to analyze adequately cumulative impacts. Section 5.4.2 of the DEIR provides Table 5-1 which states all cumulative Bay Area refinery projects known to the authors of the DEIR prior to publication in June of 2013. Since that time, a number of other projects involving refineries and rail have been announced. Given that the baseline date for the proposed Project as defined by the publication of the Notice of Preparation for the EIR (July 2012) was well before this, the DEIR authors conducted their cumulative analysis according to CEQA (as further discussed in response B4-22 in the FEIR) requirements with the best list then available of potential cumulative projects.

The appellants assert that this analysis should have considered cumulative rail traffic within California. This was not possible as the destination of the project's rail cars is not knowable and could be anywhere. It would have been speculative to have done so and contrary to CEQA section 15145.

The thread that appellants are following is indicated by the statement that "Each of the Bay Area refineries have either recently permitted projects or have pending permits that will facilitate transporting and refining tar sands crude." This expands on their claim of a "larger project" for the Propane Recovery Project, in order to link all projects and refineries in an overall action that requires a cumulative analysis, regardless of whether it

is warranted under CEQA. The appellants then assert that comments by another organization (NRDC) about another refinery project, a proposed project at the Valero Benicia Refinery, support the appellants unsupportable claims and conclusions about a “larger project”. Since the appellants’ only physical evidence in support of their “larger project” claim is not true, their claim for the “larger project” is also unsupportable. The County cannot provide a response to these general and unsupportable assertions.

Finally, as is discussed in detail in Section 5.4.3 of the DEIR, the proposed Project was analyzed for its potential to have a cumulative considerable impact on all appropriate CEQA categorical areas. In many cases the proposed Project had no project-related impacts and when considered with other projects described in Section 5.4.2, after analysis, no cumulative considerable impacts were found as well. The appellants do not suggest otherwise but simply assert that the analysis was inadequate.

CBE-11: *Significant Biological Resource Impacts due to OTC system.*

The appellant states that the Regional Water Quality Control Board (RWQCB) has ordered the Project proponent to study replacing the once through cooling (OTC) system, that the study is referenced and attached to Citizens for a Better Environment’s (CBE’s) comments on the DEIR, and that the FEIR denies the existence of the study. As a condition in the NPDES permit for existing Refinery operations, the RWQCB required that ConocoPhillips conduct a study evaluating the feasibility of replacing the existing OTC technology. The FEIR does not deny the existence of the study (page 3.2-122, last paragraph). On pages 3.2-137 and 3.2-138, the FEIR responds to Karras Comments 31, 32, and 33, by informing that the Cooling Tower Replacement Feasibility Evaluation required under the current NPDES permit was not finalized at the time of the FEIR and therefore the findings were not available for review; as such, any discussion or analysis of the feasibility evaluation would be speculative and thus outside the scope of the DEIR. Additionally, the FEIR responds on page 3.2-122 that no fundamental change to the Refinery cooling system, such as conversion from the existing OTC system to a closed-loop cooling system, is proposed as part of the Project; therefore, it is beyond the scope of the DEIR to explore the advantages and disadvantages of alternate cooling systems.

CBE-17: *The County Failed to Adequately Notify the Community of this Project.*

In advance of the November 19, 2013 Public Hearing on certification of the proposed Projects’ EIR, the County on November 6, 2013, performed the following steps to properly notice the hearing in accordance with CEQA guidelines:

- 1) The project noticed all property owners and occupants within 300 feet of the project parcels (357-010-001 and 357-300-005).

- 2) The project noticed all speakers from the scoping session.
- 3) The project noticed all required public agencies and those that requested to be noticed (e.g. City of Martinez).
- 4) The project noticed all people and organizations who expressed interest in the project and requested to be noticed.
- 5) The project was noticed in the West County Times.
- 6) Hard copies of the FEIR were sent to those people, organizations, and agencies who commented on the DEIR. A hard copy was also available for public review at the district supervisor's office and the Rodeo and Pleasant Hill public libraries.
- 7) Copies of the staff report were also mailed to various people, agencies, and organizations.

Furthermore, there is no known CEQA requirement to notice parties who might be subject to 'taking' or decreased property values as suggested by the appellant. In fact such action might be considered speculative as well. The County properly noticed the public hearing per CEQA requirements.

F-21.    *The EIR did not include criteria pollutant and GHG emissions relative to electricity use.*

Electrical power would be supplied to the proposed Project from Pacific Gas and Electric Company (PG&E)'s existing regional power grid. It is generally not possible to determine the exact generation source(s) of electricity on the power grid that would supply the proposed project, or whether or not the electricity would even be generated within the Bay Area Air Basin. Since analysis of criteria pollutants is dependent on the air basin of the Project-related sources, indirect emissions of criteria pollutants associated with electricity use from the regional power grid are not addressed in the air quality analysis.

GHG emissions associated with use of electricity from the existing power grid are generally addressed independent of air basin due to the global nature of the effects of GHG emissions. Refer to the *Indirect Emissions from Increased Electrical Demand* on DEIR page 4.8-17 for a discussion of electricity-related GHG emissions and emission factors that would be associated with the proposed Project.

F-25:    *Cumulative Air Quality Impact Analysis is Inadequate*

As mentioned in response SMW-24, the baseline date (July 2012) for the proposed Project predates both the projects mentioned by the appellant (Santa Maria and Ferndale Refineries). The Santa Maria Refinery's relationship to the proposed Project was discussed in detail in Section 2.2 of the FEIR as was a discussion of the relationship of refinery feedstocks to the proposed Project. The Ferndale Refinery project is in another state (Washington) and its status is outside what would be considered by CEQA. Whether

the Phillips refinery could or could not receive crude oils or other feedstocks from the Ferndale refinery by marine vessel merely represents an existing, baseline condition that would not be altered by the proposed project.

Response to CBE Supplemental Evidence- Letter received January 7, 2014

The appellant claims the EIR's baseline level for once-through, non-contact saltwater flow volume is erroneous and underestimates the percent increase of the proposed project, and as a result underestimates the severity of potential project impacts related to the discharge of this water. It should be noted that the appellant's Chart S-1 is not Phillips 66's submission to the Regional Water Quality Control Board (RWQCB). Rather, it is appellant's depiction of the data. With respect to plates B, C and D in particular, the comparisons will vary considerably depending upon the factors selected, including, for example, the averaging period. The data submitted by Phillips 66 for 2013 are consistent with the range of flow volumes in recent years, and confirm that the baseline used in the EIR is reasonable.

Once-through, non-contact flow at the refinery is affected by many factors, including process rates, turnaround cycle, and maintenance activities, among others. The EIR used average daily flow volumes for one year (second half of 2011 and first half of 2012) to best represent current conditions of operations at the facility in order to analyze potential impacts from the proposed changes with the project. In accordance with CEQA requirements, "an EIR must include a description of the physical environmental conditions in the vicinity of the project, as they exist at the time the notice of preparation is published." (Article 9 Section 15125). Reviewing the data provided by the appellant which includes data from 2013 that was not available at the time of preparation of the DEIR, shows relatively similar average flow volumes compared to 2012 (44.76 for 2012 and 43.26 for 2013) further supporting the appropriate use of the 2012 data as baseline conditions. Further, in reviewing the data from the years 2010 through 2013 provided by the appellant, there is no clear correlation between average flow volumes and temperature of discharge. Comparing 2010 data to 2012 shows an approximate increase of 20% in flow and yet the highest recorded monthly average temperature<sup>2</sup> for the year only increases by 1.2% while the average for the year actually decreases by 0.6%. Regardless, despite fluctuations in flow volumes of once-through, non-contact saltwater for process cooling, the Refinery has a history of compliance with the effluent permit limitations including temperature.

The EIR has disclosed on page 3-27 and on page 4.4-27 of the DEIR that the Project would result in an increase of once-through cooling volume to approximately 40,000 gallons per minute from an existing 31,500 gallons per minute. A flow of 31,500 gallons per minute is the equivalent of 45.4 million gallons per day which compares well with the data provided by the appellant showing an average daily flow of 44.6 million gallons per day.

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<sup>2</sup> The NPDES effluent permit limitation for temperature is based on the monthly average of daily measured temperatures.

The magnitude of the flow increase has been conveyed to the reader in another meaningful way by describing the change as a 25% increase in flow volume from an existing baseline level of 31,500 gallons per minute. However, it should be noted that the analysis does not rely solely on this percent increase. The increase in flow volume by 8,500 gallons per minute as proposed by the Project would be accommodated by the existing five pumps and would continue to operate within the National Pollutant Discharge Elimination System (NPDES) permit thresholds determined by the Regional Water Quality Control Board (RWQCB). As described in the DEIR (page 4.4-27) and in the County's Response to Appeal Comment SMW-23, permit thresholds are based on various studies including the project-specific study by Tenera (2006) regarding use of wedgewire screens and maximum intake flows. The appellant provides no information to support the claim that the proposed Project's increase in once-through cooling volume to 40,000 gallons per minute would result in significant impacts on special-status fishes.

Therefore, based on the appropriate use of 2012 monitoring data as representative of existing baseline conditions for the Refinery for the EIR and the lack of data supporting a direct correlation between increases in flow volumes and an inability to meet water quality permit requirements which are protective of receiving waters and habitat, the EIR has adequately characterized the potential impacts of the proposed Project.



CONTRA COSTA  
COUNTY

Phillips 66  
San Francisco Refinery  
1380 San Pablo Avenue  
Rodeo, CA 94572

January 6, 2014

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DEPARTMENT OF  
CONSERVATION  
AND DEVELOPMENT

Chair Karen Mitchoff and Members of the  
Contra Costa County Board of Supervisors  
651 Pine Street, Second Floor  
Martinez, CA 94553

**Re: Phillips 66 Propane Recovery Project – County File #LP12-2073 - Phillips 66  
Response to Appeals by the Rodeo Citizens Association and Communities for  
a Better Environment**

Dear Chair Mitchoff and Members of the Board:

This letter and attachments are submitted on behalf of Phillips 66 Company ("Phillips 66") to respond to the separate appeals filed on behalf of the Rodeo Citizens Association and by Communities for a Better Environment (collectively, "Appellants"), with respect to the Contra Costa County Planning Commission's unanimous decision at its meeting on November 19, 2013, to approve the Propane Recovery Project (the "Project") proposed by Phillips 66 Rodeo Refinery (the "Refinery" or "Rodeo Refinery") and to certify the Environmental Impact Report ("EIR") prepared for the Project.

Most of the issues raised in the appeals flow from the Appellants' reliance on generic information relating to oil refining, speculation about how the Rodeo Refinery operates and incorrect assumptions. I am the manager of the San Francisco Refinery for Phillips 66 and have held positions ranging from Process Engineer to Refinery Manager. The Rodeo Refinery employs numerous engineers and other refinery professionals, many of whom have been at the Rodeo Refinery for decades. Collectively, we have personal, hands on, knowledge of the Rodeo Refinery equipment and operations. It is important to correct the misinformation that underlies the appeal petitions so that your Board can make a thoughtful and reasoned decision based on facts.

1. The Project

In the process of refining crude oil (any crude oil) into liquid products (i.e., gasoline, diesel, jet fuel, etc.), a gaseous by-product is produced called refinery fuel gas ("RFG"). Among other constituents, RFG contains propane and butane. The more RFG that is produced, the less transportation fuels (gasoline, diesel, and jet fuel) are produced. Currently, the Rodeo Refinery manages its RFG by using it as fuel in refinery heaters and boilers. In some cases when more RFG is produced than can be used as fuel in refinery heaters and boilers the excess RFG is burned in refinery flares. Maximizing RFG production is not a preferred practice due to the fact that refineries generate more revenue from producing and selling transportation fuels than can be

produced from capturing, processing, and selling propane and butane contained in the RFG. All Bay Area refineries, with the exception of the Rodeo Refinery, currently capture, store, and sell propane and butane normally contained in RFG. The captured gases are often referred to as liquid petroleum gas ("LPG") and are stored in pressurized vessels and shipped from the refineries by rail or truck for sale to third parties. Phillips 66 is not aware of any fires or explosions related to the collection, storage and shipment of LPG from any Bay Area refinery.

The Rodeo Refinery has recovered butane, stored it in a pressurized vessel, and sent it offsite by rail for sale to third parties since the 1970s, and has experienced no adverse issues of any kind related to these activities. The Project would allow the Rodeo Refinery to recover additional butane and for the first time recover propane from its existing RFG, store the LPG in pressurized vessels, and ship it from the Refinery by rail for sale. To the extent necessary for use in the Refinery's heaters and boilers, the LPG removed from the RFG will be replaced by purchased natural gas. The motivation/justification for the Project is the fact that replacement natural gas can currently be purchased by Phillips 66 at prices below that for which LPG can be sold to third parties. [DEIR, pgs. ES-1 through ES-7, 3-1, 3-2 and 3-5; FEIR, Master Response 2.2, pgs. 2-2 through 2-4.]

2. Project Benefits

a. Reduction in Sulfur Dioxide.

RFG contains sulfur compounds which form sulfur dioxide ("SO<sub>2</sub>") when burned in heaters/boilers or flares. SO<sub>2</sub> is one of the 5 criteria pollutants regulated by Federal EPA and the Bay Area Air Quality Management District (the "BAAQMD"). Current scientific evidence links exposures to SO<sub>2</sub> with an array of adverse respiratory effects, including bronchoconstriction and increased asthma symptoms. EPA's National Ambient Air Quality Standard for SO<sub>2</sub>, as well as BAAQMD regulation of SO<sub>2</sub>, are designed to protect against exposure to the entire group of sulfur oxides which can react with other compounds in the atmosphere to form small particles that are potentially harmful. SO<sub>2</sub> emissions can also be a cause of odors.

To meet sales specifications for butane and propane, the Rodeo Refinery will need to remove impurities, including sulfur. Phillips 66 will hydrotreat the RFG in a new hydrotreater to remove sulfur compounds from the RFG, including from the propane/butane to be extracted as LPG. This sulfur removal process will precede the butane and propane recovery equipment, which means that the entire RFG stream will be treated by the sulfur removal equipment. RFG combustion is the single largest source of SO<sub>2</sub> emissions from the Rodeo Refinery; accordingly, by hydrotreating the entire RFG stream, the Project will result in a reduction in sulfur emissions from fuel burning sources throughout the Refinery. Although the Rodeo Refinery has been and continues to be in compliance with SO<sub>2</sub> limits imposed by the BAAQMD, the hydrotreating process will result in an approximately 50% reduction in SO<sub>2</sub> emissions from the Rodeo Refinery (roughly 180 tons per year). Without the Project, this reduction in SO<sub>2</sub> will not occur. [DEIR, pgs. ES-1, ES-2, 3-2, 3-5 and 4.3-19 through 4.3-22.]



b. Reduction in Flaring.

Generally, refineries strive to ensure the amount of RFG produced in the refining process is less than the amount combusted in refinery heaters and boilers. However, when some of the combustion units are down for maintenance, or as a result of upsets or breakdowns, there may be more RFG than can be combusted in the heaters and boilers. In this situation, excess RFG is typically combusted in a refinery flare. The capture of propane and butane from the RFG will reduce the volume of RFG combusted at the Refinery. To the extent and when needed, the remaining volume of RFG will be supplemented by purchased natural gas, which is very low in sulfur. The Rodeo Refinery will purchase only the amount of natural gas needed to address any shortfall between RFG production and demand, reducing instances of excess RFG and the associated flaring incidents at the Refinery. [DEIR, pgs. ES-2, 3-5 and 4.6-8; FEIR, Responses B4-29, pg. 3.2-127 and B4-39, pgs. 3.2-129 through 3.2-132.]

c. Reduction in On-site Greenhouse Gas Emissions.

The combustion of propane and butane produces more greenhouse gas ("GHG") emissions than does the combustion of natural gas. Accordingly, by replacing a portion of the RFG with natural gas for Refinery heaters and boilers, the Project will result in a reduction in onsite GHG emissions from the Rodeo Refinery. [DEIR, pgs. 4.8-12 through 4.8-18; FEIR, Responses B4-23, pgs. 3.2-123 & 3.2-124, B4-32, pgs. 3.2-127 & 3.2-128.]

3. Appeal

a. Project Scope

The fundamental premise of the arguments raised by Appellants and their consultants is based on speculation, and erroneous interpretation of the Project scope. Appellants cite the "Fox Report" and the Karras Declaration as evidence that there is insufficient butane/propane in the Refinery's existing RFG. They compound that faulty foundation by then asserting that the project goals can be met only if Canadian Oil Sands are processed. Appellants' premise, the Fox Report, and the Karras Declaration are speculative, erroneous, and false. "Argument, speculation, unsubstantiated opinion or narrative, or evidence this is clearly inaccurate or erroneous, or evidence that is not credible, shall not constitute substantial evidence." [CEQA Guidelines, 14 Cal. Code Regs. §15064(f)(5).]

As set forth in the project application, and in the DEIR and FEIR, the Project is designed to recover LPG, and the size of the Project is based on the Refinery's existing RFG produced by the existing Rodeo Refinery crude slate. [DEIR, pg. 3-2; FEIR, Master Response 2.2, pgs. 2-2 through 2-4, Responses B2-12, pg. 3.2-14, B4-5, pgs. 3.2-118 & 3.2-119, B4-11, pg. 3.2-120, B4-19, pg. 3.2-121, B4-39, pgs. 3.2-129 through 3.2-132, B4-40, pgs. 3.2-132 & 3.2-133.] The design of the removal equipment and the amount of propane/butane that can be removed is specified in the Project's BAAQMD permit application, and this amount has been translated into an enforceable condition included in the draft permit prepared by the BAAQMD. The volume is

specified as 14,500 BPD for a consecutive twelve month average. This design and permit limit is based on actual sampling and measurements of propane and butane in the RFG at the Rodeo Refinery taken in 2011. A summary of those measurements is attached to this response on Exhibit "A-1" and it verifies what has been the stated basis of the Project from its outset. I recently reviewed similar data for January through November 2013 which reveals an average of 14,250 BPD and is consistent with the levels of butane/propane measured in August of 2011 and the BAAQMD permit limit. (See Exhibit "A-2").

As referenced above, the economic motivation for the Project is that LPG currently brings a price higher than the cost of natural gas, which would replace it. The Project has nothing to do with changes in the crude slate. The Refinery has no desire or incentive to sustain or increase production of butane and propane because they have a lower value than the liquid fuels (gasoline, etc.) that are the Refinery's primary products. Moreover, regardless of the amount of RFG produced in the future, the design of the removal equipment and BAAQMD permit limits will limit the amount of LPG that can be recovered. If more than 14,500 BPD LPG is produced, the excess will remain in the RFG and be burned in heaters/boilers as it is today. If less than 14,500 BPD is produced, it will all be captured and removed from the RFG. The Project benefits and impacts (or lack thereof), as described in the DEIR, will occur regardless of which crudes or intermediates are processed at the Refinery.

Having incorrectly assumed that Phillips 66 will need to refine heavier crudes to support the Project, Appellants then contend that refining of heavy crude will produce adverse impacts. Based on Phillips 66's many years of experience refining heavy crudes at its various refineries, we do not agree with Appellants' contentions regarding the impacts of refining heavy crude. Even so, we will not provide detailed responses in this letter because the contentions have no relevance or relationship to the Project, the FEIR, or the Land Use Permit. Because the fundamental allegation of the Appellants is false and the entirety of the Project is in fact to recover propane and butane from the existing RFG, the remainder of the "larger project" arguments are not relevant and do not require a response. However, because these additional allegations are also incorrect, for informational purposes and to insure an accurate record, Phillips 66 provides the following:

b. No Crude Processing Equipment.

None of the equipment being installed in connection with the Project in any way affects the ability of the Refinery to process crude either heavier or lighter than that which is currently being processed at the Refinery. Appellants do not contend otherwise. The Refinery currently processes heavy crude and there are no restrictions on the types of crude it can process now or in the future. There are restrictions on the levels of pollutant emissions and discharges contained in applicable permits and regulations issued by the BAAQMD and the Regional Water Quality Control Board, and those restrictions will not change regardless of the type of crude processed. Further, the CEQA baseline for the Project used to determine environmental impacts are actual emissions from the refinery averaged over the last three years. Following implementation of the Project, or without the Project, the Rodeo Refinery will still be able to process the same blend of

crude oils that are currently processed and allowed under existing permits, regulations, and facility design. Rather than enabling or requiring the processing of heavier crude, the Project simply will allow the Refinery to remove LPG and sulfur from the RFG, resulting in the corresponding environmental benefits described in the FEIR irrespective of the Refinery's crude slate. [DEIR, pgs. 3-20 through 3-28, 4.3-12 through 4.3-24, 4.4-25 through 4.4-28, 4.8-12 through 4.8-18, and 4.10-21 through 4.10-24; FEIR, Master Response 2.2, pgs. 2-2 through 2-4, Responses B2-10, pg. 3.2-13 & 3.2-14, B2-11, pg. 3.2-14, B4-5, pgs. 3.2-118 & 3.2-119, B4-11, pg. 3.2-120, B4-21, pgs. 3.2-121 through 3.2-123, B4-25, pgs. 3.2-125 & 3.2-126, B4-39, pgs. 3.2-129 through 3.2-132, B4-40, pgs. 3.2-132 & 3.2-133, and B4-47, pgs. 3.2-135 through 3.2-138.]

c. Advantaged Crude.

The Appellants have excerpted selected language from various Phillips 66 public sites and documents to support its contention that all of Phillips 66's projects on the U.S. west coast are a part of an overall plan to increase use of "Advantaged Crude," including Canadian Oil Sands. However, when the Phillips 66 websites/documents that Appellants cite are read in full, one finds that Advantaged Crude is defined as "crude oils that sell at a discount relative to crude oils tied to the global benchmark." At least 6 different types of crude oils are listed as potential "Advantaged Crude," several of which are considerably lighter than the crude the Rodeo Refinery currently processes. When the Recent Advantaged Crude Activities list cited by the Appellants is read in whole one finds that most of the projects listed involve crude oils that are considerably lighter with lower sulfur contents than what Phillips 66 West Coast refineries currently process. Further, a general corporate goal to purchase crude oils that cost less than the global benchmark is not a "project" as defined in CEQA. Even assuming that Phillips 66 is successful in purchasing crude oils at a discount compared to the global benchmark, which of the qualifying crudes will be purchased and where they will be refined is currently speculation. [See (1) Feature Story - "Phillips 66 Delivers on Advantaged Crude Strategy", (2) Edited Transcript – Thomas Reuters Street events – Q1 2013 Phillips 66 Earnings Conference Call (May 1, 2013), and (3) Transcript of Phillips 66 Presentation at 2013 Barclays CEO Energy-Power Conference, Greg Garland, Chairman and CEO (September 12, 2013), all currently available on the Phillips 66 Company website "Newsroom"; *see also* FEIR, Master Response 2.2, pgs. 2-2 through 2-4.]

d. Santa Maria and Carson Projects.

Appellants attempt to bolster their claims and erroneous conclusions regarding the Project scope by cobbling the Rodeo Project together with projects at other Phillips 66 refineries in Carson and Santa Maria, California. The only thing these projects have in common is that they have the same owner, they will be constructed in the same general time frame, and they occur in California. Beyond that, they are hundreds of miles apart, and each will proceed or not depending upon the outcome of the environmental review and permitting process by the respective local jurisdictions. The projects will occur in different counties, and are subject to CEQA review by different lead and responsible agencies. Phillips 66 hopes that all these projects will be approved; however, any combination is capable of proceeding because the

projects do not affect one another. Moreover, every one of these projects either has gone through or is undergoing CEQA environmental reviews.

The Carson project consists of the addition of one new tank and increases in throughput of two additional tanks to accommodate the off-loading of very large oil tankers in one call. The size of crude tankers has increased over time, and the Carson operations need to be modified as a result. Currently, two calls are required to offload the very large tankers, and the proposed new and modified tanks will allow the entire contents to be offloaded in one visit. The South Coast Air Quality Management District ("SCAQMD") has issued a 100-page Draft Negative Declaration and is expected to issue its Final Negative Declaration in the near future. [Phillips 66 Los Angeles Refinery - Carson Plant Crude Oil Storage Capacity Project, Draft Negative Declaration, South Coast Air Quality Management District (September 2013).]

A project at Santa Maria involving an increase in refinery throughput was applied for 5 years ago, long before the propane recovery project was conceived. It was approved in 2013, after certification of an Environmental Impact Report by the County of San Luis Obispo. No legal challenge was filed related to that project nor were any comments submitted by Appellants. [Phillips 66 Santa Maria Refinery Throughput Increase Project, Final Environmental Impact Report, Marine Research Specialists (October 2012).]

A second Santa Maria project consists of an expansion of an existing rail terminal at the refinery and is the subject of a Draft Environmental Impact Report issued by the County of San Luis Obispo in November 2013. [Phillips 66 Company Rail Spur Extension Project, Public Draft Environmental Impact Report, Marine Research Specialists (November 2013).] Two full EIRs (one completed and one just issued) have been prepared for the two separate Santa Maria Projects and will cover all environmental impacts from those projects. While there is a pipeline between the Santa Maria Refinery and the Rodeo Refinery, the Santa Maria Refinery only delivers semi-refined products to the Rodeo Refinery. Unrefined crude oil is not sent directly from the Santa Maria Refinery to the Rodeo Refinery and cannot be delivered directly to the Rodeo Refinery without substantial modifications to the Santa Maria Refinery and pipeline. No such changes are proposed, and if they are proposed in the future, they would require new permits/environmental review. Prior to shipment of the intermediates produced at Santa Maria, the semi-refined material is stored in tankage. The tankage has vapor pressure limits imposed by the County Air District which acts as a constraint regarding how much butane/propane can be included in the intermediates. Historically, and currently the Santa Maria refinery operates at or very near these limits. Accordingly, contrary to the contentions of the appellants no new propane/butane can be added to the intermediates sent from Santa Maria to Rodeo regardless of the types of crude that may be processed at Santa Maria.

e. Greenhouse Gas

Another of the consistent themes of the appellants is that the DEIR/FEIR is deficient because it does not include off-site greenhouse gas emissions that could be created by the use of the propane/butane after it is sold by Phillips 66.

With respect to the proposed Project, it is unclear where, how, or by whom the propane/butane produced by the Project might be used. Butane is sometimes used as an additive in chemical manufacturing which does not involve combustion. Further uncertainty exists concerning the locations, quantities and types of fuel that might be replaced by the propane/butane that would be sold by Phillips 66. It is also unknown whether such production and sale would have the potential to impact the overall demand/consumption of propane/butane or the use or non-use of another fuel. These issues are not within the capacity or control of the Project (or of the County as Lead Agency) and are too speculative for inclusion in the EIR analysis. (14 Cal. Code Regs. §15358).

Contrary to Appellants' claims, for the above reasons, the CEQA Guidelines do not require a manufacturer/producer of a product to attempt to determine or be responsible for emissions that occur from the use of the product after it is sold. The California Natural Resources Agency chose not to impose such a requirement when presented with the opportunity to do so as part of the recently-adopted amendments to the CEQA Guidelines intended to address the effects and mitigation of GHG emissions. As stated by the Resources Agency:

"Moreover, even if a standard definition of the term 'lifecycle' existed, requiring such an analysis may not be consistent with CEQA. As a general matter, the term could refer to emissions beyond those that could be considered 'indirect effects' of a project as that term is defined in section 15358 of the State CEQA Guidelines. Depending on the circumstances of a particular project, an example of such emissions could be those resulting from the manufacture of building materials. (CAPCOA White Paper, at pp. 50-51.) CEQA only requires analysis of impacts that are directly or indirectly attributable to the project under consideration. (State CEQA Guidelines, §15064(d).) In some Instances, materials may be manufactured for many different projects as a result of general market demand, regardless of whether one particular project proceeds. Thus, such emissions may not be 'caused by' the project under consideration. Similarly, in this scenario, a lead agency may not be able to require mitigation for emissions that result from the manufacturing process. Mitigation can only be required for emissions that are actually caused by the project." (California Natural Resources Agency, "Final Statement of Reasons for Regulatory Action – Amendments to the State CEQA Guidelines Addressing Analysis and Mitigation of Greenhouse Gas Emissions Pursuant to SB 97," pgs. 71-72 (December 2009).

The Bay Area Air Quality Management District has also issued guidelines for assessing GHG emissions from stationary sources and includes a number of examples of indirect sources that should be considered. Emissions from the post-manufacturing/production that might result from the use of the product produced are not included. (Section 4.2 BAAQMD California Environmental Quality Act Air Quality Guidelines).

An indirect effect must only be considered if it constitutes a reasonably foreseeable impact caused by the project. An indirect physical change determined to be speculative is not reasonably foreseeable. (14 Cal. Code Regs. §§15064(d)(3) & 15358(a)(2)). If a lead agency determines after performing a thorough investigation that an indirect impact is speculative and not reasonably foreseeable, it is authorized to simply note this conclusion and to thereafter terminate its discussion of the impact. (14 Cal. Code Regs. §15145). This was done in the DEIR for this Project. (FEIR, pg. 3.2-123-4 )

4. The FEIR Covers Appellants' Other Arguments

While the vast majority of the Appellants' arguments relate to the fictional "larger project/Canadian Oil Sands" scenario, the Appellants also claim that almost every section of the DEIR or FEIR is inadequate. As this Board is aware, the County and its CEQA consultant have a long history of permitting and conducting environmental review of refinery projects. As part of this process, they have developed considerable expertise in CEQA compliance in general, and refinery project EIRs in particular. The shotgun attacks of the Appellants clearly lack credibility. In Exhibit "B" to this letter, Phillips 66 has responded to those of Appellants' additional arguments which Phillips 66 believes it has particular knowledge as the Project applicant. The references in the Exhibit "B" are to numbering that has been added to the appeals (i.e. Shute, Mihaly & Wineberger –SMW 1, etc.; or Communities for a Better Environment – CBE 1, etc.). In many cases, the responses simply reference sections of the DEIR and FEIR where the issues raised are appropriately addressed, and, in a number of cases, Phillips defers to the County based on its expertise and or CEQA experience.

In conclusion, the Project as described in the DEIR is only to recover for sale propane and additional butane from refinery fuel gas and other process streams and will result in a significant decrease in SO<sub>2</sub> emissions from the Refinery. [DEIR, pg. 3-5.] The Project is not about Advantaged Crude, projects at the Carson or Santa Maria Refineries, or the availability or processing of "Canadian Oil Sands," and none of those topics belong in the environmental analysis of the Project. Speculation of what greenhouse gas emissions may or may not occur related to the use of butane/propane after it is produced sold and distributed to customers is neither required by CEQA nor appropriate. For all of the above reasons it is respectfully requested that the Appeals be denied and the Planning Commission's approval of the Phillips 66 Propane Recovery Project be confirmed.

Very truly yours,



Mark E. Evans  
Phillips 66 San Francisco Refinery Manager

**Exhibit A-1**  
**Refinery Propane and Butane Production - Design Basis August 2011**

Design Period	Refinery Fuel Gas - U233			Refinery Fuel Gas - A			Butane Currently Recovered for Sale <sup>4</sup>	Total Propane + Butane
	Flow <sup>1</sup> MSCFD	Propane mol % <sup>2</sup>	Butane mol % <sup>2</sup>	Flow <sup>1</sup> MSCFD	Propane mol % <sup>3</sup>	Butane mol % <sup>3</sup>	BPD	BPD
August 2011	38,592	9.9	2.8	27,299	17.8	10.0	4,899	15,474

Propane and butane obtained from two refinery fuel gas streams: U233 and RFG-A.

1. Flowrate obtained from continuous flowmeter data.
2. Mol % based on daily lab results
3. Mol % based on on-line continuous gas chromatograph (GC) results
4. Butane recovered for sale obtained from continuous flowmeter data.

**Calculations**

BPD of LPG = {Gas Flow [mscfd] x 1000 [scfd/mscfd] x mol %/100 x MW [lb/lb-mol]} / { 379.5 [scf/lb-mol] x liquid density [lb/gal] x 42 [gal/bbl]}

where:

MW = molecular weight, propane = 44 lb/lb-mol and butane = 58 lb/lb-mol

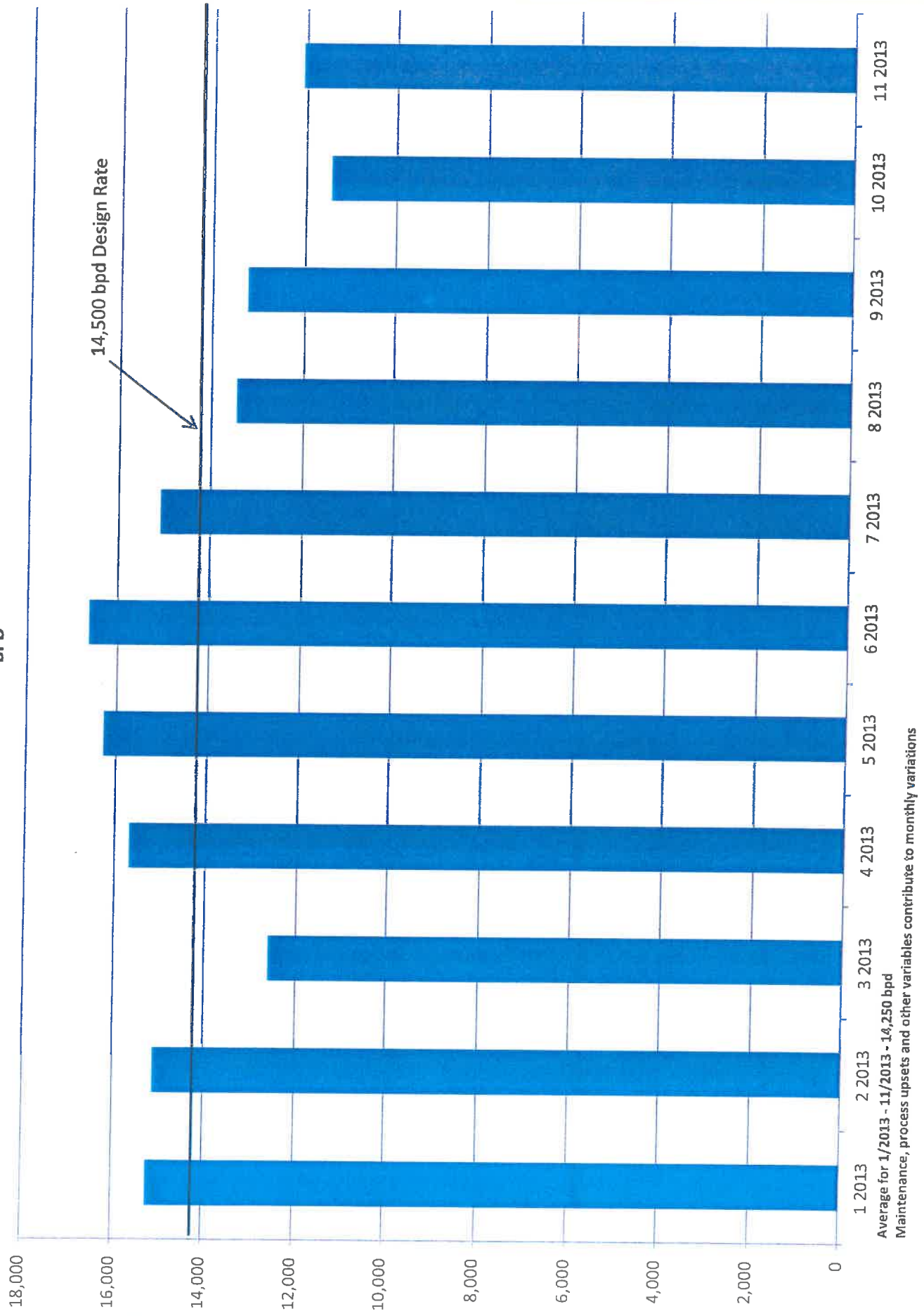
Propane liquid density = 4.2 lb/gal

Butane liquid density = 4.6 lb/gal

379.5 scf/lb-mol is the specific molar volume of an ideal gas at 60 F



**Exhibit A-2**  
**Refinery Propane and Butane Production**  
**BPD**





# EXHIBIT B

ID	Subject	FEIR/DEIR Reference	Response
SMW 1	Feedstocks	DEIR ES-1, 1.1, 3-2, 3.4.2.1 - FEIR Master Response 2.2	The propane and butane recovery equipment were sized to handle the amount of LPG in the refinery's current and recent RFG, based on a review of data in 2011 when project design was begun. Thus, the starting premise of Dr. Fox's comments is faulty. Also see Phillips 66 Letter to Board Of Supervisors dated January 6, 2014. See response to SMW-1.
SMW 2	LPG Removal Design	DEIR ES-1, 1.1, 3-2, 3.4.2.1	See response to SMW-1.
SMW 3	Santa Maria	DEIR ES-1, 1.1, 3-2, 3.4.2.1 - FEIR Master Response 2.2	
SMW 4	Rail Study Area	DEIR 4.3-19	The analysis of diesel locomotive emissions related to the project within the BAAQMD satisfies CEQA's requirements as published by BAAQMD and used by the County as it covers impacts in the 9 Bay Area Counties included in the jurisdiction of the Bay Area Air Quality Management District. Further, movements of trains from their origination and destination points off the Phillips 66 properties are performed by the Railroads on their property with their employees. The movements of such trains other than on Phillips 66 property are preempted from local and state environmental regulation by the Federal Interstate Commerce Commission Termination Act. (cite to Act) While the DEIR has included emissions within the jurisdiction of the BAAQMD the County as well as other state and local responsible agencies are preempted from imposing mitigation measures, conditions, or regulations related to such rail train movements. See response to F14.
SMW 5	B-401 Reductions	DEIR 4.3,	
SMW 6	Steam Power Plant	FEIR 3.1.6 A6-5	
SMW 7	SO2 Reduction	DEIR 4.3.5 Impact 4.3-2	See Response to F15. As discussed in the DEIR, the proposed project will remove sulfur from the RFG, which will result in decreased SO2 emissions from the combustion of this RFG in refinery heaters and boilers. The BAAQMD will impose permit conditions which will limit SO2 emissions and ensure the SO2 emission reductions in the DEIR are real. CEQA does not require that mitigation for air quality impacts be limited to banked emission reduction credits.
SMW 8	CO	DEIR 4.3-15, 4.3-19, FEIR Appendix A-1	BAAQMD CEQA guidelines do not contain significance thresholds for stationary source emissions of CO. CO emissions were provided to the County in the Air Quality Supplement and in the BAAQMD Permit Application as referenced in the DEIR. Also see Appendix A-1 to the FEIR.
SMW 9	H2 usage, SRU	DEIR 3.1.1.2, 3.2.1, 3.4.2.2, 4.3.5 Impact 4.3-2	See Response to F16, F18 and F20.
SMW 10	Propane/butane Lifecycle	FEIR 3.2.4 B4-2 & B4-2E	See Phillips 66 Letter to Board Of Supervisors dated January 6, 2014. As discussed in the previous responses (see SMW 5 - 10), the PRP emissions will not exceed significance threshold and will not conflict with the Bay Area 2010 Clean Air Plan as reported in the DEIR.
SMW 11	Clean Air Plan	DEIR 4.3.4	See Response to F15, SMW 7 and Phillips 66 Letter to Board Of Supervisors dated January 6, 2014. The BAAQMD CEQA Guideline for evaluating a project's health risk impacts requires comparison of the modeled increase in health risk from the project's TAC sources to the significance criteria. Background TAC levels monitored by the BAAQMD are presented for information on existing conditions. The average monitored background concentrations of toxics for the closest station to the Project (Crockett) and the five BAAQMD air monitoring stations within 10 miles of Rodeo are included in the attached Tables 1 and 2.
SMW 12	HRA	DEIR Section 4.3, page 4.3-22; FEIR Section 3.1.6, Response A6-3, page 3.1-21; FEIR Section 3.2.4, Response to B4-9, page 3.2-119.	The purpose of the health risk assessment under CEQA is to analyze the impact to the public from proposed projects. On-site workers, within the project refinery property boundary are protected by refinery safety practices as well as Occupational Safety and Health Administration (OSHA) regulations.
SMW 13	Odor	DEIR Section 4.3.4, page 4.3-16	The Project does not add sources of odorous emissions; thus, there would be no change from existing conditions at the refinery, which currently operates sources of odorous emissions. There would not be an increase in odor-causing compounds such as H2S, SO2, or ammonia. As stated in the DEIR, Section 4.3.4, the proposed Project represents an odor improvement over current conditions. Therefore, there would be no odor impacts associated with the Project.

## EXHIBIT B

ID	Subject	FEIR/DEIR Reference	Response
SMW 14	Hazards	DEIR 4.9-10, 4.9-12, 4.9-15, 4.9-21; FEIR Master Response 2.3, Master Response 2.5, FEIR 3.2-128.	See Response to SMW 16-18. The EIR discloses the risk of accident and associated release in DEIR 4.9. The Toxic Release Inventory and other references listed in the comment do not pertain to accidents and associated releases.
SMW 15	Historical Compliance	DEIR 4.9	The paper cited by the commenter (X. Liu et al., Exhibit I) summarizes many factors that can be involved in derailments, with train length being one. There are many root causes for which train length is not factor (e.g., broken rails, bar defects, mechanical breakdowns, human error, and obstructions to name a few). No data or statistics are cited in the paper referenced by the commenter that can be used to quantify any affect train length may have on derailments. Therefore, while train length can be a factor in some derailments, there are many other factors potentially involved. No publicly available data was found that related train length to accidents in a quantifiable manner. The publicly available data from the U.S. Department of Transportation (DOT) discussed in FEIR Master Response 2.6 expressed accident rates in terms of incidents per train-miles, which rolled up trains of various lengths involved in accidents. These data showed an extremely small risk of train derailments leading to a fire. The FEIR also showed on page 2-20 that the number of train accidents involved in the release of hazardous materials has reduced significantly over time as DOT railcar safety standards have been implemented since the late 1970s. The EIR provided a reasonable estimate of train accident frequency from the publicly available data.
SMW 16	Rail	DEIR 4.9.3 - 4.9.6, FEIR Master Response 2.3, 2.6	
SMW 17	Refrigerated C3	DEIR page 4.9-21; FEIR Master Response 2.3; FEIR Master Response 2.5; FEIR page 3.2-128.	
SMW 18	Hazards	DEIR 4.9.2.3, 4.9.4, FEIR Master Response 2.3	The refinery has comprehensive safety procedures that cover all aspects of refinery operation. The purpose of an assessment of hazard impacts under CEQA is to analyze the impact to the public from proposed projects. On-site workers, within the project refinery property boundary, are protected by refinery safety practices as well as Occupational Safety and Health Administration (OSHA) regulations.
SMW 19	Geology	DEIR 4.7.2.3, FEIR 2.5	As described in the DEIR/FEIR, the mere presence of liquefiable soils and/or seismic hazards does not preclude safe construction of critical improvements provided that the appropriate engineering design measures are incorporated into construction specifications. The DEIR states that each of the proposed project components will receive a site-specific geotechnical investigation as required by Law. The investigations and resultant design parameters would be approved by the County Department of Conservation and Development, Building Inspection Division. Construction would be in accordance with objective standards and performance criteria embodied in the regulatory codes.
SMW 20	Hazards	DEIR 4.9.2.3, 4.9.6, 4.15.2, 4.15.4, FEIR 3.1.7, 3.1.11, 3.3.3	The FEIR provided responses to the comments from the Rodeo-Hercules Fire Protection District (RHFD) and the Rodeo Sanitary District regarding potential impacts to public services and facilities. As noted in the DEIR, the proposed Project in and of itself would not necessitate the construction of a new or physically altered fire station.
SMW 21	GHG	DEIR 3.4.2.2, FEIR 3.1.6 A6-5,	See Response to SMW 10, F10, F11, F18.
SMW 22	Biology	FEIR 3.2.4 B4-2 & B4-23	County to respond.
SMW 23	Biology/OTC	DEIR 4.4, FEIR 3.2.4 B4-21	Defer to County Also See Response to CBE 15.
SMW 24	Cumulative	DEIR 5.4 -5.5	Defer to County.
SMW 25	Santa Maria	DEIR ES-1, 1.1, 3-2, 3.4.2.1 - FEIR Master Response 2.2	Also See Phillips 66 Letter to Board Of Supervisors dated January 6, 2014.

# EXHIBIT B

ID	Subject	FEIR/DEIR Reference	Response
SMW 26	Crude	DEIR ES-1, 1.1, 3-2, 3.4.2.1 - FEIR Master Response 2.2	Also See Phillips 66 Letter to Board Of Supervisors dated January 6, 2014.
SMW 27	Ferndale	DEIR ES-1, 1.1, 3-2, 3.4.2.1 - FEIR Master Response 2.2	Also See Phillips 66 Letter to Board Of Supervisors dated January 6, 2014. <b>Also See Phillips 66 Letter to Board Of Supervisors dated January 6, 2014.</b> The WesPac terminal has not yet been built or permitted, but is currently going through a CEQA review. If it is eventually approved and built, which types of crude oils will be delivered to the terminal either by ship or rail is currently unknown and entirely speculative. Further what companies may contract for delivery of such crude from WesPac is equally speculative and unknown. While a pipeline or rights of way for a pipeline to various refineries in the County exists it has been dormant for years and it is currently unknown if it can be reactivated. The pipeline and its use is not covered or analyzed by the WesPac EIR which indicates that any such use will have to be addressed by the pipeline owners in the future. (Recirculated Draft Environmental Impact Report WesPac Pittsburg Energy Infrastructure Project - State Clearinghouse No. 2011072053-July 2013)
SMW 28	WesPac	DEIR ES-1, 1.1, 3-2, 3.4.2.1 - FEIR Master Response 2.2	See Response to SMW 4 and F 14
SMW 29	Rail Study Area	DEIR 4.3-19	See Response to F15.
SMW 30	Stream Power Plant NOx	DEIR 4.3.5 Impact 4.3-2	See Response to F15.
SMW 31	Feedstock	DEIR ES-1, 1.1, 3-2, 3.4.2.1 - FEIR Master Response 2.2	Also See Phillips 66 Letter to Board Of Supervisors dated January 6, 2014.
SMW 32	Santa Maria	DEIR ES-1, 1.1, 3-2, 3.4.2.1 - FEIR Master Response 2.2	Also See Phillips 66 Letter to Board Of Supervisors dated January 6, 2014.
SMW 33	SO2 Reduction	DEIR 4.3-19, Table 4.3-7	See Response to SMW 7.
SMW 34	Cumulative	DEIR 5.4-5.5	See Response to SMW 24
F1	Feedstock	DEIR ES-1, 1.1, 3-2, 3.4.2.1 - FEIR Master Response 2.2	Also See Phillips 66 Letter to Board Of Supervisors dated January 6, 2014.
F2	LPG Removal Goal	DEIR ES-1, 1.1, 3-2, 3.4.2.1 - FEIR Master Response 2.2	Also See Phillips 66 Letter to Board Of Supervisors dated January 6, 2014.
F3	Santa Maria	DEIR ES-1, 1.1, 3-2, 3.4.2.1 - FEIR Master Response 2.2	Also See Phillips 66 Letter to Board Of Supervisors dated January 6, 2014.
F4	Feedstock/Santa Maria	DEIR ES-1, 1.1, 3-2, 3.4.2.1 - FEIR Master Response 2.2	Also See Phillips 66 Letter to Board Of Supervisors dated January 6, 2014.
F5	Santa Maria	DEIR ES-1, 1.1, 3-2, 3.4.2.1 - FEIR Master Response 2.2	Also See Phillips 66 Letter to Board Of Supervisors dated January 6, 2014.
F6	Project Description	DEIR ES-1, 1.1, 3-2, 3.4.2.1 - FEIR Master Response 2.2	Also See Phillips 66 Letter to Board Of Supervisors dated January 6, 2014.
F7	Feedstock	DEIR ES-1, 1.1, 3-2, 3.4.2.1 - FEIR Master Response 2.2	Also See Phillips 66 Letter to Board Of Supervisors dated January 6, 2014.
F8	RFG Heat Content	FEIR 3.2.4 B4-39 p. 3.2-13C	Also See Phillips 66 Letter to Board Of Supervisors dated January 6, 2014.
F9	Butane/Propane Lifecycle	FEIR 3.2.4 B4-2 & B4-2E	See Response to SMW 10
F10	GHG	FEIR 3.2.4 B4-2 & B4-2E	See Response to SMW 10
F11	B-401 Reductions	FEIR 3.1.6 A6-5, FEIR 3.2.4 B4 2 & B4-23	
F12	B-401 Reductions	DEIR 4.3.2.6, FEIR 3.2.2 B2-10	
F13	Rail Study Area	DEIR 4.3-19	See Response to SMW 4 and F14



# EXHIBIT B

ID	Subject	FEIR/DEIR Reference	Response
F14	Emissions	DEIR 4.3.2.6 Table 4.3-4, 4.3.3	The thresholds of significance that were chosen by the County are those recommended by the BAAQMD's Revised Draft Options and Justification Report (BAAQMD, 2009). These represent the levels at which a project's individual emissions would result in a considerable adverse contribution to the SF Bay Area Air Basin's (SFBAAB) existing air quality conditions. To be consistent with the significance criteria, the focus of the emissions development was to address the emissions impacting the SFBAAB. For criteria pollutants and TACs, this involved assessing emission sources that are located within the SFBAAB. Comparing criteria pollutant emissions from total track length estimates to SFBAAB significance criteria is not appropriate [Fox 13 Table 1]. For GHG, the BAAQMD's recommended interim threshold are to be applied to land uses in the SFBAAB that contribute to GHG emissions within the state, so accounting for emissions to the state boundary were considered appropriate. See also Response to SMW 4.
F15	SPP NOx	DEIR 4.3.5 Impact 4.3-2	The Steam Power Plant (SPP) NOx emissions provided to BAAQMD and the County (5/8/13 via e-mail) are based on actual emission measured : the SPP. The SPP is equipped with SCR for NOx control. Therefore, the NOx emission estimates reported to BAAQMD and the County are accurate and emissions from the SPP are less than those of a new boiler. See Responses to F 17 through F21.
F16	H2 usage, SRU	DEIR 3.1.1.2, 3.2.1, 4.3.5 Impact 4.3-2	Throughput of sulfur at the sulfur recovery units (SRUs) may increase marginally (less than 0.2%) as a result of the reduction of approximately 140 tons per year (tpy) in SO2 to atmosphere from combustion of RFG. Sulfur production will theoretically increase by approximately 135 tons per year compared to current annual throughput of about 87,500 long tons per year of sulfur or 240 long tons per day. This increase is less than one day's worth of production. The projected increase will likely be imperceptible post-project because the it is so small relative to current rates. The increase in SO2 emissions at the SRUs will be less than approximately 2 tpy because the SRUs are greater than 99% efficient at sulfur removal. The 2 tpy increase in SO2 is well below the 140 tpy decrease, therefore there is still a large net reduction in SO2 emissions to atmosphere as a result of this project.
F17	GHG - Lifecycle	FEIR 3.2.4 B4-2 & B4-2i	See Response to SMW 10
F18	H2 Usage	DEIR 3.4.2.2	The DEIR states that there is adequate hydrogen present in the gas streams being hydrotreated and that no increase in demand at the existing Refinery hydrogen plant is expected. A Hydrogen Supply Connection to the Hydrotreater is provided for start-up and shut-down operations, but will not require new hydrogen production. In response to BAAQMD requests, Phillips 66 has proposed limits on the amount of hydrogen that could be added to the hydrotreater by the Start-Up and Shut-Down Hydrogen Supply Connection. The hydraulic flow capacity of the Hydrogen Supply Connection was provided to the BAAQMD as the maximum flow value. As noted in the DEIR above, there will be no increase in hydrogen demand at the existing Hydrogen Plants. There is no inconsistency between the DEIR and the BAAQMD application.
F19	SPP NOx	DEIR 4.3.5 Impact 4.3-2	See F15.
F20	SRU	DEIR 3.1.1.2, 3.2.1, 4.3.5 Impact 4.3-2	See F16.
F21	Indirect GHG	DEIR 4.6.4, 4.8.5, p 4.8-16 - 4.8-18	Defer to County.
F22	Crude	DEIR ES -1, 1.1, 3-2, 3.4.2.1 - FEIR SMW 2.2	Also See Phillips 66 Letter to Board Of Supervisors dated January 6, 2014.
F23	CO	DEIR 4.3-15, 4.3-15	See Response to SWM 8.
F24	SO2 Reduction	DEIR 4.3-19, Table 4.3-7	See Response to SMW 7.
F25	Cumulative	DEIR 5.4-5.5	Defer to County.
CBE 1		N/A	Opinion. No response required.
CBE 2		N/A	Opinion. No response required.
CBE 3	Crude	DEIR ES-1, 1.1, 3-2, 3.4.2.1 - FEIR Master Response 2.2	Also See Phillips 66 Letter to Board Of Supervisors dated January 6, 2014.
CBE 4	Project Description	DEIR ES-1, 1.1, 3-2, 3.4.2.1 - FEIR Master Response 2.2	Also See Phillips 66 Letter to Board Of Supervisors dated January 6, 2014.

## EXHIBIT B

ID	Subject	FEIR/DEIR Reference	Response
CBE 5	Crude	DEIR ES-1, 1.1, 3-2, 3.4.2.1 - FEIR Master Response 2.2	Also See Phillips 66 Letter to Board Of Supervisors dated January 6, 2014.
CBE 6	Crude	DEIR ES-1, 1.1, 3-2, 3.4.2.1 - FEIR Master Response 2.2	Also See Phillips 66 Letter to Board Of Supervisors dated January 6, 2014.
CBE 7	Crude	DEIR ES-1, 1.1, 3-2, 3.4.2.1 - FEIR Master Response 2.2	Also See Phillips 66 Letter to Board Of Supervisors dated January 6, 2014.
CBE 8	GHG - Lifecycle	FEIR 3.2.4 B4-2 & B4-2E	See Response to SMW 10
CBE 9	Crude	DEIR ES-1, 1.1, 3-2, 3.4.2.1 - FEIR Master Response 2.2	Also See Phillips 66 Letter to Board Of Supervisors dated January 6, 2014.
CBE 10	Crude	DEIR ES-1, 1.1, 3-2, 3.4.2.1 - FEIR Master Response 2.2	Also See Phillips 66 Letter to Board Of Supervisors dated January 6, 2014.
CBE 11	OTC	DEIR 3.4.2.7 4.4.4 and 4.4.5, FEIR 3.2.4 B4-21, -25, -30, -47	As described in the DEIR and FEIR, the project does not include use of a closed-loop system for cooling. It is not part of the project. The commenter's claim that the Project's increased utilization of the existing OTC system "forecloses any replacement" of that system is incorrect and unsubstantiated. The Project use of the OTC does not in any way affect potential future replacement of the system.
CBE 12	Cumulative	DEIR 5.4-5.5	See Response to SMW 24
CBE 13	GHG - Lifecycle	FEIR 3.2.4 B4-2 & B4-2E	See Response to SMW 10
CBE 14	OTC	DEIR 3.4.2.7 4.4.4 and 4.4.5, FEIR 3.2.4 B4-21, -25, -30, -47	The commenter's claim of "deferred mitigation" is not correct. There was no significant impact found in the DEIR, therefore there is no impact to mitigate. The FEIR merely states the fact that the RWQCB has the authority to require modifications to a facility's operations if discharge limitations are exceeded. The DEIR indicates that there will be no impacts or discharge limitations exceeded as a result of this Project. See Response to CBE 11.
CBE 15	Mitigation		Contrary to the Appellants' contentions, reliance on the authority of a specialized public agency, created for the sole purpose of regulating a particular environmental media, is consistent with CEQA's mandates, especially when based on an assessment of the Project's potentially significant environmental impacts and the statutory or regulatory requirements that will be relied upon to mitigate such impacts to less-than-significant levels. See <i>Sundstrom v. County of Mendocino</i> , 202 Cal.App.3d 296, 308-09 (1988) [stating that "[a] condition requiring compliance with environmental regulations is a common and reasonable mitigation measure" and upholding conditions in a use permit requiring compliance with air and water quality standards where "the County possessed 'meaningful information' reasonably justifying an expectation of compliance...[which] would indeed avoid significant environmental effects"]; <i>Mountain Lion Foundation v. Fish &amp; Game Com.</i> , 16 Cal.4th 105, 135 (1997) (citing <i>Sundstrom</i> as standing for the proposition that a "use permit condition requiring compliance with environmental regulations is proper mitigating measure because compliance avoids potentially significant environmental effects").
CBE 16	Project Alternatives	DEIR 6.1-5	Defer to County.
CBE 17	Public Notice	FEIR 2.1	
CBE 18	Project Description	DEIR ES-1, 1.1, 3-2, 3.4.2.1 - FEIR Master Response 2.2	Also See Phillips 66 Letter to Board Of Supervisors dated January 6, 2014.
CBE 19	Project Description	DEIR ES-1, 1.1, 3-2, 3.4.2.1, 3.4.2.7 4.4.4 and 4.4.5 - FEIR SMW 2.2, 3.2.4 B4-21, -25, -30	Also See Phillips 66 Letter to Board Of Supervisors dated January 6, 2014. See Response to CBE 11 and CBE 14. Appellants contend that the FEIR should be recirculated for further public comment. Recirculation of an EIR is required only when significant new information is added to an EIR after public notice is given of the availability of the draft EIR. New information is not significant unless the EIR is changed in a way that deprives the public of a meaningful opportunity to comment upon a substantial adverse environmental effect of the project. [CEQA Guidelines, 14 Cal. Code Regs. §15088.5(a).] For all of the reasons discussed in the response to the appeals, no new significant information has been submitted that would change any of the County's findings of no significant impact with the mitigations referenced in the EIR. Any new information submitted has been only to refute Appellants' claims and speculation and only verifies the facts upon which the DEIR and FEIR are based. [FEIR, Response B4-35, pgs. 3.2-128 & 3.2-129.]
CBE 20	Omissions in FEIR	See all of above.	Summary. See all above.

COUNTY PLANNING COMMISSION  
TUESDAY, NOVEMBER 19, 2013

FILE COPY

I. INTRODUCTION

PHILLIPS 66 COMPANY (APPLICANT & OWNER) COUNTY FILE #LP12-2073:

This is a request for approval of a Land Use Permit to implement and construct the Propane Recovery Project, which proposes refinery processing equipment improvements to recover for sale additional amounts of propane and butane from refinery fuel gas (RFG) and other process streams; and to decrease sulfur dioxide (SO<sub>2</sub>) emissions from the refinery as a result of removing sulfur compounds from RFG streams. The proposed project would add and modify processing and ancillary equipment within the Phillips 66 Rodeo refinery in Contra Costa County.

The proposed project would add: 1) a hydrotreater, 2) new fractionation columns to recover propane and butane, 3) six propane storage vessels and treatment facilities, 4) two new rail spurs, and 5) the removal of two 265-foot heater stacks. To provide the steam required by the project, either a new 140 million Btu/hr<sup>1</sup> steam boiler would be added or more steam would be provided by the existing steam power plant if the new boiler were not built. There would also be minor modifications to existing process units and utility systems for the purpose of tie-ins and to address any changes in operating pressure or temperature at the tie-in points. The project also would require hydrotreating a portion of the RFG, a process that would reduce the amount of sulfur in the fuel gas, and because fuel gas is now burned to produce heat for refinery processes, it would ultimately reduce the refinery's SO<sub>2</sub> emissions within the atmosphere.

The project would be built in two phases. Phase I would include all project components except propane storage and the additional railcar loading rack and rail spurs. Phase II will include the facilities to store and ship propane along with the piping and other ancillary equipment necessary to get the propane from the Propane/Butane Recovery Unit to the storage vessels and loading racks. The Phillips 66 Rodeo refinery is located at 1380 San Pablo Avenue in unincorporated Contra Costa County, in the town of Rodeo. {Zoning: Heavy Industrial District (H-I); Assessor's Parcel Numbers: 357-010-001 & 357-300-005}

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<sup>1</sup> British Thermal Unit (BTU or Btu) is a traditional unit of energy equal to about 1,055 Joules. It is the amount of energy needed to cool or heat one pound of water by one degree Fahrenheit. The unit is most often used as a measure of power (as Btu/h) in the power, steam generation, heating, and air conditioning industries.

## II. STAFF RECOMMENDATIONS

Staff recommends that the County Planning Commission take the following actions:

- A. ACCEPT the recommendation from the Zoning Administrator regarding the adequacy and completeness of the Final Environmental Impact Report (Final EIR).
- B. ADOPT the Final EIR dated November 2013, finding it to be adequate and complete, finding that it has been prepared in compliance with the California Environmental Quality Act (CEQA) and with State and County CEQA Guidelines, and finding that the Final EIR reflects the County's independent judgment and analysis, and specify that the Department of Conservation and Development, Community Development Division (located at 30 Muir Road in Martinez, CA) is the custodian of the documents and other material which constitute the record of proceedings upon which this decision is based.
- C. CERTIFY that the Commission has considered the contents of the Final EIR prior to making a decision on the project
- D. APPROVE the Land Use Permit, County File #LP12-2073, based on the attached CEQA Findings, Land Use Permit Findings, Growth Management Standards, and subject to the attached conditions of approval (Exhibit A).
- E. ADOPT the attached Mitigation Monitoring Reporting Program (Exhibit C).
- F. DIRECT staff to file a Notice of Determination with the County Clerk.

## III. GENERAL INFORMATION

- A. General Plan: The majority of the Refinery, including the locations of all proposed Propane Recovery Project units and modifications, is designated Heavy Industry (HI). The HI designation allows activities such as oil refining and other manufacturing operations requiring large areas of land with convenient truck and rail access.

The following standards apply to the Heavy Industry designation:

- Maximum site coverage: 30%
- Maximum floor area ratio: 0.67
- Average employees per gross acre: 45 employees

The Propane Recovery Project is consistent with the overall goals, standards, and policies of the General Plan because it is consistent with the land use designation for the site; is consistent with the Growth Management Performance Standards; mitigates all potentially significant environmental impacts to less-than-significant levels; and provides

economic development in the form of temporary construction jobs and two new permanent jobs, which translates into a small increase in the tax base.

- B. Zoning: The vast majority of the refinery, including the locations of all proposed Propane Recovery Project units and modifications, is zoned Heavy Industrial District (H-I). Petroleum refining is a permitted use in the H-I District, but a land use permit is still required for this project because it involves large quantities of hazardous materials. There are no setback requirements or height limitations for this zoning district. A small area on the south side of the refinery is zoned Planned Unit District, and R-6—Single Family Residential and A-2—General Agricultural to the east, but these have no bearing on this application.
- C. CEQA Status: The Department of Conservation and Development, Community Development Division (CDD) determined that an EIR was required for this project and distributed a Notice of Preparation (NOP) on July 24, 2012 (Exhibit H). The Draft Environmental Impact Report (Draft EIR) was released for public review on June 10, 2013. The initial public comment period was scheduled for 45 days and was extended an additional 15 days, ending on August 9, 2013. A public hearing before the Zoning Administrator to receive comments on the Draft EIR was held on July 15, 2013.

The Final EIR was published and distributed in November 2013. On November 18, 2013 the County Zoning Administrator will make a recommendation regarding certification of the Final EIR. Should the Zoning Administrator recommend certification of the Final EIR, then the resolution indicating such will be distributed to the Planning Commission at its November 19, 2013 hearing.

The EIR identified potentially significant environmental impacts that would occur if the project was implemented and recommended mitigation measures that would reduce all of the potentially significant impacts to less-than-significant levels. All mitigation measures are stated in the attached Mitigation Monitoring Reporting Program (Exhibit C) and are included as conditions of approval (Exhibit A). Further discussion of the project's environmental impacts is provided in Section VI below.

- D. Regulatory Programs: None apply.
- E. Refinery Vicinity: The Phillips 66 Rodeo refinery is located in unincorporated northwestern Contra Costa County, near the community of Rodeo. The refinery encompasses a total of 1,100 acres of land, consisting of a 495-acre active area of the refinery, where all its facilities and equipment are located, and another 600 acres of undeveloped land. The southern-most 300- to 600-foot wide portion of the refinery property serves as an undeveloped buffer area between the active or developed portion of the refinery and the adjacent residential area. Figure 3-1 (see



Draft EIR Figure 3-1 which is attached as Exhibit D) shows the location and property boundaries of the refinery.

The refinery is bordered by the Shore Terminal (formerly NuStar) to the north, an undeveloped area to the east, the Bayo Vista residential area to the south, and San Pablo Bay to the north and west (see Figure 3-2 which is attached as Exhibit E). Interstate Highway 80 (I-80) and San Pablo Avenue run parallel in a north-south direction through the Refinery's property. A portion of the property extends to the southeast ending along Highway 4.

Project components would occupy approximately one acre at three primary locations in the active area of the refinery. The propane/butane recovery unit and fuel gas hydrotreating unit would be located next to the existing hydrocracker (Unit 240), located in the central area of the refinery.

#### IV. PROPOSED PROJECT

The main objectives and elements of the Propane Recovery Project are described below. A detailed description of the project is provided in Chapter 3 of the Draft EIR entitled *Project Description*.

A. Propane Recovery Project Objectives: The primary objectives of the proposed project are as follows.

1. **Recover and Sell Additional Propane and Butane**: The refinery currently generates light hydrocarbon gases from many of its separation, distillation, and conversion steps. Most of the gases are treated and used by the refinery in the refinery fuel gas (RFG) system to provide heat and energy for refinery processes. Phillips 66's main objective for its Rodeo refinery is to have the capability to recover and produce propane and recover more butane for sale, thus producing more products from the crude oil it currently refines.
2. **Reduce Refinery Fuel Gas Sulfur (SO<sub>2</sub>) Emissions**: A decrease in SO<sub>2</sub> emissions from refinery combustion sources would result from the removal of sulfur compounds from RFG as part of the process to recover propane and additional butane for sale. Phillips 66 plans to remove sulfur and other impurities from its light hydrocarbon gases, which includes the light hydrocarbon gases that are generated by the refinery's Crude/Delayed Coker Unit. The gases from this unit contain sulfur compounds, which would need to be removed to produce clean liquid propane and butane products. The proposed project includes a hydrotreating step to remove sulfur compounds from the coker fuel gas. Removal of sulfur from the light hydrocarbon gases produced at the coker would not only clean the propane and butane products, but would also reduce the sulfur in the remaining

light hydrocarbon gases that then become part of the refinery's fuel gas system.

3. **Reduce Likelihood of Flaring Events:** Recovery of propane and additional butane from the refinery's fuel gas system would reduce the overall volume of fuel gas produced. One benefit of reducing the fuel gas volume occurs when large fuel gas consuming equipment or units are periodically taken out of service. On these occasions, the refinery runs the risk of having more fuel gas present than it can consume and must flare the excess fuel gas. Thus, another key objective of this proposed project is to reduce the likelihood of flaring during periods of RFG consumption imbalance by reducing the overall amount of fuel gas consumed at the refinery.

B. Propane Recovery Project Elements: Phillips 66 proposes to implement the following additions and modifications aimed at attaining the three objectives stated above.

New Refinery Components

1. **Refinery Fuel Gas (RFG) Propane/Butane Recovery Facilities:**  
The project would involve the construction of three (3) new fractionation towers and two (2) new absorber towers to recover propane and butane and to remove hydrogen sulfide ( $H_2S$ ). Supporting the operation of the fractionators /absorbers are a total of fifteen (15) process heat exchangers, eleven (11) process vessels, and fifteen (15) process pumps. The propane/butane recovery unit would primarily be added at the existing Process Unit 240. The propane and butane recovery process would require an increase in energy consumption. The heat required by the process would be provided by steam from a new 140 million Btu/hr steam boiler or from the existing steam power plant. The project would be designed to recover approximately 4,200 barrels per day of propane and 3,800 barrels per day of additional butane. Natural gas consumption would increase to replace the propane and butane recovered from RFG. The additional natural gas would be purchased from PG&E. To meet propane product specifications, treatment facilities that use sodium hydroxide and potassium hydroxide pellets would be installed. The treatment facilities will remove trace sulfur compounds and water prior to rail loading.
2. **Refinery Fuel Gas Hydrotreating Unit:** Certain RFG streams that contain sulfur compounds would be hydrotreated prior to processing at the propane/butane recovery unit as part of the proposed project. Hydrotreating would remove the sulfur compounds from the light hydrocarbon gases, which would not only clean and improve the quality of the propane and butane products,

but would also reduce the sulfur in the remaining light hydrocarbon gases that become part of the RFG system.

3. **Propane Railcar Loading Rack:** The proposed project would add a new, two-sided railcar loading rack in order to increase the overall amount of propane and butane that could be loaded. The new loading rack would be added next to an existing butane railcar loading rack. This new loading facility would be designed to load an additional 8 rail cars per day. The total propane and butane loading capacity under the project would be 24 cars per day (16 existing + 8 new with the project). The existing butane loading capacity would be sufficient to accommodate the increased volume of recovered butane. Offloading of purchased butane will not be affected by the proposed project and will remain an infrequent occurrence. As part of this loading modification, two new rail spurs would be added with the capacity to hold 4 railcars on each spur. The new loading rack would be positioned between the two proposed rail spurs.
4. **Propane Storage Facilities:** Up to six (6) pressure tanks designed for storage of propane would be constructed. The combined total storage capacity of the storage tanks would be 15,000 barrels of propane. The propane storage tanks would be installed in a tank farm located west of San Pablo Avenue. This location allows for shorter piping runs and is farthest from sensitive receptors, ignition sources, and public roadways compared to other sites. In addition, this location has access to key utilities, such as fire water.

Project Related Modifications To Existing Refinery Process Units

5. The project would necessitate minor modifications to existing process units and utility systems for the purpose of tie-ins and to address any changes in operating pressure or temperature at the tie-in points. Additional piping would consist of new lines or tie-ins to existing lines outside of the process units. These include new rundown lines needed to send products to storage and interconnection lines between process units.
- C. Increased Demand on Utilities: The Propane Recovery Project will result in the following demands on utility usage.
1. **Water:** The East Bay Municipal Utility District (EBMUD) is the water supplier to the refinery. The Refinery currently receives approximately 3,000 gallons per minute (4.32 million gallons/day) of fresh water from EBMUD. The Propane Recovery Project would require an increase in fresh water by approximately 20 gallons per minute (0.03 million gallons/day). The additional fresh water

required for the proposed project would be available from EBMUD's existing entitlements.

Approximately 31,500 gallons per minute of additional cooling water (salt water) is withdrawn and returned to San Pablo Bay via a once-through, non-contact cooling system. The intake structure for the once-through, non-contact salt water is located at the base of the Marine Terminal Causeway and consists of four intake bays with five pumps capable of withdrawing a maximum flow of all pumps combined of 49,000 gallons per minute. The project is estimated to increase once-through salt water use by approximately 8,500 gallons per minute for a total of 40,000 gallons per minute. Therefore, the existing salt water cooling system has sufficient capacity to supply the proposed project. The additional water supply required during project construction would be only a small, temporary increment as compared to existing and proposed water usage.

2. **Sewer/Wastewater:** The proposed project would be constructed and its operations conducted entirely within those areas of the refinery that are already served by the existing water and on-site wastewater collection and treatment systems. The refinery's wastewater treatment system has a capacity of approximately 10 million gallons per day. Current wastewater flows to the on-site treatment system are approximately 2.8 million gallons per day. Overall flows to the refinery's on-site wastewater treatment system would increase by approximately 10 to 20 gallons per minute or up to 0.03 million gallons per day. The treatment system has adequate capacity to handle increased wastewater flows; thus, no treatment-system expansion or modification would be required.
3. **Electricity and Natural Gas:** The refinery currently produces approximately 48 Mega Watts (MW) of electrical power, which, as of 2012, was consumed internally for its own use with no power exported. The refinery currently uses approximately 9,000 million standard cubic feet (SCF) of natural gas and 116,000 MW-hours of electricity supplied by PG&E annually. As a result of implementing the proposed project, natural gas consumption would increase at the refinery. An increase of approximately 30 million SCF per day of natural gas would replace propane and butane removed from the fuel gas. The additional natural gas would be purchased from PG&E. An increase of 10,900 MW-hours of electricity would be required annually from PG&E.
4. **Solid Waste to Landfills:** Solid waste from proposed project construction is expected to produce 2.8 pounds per person per day.

Assuming a peak construction workforce of 400 workers and a three-month peak construction period, the proposed project would generate approximately 37 tons of waste during the peak of construction activity. Additional solid waste would be recycled or transported to an approved solid waste landfill. Debris that could not be recycled would be sent to a sanitary landfill in compliance with the *Countywide Integrated Waste Management Plan*. The refinery's ongoing recycling programs also would reduce the quantities of proposed project solid wastes that require landfill disposal. Solid waste generated by the proposed project would be transported to the Keller Canyon Landfill, which has an allowable throughput of 3,500 tons per day, and an estimated closure date of 2050. The estimated 37 tons of solid waste produced during peak construction would represent the largest component of the solid waste produced by the project. This one-time contribution to the landfill would be well within the capacity of the landfill and would result in a less-than-significant impact.

During normal post-construction project operations, solid wastes would be generated from routine maintenance, office activities, etc. The additional waste quantities generated during project operations would be an insubstantial increase in comparison to the existing solid waste generation from normal operations at the refinery. Currently, normal operations produce approximately one-quarter ton per month of waste.

D. Propane Recovery Project Construction: Construction of the Propane Recovery Project is discussed in several sections of the Draft EIR. Chapter 3 provides an overview while other sections such as, but not limited to, 4.3 *Air Quality*, 4.13 *Noise* and 4.17 *Transportation and Traffic* discuss particular aspects of the construction process. Startup would occur after the completion of construction, which is estimated to take 12 to 15 months. The project would be constructed on existing refinery property that is zoned for heavy industrial use, and the proposed project would be a permitted use within the heavy industrial zoning district; however, a Land Use Permit is required under the Hazardous Waste or Hazardous Materials Ordinance §84-63.1002 of the Contra Costa County Code. Construction is proposed to begin after all required permits are received. Construction activity is summarized as follows.

1. **Construction Duration**: The project would be built in two phases. The first phase (Phase I) would provide enhanced recovery and increased rail shipments of butane. Phase I would include all project components except propane storage and the additional rail loading rack and spurs. During the second phase, (Phase II), the facilities to store and ship propane would be added along with the piping and

other ancillary equipment necessary to get the propane from the Propane/Butane Recovery Unit to the storage vessels and loading racks.

Construction for Phase I is proposed to begin during the 2<sup>nd</sup> quarter 2014 after all required permits are received. Startup for Phase I would occur after the completion of construction, which is estimated to take 12 to 15 months. Construction for Phase II will likely begin within five years after the completion of Phase I and is expected to take 8 to 12 months to complete. Both phases of the proposed project will be constructed utilizing a single work shift, with construction occurring weekdays during an 8- to 10-hour shift, starting at 7:00 a.m., and ending as early as 3:30 p.m. and as late as 5:30 p.m. The plan is to complete construction of Phase I during a planned turnaround at the existing unicracker complex. The planned turnaround will occur regardless of the ultimate timing of this proposed project.

2. **Construction Areas:** The Propane Recovery Project would be constructed entirely within the 495-acre active processing section of the refinery property. The major project components would be constructed at three sites (see Draft EIR Figure 3-3, Locations of Site Modifications, which is attached in Exhibit F). The primary staging and laydown area would be located in an open area just south of the new propane recovery unit, and the backup laydown area would be on the Selby Slag site just north of the refinery along San Pablo Bay. Project construction workers would park in a number of adjacent and on-site refinery parcels or property. No development is proposed within the 600-acre undeveloped portion of the refinery.
3. **Site Preparation:** The new Fuel Gas Hydrotreating and Propane/Butane Recovery Unit would be constructed during Phase I on existing plot space that currently houses an out of service unit U-240-4 that would be dismantled. The propane storage facilities are proposed to be constructed during Phase II on an undeveloped space adjacent to Tank 78 (which would be demolished). The new propane railcar loading rack would be located east of the existing butane railcar loading racks and would require demolition of approximately 20 existing, small, out of service tanks. There also would be minor demolition activities (e.g., pipe supports, concrete slabs) associated with proposed new interconnecting piping. Excess soil generated from site preparation activities would be recycled or remain on-site. Other materials, such as asphalt and concrete, would be transported off-site for recycling or disposal at appropriately permitted disposal sites. Hydrocarbon-containing soils

would be handled consistent with the refinery's existing soils management plan.

4. **Construction Materials and Services:** During construction, deliveries would be required of materials such as concrete, structural steel, pipe and fittings, vessels and equipment, electrical equipment, and insulation. Deliveries would also be necessary for additional construction services equipment (e.g., portable toilets, temporary office trailers for construction contractors). Materials would be delivered by truck. It is estimated that up to 20 truck deliveries per day would occur during the construction period, which is anticipated to last approximately 12 to 15 months for Phase I and 8 to 12 months for Phase II.
5. **Construction Workforce:** The project's construction workforce for Phase I is expected to reach approximately 400 workers at its peak during 2014. This workforce would include cement finishers, ironworkers, pipe fitters, welders, carpenters, boilermakers, electricians, riggers, painters, operators, and laborers. The entire construction work force would be drawn from the region within an approximately 1-hour commute distance from the refinery. The project's construction workforce for Phase II is expected to reach approximately 200 workers at its peak.

Phillips 66 anticipates a peak of 386 additional two-way trips per day during construction: 366 worker commute trips and 20 truck trips, bringing project equipment and supplies to the refinery. No physical entrance, roadway, or intersection improvements would be needed to accommodate the construction traffic volume. Construction traffic would be encouraged to use the Cummings Skyway interchange from I-80 and the north gate(s) of the Refinery. The Cummings Skyway interchange was constructed several years ago to minimize the refinery traffic through the community of Rodeo. Continued use of this access route by project construction-phase traffic would minimize the potential for project impacts on the residents of Rodeo. Project construction workers would park in a number of adjacent and on-site refinery parcels or property.

6. **Construction Hours:** Construction activities would be limited to the hours of 7:00 a.m. to 5:30 p.m. and would be prohibited on state and federal holidays.

## V. PUBLIC AGENCY CONSULTATION & COMMENTS

The Department of Conservation and Development, Community Development Division conferred with a number of state and local agencies and other County departments prior to and during preparation of the EIR (see Exhibit G). Correspondence was received in response to the Notice of

Preparation (NOP), and the Draft Environmental Impact Report (Draft EIR) [see Section VII—Public Comments].

## VI. ENVIRONMENTAL IMPACTS

The Draft EIR identified environmental impacts which would occur if the Propane Recovery Project were implemented. Most impacts were determined to be less than significant. However, potentially significant impacts were identified in the following Draft EIR topic areas: Air Quality, Cultural Resources, Noise, and Traffic and Transportation.

- A. Air Quality: Potentially significant temporary and permanent air quality impacts would result from increased emissions of particulate matter less than 10 microns in diameter (PM<sub>10</sub>), reactive organic gases (ROG), nitrogen oxide (NO<sub>x</sub>) and sulfur dioxide (SO<sub>2</sub>) during the construction and/or operation phases of the Propane Recovery Project. These impacts would be mitigated to less-than-significant levels by permanently decommissioning the B-401 process heater in Unit 240 to offset significant emissions related to the proposed project, and prior to operations of the project, Phillips 66 shall provide documentation to the Department of Conservation and Development that the Bay Area Air Quality Management District (BAAQMD) has relinquished its permit to operate for the process heater. The project will also decrease SO<sub>2</sub> emissions by removing sulfur for RFG streams, and, during the construction phases, emissions will be reduced by implementation of basic BAAQMD construction control measures outlined in the project's Mitigation and Monitoring Program. Air quality is discussed in detail in Section 4.3 of the Draft EIR and in
- B. Cultural Resources: Potentially significant cultural resource impacts would result from earthwork performed at the various construction sites. These impacts would be mitigated to less-than-significant levels through implementation of standard protocols related to the discovery of cultural resources at construction sites. Specifically, construction must cease and appropriate professionals such as archaeologists, paleontologists, the County coroner, etc must be contacted in the event that artifacts or human remains are discovered. Cultural resources are discussed in detail in Section 4.5 of the Draft EIR.
- C. Noise: Potentially significant temporary noise impacts would result from project construction activities. These impacts would be mitigated to less-than-significant levels by proper maintenance of construction equipment, such as ensuring that equipment is well-tuned and that noise control devices are in good working order; notifying residents of the construction schedule; and adherence to approved project work hours. Noise is discussed in detail in Section 4.13 of the Draft EIR.
- D. Transportation and Traffic: Potentially significant transportation and traffic impacts would result from a large increase in truck and automobile traffic during the construction phase of the Propane Recovery



Project. The use of large trucks to transport equipment and material to and from the project work sites could affect road conditions on the designated construction route by increasing the rate of road wear. These impacts would be mitigated to less-than-significant levels by the requirement of the submittal of a pavement monitoring plan that describes measures that will be implemented to revitalize pavement along the proposed haul routes deteriorated by project-related construction traffic shall also be included and be submitted for review by the Public Works Department prior to the commencement of any construction on-site. Also, access and hauling routes shall be specified to minimize traffic impact to the area wide roadways. Transportation and traffic are discussed in Section 4.17 of the Draft EIR.

All mitigation measures are included in the Mitigation Monitoring Reporting Program (Exhibit C) and the conditions of approval (Exhibit A).

## VII. PUBLIC COMMENTS

Forty-four (41) comments, in the form of letters and e-mail correspondence, were received from private citizens, public agencies, concerned-citizens groups, and other entities during the 60-day public comment period for the Draft EIR, and seven (7) late comments were accepted for the record. According to State and County CEQA Guidelines Section 15088, staff was under no obligation to respond formally to these late comments; nevertheless, staff has chosen to provide responses for this project. Twelve (12) oral comments related to the Draft EIR were received during the July 15, 2013 public hearing before the Zoning Administrator, which was held for the purpose of receiving public comments on the adequacy of the Draft EIR. The Final EIR responds to the comments submitted during the public review and comment period for the Draft EIR.

## VIII. CONCLUSION

Staff recommends that the County Planning Commission APPROVE the Propane Recovery Project by taking the six actions listed above in Section II. The project as proposed is consistent with the General Plan and the Heavy Industrial zoning designation for the site; all environmental impacts would be mitigated to less-than-significant levels; the health, safety, and general welfare of the public would be preserved; and there would be economic benefits as a result of the project.

355020001  
SHORE TERMINALS LLC  
P.O. BOX 780339  
SAN ANTONIO, TX 78278-0339

35504002  
C S LAND INC.  
P.O. BOX 1539  
PASO ROBLES, CA 93447-1539

355040003  
C S LAND INC.  
P.O. BOX 1539  
PASO ROBLES, CA 93447-1539

357010002  
TOSCO CORPORATION  
P.O. BOX 1539  
PASO ROBLES, CA 93447-1539

355040012  
C S LAND INC.  
P.O. BOX 1539  
PASO ROBLES, CA 93447-1539

357300006  
TOSCO CORPORATION  
P.O. BOX 1539  
PASO ROBLES, CA 93447-1539

357010003  
CONOCOPHILLIPS COMPANY  
1232 PARK STREET #300  
PASO ROBLES, CA 93446-7236

357300005  
TOSCO CORPORATION  
P.O. BOX 1539  
PASO ROBLES, CA 93447-1539

357300006  
TOSCO CORPORATION  
P.O. BOX 1539  
PASO ROBLES, CA 93447-1539

357300001  
TOSCO CORPORATION  
P.O. BOX 1539  
PASO ROBLES, CA 93447-1539

357300009  
PACIFIC GAS & ELECTRIC CO  
P.O. BOX 770000  
SAN FRANCISCO, C A94177-0001

357310001  
TOSCO CORPORATION  
P.O. BOX 1539  
PASO ROBLES, CA 93447-1539

357300008  
CONOCOPHILLIPS COMPANY  
1232 PARK STREET #300  
PASO ROBLES, CA 93446-7236

357320002  
STATE OF CALIFORNIA  
100 HOWE AVE. #1005  
SACRAMENTO, CA 95825-8202

357330007  
EAST BAY MUNICIPAL UTILITY DIS  
P.O. BOX 24055  
OAKLAND, CA 94623-1055

ROGER LIN, STAFF ATTORNEY  
COMMUNITIES FOR A BETTER  
ENVIRONMENT  
1904 FRANKLIN STREET, SUITE 600  
OAKLAND, CA 94612

JAMES NEU  
3334 RICKS AVENUE  
MARTINEZ, CA 94553

DAVID BLACK  
SHADOW COUNSEL LLC  
632 VALLEJO STREET  
CROCKETT, CA 94525

ROBERT WALDRON  
111 GARRETSON AVENUE  
RODEO, CA 94572

PAMELA PECK  
37 FIRST STREET  
RODEO, CA 94572

RODEO SANITARY DISTRICT  
ATTN: STEVEN BEALL  
800 SAN PABLO AVENUE  
RODEO, CA 94572

CITY OF MARTINEZ  
ATTN: PHIL VINCE  
525 HENRIETTA STREET  
MARTINEZ, CA 94553

CARMEN GRAY  
212 SHARON AVENUE  
RODEO, CA 94572

STAN BERKOWITZ  
158 GARRETSON AVENUE  
RODEO, CA 94572

ELLISON FOLK  
SHUTE, MIHALY & WEINBERGER  
396 HAYES STREET  
SAN FRANCISCO, CA 94102

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REGION III  
7329 SILVERADO TRAIL  
NAPA, CA 94558

EAST BAY MUNICIPAL UTILITY DISTRICT  
WATER SERVICE PLANNING  
ATTN: SR. CIVIL ENGINEER  
357 11<sup>TH</sup> STREET, MS 701  
OAKLAND, CA 94607-4240

RODEO MAC  
MARINA RAMOS, CHAIR  
P.O. BOX 438  
RODEO, CA 94572

NATIONAL MARINE FISHERIES SERVICE  
ATTN: PRD DIVISION  
777 SONOMA AVENUE, ROOM 325  
SANTA ROSA, CA 95404

DEPT. OF TOXIC SUBSTANCES CONTROL  
8800 CAL CENTER DRIVE  
SACRAMENTO, CA 95826

SUPERVISOR FEDERAL GLOVER  
DISTRICT V – HERCULES  
151 LINUS PAULING DRIVE  
HERCULES, CA 94547

EAST BAY MUNICIPAL UTILITY DISTRICT  
ATTN: KIN LEE  
375 – 11<sup>TH</sup> STREET  
OAKLAND, CA 94607

STATE WATER RESOURCES CONTROL  
BOARD  
P.O. BOX 100  
SACRAMENTO, CA 95812-0100

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CALIFORNIA/NEVADA OPERATIONS  
DIVISION OF ECOLOGICAL SERVICES  
2800 COTTAGE WAY #W-2606  
SACRAMENTO, CA 95825-1888

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MICHAEL ROTH, SUPERINTENDENT  
400 PARKER AVENUE  
RODEO, CA 94572

DARWIN MYERS  
COUNTY GEOLOGIST  
(INTEROFFICE MAIL)

BAY AREA AIR QUALITY  
MANAGEMENT DISTRICT  
ATTN: IAN PETERSON  
939 ELLIS STREET  
SAN FRANCISCO, CA 94109

CITY OF BENICIA  
ATTN: CD ADMIN OFFICE  
250 EAST “L” STREET  
BENICIA, CA 94510

REGIONAL WATER QUALITY CONTROL  
BOARD – SAN FRANCISCO BAY REGION  
1515 CLAY STREET, SUITE 1400  
OAKLAND, CA 94612

SOLANO COUNTY  
DEPT OF RESOURCE MANAGEMENT  
PLANNING SERVICES DIVISION  
675 TEXAS STREET, SUITE 5500  
FAIRFIELD, CA 94533-6341

STATE WATER RESOURCES CONTROL  
BOARD – DEPT OF WATER QUALITY  
P.O. BOX 944213  
SACRAMENTO, CA 94244-2130

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HAZARDOUS MATERIAL  
(INTEROFFICE MAIL)

NWIC  
HISTORICAL RESOURCES SYSTEM  
ATTN: LEIGH JORDAN  
SONOMA STATE UNIVERSITY  
150 PROFESSIONAL CENTER DR., STE. E  
ROHNERT PARK, CA 94928-2148

RODEO-HERCULES FIRE  
PROTECTION DISTRICT  
1680 REFUGIO VALLEY ROAD  
HERCULES, CA 94547

EAST BAY REGIONAL PARK DISTRICT  
ATTN: BRIAN HOLT  
2950 PERALTA OAKS COURT  
OAKLAND, CA 94605-0381

CALTRANS  
TRANSPORTATION PLANNING  
P.O. BOX 23660  
OAKLAND, CA 94623-0660

CALIFORNIA AIR RESOURCES BOARD  
P.O. BOX 2815  
SACRAMENTO, CA 94812

BAY TRAIL PROJECT  
101 8<sup>TH</sup> STREET  
OAKLAND, CA 94607

SAN FRANCISCO BAY CONSERVATION  
& DEVELOPMENT COMMISSION  
50 CALIFORNIA STREET, 26<sup>TH</sup> FLOOR  
SAN FRANCISCO, CA 95825-8202

STATE LANDS COMMISSION  
EXECUTIVE OFFICE  
100 HOWE AVENUE, SUITE 100-SOUTH  
SACRAMENTO, CA 95825-8202

ADAMS BROADWELL JOSEPH &  
CARDOZO  
ATTN: JANET LAURAIN  
601 GATEWAY BLVD., STE. 1000  
SO SAN FRANCISCO, CA 94080-7037

US ARMY CORPS OF ENGINEERS  
SAN FRANCISCO DISTRICT  
1455 MARKET STREET #16  
SAN FRANCISCO, CA 94103

WEST CONTRA COSTA HEALTHCARE  
DISTRICT  
ATTN: NANCY CASAZZA  
2000 VALE ROAD  
SAN PABLO, CA 94806

MARIN COUNTY PLANNING DEPT  
3501 CIVIC CENTER DRIVE #308  
SAN RAFAEL, CA 94903-4157

ESA  
ATTN: CHARLES BENNETT  
225 BUSH STREET  
SAN FRANCISCO, CA 94104

BILL CONCANNON  
1644 LILLIAN STREET  
CROCKETT, CA 94525

DANIELLE FUGERE  
1304 LILLIAN STREET  
CROCKETT, CA 94525

TEAGAN CLIVE  
P.O. BOX 13  
RODEO, CA 94572

CITY OF SAN PABLO  
13831 SAN PABLO AVENUE  
SAN PABLO, CA 94806

CITY OF HERCULES  
111 CIVIC DRIVE  
HERCULES, CA 94547

CROCKETT COMMUNITY FOUNDATION  
ATTN: DANIELLE FUGERE  
P.O. BOX 155  
CROCKETT, CA 94525

BRENT P. EASTEP  
ENVIRONMENTAL ENGINEER  
CONOCOPHILLIPS (PHILLIPS 66) CO.  
1380 SAN PABLO AVENUE  
RODEO, CA 94572-1299

CROCKETT IMPROVEMENT ASSN  
ATTN: MARY WAIS  
P.O. BOX 132  
CROCKETT, CA 94525

ED TANNENBAUM  
P.O. BOX 398  
CROCKETT, CA 94525

HOWARD ADAMS  
720 KENDALL AVENUE  
CROCKETT, CA 94525

JANET CALLAGHAN  
914 SANDY COVE DRIVE  
RODEO, CA 94572

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PLEASANT HILL  
(INTEROFFICE MAIL)

RODEO LIBRARY  
220 PACIFIC AVENUE  
RODEO, CA 94572

BAAQMD  
ATTN: ENVIRONMENTAL REVIEW  
939 ELLIS STREET  
SAN FRANCISCO, CA 94109

CARL EDWARDS  
406 LAKE AVENUE  
RODEO, CA 94572

SUPERVISOR FEDERAL GLOVER  
MARTINEZ OFFICE  
(INTEROFFICE MAIL)

CROCKETT IMPROVEMENT ASSN  
P.O. BOX 132  
CROCKETT, CA 94525

NANCY RIESER  
444 ALHAMBRA STREET  
CROCKETT, CA 94525

JAY GUNKELMAN  
2210 PRUNE STREET  
PINOLE, CA 94564

DONNA HOFFMAN  
516 NAPA AVENUE  
RODEO, CA 94572

CHARLES DAVIDSON  
2108 DRAKE LANE  
HERCULES, CA 94547

355020001 OCCUPANT 51 OLD COUNTY CROCKETT, CA 94525-1024	35504002 OCCUPANT 0 NO ADDRESS CROCKETT, CA 94525	355040003 OCCUPANT 0 SAN PABLO CROCKETT, CA 94525
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357010002 OCCUPANT 1290 SAN PABLO RODEO, CA 94572-1356	357010003 OCCUPANT 0 NO ADDRESS RODEO, CA 94572	357020019 OCCUPANT 702 SAN PABLO RODEO, CA 94572-1245
357300001 OCCUPANT 0 NO ADDRESS RODEO, CA 94572	357300005 OCCUANT 0 NO ADDRESS RODEO, CA 94572	357300006 OCCUPANT 0 NO ADDRESS RODEO, CA 94572
357300008 OCCUPANT 0 NO ADDRESS RODEO, CA 94572	357300009 OCCUPANT 0 NO ADDRESS RODEO, CA 94572	357310001 OCCUPANT 0 NO ADDRESS RODEO, CA 94572
357320002 OCCUPANT 0 NO ADDRESS RODEO, CA 94572	357330007 OCCUPANT 0 NO ADDRESS RODEO, CA 94572	
JANET PYGEORGE 512 BARNES WAY RODEO, CA 94572	MIKE MILLER 136 REID LANE RICHMOND, CA 94801	STEVE KOKKONER 400 SONOMA AVENUE RODEO, CA 94572
MICHAEL PASSOFF 5011 ESMOND AVENUE RICHMOND, CA 94805	DEBI LOWE 18 ATHERTON AVENUE CROCKETT, CA 94525	KATHY KERRIDGE 771 WEST "I" STREET BENICIA, CA 94510
CHARLES DAVIDSON 2108 DRAKE LANE HERCULES, CA 94547	MARILYN BARDET 333 EAST K STREET BENICIA, CA 94510	DANIELLE FUGERE 1304 LILLIAN STREET CROCKETT, CA 94525
JAN COX GOLOVICH 179 HARBOR VISTA COURT BENICIA, CA 94510	EDUARDO MARTINEZ 2030 SANTA CLARA STREET RICHMOND, CA 94804	KYLENE MILLER 149 ELDERBERRY COURT HERCULES, CA 94547

SALLY WEED  
1515 GEARY ROAD #116  
WALNUT CREEK, CA 94597

J. & CATHLEEN DALEY  
3609 BLACK FEATHER  
EL SOBRANTE, CA 94803

JESS DERVIN-ACKERMAN  
SIERRA CLUB  
2530 SAN PABLO AVENUE  
BERKELEY, CA 94702

ERIK FERRY  
2334 TULARE AVENUE  
EL CERRITO, CA 94530

MICHAEL MAGHAKIAN  
175 RIDGEVIEW TER  
HERCULES, CA 94547

NICK DESPOTA  
633 KERN STREET  
RICHMOND, CA 94805

GEORGE SMITH  
2351 DAPPLEGRAY LANE  
WALNUT CREEK, CA 94596

KRISTIE & NICO CENTURION  
962 HEATHERGREEN  
CONCORD, CA 94521

FRED CLERICI  
1514 FLORA STREET  
CROCKETT, CA 94525

ROBERT J. BUSTOS  
1859 CHAPARRAL DRIVE  
PITTSBURG, CA 94565

ARDIS JACKSON  
320 NAPA AVENUE  
RODEO, CA 94572

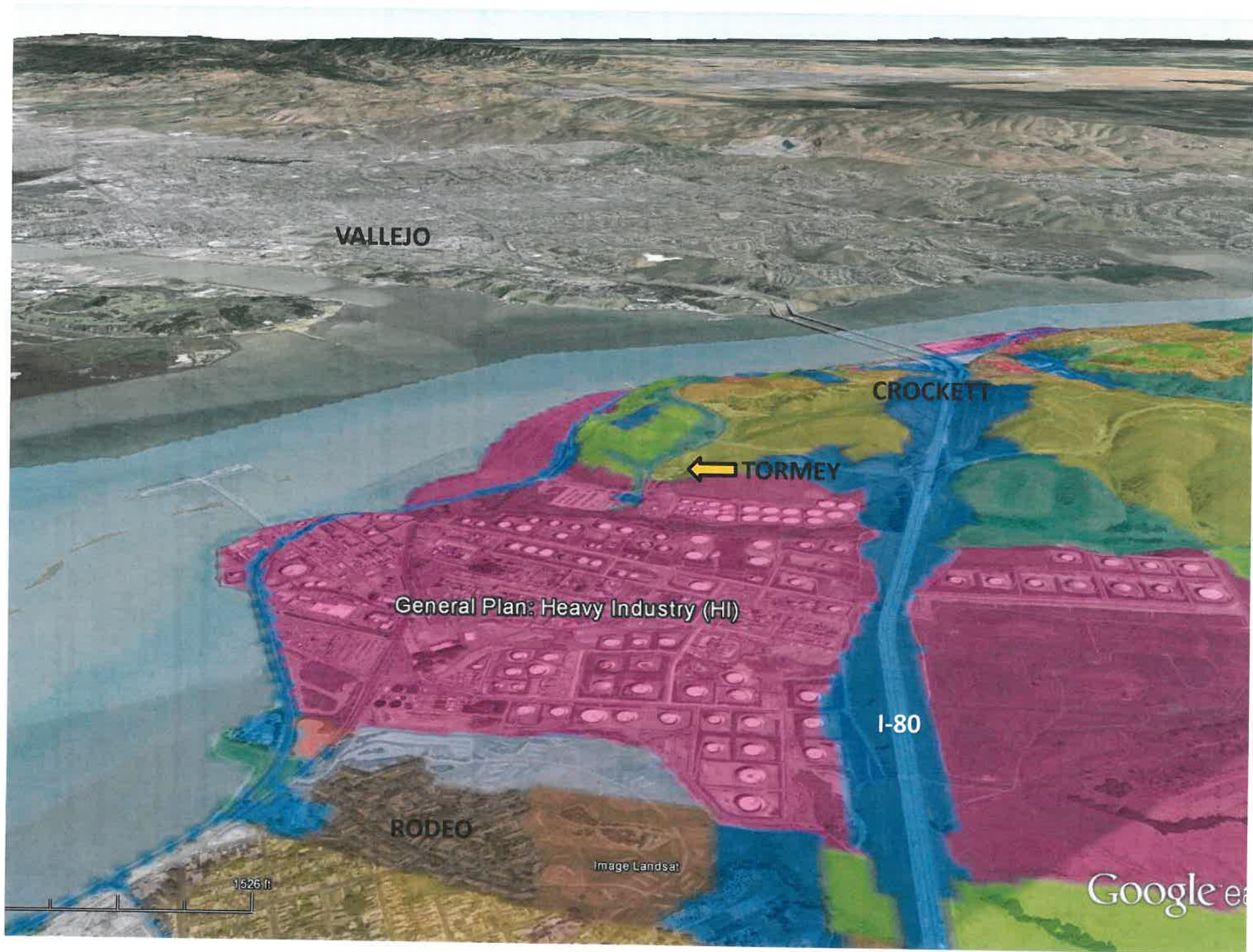
ANANDA PATTERSON  
320 NAPA STREET  
RODEO, CA 94572

SYLVIA GRAY-WHITE  
720 COURTLAND AVENUE  
RICHMOND, CA 94805

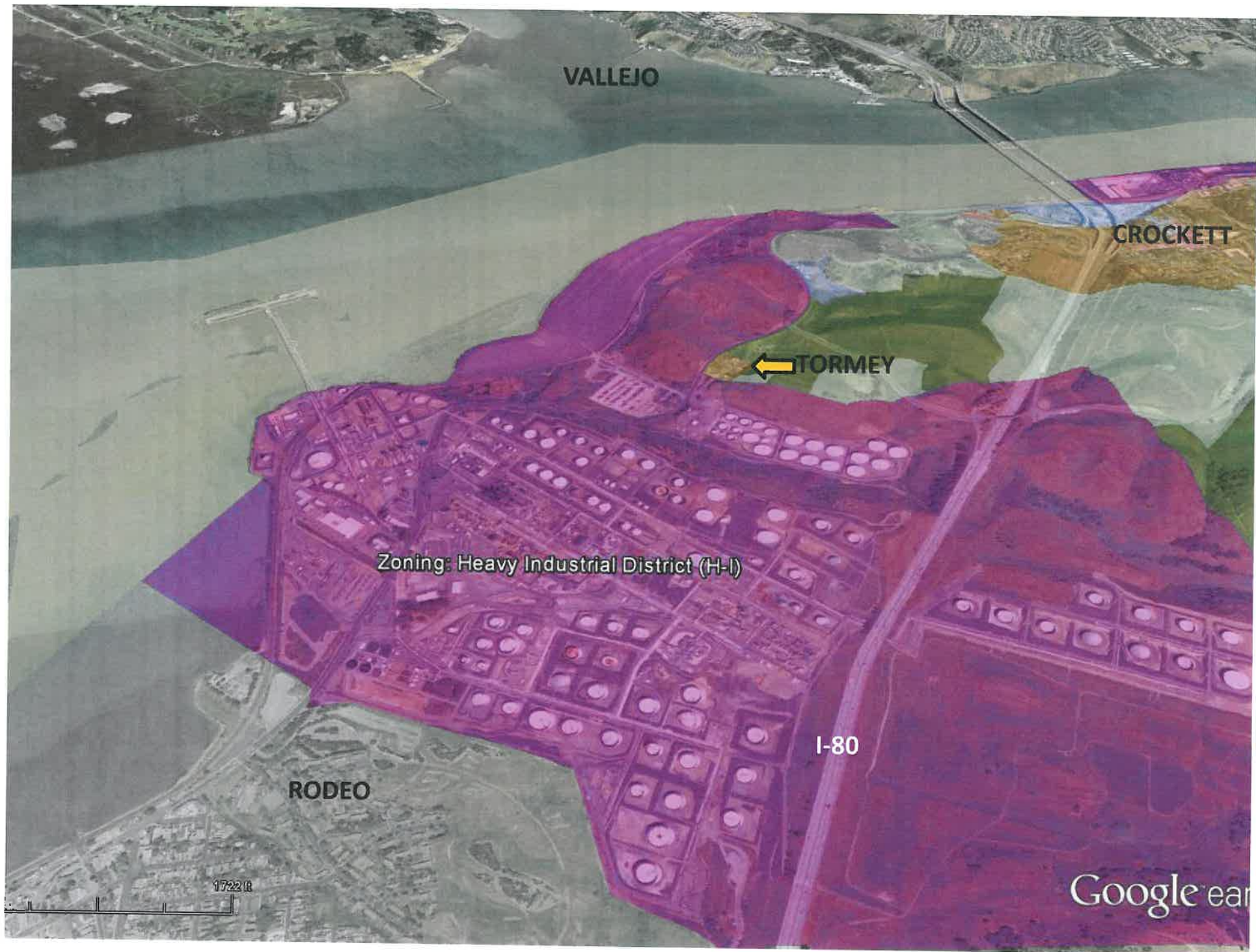
GORDON MILLER  
1340 LAS JUNTAS WAY, APT. B  
WALNUT CREEK, CA 94597

ANNA RIKKELMAN  
4706 RUSSO COURT  
CONCORD, CA 94521

FRANK BROSNAN  
271 DUPELU DRIVE  
CROCKETT, CA 94525







VALLEJO

CROCKETT

← TORMEY

Zoning: Heavy Industrial District (H-I)

I-80

RODEO

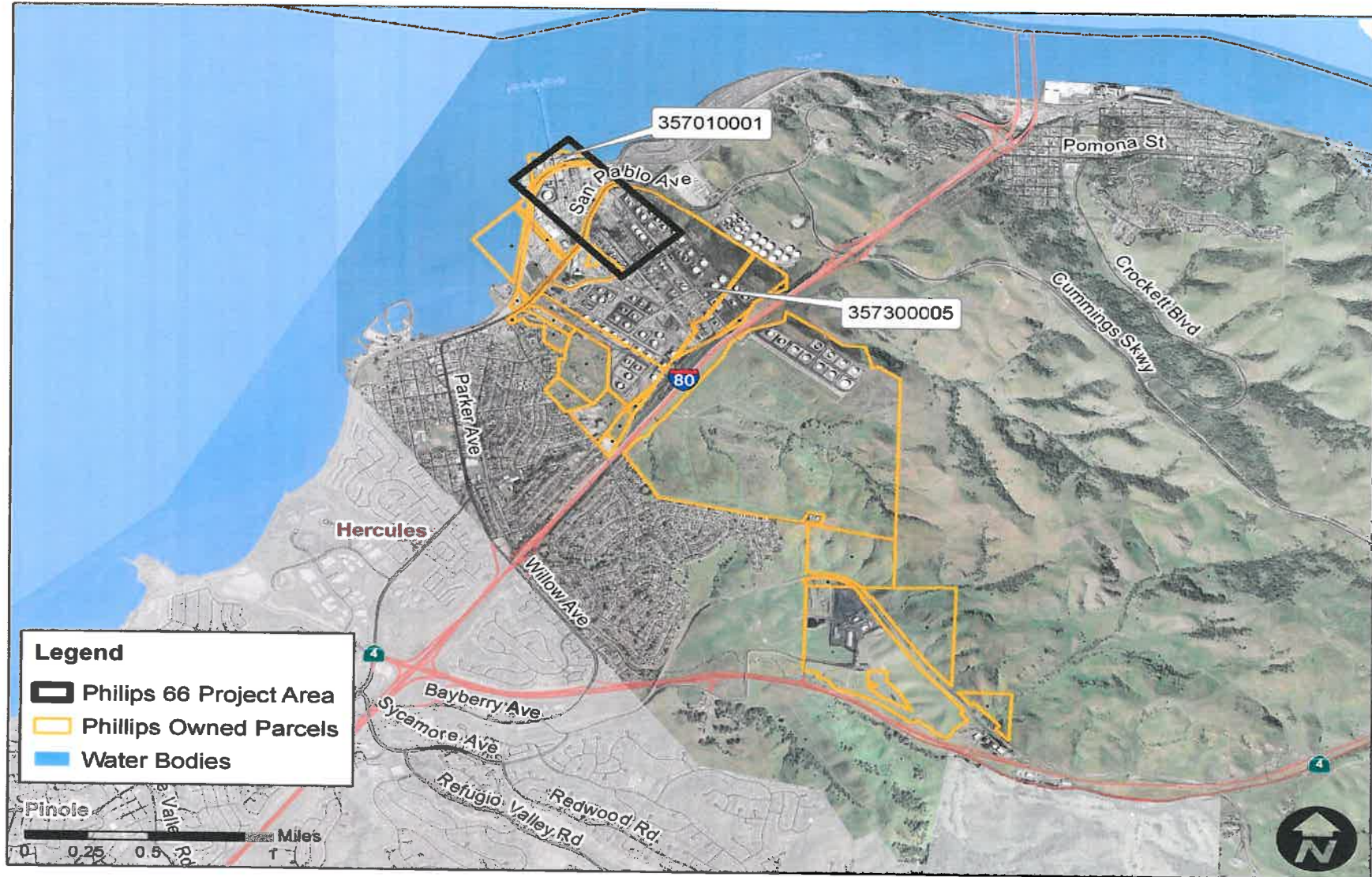
1722 ft

Google earth

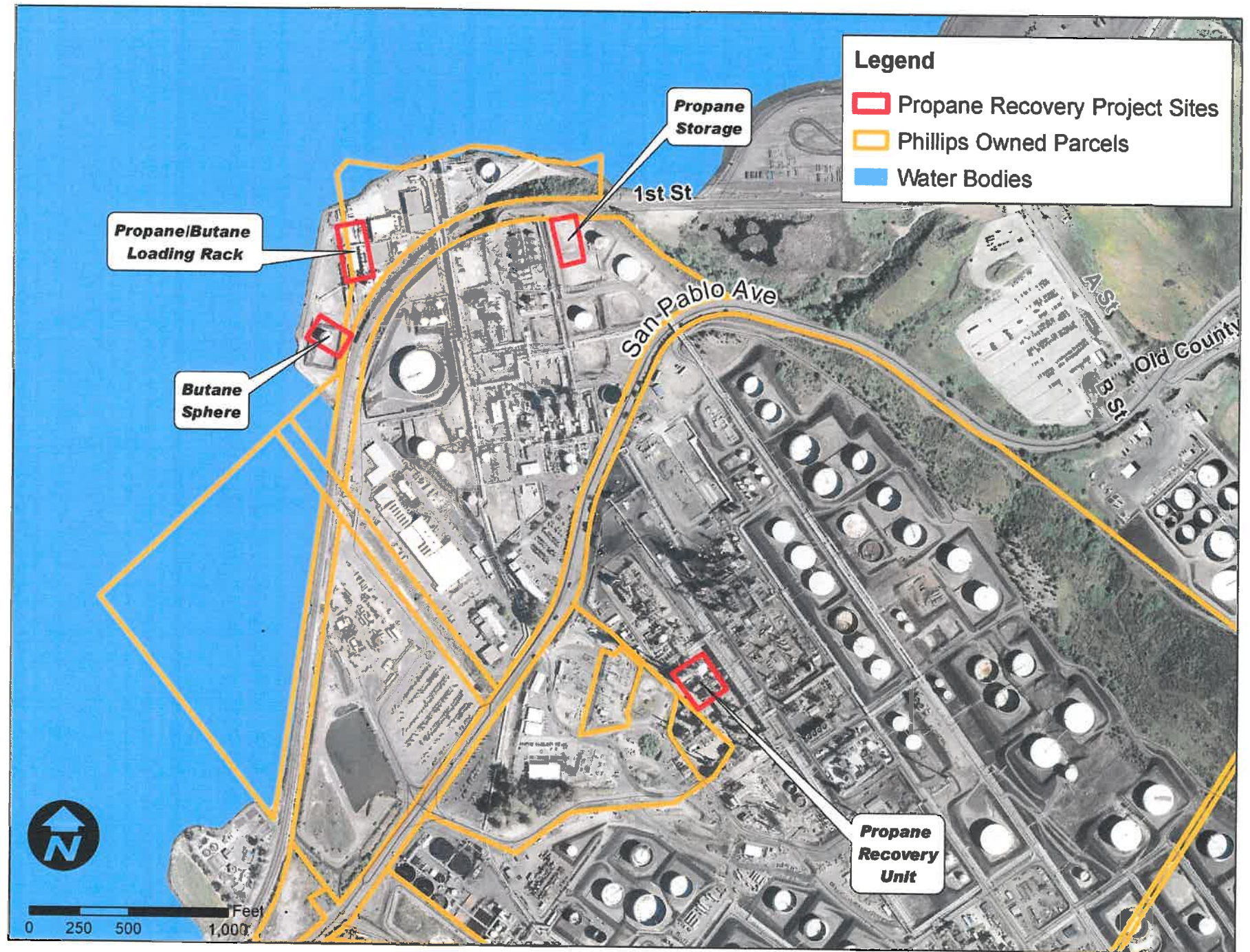


# Project Location

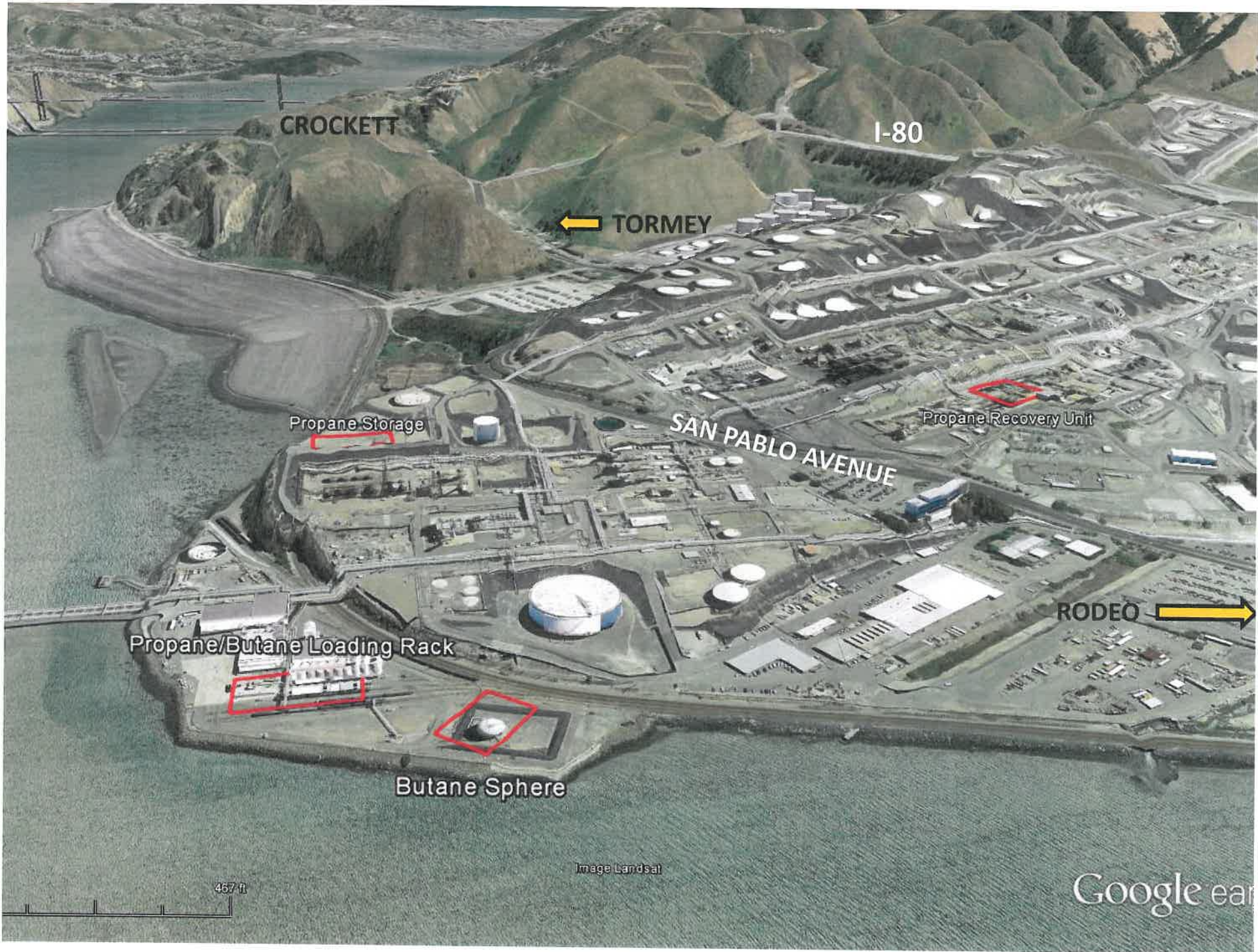
## 1380 San Pablo Avenue, Rodeo











CROCKETT

I-80

← TORMEY

Propane Storage

Propane Recovery Unit

SAN PABLO AVENUE

Propane/Butane Loading Rack

RODEO →

Butane Sphere

Image Landsat

Google earth

467 ft

BY ELECTRONIC MAIL  
(Please confirm receipt to roger@cbeccal.org)

14 January 2014

Clerk of the Board  
Contra Costa County Board of Supervisors  
651 Pine Street, Room 106  
Martinez, CA 94553



*Attention:* Tiffany Lennear (Tiffany.Lennear@cob.cccounty.us)

**Appeal of Environmental Impact Report and Land Use Permit Filed 2 Dec 2013:**

**Phillips 66 Company Propane Recovery Project, Environmental Impact Report (EIR) and Land Use Permit, EIR SCH #2012072046, County File LP12-2073;**

**Communities for a Better Environment (CBE) Supplemental Evidence–C**

Dear Clerk of the Board,

In support of our appeal, CBE respectfully submits Rodeo facility fuel gas propane and butane (LPG) content and fuel gas flow data. This evidence is appended hereto as Attachment 4.

The proposed project would recover propane and additional butane produced from crude oil in amounts that could boost this refinery's LPG yield to exceed 11 volume % on its crude oil feed.<sup>1</sup> Average monthly West Coast refinery LPG yields reported since 1993 never exceeded 4.1 vol. % on crude.<sup>2</sup> Feedstock and products are key process variables that are fundamentally interrelated. Thus, changing LPG production changes oil feedstock processing. CBE and the Rodeo Citizens Association (RCA) showed that the project would require increased LPG production, requiring a change in feedstock, and related proposals would enable such new, and likely lower quality, oil feeds, such as tar sands oils.<sup>1</sup> Refining lower quality oil can worsen pollution and safety hazards substantially.<sup>1</sup> The Governor's Office of Planning and Research (OPR),<sup>3</sup> and the Refinery Action Collaborative, which includes, among others, the Labor Occupational Health Program at U.C. Berkeley and the refinery workers' union United Steelworkers,<sup>4</sup> have joined CBE and RCA in asking that the EIR disclose and analyze potential changes in oil feedstock and resultant impacts.

<sup>1</sup> See CBE and RCA expert reports: Karras Report dated 4 Sep 2013; Fox Report dated 15 Nov 2013.

<sup>2</sup> *PADD 5 Refinery Yield*; [www.eia.gov/dnav/pet/pet\\_pnp\\_pct\\_dc\\_r50\\_pct\\_m.htm](http://www.eia.gov/dnav/pet/pet_pnp_pct_dc_r50_pct_m.htm). Download 13 Jan 2013. This 4.1% maximum may be an overestimate: it may include other liquefied gases (e.g., ethane, ethylene).

<sup>3</sup> See CBE Supplemental Evidence–A, submitted on 12 Dec 2013.

<sup>4</sup> Refinery Action Collaborative letter of 18 Dec 2013, appended hereto as Attachment 5.



The EIR admits it “did not address changes in crude oil use”<sup>5</sup> and argues against this disclosure, asserting that the proposed change in LPG has no relationship to any change in oil feedstock. Specifically, the EIR asserts that the project “would not change, enlarge, or otherwise impact” the refinery’s oil feedstock<sup>5</sup> because, it asserts:

- (1) “the actual amount of propane and butane available for recovery (determined using measured flow data and lab analysis of propane and butane content) is approximately 4,200 bpd [barrels per day, or b/d] of propane and 9,300 bpd of butane”<sup>5</sup> so that;
- (2) the 4,200 b/d of propane<sup>6</sup> and 3,800 b/d of additional butane<sup>6</sup> the project design would recover from refinery fuel gas “do not represent any anticipated increase in LPG production.”<sup>5</sup>

Despite its explicit reliance on “measured flow data and lab analysis of propane and butane content” for this claimed amount of LPG recoverable in the baseline, no such data is included anywhere in the EIR.<sup>7</sup> Therefore, the data in Attachment 4 are relevant to environmental review of this project.

### The Rodeo Fuel Gas LPG Data

Phillips 66 submitted a “Refinery Fuel Gas Speciation Profile” and “Daily U233 Fuel Gas Data” in attachments A-4 and A-7 to its air permits application for this project.<sup>8</sup> These data are given in Attachment 4. The Speciation Profile reports the propane and butane<sup>9</sup> content, mass fractions, and molecular weight (MW) of fuel gas from analysis of samples taken at the Unit 233 fuel gas mix drum, described as the mix drum for the fuel gas system. Propane and butane concentrations ranged by 10% and 17%, respectively, in three samples taken during August 2011. Phillips’ Attachment A-7 reports daily Unit 233 fuel gas flow from Jan 2009–Nov 2012. In the most recent three-year baseline period reported (Dec 2009–Nov 2012) this fuel gas flow averaged ≈29.83 million standard cubic feet per day (MMSCFD) with a 90<sup>th</sup> Percentile flow of 35.21 MMSCFD.

Phillips asserted that these data are representative of the refinery baseline for project review.<sup>10</sup> Table S-1 summarizes these baseline data.

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<sup>5</sup> FEIR at 3.2-130 [*explanation added*]: As used in the EIR, “bpd” refers to barrels per day (b/d).

<sup>6</sup> Project design reported by the EIR. See DEIR at 3-23; see also DEIR at 3-21 (Table 3-2).

<sup>7</sup> The EIR’s failure to disclose these purported baseline data is improper. See also Fox Report at 5.

<sup>8</sup> *Rodeo Propane Recovery Project BAAQMD Authority to Construct and Significant Revision to Major Facility Review Permit Application*, February 2013. Previously submitted attached to Karras Report.

<sup>9</sup> Butane, herein, is the sum of *n*-butane and isobutane, each of which is reported in Attachment A-4.

<sup>10</sup> Indeed, this refinery baseline is asserted explicitly (“Refinery fuel gas [RFG] volume and total sulfur content for the baseline period were provided in the original permit application”) (*emphasis added*) on page 3 of Phillips’ 28 June 2013 response to the Air Quality Management District’s 21 May 2013 Incomplete Letter (included in the Karras Report “Air Permit Correspondence” Attachment). Phillips’ statement must refer to air permit app. attachments A-4 and A-7 as no other refinery fuel gas data were included in the application or its attachments. Thus, these are the only data available at this time that represent the “measured flow data and lab analysis of propane and butane content” the EIR purports to rely upon, and Phillips asserted that these data are representative of the project baseline. CBE submits these data on this basis, however, more data are required for full environmental review. For example, other, undisclosed, and new streams containing LPG could be routed to recovery, such as streams from the refinery’s Santa Maria Facility (see Fox Report), and Phillips reports analysis of only three samples for LPG in fuel gas.

**Table S-1. Baseline LPG in Rodeo Facility Fuel Gas, December 2009–November 2012<sup>a</sup>**

	<b>Units</b>	<b>Average</b>	<b>90<sup>th</sup> Percentile</b>
U233 fuel gas flow	(MMSCFD)	29.83	35.21
	(million lbs/day)	1.71	2.02
<b>Propane</b> in fuel gas	(lb/lb fuel gas)	0.2381	0.2381
	(million lbs/day)	0.407	0.481
	<b>(barrels/day)</b>	<b>2,290</b>	<b>2,700</b>
	<b>(% of project design)</b>	<b>54%</b>	<b>64%</b>
<b>Butane</b> in fuel gas	(lb/lb fuel gas)	0.2230	0.2230
	(million lbs/day)	0.381	0.450
	<b>(barrels/day)</b>	<b>1,880</b>	<b>2,220</b>
	<b>(% of project design)</b>	<b>49%</b>	<b>58%</b>

(a) Project design: 4,200 b/d propane and 3,800 b/d butane; data from DEIR at 3-23. Compressed liquid densities at 60 °F: 178 lb/barrel propane and 203 lb/b butane; data from EPA's AP 42 Appendix A. All other data from Phillips 66 Air Permit Application attachments provided in Attachment 4 hereto. Conversions from MMSCFD (1 atm., 60 °F) to lbs/d based on fuel gas MW (21.75 lb/lb-mol), and on propane and butane mass fractions (lb/lb fuel gas shown in table), from Attachment 4. Butane shown includes *n*-Butane and Isobutane.

### **LPG Baseline Errors**

As estimated from Phillips' data, the baseline Rodeo facility fuel gas contains an average of  $\approx 2,290$  b/d of propane and  $\approx 1,880$  b/d of butane. See Table S-1. Even at the 90<sup>th</sup> Percentile (conditions existing only 10% of the time) it contains only  $\approx 2,700$  b/d of propane and 2,220 b/d of butane. These amounts are smaller than the "4,200 bpd of propane and 9,300 bpd of butane" baseline asserted by the EIR. Thus, Phillips' data show that the EIR overestimates the project LPG baseline. Therefore, the EIR's unsupported LPG baseline is contradicted by available data that the EIR has failed to disclose.

### **LPG Production and Feedstock Errors**

Phillips data show that baseline refinery fuel gas does not contain enough LPG to implement the project goals. See Table S-1. Instead, LPG available from existing crude stocks would meet about half of the project's goals—54% of projected propane production and 49% of projected butane production. Therefore, the EIR's unsupported assertion that the project goals "do not represent any anticipated increase in LPG production" is contradicted by available data that the EIR has failed to disclose.

At roughly half of project design (see Table S-1), LPG production would roughly double—*on average*—in order to implement the project as proposed. This substantial increase in production would require a change in the amount or composition of the feedstock or processing methods. Thus, the EIR's unsupported claim that the project "would not change, enlarge, or otherwise impact" refinery oil feedstock is contradicted by Phillips' own data, which the EIR has failed to disclose. Changing refinery oil feedstock has known potential to worsen air pollution and safety

hazards substantially. Therefore, the EIR's admission that it "did not address changes in crude oil use" indicates a serious deficiency in the environmental review of this project.

### **Conclusion**

CBE seeks an adequate environmental review that, among other things, resolves the EIR's failure to include information on the sources, types, or quality of this refinery's oil feedstock. Failing to include this information, the EIR fails to answer even the most straightforward questions about whether tar sands oils could be a new feedstock, what changes in oil feedstock are anticipated, potential impacts of those changes, and how those impacts will be addressed. The EIR argues against this necessary environmental disclosure, inappropriately, and erroneously. Its claim that LPG production and oil feed changes are unrelated suffers from the logical fallacy that products are unrelated to feedstock, relies on unsupported conclusory statements, ignores related wharf, rail, and processing expansions that enable new feedstock, and—as documented further herein—is contradicted by substantial evidence that the project requires new feedstock. This new evidence further strongly supports CBE's appeal.

Respectfully Submitted,



Roger Lin  
Staff Attorney



Greg Karras  
Senior Scientist

Attachments: CBE Supp. Attachment 4. Refinery Fuel Gas Speciation Profile and Daily U233 Fuel Gas Data, as submitted by Phillips 66 in attachments to its air permit application for the project

CBE Supp. Attachment 5. Refinery Action Collaborative letter of 18 Dec. 2013

Copy: Lashun Cross, Principal Planner, Department of Conservation and Development  
Laurel L. Impett, AICP, Urban Planner, Shute, Mihaly & Weinberger LLP  
Ken Alex, Director, Governor's Office of Planning and Research  
Jean Roggenkamp, Deputy Air Pollution Control Officer, BAAQMD  
Refinery Action Collaborative, San Francisco Bay Area  
Interested Organizations and Individuals

## **CBE Supplemental Attachment 4**

**Refinery Fuel Gas Speciation Profile and  
Daily U233 Fuel Gas Data, as submitted  
by Phillips 66 in attachments to its Air  
Permit Application for the Project\***

### **Contents**

- Part 1:      Refinery Fuel Gas Speciation Profile  
                 Permit App. Attachment A-4 excerpt  
                 (5 pages)**
- Part 2:      Daily U233 Fuel Gas Data  
                 Permit App. Attachment A-7  
                 (22 pages)**

***\* Rodeo Propane Recovery Project BAAQMD Authority to  
Construct and Significant Revision to Major Facility Review  
Permit Application, February 2013.  
Previously submitted attached to 4 Sep 2013 Karras Report.***



Form Approved 03/28/2011  
OMB Control No. 2060-0657  
Approval Expires 03/31/2014

[illegible]

Refinery Fuel Gas Speciation Profil

Form Approved 03/28/2011  
OMB Control No. 2060-0657  
Approval Expires 03/31/2014

Fuel Gas Data

Instruction:		Enter the fuel gas higher heating value (HHV) content and general composition data						
Field:			CAS No. >>	1333-74-0	630-08-0	124-38-9	7727-37-9	7782-44-7
	Facility ID Number	HHV (Btu/scf)	Moisture Content (vol%)	Hydrogen (vol%, dry basis)	Carbon monoxide (vol%, dry basis)	Carbon dioxide (vol%, dry basis)	Nitrogen (vol%, dry basis)	Oxygen (vol%, dry basis)
	CA5A0280	1323.33	1.00	29.44	0.43	0.11	2.03	0.43
	CA5A0280	1335.42	0.90	29.49	0.44	0.11	2.39	0.44
	CA5A0280	1320.85	1.10	29.44	0.43	0.11	2.03	0.43
Molecular Wt	Molecular V		18.0153	2.014	28.01	44.01	28.0134	32
Mass Fraction			0.008282897	0.027274137	0.005531228	0.002225793	0.027678106	0.006319147

Refinery Fuel Gas Speciation Profil

Form Approved 03/28/2011  
OMB Control No. 2060-0657  
Approval Expires 03/31/2014

Fuel Gas DataAssume all TRS is H2S

Instruction:		Enter the sulfur compound composition data												
Field:		CAS No. >>	7783-06-4	463-58-1	75-15-0	74-82-8	74-84-0	74-85-1	74-86-2	74-98-6	115-07-1	463-49-0	106-97-8	75-28-5
	Facility ID Number	TRS (ppmvd)	Hydrogen sulfide (ppmvd)	Carbonyl sulfide (ppmvd)	Carbon disulfide (ppmvd)	Methane (ppmvd)	Ethane (ppmvd)	Ethylene (ppmvd)	Acetylene (ppmvd)	Propane (ppmvd)	Propylene (ppmvd)	Propadiene (ppmvd)	n-Butane (ppmvd)	Isobutane (ppmvd)
	CA5A0280	505.56	8.370	29.50	0.344	285,832.00	115,500.66	6,783.18	0.53	113,270.53	13,323.18	0.53	50,774.64	35,532.76
	CA5A0280	571.99	12.300	30.60	0.459	275,316.91	113,347.86	6,775.19	0.54	114,580.81	13,684.23	0.54	54,365.84	34,297.09
	CA5A0280	551.55	18.300	32.70	0.359	278,916.27	123,708.52	6,628.30	0.54	124,396.66	12,803.23	0.54	47,143.31	28,321.31
Molecular Wt	Molecular Wt	34.0809	34.0809	60.07	76.139	16.04	30.07	28.05	26.04	44.1	42.08	40.065	58.12	58.12
Mass Fraction		0.0009	0.0000	0.0001	0.00000136	0.2065	0.1625	0.0087	0.0000	0.2381	0.0257	0.0000	0.1356	0.0874

Refinery Fuel Gas Speciation Profil

Form Approved 03/28/2011  
OMB Control No. 2060-0657  
Approval Expires 03/31/2014

Fuel Gas Data

Instruction:		Enter the organic compound composition data													
Field:		106-98-9	107-01-7	115-11-7	590-19-2	106-99-0	109-66-0	78-78-4	287-92-3	109-67-1	627-20-3	646-04-8	563-46-2	563-45-1	513-35-9
	Facility ID Number	1-Butene (ppmvd)	2-Butene (ppmvd)	Isobutene (ppmvd)	1,2-Butadiene (ppmvd)	1,3-Butadiene (ppmvd)	n-Pentane (ppmvd)	2-Methylbutane (ppmvd)	Cyclopentane (ppmvd)	1-Pentene (ppmvd)	Cis-2-pentene (ppmvd)	Trans-2-pentene (ppmvd)	2-Methyl-1-butene (ppmvd)	3-Methyl-1-butene (ppmvd)	2-Methyl-2-butene (ppmvd)
	CA5A0280	3,845.93	3,281.74	4,959.40	0.53	90.87	6,159.25	8,323.26	603.66	840.43	239.12	487.41	603.66	364.76	700.72
	CA5A0280	4,218.99	3,561.71	4,991.62	0.54	92.39	7,002.63	9,746.00	685.57	958.71	277.82	562.60	694.28	414.61	810.72
	CA5A0280	3,651.76	3,012.08	3,904.83	0.54	88.31	5,850.78	7,771.96	579.37	813.06	253.07	479.22	581.52	358.61	685.98
Molecular Wt	Molecular Wt	56.106	56.106	56.106	54.091	54.091	72.15	72.15	70.1	70.13	70.13	70.13	70.13	70.13	70.13
Mass Fraction		0.0101	0.0085	0.0119	0.0000	0.0002	0.0210	0.0286	0.0020	0.0028	0.0008	0.0016	0.0020	0.0012	0.0024

Refinery Fuel Gas Speciation Profil

Form Approved 03/28/2011  
OMB Control No. 2060-0657  
Approval Expires 03/31/2014

Fuel Gas Data

Assume n-Hexane

Instruction:												
Field:		142-29-0	591-95-7	1574-41-0	2004-70-8	591-93-5	591-96-8	598-25-4	78-79-5	542-92-7	71-43-2	110-54-3
	Facility ID Number	Cylcopentene (ppmvd)	1,2- Pentadiene (ppmvd)	1-cis-3- Pentadiene (ppmvd)	1-trans-3- Pentadiene (ppmvd)	1,4- Pentadiene (ppmvd)	2,3-Pentadiene (ppmvd)	3-Methyl-1,2- butadiene (ppmvd)	2-Methyl-1,3- butadiene (ppmvd)	Cyclopentadie ne (ppmvd)	Benzene (ppmvd)	other C6+ (ppmvd)
	CA5A0280	121.48	19.09	159.13	40.64	6.29	N/A	10.24	26.66	N/A	257.25	12,947.76
	CA5A0280	138.75	23.61	170.52	46.90	7.73	N/A	11.64	31.45	N/A	292.29	14,456.86
	CA5A0280	130.41	21.54	178.12	43.18	6.57	N/A	11.42	28.32	N/A	283.22	13,355.67
Molecular Wt	Molecular Wt	68.12	68.12	68.12	68.12	68.12	68.12	68.12	68.12	66.10114	78.11	86.18
Mass Fraction		0.0004	0.0001	0.0005	0.0001	0.0000	0.0000	0.0000	0.0001	0.0000	0.000997	0.0538

*Attachment A-7*  
*Daily U233 Fuel Gas Data*

DATE	U233 FG	U233 Total S	U233 FG SO2
	MSCFD	ppm	lb/d
1/1/2009	36,424	272.3	1,648
1/2/2009	35,533	270.2	1,595
1/3/2009	36,013	313.1	1,873
1/4/2009	35,013	324.2	1,885
1/5/2009	35,133	310.4	1,811
1/6/2009	35,162	302.3	1,766
1/7/2009	36,438	282.3	1,708
1/8/2009	36,114	305.3	1,831
1/9/2009	35,737	283.6	1,684
1/10/2009	35,381	321.8	1,891
1/11/2009	34,445	302.8	1,733
1/12/2009	33,907	304.3	1,714
1/13/2009	34,348	306.1	1,747
1/14/2009	35,624	317.0	1,876
1/15/2009	36,061	283.7	1,700
1/16/2009	36,715	261.2	1,593
1/17/2009	36,823	272.5	1,667
1/18/2009	32,963	380.5	2,083
1/19/2009	32,132	370.0	1,975
1/20/2009	33,395	296.5	1,645
1/21/2009	32,368	304.8	1,639
1/22/2009	32,765	309.8	1,686
1/23/2009	33,833	327.0	1,838
1/24/2009	35,622	280.8	1,662
1/25/2009	36,994	256.1	1,574
1/26/2009	35,268	284.0	1,664
1/27/2009	34,667	340.9	1,963
1/28/2009	34,025	326.5	1,846
1/29/2009	33,793	313.0	1,757
1/30/2009	33,527	321.3	1,789
1/31/2009	33,817	335.6	1,885
2/1/2009	33,276	333.8	1,845
2/2/2009	32,918	352.5	1,928
2/3/2009	31,799	386.6	2,042
2/4/2009	30,532	428.0	2,171
2/5/2009	31,341	383.3	1,996
2/6/2009	31,541	298.4	1,563
2/7/2009	32,050	308.2	1,641
2/8/2009	32,440	304.5	1,641
2/9/2009	32,521	359.9	1,944
2/10/2009	32,485	320.8	1,731
2/11/2009	31,750	342.8	1,808
2/12/2009	33,553	358.9	2,000
2/13/2009	34,433	313.9	1,795
2/14/2009	33,545	355.5	1,981
2/15/2009	33,810	333.3	1,872
2/16/2009	34,462	324.9	1,860
2/17/2009	35,806	283.9	1,688
2/18/2009	35,297	260.9	1,530
2/19/2009	36,933	284.1	1,743
2/20/2009	37,503	335.7	2,091
2/21/2009	38,282	359.3	2,285
2/22/2009	39,774	297.3	1,964
2/23/2009	39,470	269.6	1,768
2/24/2009	36,443	276.8	1,675
2/25/2009	33,406	287.0	1,592
2/26/2009	33,616	278.4	1,554
2/27/2009	36,151	197.1	1,184
2/28/2009	33,562	280.2	1,562
3/1/2009	36,386	277.3	1,676
3/2/2009	33,550	277.4	1,546
3/3/2009	32,106	249.6	1,331
3/4/2009	32,612	246.1	1,333
3/5/2009	32,071	317.9	1,693
3/6/2009	29,664	301.0	1,483
3/7/2009	28,452	296.3	1,400
3/8/2009	28,035	258.3	1,203
3/9/2009	28,322	258.0	1,214

DATE	U233 FG	U233 Total S	U233 FG SO2
	MSCFD	ppm	lb/d
3/10/2009	29,279	310.8	1,511
3/11/2009	28,637	325.5	1,548
3/12/2009	28,622	287.9	1,369
3/13/2009	27,867	265.8	1,230
3/14/2009	27,652	291.3	1,338
3/15/2009	26,924	344.9	1,543
3/16/2009	25,347	380.1	1,600
3/17/2009	25,090	350.1	1,459
3/18/2009	26,214	365.7	1,592
3/19/2009	26,574	378.6	1,671
3/20/2009	25,970	403.9	1,742
3/21/2009	25,400	334.0	1,409
3/22/2009	26,028	305.1	1,319
3/23/2009	25,555	365.7	1,552
3/24/2009	25,896	327.2	1,408
3/25/2009	24,863	344.3	1,422
3/26/2009	25,724	352.6	1,506
3/27/2009	25,650	351.8	1,499
3/28/2009	25,654	347.8	1,482
3/29/2009	25,181	371.0	1,552
3/30/2009	24,548	409.9	1,671
3/31/2009	25,261	389.1	1,633
4/1/2009	24,889	408.6	1,689
4/2/2009	24,239	418.7	1,686
4/3/2009	23,935	380.7	1,514
4/4/2009	22,849	373.0	1,416
4/5/2009	23,040	404.5	1,548
4/6/2009	22,314	447.3	1,658
4/7/2009	23,849	432.7	1,714
4/8/2009	25,886	321.9	1,384
4/9/2009	26,817	329.8	1,469
4/10/2009	27,214	337.0	1,523
4/11/2009	27,201	344.3	1,556
4/12/2009	26,937	322.8	1,444
4/13/2009	27,465	329.9	1,505
4/14/2009	29,098	332.9	1,609
4/15/2009	30,389	317.2	1,601
4/16/2009	30,427	332.5	1,680
4/17/2009	30,920	325.0	1,669
4/18/2009	31,696	320.6	1,688
4/19/2009	34,618	308.2	1,772
4/20/2009	30,953	239.8	1,233
4/21/2009	25,738	25.1	107
4/22/2009	26,210	31.3	136
4/23/2009	27,990	24.5	114
4/24/2009	28,929	23.0	111
4/25/2009	28,605	23.4	111
4/26/2009	28,615	23.0	109
4/27/2009	28,963	22.1	107
4/28/2009	29,078	23.4	113
4/29/2009	28,169	20.4	95
4/30/2009	26,032	24.9	108
5/1/2009	26,005	26.9	116
5/2/2009	26,146	25.0	108
5/3/2009	27,733	102.5	472
5/4/2009	29,291	419.0	2,039
5/5/2009	30,456	547.3	2,769
5/6/2009	29,237	548.1	2,662
5/7/2009	29,067	538.0	2,598
5/8/2009	28,600	448.5	2,131
5/9/2009	30,062	463.3	2,314
5/10/2009	25,634	490.8	2,090
5/11/2009	27,591	481.5	2,207
5/12/2009	26,859	562.7	2,510
5/13/2009	26,997	566.7	2,541
5/14/2009	27,631	543.0	2,492
5/15/2009	28,233	563.9	2,645
5/16/2009	28,660	556.5	2,649
5/17/2009	28,370	561.3	2,645
5/18/2009	29,479	545.0	2,669



DATE	U233 FG	U233 Total S	U233 FG SO2
	MSCFD	ppm	lb/d
5/19/2009	28,778	522.0	2,495
5/20/2009	27,056	559.4	2,514
5/21/2009	27,554	529.5	2,424
5/22/2009	28,606	514.3	2,444
5/23/2009	27,414	527.2	2,401
5/24/2009	30,695	499.3	2,546
5/25/2009	32,257	488.2	2,616
5/26/2009	34,029	474.1	2,680
5/27/2009	33,326	477.2	2,641
5/28/2009	33,917	417.4	2,352
5/29/2009	33,488	437.3	2,432
5/30/2009	33,606	458.2	2,557
5/31/2009	33,958	446.9	2,521
6/1/2009	33,970	515.4	2,908
6/2/2009	34,419	444.8	2,543
6/3/2009	33,144	451.6	2,486
6/4/2009	31,957	434.0	2,304
6/5/2009	32,053	445.8	2,374
6/6/2009	31,981	447.1	2,375
6/7/2009	32,338	469.7	2,523
6/8/2009	32,311	486.6	2,611
6/9/2009	32,663	479.4	2,601
6/10/2009	32,185	498.1	2,663
6/11/2009	31,583	516.2	2,708
6/12/2009	31,758	484.1	2,553
6/13/2009	30,058	420.2	2,098
6/14/2009	30,315	474.9	2,391
6/15/2009	30,711	495.9	2,530
6/16/2009	31,386	506.3	2,640
6/17/2009	31,745	451.0	2,378
6/18/2009	31,702	492.8	2,595
6/19/2009	31,487	453.5	2,372
6/20/2009	32,321	478.6	2,569
6/21/2009	31,827	443.1	2,343
6/22/2009	31,517	535.4	2,803
6/23/2009	31,485	501.4	2,622
6/24/2009	32,223	486.7	2,605
6/25/2009	32,568	378.9	2,050
6/26/2009	32,315	394.5	2,117
6/27/2009	31,861	461.9	2,445
6/28/2009	32,386	402.1	2,163
6/29/2009	32,855	401.0	2,188
6/30/2009	32,476	441.2	2,380
7/1/2009	31,446	473.2	2,472
7/2/2009	31,976	465.6	2,473
7/3/2009	33,195	448.4	2,472
7/4/2009	33,548	355.9	1,983
7/5/2009	34,016	430.0	2,429
7/6/2009	33,448	386.8	2,149
7/7/2009	33,007	415.9	2,280
7/8/2009	33,215	392.2	2,164
7/9/2009	32,826	466.3	2,543
7/10/2009	32,683	420.2	2,281
7/11/2009	32,666	459.1	2,491
7/12/2009	31,153	354.5	1,835
7/13/2009	31,633	337.4	1,773
7/14/2009	31,668	489.4	2,574
7/15/2009	32,957	469.9	2,572
7/16/2009	33,305	429.6	2,377
7/17/2009	32,920	396.0	2,165
7/18/2009	32,771	410.9	2,237
7/19/2009	32,815	428.4	2,335
7/20/2009	33,403	406.5	2,255
7/21/2009	33,458	418.1	2,324
7/22/2009	33,279	372.0	2,056
7/23/2009	33,703	402.7	2,254
7/24/2009	33,484	422.1	2,348
7/25/2009	33,204	422.0	2,327
7/26/2009	32,967	452.0	2,475
7/27/2009	33,032	434.0	2,381

DATE	U233 FG	U233 Total S	U233 FG SO2
	MSCFD	ppm	lb/d
7/28/2009	32,942	471.8	2,582
7/29/2009	33,234	446.5	2,465
7/30/2009	32,999	464.2	2,544
7/31/2009	33,131	462.7	2,546
8/1/2009	33,199	484.7	2,673
8/2/2009	33,572	495.3	2,762
8/3/2009	33,847	476.2	2,677
8/4/2009	33,676	464.7	2,599
8/5/2009	33,495	488.4	2,717
8/6/2009	32,588	493.4	2,671
8/7/2009	31,314	522.1	2,716
8/8/2009	31,954	470.9	2,499
8/9/2009	32,187	510.6	2,730
8/10/2009	31,452	520.4	2,719
8/11/2009	32,112	407.7	2,174
8/12/2009	31,111	536.6	2,773
8/13/2009	31,689	495.8	2,610
8/14/2009	32,452	424.3	2,287
8/15/2009	31,919	453.6	2,405
8/16/2009	31,823	470.1	2,485
8/17/2009	31,443	471.0	2,460
8/18/2009	31,928	431.6	2,289
8/19/2009	32,200	389.6	2,084
8/20/2009	32,267	412.1	2,209
8/21/2009	32,380	461.9	2,484
8/22/2009	33,915	473.7	2,669
8/23/2009	33,003	443.2	2,430
8/24/2009	33,471	451.9	2,512
8/25/2009	33,255	431.9	2,386
8/26/2009	33,468	458.5	2,549
8/27/2009	33,597	469.5	2,620
8/28/2009	32,898	486.0	2,656
8/29/2009	32,129	463.3	2,472
8/30/2009	33,061	445.3	2,445
8/31/2009	32,987	394.9	2,164
9/1/2009	33,036	467.6	2,566
9/2/2009	32,533	509.9	2,755
9/3/2009	33,174	484.7	2,671
9/4/2009	33,515	435.9	2,427
9/5/2009	33,484	476.1	2,648
9/6/2009	33,284	490.1	2,710
9/7/2009	33,175	457.5	2,521
9/8/2009	33,047	454.0	2,492
9/9/2009	34,239	398.8	2,268
9/10/2009	33,071	422.8	2,323
9/11/2009	34,130	465.6	2,640
9/12/2009	34,070	431.3	2,441
9/13/2009	33,824	352.8	1,982
9/14/2009	33,501	405.6	2,257
9/15/2009	33,158	349.3	1,924
9/16/2009	30,697	449.2	2,290
9/17/2009	29,823	441.0	2,185
9/18/2009	30,155	473.9	2,374
9/19/2009	30,843	432.8	2,217
9/20/2009	30,442	450.4	2,277
9/21/2009	31,131	446.9	2,311
9/22/2009	29,473	416.0	2,037
9/23/2009	31,038	379.1	1,955
9/24/2009	31,735	303.4	1,599
9/25/2009	30,369	322.0	1,624
9/26/2009	32,828	341.6	1,863
9/27/2009	32,196	216.6	1,158
9/28/2009	30,296	180.9	911
9/29/2009	30,946	178.7	918
9/30/2009	33,470	176.0	978
10/1/2009	30,715	220.3	1,124
10/2/2009	31,648	198.4	1,043
10/3/2009	28,276	226.9	1,066
10/4/2009	27,083	257.7	1,159
10/5/2009	26,405	276.3	1,212

DATE	U233 FG	U233 Total S	U233 FG SO2
	MSCFD	ppm	lb/d
10/6/2009	25,487	293.8	1,244
10/7/2009	25,154	324.0	1,354
10/8/2009	25,468	288.8	1,222
10/9/2009	26,672	337.1	1,493
10/10/2009	29,994	396.8	1,977
10/11/2009	32,823	386.5	2,107
10/12/2009	35,289	352.2	2,065
10/13/2009	39,336	337.3	2,204
10/14/2009	33,275	421.6	2,330
10/15/2009	33,069	412.6	2,267
10/16/2009	31,624	431.5	2,266
10/17/2009	32,299	460.6	2,471
10/18/2009	32,665	445.8	2,419
10/19/2009	31,912	371.4	1,969
10/20/2009	31,662	410.8	2,161
10/21/2009	32,380	389.8	2,097
10/22/2009	31,272	329.3	1,711
10/23/2009	30,108	393.4	1,967
10/24/2009	29,825	440.2	2,181
10/25/2009	31,214	447.9	2,322
10/26/2009	33,290	440.0	2,433
10/27/2009	33,726	361.5	2,025
10/28/2009	32,080	256.1	1,365
10/29/2009	32,920	356.9	1,952
10/30/2009	32,553	345.4	1,868
10/31/2009	32,702	329.2	1,788
11/1/2009	32,666	335.2	1,819
11/2/2009	32,667	340.0	1,845
11/3/2009	32,678	330.7	1,795
11/4/2009	32,480	325.5	1,756
11/5/2009	30,808	380.7	1,948
11/6/2009	30,508	382.7	1,939
11/7/2009	31,993	324.9	1,726
11/8/2009	32,559	341.8	1,849
11/9/2009	30,490	341.1	1,728
11/10/2009	31,270	349.6	1,816
11/11/2009	30,780	401.8	2,054
11/12/2009	30,241	421.4	2,117
11/13/2009	31,799	384.9	2,033
11/14/2009	31,750	378.6	1,996
11/15/2009	33,049	427.4	2,346
11/16/2009	37,205	332.4	2,054
11/17/2009	37,601	327.1	2,043
11/18/2009	37,957	323.2	2,038
11/19/2009	35,313	384.5	2,255
11/20/2009	37,038	366.5	2,255
11/21/2009	37,910	316.7	1,994
11/22/2009	37,458	340.2	2,117
11/23/2009	37,229	355.0	2,195
11/24/2009	36,782	359.8	2,198
11/25/2009	36,605	372.4	2,265
11/26/2009	36,202	361.5	2,174
11/27/2009	35,433	345.8	2,035
11/28/2009	35,411	347.9	2,046
11/29/2009	35,150	386.4	2,256
11/30/2009	35,182	395.1	2,309
12/1/2009	34,616	404.9	2,328
12/2/2009	35,065	382.5	2,228
12/3/2009	34,519	406.1	2,328
12/4/2009	34,618	395.1	2,272
12/5/2009	33,858	389.8	2,192
12/6/2009	35,588	346.3	2,047
12/7/2009	34,831	347.3	2,009
12/8/2009	29,690	41.3	203
12/9/2009	27,149	20.3	92
12/10/2009	27,278	15.7	71
12/11/2009	29,776	121.5	601
12/12/2009	31,754	330.5	1,743
12/13/2009	32,746	357.6	1,945
12/14/2009	32,219	356.9	1,910

DATE	U233 FG	U233 Total S	U233 FG SO2
	MSCFD	ppm	lb/d
12/15/2009	33,455	380.6	2,115
12/16/2009	31,960	398.8	2,117
12/17/2009	32,435	413.3	2,226
12/18/2009	33,637	374.6	2,093
12/19/2009	32,468	377.7	2,037
12/20/2009	32,270	372.4	1,996
12/21/2009	31,934	361.0	1,915
12/22/2009	32,744	393.1	2,138
12/23/2009	31,613	423.6	2,224
12/24/2009	31,238	430.2	2,232
12/25/2009	31,890	408.9	2,166
12/26/2009	31,439	386.3	2,017
12/27/2009	32,049	393.5	2,095
12/28/2009	31,554	431.5	2,261
12/29/2009	33,780	387.8	2,176
12/30/2009	36,698	375.7	2,290
12/31/2009	37,763	363.8	2,282
1/1/2010	36,887	414.9	2,542
1/2/2010	37,113	419.8	2,588
1/3/2010	38,316	381.5	2,428
1/4/2010	40,225	348.6	2,329
1/5/2010	39,453	369.0	2,418
1/6/2010	34,638	403.0	2,318
1/7/2010	33,459	379.5	2,109
1/8/2010	34,474	397.6	2,277
1/9/2010	31,163	407.3	2,108
1/10/2010	35,750	409.7	2,433
1/11/2010	36,557	408.6	2,481
1/12/2010	33,343	435.9	2,414
1/13/2010	33,316	374.2	2,071
1/14/2010	33,300	414.0	2,290
1/15/2010	32,374	453.8	2,440
1/16/2010	33,445	410.8	2,282
1/17/2010	32,050	409.5	2,180
1/18/2010	33,587	412.2	2,299
1/19/2010	36,122	386.6	2,319
1/20/2010	36,892	341.7	2,094
1/21/2010	31,429	409.9	2,140
1/22/2010	29,782	419.5	2,075
1/23/2010	31,180	420.5	2,178
1/24/2010	31,421	442.4	2,309
1/25/2010	32,400	372.0	2,002
1/26/2010	35,667	347.2	2,057
1/27/2010	35,146	400.8	2,340
1/28/2010	32,510	397.8	2,148
1/29/2010	34,802	418.2	2,417
1/30/2010	36,862	389.8	2,387
1/31/2010	37,542	407.6	2,542
2/1/2010	36,951	410.3	2,518
2/2/2010	36,742	318.5	1,944
2/3/2010	36,741	320.9	1,958
2/4/2010	37,005	373.2	2,294
2/5/2010	36,717	372.8	2,274
2/6/2010	35,910	400.0	2,386
2/7/2010	35,445	368.4	2,169
2/8/2010	33,620	396.2	2,212
2/9/2010	32,640	354.5	1,922
2/10/2010	33,886	424.8	2,391
2/11/2010	33,836	403.6	2,268
2/12/2010	33,682	472.5	2,644
2/13/2010	32,035	483.1	2,571
2/14/2010	29,406	471.8	2,304
2/15/2010	33,756	463.7	2,600
2/16/2010	36,494	408.3	2,475
2/17/2010	35,735	404.6	2,402
2/18/2010	35,018	387.5	2,254
2/19/2010	33,977	405.0	2,286
2/20/2010	34,058	405.2	2,292
2/21/2010	34,436	336.8	1,927
2/22/2010	34,915	392.7	2,277

DATE	U233 FG	U233 Total S	U233 FG SO2
	MSCFD	ppm	lb/d
2/23/2010	36,740	348.8	2,129
2/24/2010	32,389	412.5	2,219
2/25/2010	33,592	360.4	2,011
2/26/2010	33,601	347.3	1,938
2/27/2010	34,773	386.3	2,231
2/28/2010	35,176	363.8	2,125
3/1/2010	34,192	418.2	2,375
3/2/2010	35,124	407.8	2,379
3/3/2010	35,965	256.7	1,533
3/4/2010	35,912	386.9	2,308
3/5/2010	35,515	390.4	2,303
3/6/2010	35,548	362.9	2,143
3/7/2010	35,284	369.5	2,165
3/8/2010	30,401	337.4	1,704
3/9/2010	29,429	352.5	1,723
3/10/2010	28,342	374.7	1,764
3/11/2010	31,064	361.8	1,867
3/12/2010	36,289	248.1	1,495
3/13/2010	38,198	269.6	1,710
3/14/2010	35,845	267.3	1,592
3/15/2010	31,116	318.7	1,647
3/16/2010	32,475	405.1	2,185
3/17/2010	31,198	432.0	2,239
3/18/2010	32,916	416.3	2,276
3/19/2010	30,368	412.5	2,081
3/20/2010	32,857	394.7	2,154
3/21/2010	32,880	372.6	2,035
3/22/2010	30,875	396.6	2,034
3/23/2010	31,347	408.6	2,127
3/24/2010	33,551	370.4	2,064
3/25/2010	33,965	380.9	2,149
3/26/2010	33,947	407.1	2,295
3/27/2010	33,539	429.4	2,392
3/28/2010	33,433	381.3	2,117
3/29/2010	34,959	393.6	2,286
3/30/2010	36,188	330.3	1,985
3/31/2010	36,101	349.6	2,096
4/1/2010	36,028	392.9	2,352
4/2/2010	37,397	364.4	2,263
4/3/2010	38,113	352.5	2,232
4/4/2010	38,378	330.2	2,105
4/5/2010	36,590	327.7	1,992
4/6/2010	32,062	413.9	2,205
4/7/2010	31,369	450.7	2,348
4/8/2010	31,123	368.5	1,905
4/9/2010	31,089	482.3	2,491
4/10/2010	30,439	420.6	2,127
4/11/2010	31,050	381.3	1,967
4/12/2010	29,711	413.2	2,039
4/13/2010	30,979	434.5	2,236
4/14/2010	32,966	375.7	2,057
4/15/2010	31,723	432.5	2,279
4/16/2010	31,865	267.8	1,418
4/17/2010	33,258	498.2	2,752
4/18/2010	32,791	533.5	2,906
4/19/2010	32,571	460.9	2,494
4/20/2010	31,485	435.4	2,277
4/21/2010	31,940	421.2	2,235
4/22/2010	31,438	491.6	2,567
4/23/2010	31,989	486.0	2,583
4/24/2010	31,457	451.5	2,359
4/25/2010	31,702	453.1	2,386
4/26/2010	31,974	465.2	2,471
4/27/2010	31,093	427.5	2,208
4/28/2010	28,295	427.8	2,011
4/29/2010	27,683	452.8	2,082
4/30/2010	28,745	541.0	2,583
5/1/2010	29,604	514.9	2,532
5/2/2010	33,958	466.5	2,631
5/3/2010	33,255	467.7	2,584

DATE	U233 FG	U233 Total S	U233 FG SO2
	MSCFD	ppm	lb/d
5/4/2010	32,786	443.4	2,415
5/5/2010	31,936	398.8	2,115
5/6/2010	29,912	449.6	2,234
5/7/2010	31,785	437.8	2,311
5/8/2010	30,381	539.0	2,720
5/9/2010	31,585	521.3	2,735
5/10/2010	34,315	434.5	2,476
5/11/2010	36,256	447.3	2,694
5/12/2010	38,217	488.5	3,101
5/13/2010	37,482	446.4	2,779
5/14/2010	36,739	453.0	2,765
5/15/2010	36,426	519.0	3,140
5/16/2010	36,508	545.3	3,306
5/17/2010	35,446	501.9	2,955
5/18/2010	34,448	505.0	2,889
5/19/2010	36,805	458.8	2,805
5/20/2010	36,988	380.8	2,339
5/21/2010	36,589	407.5	2,477
5/22/2010	36,351	406.5	2,454
5/23/2010	35,767	400.4	2,379
5/24/2010	35,583	389.9	2,304
5/25/2010	34,983	430.4	2,501
5/26/2010	35,345	463.7	2,722
5/27/2010	36,378	416.0	2,514
5/28/2010	35,527	468.4	2,764
5/29/2010	34,545	524.2	3,008
5/30/2010	35,211	546.6	3,197
5/31/2010	35,637	541.6	3,206
6/1/2010	35,366	495.6	2,911
6/2/2010	35,226	424.8	2,486
6/3/2010	33,842	400.5	2,251
6/4/2010	33,305	409.6	2,266
6/5/2010	34,104	458.8	2,599
6/6/2010	34,493	524.6	3,005
6/7/2010	34,415	543.8	3,108
6/8/2010	34,429	487.4	2,787
6/9/2010	33,489	478.1	2,659
6/10/2010	33,605	498.4	2,782
6/11/2010	34,073	521.9	2,954
6/12/2010	33,784	561.9	3,153
6/13/2010	33,281	565.2	3,124
6/14/2010	33,093	484.3	2,662
6/15/2010	33,883	458.4	2,580
6/16/2010	32,592	463.8	2,511
6/17/2010	34,323	439.5	2,505
6/18/2010	35,575	382.5	2,260
6/19/2010	35,371	269.9	1,586
6/20/2010	35,836	433.3	2,579
6/21/2010	36,147	462.7	2,778
6/22/2010	34,559	457.4	2,626
6/23/2010	34,702	486.8	2,806
6/24/2010	35,249	483.8	2,832
6/25/2010	34,883	477.1	2,764
6/26/2010	34,480	429.7	2,461
6/27/2010	34,106	401.5	2,275
6/28/2010	33,062	273.3	1,501
6/29/2010	32,157	231.8	1,238
6/30/2010	27,206	249.9	1,129
7/1/2010	23,717	308.0	1,213
7/2/2010	27,067	291.4	1,310
7/3/2010	34,369	408.5	2,332
7/4/2010	35,103	469.2	2,736
7/5/2010	33,758	465.5	2,610
7/6/2010	34,412	464.2	2,653
7/7/2010	36,702	429.9	2,621
7/8/2010	35,451	449.2	2,645
7/9/2010	34,710	506.8	2,922
7/10/2010	37,634	508.6	3,179
7/11/2010	38,242	453.8	2,883
7/12/2010	38,524	434.6	2,781
7/13/2010	37,105	449.7	2,771
7/14/2010	36,010	422.0	2,524

DATE	U233 FG	U233 Total S	U233 FG SO2
	MSCFD	ppm	lb/d
7/15/2010	35,444	397.1	2,338
7/16/2010	36,168	493.9	2,967
7/17/2010	35,353	554.4	3,256
7/18/2010	36,236	388.9	2,341
7/19/2010	36,916	431.8	2,648
7/20/2010	33,646	396.5	2,216
7/21/2010	32,115	398.8	2,127
7/22/2010	36,843	438.7	2,685
7/23/2010	35,548	454.6	2,685
7/24/2010	34,454	442.3	2,531
7/25/2010	32,324	430.0	2,309
7/26/2010	34,412	456.0	2,606
7/27/2010	34,546	407.8	2,340
7/28/2010	32,921	505.4	2,764
7/29/2010	30,741	551.5	2,816
7/30/2010	30,378	578.9	2,921
7/31/2010	30,875	499.4	2,561
8/1/2010	31,421	512.8	2,677
8/2/2010	32,666	565.7	3,069
8/3/2010	33,373	579.7	3,213
8/4/2010	33,684	550.0	3,077
8/5/2010	35,529	526.2	3,106
8/6/2010	36,907	460.4	2,823
8/7/2010	36,855	391.1	2,394
8/8/2010	35,759	412.0	2,447
8/9/2010	35,988	448.0	2,678
8/10/2010	36,285	438.7	2,644
8/11/2010	35,117	461.6	2,692
8/12/2010	34,669	472.6	2,721
8/13/2010	34,865	437.1	2,532
8/14/2010	34,822	403.6	2,334
8/15/2010	34,678	417.7	2,406
8/16/2010	34,897	442.8	2,567
8/17/2010	35,627	359.9	2,130
8/18/2010	35,294	425.6	2,495
8/19/2010	34,871	460.8	2,669
8/20/2010	35,636	427.2	2,529
8/21/2010	35,601	414.6	2,452
8/22/2010	35,484	441.4	2,602
8/23/2010	33,761	436.5	2,448
8/24/2010	32,021	477.2	2,538
8/25/2010	31,853	518.4	2,743
8/26/2010	33,051	448.6	2,463
8/27/2010	32,144	432.8	2,311
8/28/2010	32,203	449.0	2,402
8/29/2010	31,718	456.8	2,407
8/30/2010	32,554	494.5	2,674
8/31/2010	34,563	498.2	2,860
9/1/2010	35,157	450.7	2,632
9/2/2010	35,124	486.6	2,839
9/3/2010	36,082	363.5	2,179
9/4/2010	36,093	395.5	2,371
9/5/2010	35,636	420.4	2,488
9/6/2010	34,926	401.6	2,330
9/7/2010	35,203	281.7	1,647
9/8/2010	37,427	365.8	2,274
9/9/2010	38,586	338.4	2,169
9/10/2010	36,181	365.5	2,197
9/11/2010	34,683	410.1	2,363
9/12/2010	35,766	405.7	2,410
9/13/2010	33,939	388.0	2,188
9/14/2010	31,847	427.9	2,264
9/15/2010	32,304	405.9	2,178
9/16/2010	32,576	425.7	2,304
9/17/2010	32,809	479.0	2,611
9/18/2010	32,809	481.6	2,625
9/19/2010	33,414	451.1	2,504
9/20/2010	34,479	413.9	2,370
9/21/2010	33,949	376.8	2,125
9/22/2010	32,292	398.9	2,140
9/23/2010	32,040	443.2	2,359
9/24/2010	33,125	434.5	2,391

DATE	U233 FG	U233 Total S	U233 FG SO2
	MSCFD	ppm	lb/d
9/25/2010	32,672	432.0	2,344
9/26/2010	31,018	472.7	2,435
9/27/2010	31,366	491.0	2,558
9/28/2010	30,403	517.2	2,612
9/29/2010	30,588	434.9	2,210
9/30/2010	33,051	395.7	2,172
10/1/2010	32,720	418.5	2,274
10/2/2010	32,287	466.1	2,499
10/3/2010	31,483	419.4	2,193
10/4/2010	31,261	393.6	2,044
10/5/2010	30,368	469.9	2,370
10/6/2010	30,451	435.6	2,203
10/7/2010	28,546	400.5	1,899
10/8/2010	27,746	384.1	1,770
10/9/2010	31,114	308.2	1,593
10/10/2010	29,770	447.4	2,212
10/11/2010	29,272	457.0	2,222
10/12/2010	29,318	515.7	2,512
10/13/2010	30,307	421.1	2,120
10/14/2010	29,652	475.0	2,340
10/15/2010	30,179	417.1	2,091
10/16/2010	30,009	389.4	1,941
10/17/2010	30,756	388.3	1,984
10/18/2010	31,111	368.0	1,901
10/19/2010	31,142	391.4	2,025
10/20/2010	31,815	364.2	1,925
10/21/2010	32,220	339.4	1,816
10/22/2010	12,785	190.2	404
10/23/2010	9,082	43.8	66
10/24/2010	16,917	54.5	153
10/25/2010	22,740	115.5	436
10/26/2010	24,632	389.3	1,593
10/27/2010	22,132	452.1	1,662
10/28/2010	24,311	464.3	1,875
10/29/2010	26,682	363.9	1,613
10/30/2010	29,166	355.6	1,723
10/31/2010	27,253	431.8	1,954
11/1/2010	26,477	405.9	1,785
11/2/2010	25,935	395.2	1,703
11/3/2010	25,503	375.7	1,592
11/4/2010	24,985	373.9	1,552
11/5/2010	25,714	323.1	1,380
11/6/2010	28,460	309.0	1,461
11/7/2010	29,745	340.3	1,681
11/8/2010	30,151	349.6	1,751
11/9/2010	30,609	333.1	1,694
11/10/2010	31,075	263.6	1,360
11/11/2010	30,586	367.2	1,865
11/12/2010	30,035	341.1	1,702
11/13/2010	30,818	353.0	1,807
11/14/2010	30,465	397.3	2,010
11/15/2010	29,380	356.6	1,740
11/16/2010	29,690	397.2	1,959
11/17/2010	31,578	329.3	1,727
11/18/2010	32,986	269.9	1,479
11/19/2010	32,582	272.8	1,476
11/20/2010	31,174	300.5	1,556
11/21/2010	28,322	301.4	1,418
11/22/2010	29,334	271.7	1,324
11/23/2010	33,640	269.9	1,508
11/24/2010	34,882	347.2	2,012
11/25/2010	32,870	324.9	1,774
11/26/2010	32,201	325.4	1,741
11/27/2010	31,755	330.8	1,745
11/28/2010	32,096	307.2	1,638
11/29/2010	32,139	308.4	1,646
11/30/2010	30,773	304.5	1,557
12/1/2010	31,353	327.3	1,705
12/2/2010	32,247	316.8	1,697
12/3/2010	33,523	321.1	1,788
12/4/2010	33,503	353.6	1,968
12/5/2010	33,382	385.2	2,136



DATE	U233 FG	U233 Total S	U233 FG SO2
	MSCFD	ppm	lb/d
12/6/2010	32,733	375.9	2,044
12/7/2010	32,030	366.2	1,949
12/8/2010	31,364	366.1	1,907
12/9/2010	32,728	367.6	1,999
12/10/2010	33,413	397.4	2,206
12/11/2010	33,901	366.9	2,066
12/12/2010	33,095	360.1	1,979
12/13/2010	30,780	345.0	1,764
12/14/2010	31,267	264.0	1,371
12/15/2010	33,459	362.1	2,013
12/16/2010	32,773	379.6	2,067
12/17/2010	31,632	290.0	1,524
12/18/2010	30,176	203.5	1,020
12/19/2010	30,485	272.2	1,378
12/20/2010	30,595	290.5	1,476
12/21/2010	31,456	326.3	1,705
12/22/2010	30,843	378.3	1,938
12/23/2010	30,723	295.6	1,508
12/24/2010	31,130	385.0	1,991
12/25/2010	31,555	363.0	1,903
12/26/2010	31,316	324.3	1,687
12/27/2010	31,603	378.9	1,989
12/28/2010	31,687	339.8	1,789
12/29/2010	31,922	364.8	1,934
12/30/2010	31,872	349.3	1,849
12/31/2010	31,660	353.2	1,857
1/1/2011	32,152	326.7	1,745
1/2/2011	31,589	361.9	1,899
1/3/2011	31,494	361.0	1,889
1/4/2011	31,360	282.9	1,474
1/5/2011	31,563	348.8	1,829
1/6/2011	32,050	361.7	1,926
1/7/2011	32,011	371.6	1,976
1/8/2011	30,895	311.2	1,597
1/9/2011	30,838	377.1	1,932
1/10/2011	31,043	365.5	1,885
1/11/2011	31,072	386.9	1,997
1/12/2011	30,336	411.5	2,073
1/13/2011	28,579	427.3	2,028
1/14/2011	28,145	415.1	1,941
1/15/2011	27,507	430.0	1,965
1/16/2011	29,125	407.6	1,972
1/17/2011	28,648	400.1	1,904
1/18/2011	28,028	218.5	1,017
1/19/2011	28,526	199.9	947
1/20/2011	27,054	216.8	974
1/21/2011	27,836	256.6	1,186
1/22/2011	26,010	374.1	1,616
1/23/2011	24,720	362.2	1,487
1/24/2011	22,709	365.5	1,379
1/25/2011	21,157	426.4	1,499
1/26/2011	22,128	421.4	1,549
1/27/2011	22,917	370.4	1,410
1/28/2011	24,704	387.8	1,591
1/29/2011	25,447	406.9	1,720
1/30/2011	22,489	315.8	1,180
1/31/2011	19,350	19.4	62
2/1/2011	18,344	20.1	61
2/2/2011	20,365	12.3	41
2/3/2011	20,100	14.0	47
2/4/2011	21,449	23.4	83
2/5/2011	21,573	36.5	131
2/6/2011	20,448	23.8	81
2/7/2011	23,378	133.2	517
2/8/2011	28,162	304.6	1,425
2/9/2011	27,436	306.6	1,397
2/10/2011	28,365	392.2	1,848
2/11/2011	28,909	419.1	2,012
2/12/2011	29,226	447.0	2,170
2/13/2011	29,655	399.7	1,969
2/14/2011	29,444	438.5	2,145
2/15/2011	29,588	456.5	2,244

DATE	U233 FG	U233 Total S	U233 FG SO2
	MSCFD	ppm	lb/d
2/16/2011	29,098	362.5	1,752
2/17/2011	28,926	304.2	1,462
2/18/2011	29,174	338.0	1,638
2/19/2011	29,306	364.3	1,774
2/20/2011	29,673	416.8	2,054
2/21/2011	25,001	376.0	1,561
2/22/2011	19,875	345.3	1,140
2/23/2011	24,574	301.9	1,232
2/24/2011	26,411	308.9	1,355
2/25/2011	26,765	333.5	1,483
2/26/2011	27,498	369.1	1,686
2/27/2011	27,833	393.6	1,820
2/28/2011	29,285	386.4	1,880
3/1/2011	30,104	387.5	1,938
3/2/2011	31,618	387.6	2,036
3/3/2011	32,135	369.1	1,970
3/4/2011	33,162	461.5	2,542
3/5/2011	35,886	403.1	2,403
3/6/2011	32,913	386.6	2,113
3/7/2011	31,951	381.7	2,026
3/8/2011	32,517	406.4	2,195
3/9/2011	32,866	436.7	2,384
3/10/2011	32,758	425.0	2,313
3/11/2011	32,838	410.7	2,240
3/12/2011	32,113	460.6	2,457
3/13/2011	32,307	446.7	2,397
3/14/2011	31,017	513.0	2,643
3/15/2011	31,681	448.8	2,362
3/16/2011	32,758	471.8	2,567
3/17/2011	34,560	448.3	2,573
3/18/2011	35,367	412.8	2,425
3/19/2011	35,848	471.2	2,806
3/20/2011	35,251	414.4	2,426
3/21/2011	35,871	414.3	2,469
3/22/2011	36,399	368.3	2,227
3/23/2011	36,681	381.8	2,326
3/24/2011	35,653	341.8	2,024
3/25/2011	33,478	425.7	2,367
3/26/2011	33,696	474.6	2,656
3/27/2011	32,503	475.5	2,567
3/28/2011	30,971	532.9	2,742
3/29/2011	32,425	495.5	2,669
3/30/2011	33,451	513.5	2,853
3/31/2011	33,721	488.5	2,736
4/1/2011	33,081	488.3	2,683
4/2/2011	31,826	484.2	2,560
4/3/2011	33,422	524.5	2,912
4/4/2011	31,571	438.0	2,297
4/5/2011	32,832	469.0	2,558
4/6/2011	32,428	463.7	2,497
4/7/2011	32,448	450.5	2,428
4/8/2011	32,345	475.6	2,555
4/9/2011	34,603	432.6	2,486
4/10/2011	34,781	403.2	2,330
4/11/2011	34,440	446.0	2,551
4/12/2011	34,820	384.1	2,222
4/13/2011	33,525	369.2	2,056
4/14/2011	32,329	424.6	2,280
4/15/2011	31,853	428.0	2,264
4/16/2011	32,430	426.3	2,296
4/17/2011	32,762	415.6	2,262
4/18/2011	32,652	418.7	2,271
4/19/2011	32,375	430.5	2,315
4/20/2011	32,898	462.7	2,528
4/21/2011	32,823	451.8	2,463
4/22/2011	32,741	516.9	2,811
4/23/2011	32,425	567.6	3,057
4/24/2011	32,397	461.8	2,485
4/25/2011	32,259	497.0	2,663
4/26/2011	32,484	609.7	3,290
4/27/2011	32,165	669.9	3,579
4/28/2011	32,268	531.7	2,850

DATE	U233 FG	U233 Total S	U233 FG SO2
	MSCFD	ppm	lb/d
4/29/2011	32,310	447.0	2,399
4/30/2011	31,570	497.0	2,606
5/1/2011	31,388	603.8	3,148
5/2/2011	31,590	671.0	3,521
5/3/2011	31,526	590.8	3,094
5/4/2011	31,217	748.2	3,880
5/5/2011	30,551	716.1	3,634
5/6/2011	30,918	678.4	3,484
5/7/2011	31,593	414.0	2,173
5/8/2011	31,667	332.2	1,748
5/9/2011	28,672	470.1	2,239
5/10/2011	31,950	434.6	2,307
5/11/2011	25,334	184.1	775
5/12/2011	21,016	76.9	268
5/13/2011	21,842	51.8	188
5/14/2011	21,498	48.9	175
5/15/2011	21,449	54.7	195
5/16/2011	20,770	61.7	213
5/17/2011	21,105	77.0	270
5/18/2011	18,877	98.3	308
5/19/2011	19,538	67.9	220
5/20/2011	18,425	110.5	338
5/21/2011	19,882	107.1	354
5/22/2011	18,917	55.5	174
5/23/2011	18,397	152.1	465
5/24/2011	17,975	231.1	690
5/25/2011	19,702	99.1	324
5/26/2011	18,048	96.1	288
5/27/2011	16,286	110.2	298
5/28/2011	17,996	119.0	356
5/29/2011	17,896	119.0	354
5/30/2011	18,759	137.8	429
5/31/2011	20,497	207.1	705
6/1/2011	19,879	310.1	1,024
6/2/2011	20,611	50.0	171
6/3/2011	20,559	16.2	55
6/4/2011	23,771	73.0	288
6/5/2011	28,513	55.8	264
6/6/2011	27,932	6.0	28
6/7/2011	25,169	8.1	34
6/8/2011	26,088	6.0	26
6/9/2011	25,810	8.3	36
6/10/2011	25,930	7.9	34
6/11/2011	24,955	29.2	121
6/12/2011	23,674	19.8	78
6/13/2011	20,055	57.8	193
6/14/2011	20,268	105.1	354
6/15/2011	21,291	176.5	624
6/16/2011	22,329	206.9	767
6/17/2011	22,354	221.7	823
6/18/2011	22,223	211.4	780
6/19/2011	21,781	246.6	892
6/20/2011	19,434	238.4	770
6/21/2011	20,316	197.7	667
6/22/2011	21,061	174.9	612
6/23/2011	21,726	198.4	716
6/24/2011	22,590	188.1	706
6/25/2011	23,875	296.1	1,174
6/26/2011	22,012	375.1	1,371
6/27/2011	21,201	358.8	1,264
6/28/2011	23,008	267.3	1,021
6/29/2011	23,664	275.6	1,083
6/30/2011	24,109	373.9	1,497
7/1/2011	24,104	402.9	1,613
7/2/2011	26,167	425.3	1,848
7/3/2011	27,598	501.4	2,298
7/4/2011	29,142	447.7	2,167
7/5/2011	31,674	444.9	2,341
7/6/2011	33,521	440.2	2,451
7/7/2011	34,194	435.3	2,472
7/8/2011	33,956	451.0	2,544
7/9/2011	34,341	470.8	2,686

DATE	U233 FG	U233 Total S	U233 FG SO2
	MSCFD	ppm	lb/d
7/10/2011	33,950	460.2	2,595
7/11/2011	33,805	455.4	2,557
7/12/2011	33,056	394.7	2,167
7/13/2011	32,921	405.2	2,216
7/14/2011	32,298	434.3	2,330
7/15/2011	32,946	456.2	2,496
7/16/2011	32,403	470.1	2,530
7/17/2011	31,636	393.0	2,065
7/18/2011	32,137	432.7	2,310
7/19/2011	32,279	460.0	2,466
7/20/2011	31,755	504.1	2,659
7/21/2011	32,160	484.3	2,587
7/22/2011	32,060	497.7	2,651
7/23/2011	31,593	446.3	2,342
7/24/2011	30,225	384.9	1,932
7/25/2011	30,951	366.7	1,885
7/26/2011	31,700	326.1	1,717
7/27/2011	32,658	360.0	1,953
7/28/2011	33,987	390.4	2,204
7/29/2011	33,498	444.7	2,475
7/30/2011	31,913	449.8	2,384
7/31/2011	29,512	436.4	2,139
8/1/2011	29,242	445.0	2,161
8/2/2011	30,233	429.4	2,157
8/3/2011	31,352	415.6	2,164
8/4/2011	32,036	425.3	2,263
8/5/2011	32,169	459.6	2,456
8/6/2011	32,707	418.9	2,276
8/7/2011	32,491	444.8	2,401
8/8/2011	32,504	467.4	2,523
8/9/2011	33,034	427.7	2,347
8/10/2011	33,944	402.4	2,269
8/11/2011	33,468	374.5	2,082
8/12/2011	32,844	461.4	2,517
8/13/2011	33,005	510.1	2,797
8/14/2011	33,147	455.6	2,509
8/15/2011	33,340	212.9	1,179
8/16/2011	33,154	297.1	1,636
8/17/2011	32,302	419.2	2,249
8/18/2011	32,537	409.5	2,213
8/19/2011	32,774	425.0	2,314
8/20/2011	33,075	438.9	2,411
8/21/2011	36,305	390.5	2,355
8/22/2011	36,666	378.9	2,307
8/23/2011	34,933	448.3	2,601
8/24/2011	32,355	542.1	2,913
8/25/2011	32,392	531.8	2,861
8/26/2011	32,218	486.9	2,606
8/27/2011	33,021	313.8	1,721
8/28/2011	34,348	409.6	2,337
8/29/2011	33,355	403.7	2,237
8/30/2011	33,523	382.8	2,132
8/31/2011	33,636	424.0	2,369
9/1/2011	34,528	427.3	2,451
9/2/2011	35,403	448.8	2,639
9/3/2011	35,290	400.6	2,348
9/4/2011	35,612	441.2	2,610
9/5/2011	35,176	457.4	2,673
9/6/2011	34,807	438.3	2,534
9/7/2011	30,308	116.2	585
9/8/2011	29,506	69.1	338
9/9/2011	28,835	57.4	275
9/10/2011	29,577	40.1	197
9/11/2011	29,824	41.2	204
9/12/2011	31,012	91.0	469
9/13/2011	30,838	346.4	1,775
9/14/2011	30,805	333.2	1,705
9/15/2011	29,654	344.1	1,695
9/16/2011	30,495	340.2	1,723
9/17/2011	30,568	391.6	1,988
9/18/2011	30,470	422.3	2,137
9/19/2011	30,541	410.4	2,082

DATE	U233 FG	U233 Total S	U233 FG SO2
	MSCFD	ppm	lb/d
9/20/2011	31,085	387.8	2,003
9/21/2011	29,940	353.3	1,757
9/22/2011	29,517	374.2	1,835
9/23/2011	30,160	432.6	2,167
9/24/2011	32,083	393.7	2,098
9/25/2011	32,955	427.2	2,338
9/26/2011	33,498	512.9	2,854
9/27/2011	33,051	422.0	2,316
9/28/2011	31,823	561.7	2,969
9/29/2011	32,401	463.6	2,495
9/30/2011	30,691	412.2	2,101
10/1/2011	29,692	489.1	2,412
10/2/2011	29,456	488.5	2,390
10/3/2011	29,871	483.2	2,398
10/4/2011	29,720	522.2	2,578
10/5/2011	29,167	532.6	2,580
10/6/2011	28,827	605.2	2,898
10/7/2011	28,370	489.7	2,307
10/8/2011	27,300	254.5	1,154
10/9/2011	25,430	269.1	1,137
10/10/2011	25,829	286.2	1,228
10/11/2011	24,968	303.8	1,260
10/12/2011	23,599	354.0	1,388
10/13/2011	23,411	383.8	1,492
10/14/2011	26,579	586.8	2,591
10/15/2011	29,982	534.5	2,662
10/16/2011	29,376	483.6	2,360
10/17/2011	27,729	465.8	2,145
10/18/2011	27,732	496.1	2,285
10/19/2011	29,011	508.3	2,449
10/20/2011	29,964	438.3	2,182
10/21/2011	31,025	492.7	2,539
10/22/2011	28,850	509.8	2,443
10/23/2011	28,600	555.7	2,640
10/24/2011	29,501	549.3	2,692
10/25/2011	29,834	500.4	2,480
10/26/2011	28,359	526.0	2,478
10/27/2011	30,291	459.7	2,313
10/28/2011	31,011	486.9	2,508
10/29/2011	30,873	504.2	2,586
10/30/2011	29,368	543.7	2,652
10/31/2011	27,763	580.3	2,676
11/1/2011	28,691	641.1	3,055
11/2/2011	28,924	560.5	2,693
11/3/2011	30,478	479.8	2,429
11/4/2011	29,442	437.9	2,141
11/5/2011	29,917	506.0	2,515
11/6/2011	29,664	498.5	2,456
11/7/2011	29,823	432.7	2,143
11/8/2011	29,407	405.0	1,978
11/9/2011	28,961	472.0	2,271
11/10/2011	28,502	459.1	2,174
11/11/2011	27,467	434.8	1,984
11/12/2011	26,954	420.3	1,882
11/13/2011	27,904	430.2	1,994
11/14/2011	29,570	384.4	1,888
11/15/2011	29,441	517.3	2,530
11/16/2011	28,923	533.4	2,562
11/17/2011	28,129	470.1	2,196
11/18/2011	28,393	471.3	2,223
11/19/2011	29,016	506.5	2,441
11/20/2011	28,690	438.0	2,088
11/21/2011	28,827	463.4	2,219
11/22/2011	27,969	424.3	1,971
11/23/2011	28,211	394.4	1,848
11/24/2011	28,334	438.9	2,066
11/25/2011	27,803	421.1	1,945
11/26/2011	28,455	406.8	1,923
11/27/2011	28,162	440.0	2,058
11/28/2011	27,819	515.3	2,381
11/29/2011	27,615	554.9	2,545
11/30/2011	27,420	567.4	2,584

DATE	U233 FG	U233 Total S	U233 FG SO2
	MSCFD	ppm	lb/d
12/1/2011	27,237	510.9	2,311
12/2/2011	26,843	502.7	2,241
12/3/2011	26,516	431.7	1,901
12/4/2011	26,238	444.7	1,938
12/5/2011	26,377	426.4	1,868
12/6/2011	26,748	399.0	1,773
12/7/2011	25,268	369.8	1,552
12/8/2011	26,568	348.8	1,539
12/9/2011	27,486	339.6	1,551
12/10/2011	26,909	377.5	1,687
12/11/2011	26,686	426.4	1,890
12/12/2011	26,985	438.3	1,965
12/13/2011	29,921	383.9	1,908
12/14/2011	30,279	382.9	1,926
12/15/2011	29,926	363.2	1,805
12/16/2011	29,733	413.2	2,041
12/17/2011	29,670	373.8	1,842
12/18/2011	30,562	392.6	1,993
12/19/2011	29,704	401.5	1,981
12/20/2011	29,596	400.0	1,966
12/21/2011	28,852	391.1	1,874
12/22/2011	30,020	329.5	1,643
12/23/2011	27,969	305.7	1,420
12/24/2011	25,205	336.4	1,408
12/25/2011	26,987	357.6	1,603
12/26/2011	25,602	360.3	1,532
12/27/2011	25,073	384.3	1,600
12/28/2011	26,335	418.6	1,831
12/29/2011	25,906	403.8	1,738
12/30/2011	24,576	436.5	1,782
12/31/2011	25,910	473.9	2,039
1/1/2012	24,917	507.2	2,099
1/2/2012	24,453	473.4	1,923
1/3/2012	23,849	451.9	1,790
1/4/2012	24,199	373.6	1,502
1/5/2012	24,494	364.1	1,481
1/6/2012	25,264	322.9	1,355
1/7/2012	24,877	302.1	1,248
1/8/2012	25,404	385.7	1,627
1/9/2012	25,380	367.8	1,551
1/10/2012	26,270	326.9	1,426
1/11/2012	26,064	297.2	1,287
1/12/2012	25,531	409.8	1,738
1/13/2012	26,121	472.7	2,051
1/14/2012	27,354	453.1	2,059
1/15/2012	27,331	438.6	1,991
1/16/2012	25,291	426.9	1,794
1/17/2012	25,938	422.4	1,820
1/18/2012	22,606	432.2	1,623
1/19/2012	20,952	442.9	1,541
1/20/2012	22,968	451.4	1,722
1/21/2012	28,051	492.0	2,293
1/22/2012	28,179	505.8	2,367
1/23/2012	27,267	501.2	2,270
1/24/2012	26,924	543.1	2,429
1/25/2012	27,984	476.0	2,212
1/26/2012	29,514	371.6	1,822
1/27/2012	29,369	414.0	2,020
1/28/2012	28,766	432.6	2,067
1/29/2012	26,075	470.7	2,039
1/30/2012	24,580	487.7	1,991
1/31/2012	25,811	488.8	2,096
2/1/2012	27,071	549.8	2,472
2/2/2012	27,464	550.1	2,509
2/3/2012	27,543	561.8	2,570
2/4/2012	28,260	549.3	2,579
2/5/2012	27,672	552.7	2,540
2/6/2012	28,248	540.0	2,534
2/7/2012	29,096	512.1	2,475
2/8/2012	29,572	467.8	2,298
2/9/2012	29,530	517.8	2,540
2/10/2012	27,892	535.7	2,482

DATE	U233 FG	U233 Total S	U233 FG SO2
	MSCFD	ppm	lb/d
2/11/2012	27,305	581.0	2,635
2/12/2012	26,335	519.8	2,274
2/13/2012	27,105	478.5	2,155
2/14/2012	26,879	543.1	2,425
2/15/2012	26,810	527.8	2,350
2/16/2012	26,548	347.9	1,534
2/17/2012	25,271	329.1	1,381
2/18/2012	24,951	368.6	1,527
2/19/2012	26,582	562.3	2,483
2/20/2012	25,840	493.1	2,116
2/21/2012	24,550	556.5	2,269
2/22/2012	24,852	575.8	2,377
2/23/2012	25,397	568.1	2,397
2/24/2012	25,660	407.2	1,736
2/25/2012	25,788	493.7	2,115
2/26/2012	24,963	506.3	2,099
2/27/2012	24,633	303.5	1,242
2/28/2012	23,777	299.4	1,182
2/29/2012	24,099	488.0	1,954
3/1/2012	23,922	721.1	2,865
3/2/2012	22,787	625.6	2,368
3/3/2012	23,202	663.5	2,557
3/4/2012	23,466	675.3	2,632
3/5/2012	24,540	646.6	2,636
3/6/2012	24,587	638.3	2,607
3/7/2012	26,106	640.1	2,776
3/8/2012	29,576	578.1	2,840
3/9/2012	30,647	480.7	2,447
3/10/2012	30,357	402.0	2,027
3/11/2012	27,786	387.7	1,789
3/12/2012	26,564	349.1	1,540
3/13/2012	27,606	335.9	1,540
3/14/2012	25,633	371.8	1,583
3/15/2012	25,966	447.7	1,931
3/16/2012	30,010	437.4	2,180
3/17/2012	28,829	421.8	2,020
3/18/2012	26,307	463.4	2,025
3/19/2012	25,805	547.9	2,348
3/20/2012	24,897	535.6	2,215
3/21/2012	26,421	514.8	2,259
3/22/2012	28,825	493.9	2,365
3/23/2012	29,079	467.1	2,256
3/24/2012	28,995	442.0	2,129
3/25/2012	28,384	457.1	2,155
3/26/2012	26,924	492.2	2,201
3/27/2012	25,347	508.1	2,139
3/28/2012	28,974	477.8	2,299
3/29/2012	28,145	502.4	2,349
3/30/2012	28,282	498.1	2,340
3/31/2012	29,642	470.1	2,314
4/1/2012	29,799	440.0	2,178
4/2/2012	29,277	477.5	2,322
4/3/2012	29,894	435.4	2,162
4/4/2012	29,816	416.9	2,065
4/5/2012	29,441	393.9	1,926
4/6/2012	29,194	407.7	1,977
4/7/2012	28,517	424.0	2,009
4/8/2012	29,314	384.4	1,872
4/9/2012	29,036	411.0	1,982
4/10/2012	29,951	468.2	2,329
4/11/2012	29,054	426.1	2,056
4/12/2012	28,203	445.7	2,088
4/13/2012	28,028	382.7	1,782
4/14/2012	29,272	318.7	1,550
4/15/2012	28,371	329.0	1,550
4/16/2012	28,798	336.7	1,611
4/17/2012	28,984	319.8	1,540
4/18/2012	29,242	312.2	1,516
4/19/2012	29,511	319.7	1,567
4/20/2012	28,053	332.3	1,549
4/21/2012	27,543	396.2	1,812
4/22/2012	27,273	442.1	2,003

DATE	U233 FG	U233 Total S	U233 FG SO2
	MSCFD	ppm	lb/d
4/23/2012	27,074	447.5	2,012
4/24/2012	27,806	470.6	2,174
4/25/2012	27,362	425.6	1,934
4/26/2012	27,937	410.5	1,905
4/27/2012	26,784	427.7	1,903
4/28/2012	25,291	399.9	1,680
4/29/2012	24,628	409.2	1,674
4/30/2012	24,672	364.9	1,496
5/1/2012	24,929	403.4	1,670
5/2/2012	25,196	368.1	1,540
5/3/2012	25,263	374.6	1,572
5/4/2012	24,868	359.7	1,486
5/5/2012	22,923	376.8	1,435
5/6/2012	23,472	416.7	1,625
5/7/2012	23,352	416.7	1,616
5/8/2012	23,747	388.1	1,531
5/9/2012	24,438	431.5	1,752
5/10/2012	24,409	404.0	1,638
5/11/2012	24,880	381.4	1,576
5/12/2012	25,306	339.3	1,426
5/13/2012	25,646	355.5	1,515
5/14/2012	26,103	290.8	1,261
5/15/2012	26,748	322.0	1,431
5/16/2012	26,983	315.0	1,412
5/17/2012	27,886	304.2	1,409
5/18/2012	27,447	336.7	1,535
5/19/2012	27,261	397.7	1,801
5/20/2012	28,425	383.6	1,811
5/21/2012	27,946	402.4	1,868
5/22/2012	28,531	392.2	1,859
5/23/2012	27,173	355.1	1,603
5/24/2012	27,800	279.3	1,290
5/25/2012	26,695	248.2	1,100
5/26/2012	25,890	298.8	1,285
5/27/2012	25,626	261.1	1,111
5/28/2012	25,853	233.6	1,003
5/29/2012	26,519	264.6	1,165
5/30/2012	27,974	275.8	1,281
5/31/2012	29,488	222.2	1,088
6/1/2012	30,040	234.5	1,170
6/2/2012	28,529	293.7	1,392
6/3/2012	29,191	324.3	1,572
6/4/2012	28,290	351.0	1,649
6/5/2012	20,731	398.5	1,372
6/6/2012	19,313	496.4	1,592
6/7/2012	21,415	391.9	1,394
6/8/2012	20,153	396.5	1,327
6/9/2012	20,280	395.3	1,331
6/10/2012	21,508	529.9	1,893
6/11/2012	23,444	405.1	1,577
6/12/2012	23,426	366.6	1,427
6/13/2012	24,596	398.2	1,627
6/14/2012	25,924	369.4	1,591
6/15/2012	26,626	316.9	1,401
6/16/2012	25,279	311.3	1,307
6/17/2012	23,201	333.9	1,287
6/18/2012	24,892	371.7	1,537
6/19/2012	25,581	400.9	1,703
6/20/2012	25,441	387.0	1,635
6/21/2012	25,095	354.0	1,476
6/22/2012	24,738	330.2	1,357
6/23/2012	25,040	252.2	1,049
6/24/2012	25,150	326.2	1,363
6/25/2012	25,541	346.7	1,471
6/26/2012	25,914	370.3	1,594
6/27/2012	26,154	380.2	1,652
6/28/2012	26,248	393.1	1,714
6/29/2012	26,825	332.1	1,480
6/30/2012	26,241	413.1	1,801
7/1/2012	28,666	395.8	1,885
7/2/2012	28,982	404.0	1,945
7/3/2012	29,046	434.8	2,098



DATE	U233 FG	U233 Total S	U233 FG SO2
	MSCFD	ppm	lb/d
7/4/2012	29,709	403.2	1,990
7/5/2012	29,638	379.3	1,867
7/6/2012	29,661	406.7	2,004
7/7/2012	29,149	391.3	1,895
7/8/2012	28,429	334.3	1,579
7/9/2012	28,590	279.2	1,326
7/10/2012	27,664	305.9	1,406
7/11/2012	27,486	339.1	1,548
7/12/2012	27,903	410.1	1,901
7/13/2012	28,625	328.9	1,564
7/14/2012	27,279	407.2	1,845
7/15/2012	27,198	378.2	1,709
7/16/2012	27,250	317.8	1,438
7/17/2012	27,148	374.2	1,688
7/18/2012	27,782	402.1	1,856
7/19/2012	28,102	390.8	1,824
7/20/2012	28,382	390.3	1,840
7/21/2012	28,379	390.0	1,838
7/22/2012	29,039	372.3	1,796
7/23/2012	30,055	368.9	1,842
7/24/2012	29,730	364.6	1,801
7/25/2012	27,547	400.7	1,834
7/26/2012	27,320	412.8	1,873
7/27/2012	27,694	389.0	1,790
7/28/2012	29,403	327.1	1,598
7/29/2012	28,906	348.5	1,674
7/30/2012	28,707	361.0	1,721
7/31/2012	28,680	347.9	1,657
8/1/2012	27,891	375.1	1,738
8/2/2012	31,494	322.6	1,688
8/3/2012	32,095	277.5	1,479
8/4/2012	31,863	293.8	1,555
8/5/2012	31,085	388.3	2,005
8/6/2012	31,473	362.6	1,896
8/7/2012	31,243	361.9	1,878
8/8/2012	30,234	398.5	2,001
8/9/2012	32,896	444.8	2,430
8/10/2012	33,004	385.5	2,113
8/11/2012	31,145	433.7	2,244
8/12/2012	30,629	383.9	1,953
8/13/2012	30,492	409.6	2,075
8/14/2012	31,019	393.9	2,029
8/15/2012	30,839	387.0	1,982
8/16/2012	30,893	428.1	2,197
8/17/2012	30,693	433.1	2,208
8/18/2012	30,440	406.2	2,054
8/19/2012	30,321	401.2	2,021
8/20/2012	30,680	386.4	1,969
8/21/2012	30,754	357.5	1,826
8/22/2012	31,097	327.9	1,694
8/23/2012	31,574	324.0	1,699
8/24/2012	29,239	309.2	1,502
8/25/2012	25,934	291.3	1,255
8/26/2012	25,408	339.5	1,433
8/27/2012	28,534	274.5	1,301
8/28/2012	25,213	354.5	1,485
8/29/2012	28,198	159.5	747
8/30/2012	25,222	20.6	86
8/31/2012	27,639	102.4	470
9/1/2012	28,309	212.0	997

DATE	U233 FG	U233 Total S	U233 FG SO2
	MSCFD	ppm	lb/d
9/2/2012	27,038	244.0	1,096
9/3/2012	27,550	299.7	1,372
9/4/2012	29,854	391.0	1,939
9/5/2012	28,634	360.2	1,713
9/6/2012	28,078	436.2	2,034
9/7/2012	28,311	428.3	2,014
9/8/2012	28,318	409.0	1,924
9/9/2012	28,949	395.1	1,900
9/10/2012	28,968	353.1	1,699
9/11/2012	26,835	392.1	1,748
9/12/2012	29,708	438.8	2,165
9/13/2012	28,372	439.2	2,070
9/14/2012	28,472	413.0	1,953
9/15/2012	27,277	401.0	1,817
9/16/2012	27,573	401.0	1,837
9/17/2012	26,892	401.0	1,791
9/18/2012	27,723	401.0	1,847
9/19/2012	27,855	401.0	1,855
9/20/2012	27,554	401.0	1,835
9/21/2012	28,194	401.0	1,878
9/22/2012	28,305	401.0	1,885
9/23/2012	27,873	401.0	1,857
9/24/2012	28,646	401.0	1,908
9/25/2012	28,557	401.0	1,902
9/26/2012	29,131	401.0	1,940
9/27/2012	29,178	401.0	1,943
9/28/2012	29,553	401.0	1,968
9/29/2012	29,362	401.0	1,956
9/30/2012	29,186	401.0	1,944
10/1/2012	32,171	401.0	2,143
10/2/2012	30,627	401.0	2,040
10/3/2012	30,901	400.7	2,057
10/4/2012	30,913	374.2	1,921
10/5/2012	32,326	304.7	1,636
10/6/2012	26,367	293.3	1,285
10/7/2012	24,725	407.7	1,674
10/8/2012	24,683	385.6	1,581
10/9/2012	24,223	375.3	1,510
10/10/2012	24,475	423.6	1,722
10/11/2012	24,520	436.8	1,779
10/12/2012	24,336	340.9	1,378
10/13/2012	24,331	365.1	1,475
10/14/2012	23,780	340.0	1,343
10/15/2012	24,110	313.3	1,255
10/16/2012	25,388	307.0	1,295
10/17/2012	25,083	325.9	1,358
10/18/2012	26,119	259.2	1,124
10/19/2012	23,386	256.8	998
10/20/2012	19,250	285.9	914
10/21/2012	17,644	176.2	516
10/22/2012	19,941	35.5	117
10/23/2012	23,737	32.6	129
10/24/2012	24,529	181.4	739
10/25/2012	24,405	340.4	1,380
10/26/2012	26,025	502.2	2,171
10/27/2012	30,900	427.2	2,192
10/28/2012	28,619	382.9	1,820
10/29/2012	28,723	388.4	1,853
10/30/2012	28,384	407.1	1,920
10/31/2012	26,285	420.7	1,837
11/1/2012	26,646	496.8	2,199
11/2/2012	27,235	515.4	2,331
11/3/2012	26,859	460.3	2,053

DATE	U233 FG	U233 Total S	U233 FG SO2
	MSCFD	ppm	lb/d
11/4/2012	26,966	491.5	2,201
11/5/2012	27,273	481.4	2,181
11/6/2012	27,422	512.9	2,336
11/7/2012	29,167	440.9	2,136
11/8/2012	29,439	343.7	1,681
11/9/2012	29,321	365.1	1,778
11/10/2012	29,759	346.1	1,711
11/11/2012	29,631	362.4	1,784
11/12/2012	26,908	417.3	1,865
11/13/2012	26,490	376.0	1,654
11/14/2012	24,863	385.3	1,591
11/15/2012	25,275	380.0	1,596
11/16/2012	25,129	353.0	1,473
11/17/2012	25,567	313.4	1,331
11/18/2012	26,089	330.0	1,430
11/19/2012	25,316	340.6	1,432
11/20/2012	25,088	433.5	1,806
11/21/2012	24,724	386.3	1,587
11/22/2012	24,968	413.6	1,715
11/23/2012	24,465	546.1	2,219
11/24/2012	25,390	543.9	2,294
11/25/2012	26,287	503.8	2,200
11/26/2012	26,716	520.4	2,309
11/27/2012	26,558	500.2	2,207
11/28/2012	26,797	501.8	2,234
11/29/2012	26,376	509.0	2,230
11/30/2012	26,244	425.0	1,852

**CBE Supplemental Attachment 5**

**Refinery Action Collaborative letter of  
18 December 2013  
(3 pages)**

# REFINERY

ACTION COLLABORATIVE



SAN FRANCISCO BAY AREA

BY ELECTRONIC MAIL

18 December 2013

Hon. Federal Glover, Chair, and Members of the Board  
Board of Supervisors, Contra Costa County

Hon. Elizabeth Patterson, Mayor, and Council Members  
City Council, City of Benicia

Hon. Nancy Parent, Mayor, and Council Members  
City Council, City of Pittsburg

Hon. Gayle McLaughlin, Mayor, and Council Members  
City Council, City of Richmond

Re: **Chevron Richmond Refinery “Modernization” Project,  
Phillips 66 San Francisco Refinery Rodeo “Propane Recovery” Project,  
Praxair “Contra Costa Pipeline” Project,  
Valero Benicia Refinery “Crude by Rail” Project, and  
WesPac Pittsburg “Energy Infrastructure” Project—Disclosure of  
Refinery Oil Feedstock Quality Among Data for Environmental Review**

Dear local government leaders,

The Refinery Action Collaborative (Collaborative) is a labor-community-university partnership working to address critical environmental health and safety concerns shared by refinery workers and residents regionally. Collaborative members include the Asian Pacific Environmental Network, the BlueGreen Alliance, Communities for a Better Environment, the Labor Occupational Health Program at UC Berkeley, the Natural Resources Defense Council, the United Steelworkers (USW) International Union, United Steelworkers Local 5, and United Steelworkers Local 326.

We understand that the proposed projects identified above are currently in environmental review, including public review of potential environmental health and safety impacts, and that your city or county is the California Environmental Quality Act “lead agency” in this review for one or more of these projects. The Collaborative has not taken a position on the projects at this time. We write to support an adequate environmental review of these

projects that includes, among other factors that have the potential to affect refinery safety and emissions, public disclosure of potential changes in refinery oil feedstock quality.

Our Collaborative's founding principles commit us to "pursue solutions that improve transparency and public accountability in the refinery industry." In a major effort earlier this year, our groups reached consensus on a *Recommendation to Ensure Prevention of Feedstock-Related Emissions Increase*, released in June 2013, that calls for the public disclosure and review of each Bay Area refiner's oil feedstock quality.<sup>1</sup> We also have supported community leaders' call for full and transparent environmental review of all potential risks associated with the Valero Benicia proposal, including its potential to facilitate a change in refinery oil feedstock quality.<sup>2</sup> More recently, we made recommendations to the Governor's Interagency Refineries Task Force that called, among other things, for public reporting of refinery crude feed quality, explaining that:

Disclosure by the refineries of the quality of crude oil entering the plant is necessary for assessing the efficacy of a plant's safety measures and air pollution controls.<sup>3</sup>

As leaders of the public environmental reviews for these proposed projects under the state's Environmental Quality Act, your agencies are positioned to address these needs. Accordingly, we respectfully ask you to ensure that the environmental reviews of these proposed projects will disclose and address current and potentially changing refinery oil feedstock quality among the factors affecting community and worker health and safety.

On Behalf of the Collaborative,

Miya Yoshitani, Executive Director  
Asian Pacific Environmental Network

Charlotte Brody, Vice President for Health Initiatives  
BlueGreen Alliance

Greg Karras, Senior Scientist  
Communities for a Better Environment

Nazima EL-Askari, MPH, Program Coordinator  
Labor Occupational Health Program, UC Berkeley

Diane Bailey, Senior Scientist  
Natural Resources Defense Council

Ron Espinoza, District 12 Sub-Director

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<sup>1</sup> *Bay Area Air Quality Management District Proposed Regulation 12, Rule 15; March 2013 Preliminary Draft Petroleum Refining Emissions Tracking Rule*; comments submitted to Jack Broadbent, Executive Officer, BAAQMD. 13 June 2013. See page 3.

<sup>2</sup> *Supporting the Committee's position on the Valero Crude-by-Rail Project*; letter to the Benicia Good Neighbor Steering Committee c/o Marilyn Bardet. 25 July 2013.

<sup>3</sup> *Initial Response of the Collaborative to the Findings & Recommendations of the July 2013 Draft Report of the Interagency Working Group on Refinery Safety*; 10 October 2013. See p. 7.

United Steelworkers International

Mike Smith, Local 5 Field Rep.

United Steelworkers Local 5

Moxie J. Loeffler, D.O.

Internal Medicine Physician





Contra  
Costa  
County

To: Board of Supervisors  
From: Julia R. Bueren, Public Works Director/Chief Engineer  
Date: January 21, 2014

Subject: Establish speed limits on Rudgear Road (Road No. 4141 and 4144A), Walnut Creek area. (District IV)

---

**RECOMMENDATION(S):**

ADOPT Traffic Resolution No. 2014/4401 to establish speed limits on Rudgear Road (Road No. 4141 and 4144A), and RESCIND Traffic Resolution No. 1961/0200, as recommended by the Public Works Director, Walnut Creek area.

**FISCAL IMPACT:**

No fiscal impact.

**BACKGROUND:**

The establishment of speed limits on Rudgear Road is necessary to allow local authorities the ability to enforce the speed limit.

**CONSEQUENCE OF NEGATIVE ACTION:**

Unable to use local authorities' power to enforce the California Vehicle Code.

**CHILDREN'S IMPACT STATEMENT:**

Not applicable.

---

☒ APPROVE

☐ OTHER

☒ RECOMMENDATION OF CNTY ADMINISTRATOR

☐ RECOMMENDATION OF BOARD  
COMMITTEE

---

Action of Board On: **01/21/2014** ☐ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

AYES \_\_\_\_\_ NOES \_\_\_\_\_

ABSENT \_\_\_\_\_ ABSTAIN \_\_\_\_\_

RECUSE \_\_\_\_\_

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: January 21, 2014

David J. Twa, County Administrator and Clerk of the Board of Supervisors

Contact: Monish Sen (925)  
313-2187

By: , Deputy

cc:



## ATTACHMENTS

Rudgear Road  
Resolution

**THE BOARD OF SUPERVISORS OF CONTRA COSTA COUNTY, CALIFORNIA**

Adopted this Traffic Resolution on January 21, 2014 by the following vote:

AYES:

NOES:

ABSENT:

ABSTAIN:

**RESOLUTION NO. 2014/4401**  
**Supervisorial District IV**

**SUBJECT:** Establish speed limits on Rudgear Road (Road No. 4141 and 4144A), Walnut Creek area.

The Contra Costa County Board of Supervisors RESOLVES that:

On the basis of an engineering and traffic survey and recommendations thereon by the County Public Works Department's Transportation Division, and pursuant to County Ordinance Code Sections 46-2.002 - 46-2.012, the following traffic regulation is established (and other action taken as indicated):

Pursuant to Section 22358 and Section 627 of the California Vehicle Code, no vehicle shall travel in excess of 35 miles per hour on Rudgear Road (Road No. 4141), beginning at the Walnut Creek City Limit extending easterly to San Miguel Drive (Road No. 4041);

THENCE, no vehicle shall travel in excess of 25 miles per hour on that portion of Rudgear Road (Road No. 4144A), beginning at San Miguel Drive (Road No. 4041) and extending easterly to the Walnut Creek City Limit (Garren Court), Walnut Creek;

Traffic Resolution No. 1961/0200 pertaining to the speed limit on Rudgear Road, is hereby rescinded.

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

MS:kh

Orig. Dept.: Public Works (Traffic)  
Contact: Monish Sen (925-313-2187)

c: California Highway Patrol  
Sheriff's Department

ATTESTED: \_\_\_\_\_  
DAVID TWA, Clerk of the Board of Supervisors and  
County Administrator

By \_\_\_\_\_,  
Deputy

**TRAFFIC RESOLUTION NO. 2014/4401**



Contra  
Costa  
County

To: Board of Supervisors  
From: Julia R. Bueren, Public Works Director/Chief Engineer  
Date: January 21, 2014

Subject: Accepting completion of warranty period and release of cash deposit under the Subdivision Agreement for road acceptance RA05-01186

---

**RECOMMENDATION(S):**

ADOPT Resolution No. 2014/19 accepting completion of the warranty period and release of cash deposit under the Subdivision Agreement (Right-of-Way Landscaping) for road acceptance RA05-01186 (cross-reference subdivision SD99-08381), for a project developed by Shapell Homes, a division of Shapell Industries, Inc., a Delaware Corporation, as recommended by the Public Works Director, Danville area. (District II)

**FISCAL IMPACT:**

No fiscal impact to County Funds. The funds to be released are developer fees that have been held on deposit.

**BACKGROUND:**

The landscape improvements have met the guarantee performance standards for the warranty period following completion and acceptance of the improvements.

**CONSEQUENCE OF NEGATIVE ACTION:**

The developer will not receive a refund of the cash deposit the Subdivision Agreement (Right-of-Way Landscaping) and performance surety bond will not be exonerated, and the billing account will not be liquidated and closed.

**CHILDREN'S IMPACT STATEMENT:**

Not applicable.

---

☒ APPROVE

☐ OTHER

☒ RECOMMENDATION OF CNTY ADMINISTRATOR

☐ RECOMMENDATION OF BOARD  
COMMITTEE

---

Action of Board On: **01/21/2014** ☐ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

AYES \_\_\_\_\_ NOES \_\_\_\_\_

ABSENT \_\_\_\_\_ ABSTAIN \_\_\_\_\_

RECUSE \_\_\_\_\_

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: January 21, 2014

David J. Twa, County Administrator and Clerk of the Board of Supervisors

Contact: J. LaRocque,  
925-313-2315

By: , Deputy

## ATTACHMENTS

Resolution No.  
2014/19

Recorded at the request of: **BOARD OF SUPERVISORS**

Return To: **PUBLIC WORKS DEPARTMENT ENGINEERING SERVICES**

**THE BOARD OF SUPERVISORS OF CONTRA COSTA COUNTY, CALIFORNIA**

**and for Special Districts, Agencies and Authorities Governed by the Board**

Adopted this Resolution on 01/21/2014 by the following vote:

AYES: ☐

NOES: ☐

ABSENT: ☐

ABSTAIN: ☐

RECUSE: ☐

Resolution No. 2014/19

IN THE MATTER OF accepting completion of the warranty period and release of cash deposit under the Subdivision Agreement (Right-of-Way Landscaping) for road acceptance RA05-01186 (cross-reference subdivision SD99-08381), for a project developed by Shapell Homes, a division of Shapell Industries, Inc., a Delaware Corporation, as recommended by the Public Works Director, Danville area. (District II)

WHEREAS on December 11, 2012, this Board resolved that the landscape improvements for RA05-01186 were completed as provided in the Subdivision Agreement (Right-of-Way Landscaping) with Shapell Homes, a division of Shapell Industries, Inc., a Delaware Corporation, and now on the recommendation of the Public Works Director;

The Board hereby FINDS that the landscape improvements have satisfactorily met the guaranteed performance standards for the period following completion and acceptance.

NOW, THEREFORE, BE IT RESOLVED that the Public Works Director is AUTHORIZED to:

- REFUND the \$6,500.00 cash deposit (Auditor's Deposit Permit No. 515324, dated December 18, 2008) plus interest in accordance with Government Code Section 53079, if appropriate, to Shapell Homes, a division of Shapell Industries, Inc., a Delaware Corporation, pursuant to the Subdivision Agreement (Right-of-Way Landscaping) and Ordinance Code Section 94 4.406.

BE IT FURTHER RESOLVED that the warranty period has been completed and the Subdivision Agreement (Right-of-Way Landscaping) for road acceptance RA05-01186 and performance/maintenance surety bond issued by The Continental Insurance Company, Bond No. 929 467 100, dated June 16, 2010, are EXONERATED.

Contact: **J. LaRocque, 925-313-2315**

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: **January 21, 2014**

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

cc: Finance Division , Design/Construction, DCD



Contra  
Costa  
County

To: Board of Supervisors  
From: David Twa, County Administrator  
Date: January 21, 2014

Subject: CLAIMS

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**RECOMMENDATION(S):**

DENY claim filed by Julie  
Ginkens.

**FISCAL IMPACT:**

No fiscal impact.

**BACKGROUND:**

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☒ APPROVE

☐ OTHER

☒ RECOMMENDATION OF CNTY ADMINISTRATOR

☐ RECOMMENDATION OF BOARD  
COMMITTEE

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Action of Board On: **01/21/2014** ☐ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

AYES \_\_\_\_\_ NOES \_\_\_\_\_

ABSENT \_\_\_\_\_ ABSTAIN \_\_\_\_\_

RECUSE \_\_\_\_\_

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: January 21, 2014

David J. Twa, County Administrator and Clerk of the Board of Supervisors

Contact: Joellen Balbas  
925.335.1906

By: , Deputy

cc:



Contra  
Costa  
County

To: Board of Supervisors  
From: Mary N. Piepho, District III Supervisor  
Date: January 21, 2014

Subject: RESOLUTION FOR MIKE MCGOWAN

---

**RECOMMENDATION(S):**

ADOPT Resolution No. 2014/29 recognizing Yolo County Supervisor Mike McGowan upon his appointment as Deputy Director for the California Department of Motor Vehicles, as recommended by Supervisor Piepho and Supervisor Mitchoff.

**FISCAL IMPACT:**

There is no fiscal impact.

**BACKGROUND:**

Supervisor Mike McGowan was elected to the Inaugural City Council for the newly incorporated City of West Sacramento in 1987 and served as the city's first Mayor. In 1993, he began his tenure at the Yolo County Board of Supervisors representing the first district, which includes West Sacramento and the farming community of Clarksburg. Supervisor McGowan has served five terms as a Yolo County Supervisor and served four times as the Chair of the Board.

Supervisor McGowan is an advocate for the presentation of agricultural lands and led the promotion and enhancement of open space, and is actively involved in the issues concerning Flood Protection,

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☒ APPROVE

☐ OTHER

☒ RECOMMENDATION OF CNTY ADMINISTRATOR

☐ RECOMMENDATION OF BOARD  
COMMITTEE

---

Action of Board On: **01/21/2014** ☐ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

AYES \_\_\_\_\_ NOES \_\_\_\_\_

ABSENT \_\_\_\_\_ ABSTAIN \_\_\_\_\_

RECUSE \_\_\_\_\_

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: January 21, 2014

David J. Twa, County Administrator and Clerk of the Board of Supervisors

Contact: LEA CASTLEBERRY, 925  
252-4500

By: , Deputy

cc:

BACKGROUND: (CONT'D)

Water, and the Delta.

Supervisor McGowan was recently appointed by Governor Jerry Brown to serve as the Deputy Director of Strategic Planning and Policy at the California Department of Motor Vehicles. Therefore, Contra Costa County Board of Supervisors would like to recognize Supervisor Mike McGowan for his strong leadership and advocacy for the Delta.

ATTACHMENTS

Resolution No. 2014/29



**THE BOARD OF SUPERVISORS OF CONTRA COSTA COUNTY, CALIFORNIA**  
**and for Special Districts, Agencies and Authorities Governed by the Board**

Adopted this Resolution on 01/21/2014 by the following vote:

AYES: ☐  
NOES: ☐  
ABSENT: ☐  
ABSTAIN: ☐  
RECUSE: ☐



**Resolution No. 2014/29**

**In the Matter of Recognizing Yolo County Supervisor Mike McGowan Upon His Appointment as Deputy Director for the California Department of Motor Vehicles**

WHEREAS, Supervisor Mike McGowan is a life long resident of the City of West Sacramento.

WHEREAS, Supervisor McGowan attended local Sacramento schools through high school, California State University at Sacramento and McGeorge School of Law; and

WHEREAS, Supervisor McGowan served in the United States Marine Corp. in Vietnam as a Section Chief on a 105MM Howitzer Battery; and

WHEREAS, After his years of service and upon completion of law school, Supervisor McGowan opened a law office in West Sacramento; and

WHEREAS, In 1987 Supervisor McGowan was elected to the Inaugural City Council for the newly incorporated City of West Sacramento and served as the city's first Mayor; and

WHEREAS, In January 1993, Supervisor McGowan began his tenure at the Yolo County Board of Supervisors representing the first district, which includes West Sacramento and the farming community of Clarksburg; and

WHEREAS, Supervisor McGowan served five terms as a Yolo County Supervisor and served four times as the Chair of the Board; and

WHEREAS, Supervisor McGowan is an advocate for the presentation of agricultural lands, and led the promotion and enhancement of open space, and the provision of a myriad of services important to the well being of Yolo's diverse population; and

WHEREAS, Supervisor McGowan is actively involved in the issues concerning Flood Protection, Water, the Delta & represented Yolo County on the Port of West Sacramento where he served as Chair; and

WHEREAS, In November 2009, Supervisor McGowan was elected as 2<sup>nd</sup> Vice President for the California State Association of Counties; and

WHEREAS, Supervisor McGowan and his wife, Sue, are both life long residents of the City of West Sacramento and have a daughter, Becky, a granddaughter, Phoebe and a grandson, Franklin; and

WHEREAS, Supervisor McGowan served as a Commissioner on the Delta Protection Commission since its origination in 1993; and

WHEREAS, Supervisor McGowan was recently appointed by Governor Jerry Brown to serve as the Deputy Director of Strategic Planning and Policy at the California Department of Motor Vehicles; and

Now, Therefore, Be It Resolved, that the Contra Costa County Board of Supervisors hereby recognizes Supervisor Mike McGowan for his strong leadership and advocacy for the Delta.

**Contact: LEA CASTLEBERRY, 925  
252-4500**

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

**ATTESTED: January 21, 2014**

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

**cc:**



Contra  
Costa  
County

To: Board of Supervisors  
From: Karen Mitchoff, District IV Supervisor  
Date: January 21, 2014

Subject: Resolution Honoring Richard Cabral Upon His Retirement

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☒ APPROVE

☐ OTHER

☒ RECOMMENDATION OF CNTY ADMINISTRATOR

☐ RECOMMENDATION OF BOARD  
COMMITTEE

---

Action of Board On: **01/21/2014** ☐ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

#### **VOTE OF SUPERVISORS**

AYES \_\_\_\_\_ NOES \_\_\_\_\_

ABSENT \_\_\_\_\_ ABSTAIN \_\_\_\_\_

RECUSE \_\_\_\_\_

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: January 21, 2014

David J. Twa, County Administrator and Clerk of the Board of Supervisors

Contact: Enid Mendoza, (925)  
335-1039

By: , Deputy

## ATTACHMENTS

Resolution No.  
2014/20

*The Board of Supervisors of  
Contra Costa County, California*

In the matter of:

**Resolution No. 2014/20**

**Honoring and thanking Richard Cabral upon his retirement for over 39 years of service to the County and 36 years serving on the Board of Retirement**

WHEREAS, Richard Cabral began his public service with Contra Costa County as a temporary employee on July 9, 1968 in the Public Works Department; was hired permanently on September 10, 1974 as an Eligibility Worker I in the Social Service Department, now the Employment and Human Services Department (EHSD); was promoted to Eligibility Worker II, Eligibility Work Specialist, and Eligibility Worker Supervisor I; and during these 39 years of service worked in various divisions including the Workforce Development Board, Aging and Adult Services, Workforce Services, Child Welfare, and is ending his career in the MediCal program; and

WHEREAS, Mr. Cabral has actively mentored new supervisors in navigating their new roles; and

WHEREAS, Mr. Cabral's deep devotion and dedicated spirit in bettering the lives of the people of Contra Costa County will be greatly missed in EHSD; and

WHEREAS, Mr. Cabral has served as the General Member representative on the Contra Costa County Employees' Retirement Board since 1978, making him one of the longest serving Board members for any '37 Act Retirement System, joining the Board of Retirement when total Contra Costa County Employees' Retirement Association (CCCERA) assets were just under \$200 million with 7,969 active and retired participants and those assets have grown to over \$6.4 Billion as of this date with a total of \$19,445 active and retired participants; and

WHEREAS, Mr. Cabral, has served the Board of Retirement in every position including Committee Chair, Board Secretary, Vice Chair, and Chair; worked with the Board to develop a multitude of policies; and oversaw the implementation of various tier structures, actuarial methodology revisions and the continued diversification of investments; and

WHEREAS, Mr. Cabral has acted tirelessly and solely in the interest of, and for the exclusive purposes of providing benefits to, participants and their beneficiaries, minimizing employer contributions thereto, and defraying reasonable expenses of administering the system; and

WHEREAS, Mr. Cabral was a strong supporter of Board education, including Board involvement with onsite visits to investment managers; and from a basic portfolio of stocks and bonds in 1978, CCCERA has expanded into a highly diversified portfolio through 39 investment firms and 59 different strategies; and

WHEREAS, during Mr. Cabral's Board tenure with CCCERA, he became one of the founding members for the Council of Institutional Investors and National Institute on Retirement Security, served as Treasurer from 1994-1995 on the Director of the Council of Institutional Investors and was the former trustee of the 1st Choice Health Plan, serving as the Chairperson of the Investment Committee from 1992-1994; and

WHEREAS, Mr. Cabral has also been involved in various labor activities including serving as President of AFSCME Local 512 from 1991 to the present and the SEIU Local 535 Contra Costa Chapter from 1977-1979;

NOW, THEREFORE, BE IT RESOLVED that the Contra Costa County Board of Supervisors honors Richard Cabral upon his retirement from the County of Contra Costa, and for his commitment to improving the lives of Contra Costa County residents and retirees.

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**KAREN MITCHOFF**

Chair,  
District IV Supervisor

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**JOHN GIOIA**

District I Supervisor

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**CANDACE ANDERSEN**

District II Supervisor

---

**MARY N. PIEPHO**

District III Supervisor

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**FEDERAL D. GLOVER**

District V Supervisor

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: January 21, 2014

David J. Twa,

By: \_\_\_\_\_, Deputy



Contra  
Costa  
County

To: Board of Supervisors  
From: Candace Andersen, District II Supervisor  
Date: January 21, 2014

Subject: Resolution Honoring Chinese American Cooperation Council

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☒ APPROVE

☐ OTHER

☒ RECOMMENDATION OF CNTY ADMINISTRATOR

☐ RECOMMENDATION OF BOARD  
COMMITTEE

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Action of Board On: **01/21/2014** ☐ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

AYES \_\_\_\_\_ NOES \_\_\_\_\_

ABSENT \_\_\_\_\_ ABSTAIN \_\_\_\_\_

RECUSE \_\_\_\_\_

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: January 21, 2014

David J. Twa, County Administrator and Clerk of the Board of Supervisors

Contact: Lauri Byers, (925)  
957-8860

By: , Deputy

cc:

## ATTACHMENTS

Resolution No.  
2014/21



*The Board of Supervisors of  
Contra Costa County, California*

**In the matter of:**

**Resolution No. 2014/21**

**Honoring the Chinese American Cooperation Council at their 11th Annual CCAC Tri-Valley Chinese Culture Day**

since the founding of the Chinese American Cooperation Council in 2003, the organization has continuously thrived to become exciting and influential to the community and to serving all of its citizens; and

WHEREAS, the dedicated volunteers of the Chinese American Cooperation Council (CACC) have worked diligently to make all of the achievements possible today; and

WHEREAS, the CACC promotes cultural heritage and enhances friendship in the Chinese American community and facilitate the cultural and business exchanges between the United States and China; and

WHEREAS, the 11th annual Chinese American Culture Day Celebration to celebrate the beginning of the Chinese Lunar Year of the Horse is a very meaningful tradition and the largest Chinese community event in the Tri-Valley area.

**Now, Therefore, Be It Resolved** that the Board of Supervisors of Contra Costa County does hereby honor and congratulate the Chinese American Cooperation Council for their dedication in the past and in the future.

\_\_\_\_\_  
**KAREN MITCHOFF**

Chair,  
District IV Supervisor

\_\_\_\_\_  
**JOHN GIOIA**  
District I Supervisor

\_\_\_\_\_  
**CANDACE ANDERSEN**  
District II Supervisor

\_\_\_\_\_  
**MARY N. PIEPHO**  
District III Supervisor

\_\_\_\_\_  
**FEDERAL D. GLOVER**  
District V Supervisor

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: January 21, 2014

David J. Twa,

By: \_\_\_\_\_, Deputy



Contra  
Costa  
County

To: Board of Supervisors  
From: Candace Andersen, District II Supervisor  
Date: January 21, 2014

Subject: Resolution honoring Resident Brian Aiello as the 2014 Business person of the year

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☒ APPROVE

☐ OTHER

☒ RECOMMENDATION OF CNTY ADMINISTRATOR

☐ RECOMMENDATION OF BOARD  
COMMITTEE

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Action of Board On: **01/21/2014** ☐ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

AYES \_\_\_\_\_ NOES \_\_\_\_\_

ABSENT \_\_\_\_\_ ABSTAIN \_\_\_\_\_

RECUSE \_\_\_\_\_

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: January 21, 2014

David J. Twa, County Administrator and Clerk of the Board of Supervisors

Contact: Lauri Byers, (925)  
957-8860

By: , Deputy

cc:

## ATTACHMENTS

Resolution No.

2014/23

*The Board of Supervisors of  
Contra Costa County, California*

In the matter of:

**Resolution No. 2014/23**

**Honoring Brian Aiello as the Lafayette 2014 Business Person of the Year**

Brian Aiello is a lifelong Lafayette resident where he and his wife run their business and raise their family;  
and

**Whereas**, Brian is a dedicated family man and coach and equally dedicated to his community volunteering his time serving on many boards and commissions; and

**Whereas**, Brian works diligently on the Lafayette Art & Wine Festival serving as the Chair for the past 2 years, he serves as the artist for the Reservoir Run and offers his time and effort to several other community activities.

that the Board of Supervisors of Contra Costa County does hereby honor and thank **Brian Aiello** *for his dedicated service to Lafayette and it's citizens.*

\_\_\_\_\_  
**KAREN MITCHOFF**

Chair,  
District IV Supervisor

\_\_\_\_\_  
**JOHN GIOIA**  
District I Supervisor

\_\_\_\_\_  
**CANDACE ANDERSEN**  
District II Supervisor

\_\_\_\_\_  
**MARY N. PIEPHO**  
District III Supervisor

\_\_\_\_\_  
**FEDERAL D. GLOVER**  
District V Supervisor

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: January 21, 2014

David J. Twa,

By: \_\_\_\_\_, Deputy



Contra  
Costa  
County

To: Board of Supervisors  
From: Candace Andersen, District II Supervisor  
Date: January 21, 2014

Subject: Resolution honoring the 100th Anniversary of the United States Power Squadrons

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☒ APPROVE

☐ OTHER

☒ RECOMMENDATION OF CNTY ADMINISTRATOR

☐ RECOMMENDATION OF BOARD  
COMMITTEE

---

Action of Board On: **01/21/2014** ☐ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

AYES \_\_\_\_\_ NOES \_\_\_\_\_

ABSENT \_\_\_\_\_ ABSTAIN \_\_\_\_\_

RECUSE \_\_\_\_\_

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: January 21, 2014

David J. Twa, County Administrator and Clerk of the Board of Supervisors

Contact: Lauri Byers, (925)  
957-8860

By: , Deputy

cc:

## ATTACHMENTS

Resolution No.

2014/24

*The Board of Supervisors of  
Contra Costa County, California*

In the matter of:

**Resolution No. 2014/24**

**honoring the United States Power Squadrons on their 100th Anniversary.**

**Whereas**, the United States Power Squadrons was founded in 1914 at the encouragement of Franklin Delano Roosevelt, then Assistant Secretary of the Navy, as a national organization to promote boating safety; and

**Whereas**, the United States Power Squadrons is the largest volunteer boating organization in virtually every state, the United States territories and Japan; and

**Whereas**, the United States Power Squadrons serves towns, cities and counties throughout the organization to promote boating safety interests and the boating activities in the communities served; and

**Whereas**, the United States Power Squadrons throughout its life has worked closely with the Department of the Navy, the United States Coast Guard, the Department of Commerce, and the National Oceanographic and Atmospheric Administration (NOAA) in the education and safety of boaters; and

**Whereas**, the United States Power Squadrons is a major provider of boating safety instruction, of the United States Coast Guard Vessel Safety Inspections, of navigation data on nautical charts for NOAA, of dispensing information regarding the boaters' role in homeland security; and

**Whereas**, the United States Power Squadrons broadcasts its motto: "Boating is fun... We'll show you how!"

**Now, therefore be it resolved** that the Board of Supervisors of Contra Costa County does hereby offer its congratulations and best wishes for the continued success of the **United States Power Squadrons**

\_\_\_\_\_  
**KAREN MITCHOFF**

Chair,  
District IV Supervisor

\_\_\_\_\_  
**JOHN GIOIA**  
District I Supervisor

\_\_\_\_\_  
**CANDACE ANDERSEN**  
District II Supervisor

\_\_\_\_\_  
**MARY N. PIEPHO**  
District III Supervisor

\_\_\_\_\_  
**FEDERAL D. GLOVER**  
District V Supervisor

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: January 21, 2014

David J. Twa,

By: \_\_\_\_\_, Deputy



Contra  
Costa  
County

To: Board of Supervisors  
From: William Walker, M.D., Health Services Director  
Date: January 21, 2014

Subject: Declare Vacancy on the Hazardous Materials Commission

---

**RECOMMENDATION(S):**

DECLARE vacant Hazardous Materials Commission Business Seat #1 held by Jimmy Rodgers due to him passing away, and DIRECT the Clerk of the Board to post the vacancy.

**FISCAL IMPACT:**

None.

**BACKGROUND:**

The Hazardous Materials Commission was established in 1986 to advise the Board, County staff and the mayor's council members, and staffs of the cities within the County, on issues related to the development, approval and administration of the County Hazardous Waste Management Plan. Specifically, the Board charged the Commission with drafting a hazardous materials storage and transportation plan and ordinance, coordinating the implementation of the hazardous materials release response plan and inventory program, and to analyze and develop recommendations regarding hazardous materials issues with consideration to broad public input, and report back to the Board on Board referrals.

The bylaws of the Commission provide that one business seat representative be

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☒ APPROVE

☐ OTHER

☒ RECOMMENDATION OF CNTY ADMINISTRATOR

☐ RECOMMENDATION OF BOARD  
COMMITTEE

---

Action of Board On: **01/21/2014** ☐ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

AYES \_\_\_\_\_ NOES \_\_\_\_\_

ABSENT \_\_\_\_\_ ABSTAIN \_\_\_\_\_

RECUSE \_\_\_\_\_

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: January 21, 2014

David J. Twa, County Administrator and Clerk of the Board of Supervisors

Contact: Randy Sawyer 925  
335-3210

By: , Deputy



**BACKGROUND: (CONT'D)**

nominated by the West County Council of Industries, screened by the Internal Operations Committee and appointed by the Board of Supervisors.



Contra  
Costa  
County

To: Board of Supervisors  
From: Mary N. Piepho, District III Supervisor  
Date: January 21, 2014

Subject: REAPPOINTMENT TO THE BYRON-BRENTWOOD-KNIGHTSEN UNION CEMETERY DISTRICT

---

**RECOMMENDATION(S):**

REAPPOINT and APPOINT the following individuals to the Byron-Brentwood-Knightsen Union Cemetery District to terms expiring December 31, 2017, as recommended by Supervisor Mary Piepho:

Reappoint to the Trustee 2 seat

Barbara Guise  
189 Sherwood Drive  
Brentwood, CA 94513

Appoint to the Trustee 3 seat

Patricia Bristow  
2866 Camino Diablo Road  
Byron, CA 94514

**FISCAL IMPACT:**

None.

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☒ APPROVE

☐ OTHER

☒ RECOMMENDATION OF CNTY ADMINISTRATOR

☐ RECOMMENDATION OF BOARD  
COMMITTEE

---

Action of Board On: **01/21/2014** ☐ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

AYES \_\_\_\_\_ NOES \_\_\_\_\_

ABSENT \_\_\_\_\_ ABSTAIN \_\_\_\_\_

RECUSE \_\_\_\_\_

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: January 21, 2014

David J. Twa, County Administrator and Clerk of the Board of Supervisors

Contact: LEA CASTLEBERRY, 925  
252-4500

By: , Deputy

cc:

**BACKGROUND:**

The Trustee 2 and 3 seats expired December 31, 2013 on the Byron-Brentwood-Knightsen Union Cemetery District. The seats were advertised by the district office and applications were accepted. The decision to appoint Ms. Bristow and reappoint Ms. Guise was then determined.

There are no additional seats on the Union Cemetery District to fill at this time. The next trustee seat expires December 31, 2014.

**CONSEQUENCE OF NEGATIVE ACTION:**

The seats will remain vacant.

**CHILDREN'S IMPACT STATEMENT:**

Not applicable.



Contra  
Costa  
County

To: Board of Supervisors  
From: Mary N. Piepho, District III Supervisor  
Date: January 21, 2014

Subject: APPOINTMENT TO COUNTY SERVICE AREA P-2A

---

**RECOMMENDATION(S):**

REAPPOINT the following individuals to the County Service Area, P-2A Citizen Advisory Committee to terms expiring December 31, 2015, as recommended by Supervisor Piepho:

Appointee 3 Seat  
Alton Moody  
9 Canyon Oak Place  
Danville, CA 94506

Appointee 5 Seat  
Trudy Negherbon  
336 Pheasant Run Drive  
Danville, CA 94506

Appointee 6 Seat  
William Lipsin  
3280 Blackhawk Meadow Drive  
Danville, CA 94506

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☒ APPROVE

☐ OTHER

☒ RECOMMENDATION OF CNTY ADMINISTRATOR

☐ RECOMMENDATION OF BOARD  
COMMITTEE

---

Action of Board On: **01/21/2014** ☐ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

AYES \_\_\_\_\_ NOES \_\_\_\_\_

ABSENT \_\_\_\_\_ ABSTAIN \_\_\_\_\_

RECUSE \_\_\_\_\_

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: January 21, 2014

David J. Twa, County Administrator and Clerk of the Board of Supervisors

Contact: LEA CASTLEBERRY, 925  
252-4500

By: , Deputy

cc:

FISCAL IMPACT:

None.

BACKGROUND:

Established on July 24, 1984 by Board Resolution 84/440, the purpose of the County Service Area P-2A Citizens Advisory Committee is to advise the Board of Supervisors and the Sheriff's Department on the needs of the Blackhawk community for extended police services which includes, but is not limited to, enforcement of the State Vehicle Code, crime prevention, letter control, etc.

The committee consists of seven member, appointed by the Board of Supervisors, who serve for a two year term.

The terms for appointees 3, 5 and 6 expired December 31, 2013. Applications were accepted and the recommendation to reappoint Mr. Moody, Ms. Negherbon and Mr. Lipsin was then determined.

There are no additional seats on the County Service Area, P-2A Citizens Advisory Committee to fill at this time.

CONSEQUENCE OF NEGATIVE ACTION:

The seats will not be filled.

CHILDREN'S IMPACT STATEMENT:

Not applicable.



Contra  
Costa  
County

To: Board of Supervisors  
From: Karen Mitchoff, District IV Supervisor  
Date: January 21, 2014

Subject: CORRECTION TO SEAT TERM FOR BOARD APPOINTEE TO CONTRA COSTA TRANSPORTATION  
AUTHORITY BOARD OF DIRECTORS SEAT 2

---

**RECOMMENDATION(S):**

1. ADOPT Resolution No. 2014/25 correcting the terms of office for Seat 2 and Seat 2 Alternate on the Contra Costa Transportation Authority Board of Directors to February 1, 2014 through January 31, 2016 and restating the appointment of Board members and other individuals to serve on Board committees, special county committees, and regional boards/ committees/ commissions for 2014, some of which include additional compensation in the form of stipend.

2. INDICATE that the attached Resolution No. 2014/25 supersedes in its entirety Resolution No. 2014/1, which was adopted by the Board of Supervisors on January 7, 2014.

**FISCAL IMPACT:**

No fiscal impact to the County from this action.

**BACKGROUND:**

The Contra Costa Transportation Authority alerted us that the terms of office adopted by the Board of Supervisors on January 7, 2014 for the Seat 2 and Seat 2 Alternate on the Authority Board of Directors were incorrect. Today's action is necessary to correct the seat terms to accord with the Authority's bylaws.

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☒ APPROVE

☐ OTHER

☒ RECOMMENDATION OF CNTY ADMINISTRATOR

☐ RECOMMENDATION OF BOARD  
COMMITTEE

---

Action of Board On: **01/21/2014** ☒ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

AYES \_\_\_\_\_ NOES \_\_\_\_\_

ABSENT \_\_\_\_\_ ABSTAIN \_\_\_\_\_

RECUSE \_\_\_\_\_

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: January 21, 2014

David J. Twa, County Administrator and Clerk of the Board of Supervisors

Contact: Julie DiMaggio Enea  
925.335.1077

By: , Deputy

cc: CAO

## ATTACHMENTS

Resolution No. 2014/25

Attachments to Resolution No. 2014/25 Board Committee  
Appointments

**THE BOARD OF SUPERVISORS OF CONTRA COSTA COUNTY, CALIFORNIA**  
**and for Special Districts, Agencies and Authorities Governed by the Board**

Adopted this Resolution on 01/21/2014 by the following vote:

AYES: ☐

NOES: ☐

ABSENT: ☐

ABSTAIN: ☐

RECUSE: ☐



**Resolution No. 2014/25**

**IN THE MATTER OF CORRECTING THE TERM OF OFFICE FOR SEAT 2 AND SEAT 2  
ALTERNATE ON THE CONTRA COSTA TRANSPORTATION AUTHORITY BOARD OF  
DIRECTORS**

THE BOARD OF SUPERVISORS RESOLVES TO:

1. CORRECT the terms of office for Seat 2 and the Seat 2 Alternate on the Contra Costa Transportation Authority Board of Directors the term February 1, 2014 through January 31, 2016.
2. APPOINT the Board members and other individuals to serve on Board committees, special county committees and regional boards / committees / commissions as specified in the Master List (see attached) as Type I for Board Standing Committees, Type II for Internal Appointments, Type III for Regional Appointments, and Type IV for Special/Restricted Appointments.
3. INDICATE that this Resolution No. 2014/25 supersedes in its entirety Resolution No. 2014/1, which was adopted by the Board of Supervisors on January 7, 2014.
4. ACKNOWLEDGE that this correction does not require modifications to Form 806, which is used to report additional compensation that officials receive when appointing themselves to positions on committees, boards, or commissions of a public agency, special district, or joint powers agency or authority.



I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

**Contact: Julie DiMaggio Enea 925.335.1077**

**ATTESTED: January 21, 2014**

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

**cc:** CAO

**BOARD OF SUPERVISORS COMMITTEE ASSIGNMENTS FOR 2014  
RESOLUTION NO. 2014/25**

January 21, 2014

<b>Type*</b>	<b>Committee Name</b>	<b>New Appointee</b>	<b>Term Expiration</b>	<b>Stipend Information</b>
I	Airport Committee, Chair	Mary N. Piepho	12/31/2014	NO STIPEND
I	Airport Committee, Vice Chair	Karen Mitchoff	12/31/2014	NO STIPEND
I	Family & Human Services Committee, Chair	Federal D. Glover	12/31/2014	NO STIPEND
I	Family & Human Services Committee, Vice Chair	Candace Andersen	12/31/2014	NO STIPEND
I	Finance Committee, Chair	Mary N. Piepho	12/31/2014	NO STIPEND
I	Finance Committee, Vice Chair	Federal D. Glover	12/31/2014	NO STIPEND
I	Hiring Outreach & Oversight Committee	Karen Mitchoff	12/31/2014	NO STIPEND
I	Hiring Outreach & Oversight Committee	Federal D. Glover	12/31/2014	NO STIPEND
I	Internal Operations Committee, Chair	Karen Mitchoff	12/31/2014	NO STIPEND
I	Internal Operations Committee, Vice Chair	Candace Andersen	12/31/2014	NO STIPEND
I	Legislation Committee, Chair	Mary N. Piepho	12/31/2014	NO STIPEND
I	Legislation Committee, Vice Chair	Karen Mitchoff	12/31/2014	NO STIPEND
I	Public Protection, Chair	Federal D. Glover	12/31/2014	NO STIPEND
I	Public Protection, Vice Chair	John Gioia	12/31/2014	NO STIPEND
I	Transportation, Water & Infrastructure Committee, Chair	Mary N. Piepho	12/31/2014	NO STIPEND
I	Transportation, Water & Infrastructure Committee, Vice Chair	Candace Andersen	12/31/2014	NO STIPEND

**BOARD OF SUPERVISORS COMMITTEE ASSIGNMENTS FOR 2014  
RESOLUTION NO. 2014/25**

January 21, 2014

<b>Type*</b>	<b>Committee Name</b>	<b>New Appointee</b>	<b>Term Expiration</b>	<b>Stipend Information</b>
II	Bay Area Counties Caucus	John Gioia	12/31/2014	NO STIPEND
II	Bay Area Counties Caucus, Alternate	Karen Mitchoff	12/31/2014	NO STIPEND
II	Bay Area Regional Interoperable Communications System (BayRICS) Authority	Candace Andersen	12/31/2014	NO STIPEND
II	BayRICS Authority, Alternate	Karen Mitchoff	12/31/2014	NO STIPEND
II	California Identification System Remote Access Network Board (Cal-ID RAN Board)	Mary N. Piepho	12/31/2014	NO STIPEND
II	City-County Relations Committee	Federal D. Glover	12/31/2014	NO STIPEND
II	City-County Relations Committee	Mary N. Piepho	12/31/2014	NO STIPEND
II	City-County Relations Committee, Alternate	Karen Mitchoff	12/31/2014	NO STIPEND
II	Contra Costa Health Plan Joint Conference Committee	Federal D. Glover	12/31/2014	NO STIPEND
II	Contra Costa Health Plan Joint Conference Committee	Mary N. Piepho	12/31/2014	NO STIPEND
II	Dougherty Valley Oversight Committee	Mary N. Piepho	12/31/2014	NO STIPEND
II	Dougherty Valley Oversight Committee	Candace Andersen	12/31/2014	NO STIPEND
II	East Bay Regional Communication System (EBRCS) Authority Governing Board	Candace Andersen	12/31/2014	NO STIPEND
II	East Contra Costa County Habitat Conservancy, Governing Board	Mary N. Piepho	12/31/2014	NO STIPEND
II	East Contra Costa County Habitat Conservancy, Governing Board, Alternate	Federal D. Glover	12/31/2014	NO STIPEND
II	East Contra Costa Regional Fee & Finance Authority	Mary N. Piepho	12/31/2014	NO STIPEND
II	East Contra Costa Regional Fee & Finance Authority, Alternate	Federal D. Glover	12/31/2014	NO STIPEND
II	eBART (Bay Area Rapid Transit) Partnership Policy Advisory Committee	Federal D. Glover	12/31/2014	NO STIPEND
II	eBART (Bay Area Rapid Transit) Partnership Policy Advisory Committee	Mary N. Piepho	12/31/2014	NO STIPEND
II	EBRCS Authority Governing Board, Alternate	Karen Mitchoff	12/31/2014	NO STIPEND
II	First 5 Children and Families Commission Alternate Member	Karen Mitchoff	12/31/2014	NO STIPEND
II	Library Needs Assessment Steering Committee	Karen Mitchoff	12/31/2014	NO STIPEND
II	Medical Services Joint Conference Committee, Chair	Candace Andersen	12/31/2014	NO STIPEND
II	Medical Services Joint Conference Committee, Vice Chair	Karen Mitchoff	12/31/2014	NO STIPEND
II	North Richmond Waste and Recovery Mitigation Fee Committee	John Gioia	12/31/2014	NO STIPEND
II	Open Space/Parks & East Bay Regional Parks District Liaison Committee, Chair	Federal D. Glover	12/31/2014	NO STIPEND
II	Open Space/Parks & East Bay Regional Parks District Liaison Committee, Vice Chair	Mary N. Piepho	12/31/2014	NO STIPEND
II	Pleasant Hill BART/Contra Costa Centre Joint Powers Authority Board of Trustees	Karen Mitchoff	12/31/2014	NO STIPEND
II	Pleasant Hill BART/Contra Costa Centre Joint Powers Authority Board of Trustees	Candace Andersen	12/31/2014	NO STIPEND
II	State Route 4 Bypass Authority	Mary N. Piepho	12/31/2014	NO STIPEND
II	State Route 4 Bypass Authority, Alternate	Federal D. Glover	12/31/2014	NO STIPEND
II	SWAT (Southwest Area Transportation Committee)	Candace Andersen	12/31/2014	NO STIPEND

**BOARD OF SUPERVISORS COMMITTEE ASSIGNMENTS FOR 2014  
RESOLUTION NO. 2014/25**

January 21, 2014

<b>Type*</b>	<b>Committee Name</b>	<b>New Appointee</b>	<b>Term Expiration</b>	<b>Stipend Information</b>
II	SWAT, Alternate	Karen Mitchoff	12/31/2014	NO STIPEND
II	TRAFFIX (Measure J Traffic Congestion Relief Agency)	Candace Andersen	12/31/2014	NO STIPEND
II	TRAFFIX (Measure J Traffic Congestion Relief Agency), Alternate	Karen Mitchoff	12/31/2014	NO STIPEND
II	TRANSPAC (Central County Transportation Partnership and Cooperation)	Karen Mitchoff	12/31/2014	NO STIPEND
II	TRANSPAC, Alternate	Candace Andersen	12/31/2014	NO STIPEND
II	TRANSPLAN (East County Transportation Planning)	Mary N. Piepho	12/31/2014	NO STIPEND
II	TRANSPLAN, Alternate	Federal D. Glover	12/31/2014	NO STIPEND
II	Tri-Valley Transportation Council	Candace Andersen	12/31/2014	NO STIPEND
II	Urban Counties Caucus	Federal D. Glover	12/31/2014	NO STIPEND
II	Urban Counties Caucus, Alternate	Karen Mitchoff	12/31/2014	NO STIPEND
II	WCCTAC (West County Transportation Advisory Committee)	Federal D. Glover	12/31/2014	NO STIPEND
II	WCCTAC, Alternate	John Gioia	12/31/2014	NO STIPEND
II	Central Contra Costa Solid Waste Authority	Candace Andersen	12/31/2014	STIPEND of \$50/meeting; max of 2 paid/month
II	Central Contra Costa Solid Waste Authority	Karen Mitchoff	12/31/2014	STIPEND of \$50/meeting; max of 2 paid/month
II	East County Water Management Association	Federal D. Glover	12/31/2014	STIPEND of \$170/meeting; max 6 per month
II	East County Water Management Association, Alternate	Mary N. Piepho	12/31/2014	STIPEND of \$170/meeting; max 6 per month
II	Hazardous Waste Management Facility Allocation Committee	Karen Mitchoff	12/31/2014	STIPEND of \$150 per meeting.
II	Hazardous Waste Management Facility Allocation Committee, Alternate	Candace Andersen	12/31/2014	STIPEND of \$150 per meeting.
II	West Contra Costa Integrated Waste Management Authority	Federal D. Glover	12/31/2014	STIPEND of \$50 per meeting.
II	West Contra Costa Integrated Waste Management Authority, Alternate	John Gioia	12/31/2014	STIPEND of \$50 per meeting.

**BOARD OF SUPERVISORS COMMITTEE ASSIGNMENTS FOR 2014  
RESOLUTION NO. 2014/25**

January 21, 2014

<b>Type*</b>	<b>Committee Name</b>	<b>New Appointee</b>	<b>Term Expiration</b>	<b>Stipend Information</b>
III	Regional Airport Planning Committee	Karen Mitchoff	12/31/2014	<i>inactive</i>
III	San Joaquin Valley Rail Committee	Mary N. Piepho	12/31/2014	<b>NO STIPEND</b>
III	San Joaquin Valley Rail Committee	Federal D. Glover	12/31/2014	<b>NO STIPEND</b>
III	Water Emergency Transportation Authority (WETA), Community Advisory Committee	Federal D. Glover	12/31/2014	<b>NO STIPEND</b>
III	WETA, Community Advisory Committee, Alternate	John Gioia	12/31/2014	<b>NO STIPEND</b>
III	ABAG Regional Planning Committee	Karen Mitchoff	12/31/2014	<b>STIPEND of \$150 per meeting.</b>
III	Bay Area Air Quality Management District Board of Directors	Mary N. Piepho	1/8/2016	<b>Per diem of \$100/meeting + travel exp; max \$6,000</b>
III	Bay Area Air Quality Management District Board of Directors	John Gioia	6/17/2017	<b>Per diem of \$100/meeting + travel exp; max \$6,000</b>
III	CCCTA Board of Directors, Alternate	Karen Mitchoff	5/1/2015	<b>STIPEND of \$100 per meeting; up to \$200 month</b>
III	Central Contra Costa Transit Authority (CCCTA) Board of Directors	Candace Andersen	5/1/2015	<b>STIPEND of \$100 per meeting; up to \$200 month</b>
III	Contra Costa Transportation Authority (seat 1)	Federal D. Glover	1/31/2015	<b>STIPEND of \$100 per meeting; up to \$400 month</b>
III	Contra Costa Transportation Authority (Seat 2)	Karen Mitchoff	<b>1/31/2016</b>	<b>STIPEND of \$100 per meeting; up to \$400 month</b>
III	Contra Costa Transportation Authority, Alternate (Seat 1)	John Gioia	1/31/2015	<b>STIPEND of \$100 per meeting; up to \$400 month</b>
III	Contra Costa Transportation Authority, Alternate (Seat 2)	Candace Andersen	<b>1/31/2016</b>	<b>STIPEND of \$100 per meeting; up to \$400 month</b>
III	Contra Costa Transportation Authority, Second Alternate (Seat 1)	Candace Andersen	1/31/2015	<b>STIPEND of \$100 per meeting; up to \$400 month</b>
III	Contra Costa Transportation Authority, Third Alternate (Seat 1)	Mary N. Piepho	1/31/2015	<b>STIPEND of \$100 per meeting; up to \$400 month</b>
III	Local Agency Formation Commission	Federal D. Glover	5/6/2014	<b>STIPEND of \$150 per meeting.</b>
III	Local Agency Formation Commission	Mary N. Piepho	5/6/2014	<b>STIPEND of \$150 per meeting.</b>
III	Local Agency Formation Commission, Alternate	Candace Andersen	5/7/2016	<b>STIPEND of \$150 per meeting.</b>
III	Metropolitan Transportation Commission	Federal D. Glover	2/1/2015	<b>STIPEND of \$100/meeting; up to \$500/month per agency</b>
III	Tri Delta Transit Authority, Board of Directors (Seat 1)	Federal D. Glover	12/31/2014	<b>STIPEND of \$100/month</b>
III	Tri Delta Transit Authority, Board of Directors (Seat 2)	Mary N. Piepho	12/31/2015	<b>STIPEND of \$100/month</b>

**BOARD OF SUPERVISORS COMMITTEE ASSIGNMENTS FOR 2014  
RESOLUTION NO. 2014/25**

January 21, 2014

<b>Type*</b>	<b>Committee Name</b>	<b>New Appointee</b>	<b>Term Expiration</b>	<b>Stipend Information</b>
IV	ABAG (Association of Bay Area Counties) General Assembly	Federal D. Glover	12/31/2014	NO STIPEND
IV	ABAG General Assembly	Karen Mitchoff	12/31/2014	NO STIPEND
IV	ABAG General Assembly, Alternate	Candace Andersen	12/31/2014	NO STIPEND
IV	ABAG General Assembly, Alternate	John Gioia	12/31/2014	NO STIPEND
IV	Clayton Redevelopment Successor Agency Oversight Board	Karen Mitchoff	Unspecified	NO STIPEND
IV	Concord Redevelopment Successor Agency Oversight Board	Karen Mitchoff	Unspecified	NO STIPEND
IV	Contra Costa County Redevelopment Successor Agency Oversight Board	Federal D. Glover**	Unspecified	NO STIPEND
IV	Contra Costa County Redevelopment Successor Agency Oversight Board	Karen Mitchoff	Unspecified	NO STIPEND
IV	CSAC (California State Association of Counties) Board of Directors	Federal D. Glover	12/31/2014	NO STIPEND
IV	CSAC Board of Directors, Alternate	Karen Mitchoff	12/31/2014	NO STIPEND
IV	Delta Protection Commission	Mary N. Piepho	12/31/2014	NO STIPEND
IV	Delta Protection Commission, Alternate	Karen Mitchoff	12/31/2014	NO STIPEND
IV	Doctors Medical Center Management Authority Governing Board	John Gioia	Unspecified	NO STIPEND
IV	First 5 Children and Families Commission Member	Candace Andersen	12/31/2014	NO STIPEND
IV	Kensington Solid Waste Coordinating Committee	John Gioia*	Unspecified	NO STIPEND
IV	Law Library Board of Trustees	Mark Armstrong	12/31/2014	NO STIPEND
IV	Mental Health Commission	Karen Mitchoff	12/31/2014	NO STIPEND
IV	Mental Health Commission, Alternate	Mary N. Piepho	12/31/2014	NO STIPEND
IV	North Coast Shoreline Joint Powers Authority	Federal D. Glover	12/31/2014	NO STIPEND
IV	North Coast Shoreline Joint Powers Authority	John Gioia	12/31/2014	NO STIPEND
IV	Pittsburg Redevelopment Successor Agency Oversight Board	Federal D. Glover	Unspecified	NO STIPEND
IV	Pleasant Hill Redevelopment Successor Agency Oversight Board	Karen Mitchoff	Unspecified	NO STIPEND
IV	Sacramento-San Joaquin Delta Conservancy Board	Mary N. Piepho	Unspecified	NO STIPEND
IV	Sacramento-San Joaquin Delta Conservancy Board, Alternate	Karen Mitchoff	Unspecified	NO STIPEND
IV	San Pablo Redevelopment Successor Agency Oversight Board	John Gioia**	Unspecified	NO STIPEND
IV	Walnut Creek Redevelopment Successor Agency Oversight Board	Karen Mitchoff	Unspecified	NO STIPEND
IV	ABAG Executive Board (Seat 1)	Karen Mitchoff	6/30/2014	STIPEND of \$150 per meeting.
IV	ABAG Executive Board (Seat 2)	John Gioia	6/30/2014	STIPEND of \$150 per meeting.
IV	ABAG Executive Board, Alternate 1	Candace Andersen	6/30/2014	STIPEND of \$150 per meeting.
IV	ABAG Executive Board, Alternate 2	Mary N. Piepho	6/30/2014	STIPEND of \$150 per meeting.
IV	Bay Conservation & Development Commission	John Gioia	12/31/2014	STIPEND of \$100 per meeting; max of 4 meetings.
IV	Bay Conservation & Development Commission, Alternate	Federal D. Glover	12/31/2014	STIPEND of \$100 per meeting; max of 4 meetings.

\*Type I: Internal Standing Committees; Type II: Internal appointments; Type III: Regional appointments; Type IV: Special/Restricted appointments

**BOARD OF SUPERVISORS COMMITTEE ASSIGNMENTS FOR 2014  
RESOLUTION NO. 2014/25**

January 21, 2014

<b>Type*</b>	<b>Committee Name</b>	<b>New Appointee</b>	<b>Term Expiration</b>	<b>Stipend Information</b>
IV	CCCERA (Contra Costa County Employees Retirement Association) Board of Trustees	Karen Mitchoff	6/30/2014	STIPEND of \$100 per meeting.
IV	Delta Diablo Sanitation District Governing Board	Federal D. Glover	12/31/2014	STIPEND of \$170 per meeting; max of 6 meetings.
IV	Delta Diablo Sanitation District Governing Board, Alternate	Karen Mitchoff	12/31/2014	STIPEND of \$170 per meeting; max of 6 meetings.
		* Or his designee		
		* Or his designee		
		** Appointed by CCC Fire Protection District BOD		



Contra  
Costa  
County

To: Board of Supervisors  
From: Joseph E. Canciamilla, Clerk-Recorder  
Date: January 21, 2014

Subject: APPROPRIATIONS ADJUSTMENT FOR ELECTIONS FIXED ASSETS

---

**RECOMMENDATION(S):**

APPROVE Appropriations Adjustment No. 5040 authorizing an internal transfer in the amount of \$20,000 from Services/Supplies to Fixed Assets to cover the one-time cost to upgrade the ballot sorter/scanner used in county elections.

**FISCAL IMPACT:**

There will be no fiscal impact to the General Fund. Allocations are being moved from Services and Supplies to cover the cost of this unexpected expenditure that is above the budgeted amount for fixed asset expenses. The department has recognized sufficient savings in other services and supplies accounts to cover the cost.

**BACKGROUND:**

The operating system of the large Pitney Bowes high-volume scanner and sorter has become obsolete and failed during the last election. This equipment is used to sort incoming vote-by-mail ballots into precinct order as it scans the voters' signatures for signature authorization. The department was able to perform these functions manually during the recent small elections. Upgrades to the operating hardware and software are required to be able to use the equipment for the upcoming gubernatorial elections.

**CONSEQUENCE OF NEGATIVE ACTION:**

Failure to upgrade the equipment will require the Elections Division to hand sort and scan vote-by-mail ballots. This could delay final election results and perhaps prevent the division from completing the canvass within statutory deadlines.

---

☒ APPROVE

☐ OTHER

☒ RECOMMENDATION OF CNTY ADMINISTRATOR

☐ RECOMMENDATION OF BOARD  
COMMITTEE

---

Action of Board On: **01/21/2014** ☐ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

AYES \_\_\_\_\_ NOES \_\_\_\_\_

ABSENT \_\_\_\_\_ ABSTAIN \_\_\_\_\_

RECUSE \_\_\_\_\_

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: January 21, 2014

David J. Twa, County Administrator and Clerk of the Board of Supervisors

Contact: Debi Cooper 335-7899

By: , Deputy

cc:



CHILDREN'S IMPACT STATEMENT:

None.

ATTACHMENTS

APOO 5040\_Clerk-Recorder TC27 Ballot  
Sorter

CONTRA COSTA COUNTY  
APPROPRIATION ADJUSTMENT

T/C 27

AUDITOR-CONTROLLER USE ONLY

FINAL APPROVAL NEEDED BY:

☒ BOARD OF SUPERVISORS

☐ COUNTY ADMINISTRATOR

ACCOUNT CODING		BUDGET UNIT: <b>CLERK-RECORDER-ELECTIONS</b>			
ORGANIZATION	EXPENDITURE SUB-ACCOUNT	EXPENDITURE ACCOUNT DESCRIPTION	<DECREASE>		INCREASE
2353	4951	Capital Equipment			20,000 00
2353	2473	Specialized Printing	20,000	00	
			20,000	00	20,000 00

<p>APPROVED</p> <p>AUDITOR-CONTROLLER: BY: <u>Marie Pulkoski</u> DATE <u>1/14/13</u></p> <p>COUNTY ADMINISTRATOR: BY: <u>Julie Green</u> DATE <u>1/14/14</u></p> <p>BOARD OF SUPERVISORS:</p> <p>YES:</p> <p>NO:</p> <p>BY: _____ DATE _____</p>	<p>EXPLANATION OF REQUEST</p> <p>To cover the balance of the cost of upgrading the operating system hardware and software of the Pitney Bowes sorter/scanner.</p> <p><u>Debi Cooper</u> Deputy Clerk-Recorder 12/31/2013</p> <p>SIGNATURE TITLE DATE APPROPRIATION APOO <u>5040</u> ADJ. JOURNAL NO.</p>
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Contra  
Costa  
County

To: Board of Supervisors  
From: David O. Livingston, Sheriff-Coroner  
Date: January 21, 2014

Subject: Cancel One (1) Lieutenant Position and add One (1) Captain Position to the Field Operations Bureau – Town of Danville.

**RECOMMENDATION(S):**

ADOPT Personnel Adjustment Resolution No. 21404 to cancel one (1) Lieutenant (6XHA) (represented) vacant position #13554 at salary plan and grade V#X 2023 (\$7,381 - \$9,197), and add one (1) Captain (6XDA) (represented) position at salary plan and grade V#X 2189 (\$8,700 - \$10,840) to the Field Operations Bureau – Town of Danville.

**FISCAL IMPACT:**

\$31,015.00 annual increase in salary costs; of which \$13,956.00 is attributed to retirement costs. (100% funded by the town of Danville).

**BACKGROUND:**

The Office of the Sheriff has requested to cancel one Lieutenant (6XHA) position and add one Captain (6XDA) position. The Department and the City of Danville has determined that the proposed staffing adjustment would benefit the overall operation of the contracted City

☒ APPROVE

☐ OTHER

☒ RECOMMENDATION OF CNTY ADMINISTRATOR

☐ RECOMMENDATION OF BOARD  
COMMITTEE

Action of Board On: **01/21/2014** ☐ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

AYES \_\_\_\_\_ NOES \_\_\_\_\_

ABSENT \_\_\_\_\_ ABSTAIN \_\_\_\_\_

RECUSE \_\_\_\_\_

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: January 21, 2014

David J. Twa, County Administrator and Clerk of the Board of Supervisors

Contact: Lori Brown (925)  
335-1552

By: , Deputy

cc: MJ Robb, Barbara Vargen, Lori Brown, Tanya Williams, Roxana Mendoza

BACKGROUND: (CONT'D)

of Danville.

The City of Danville agrees to cover any additional cost incurred with the above staffing adjustments.

CONSEQUENCE OF NEGATIVE ACTION:

If this action is not approved, the City of Danville will not have the appropriate staffing levels to maintain a highly trained and committed law enforcement staff.

CHILDREN'S IMPACT STATEMENT:

No impact.

ATTACHMENTS

P300 No. 21404

# POSITION ADJUSTMENT REQUEST

NO. 21404  
DATE 12/11/2013

Department Office of the Sheriff

Department No./

Budget Unit No. 0277 Org No. 2529 Agency No. 25

Action Requested: Cancel one (1) Lieutenant (6XHA) position # 13544, and Add one (1) Captain (6XDA) position to the Field Operations Bureau - Town of Danville.

Proposed Effective Date: 2/1/2014

Classification Questionnaire attached: Yes ☐ No ☒ / Cost is within Department's budget: Yes ☒ No ☐

Total One-Time Costs (non-salary) associated with request: \$0.00

Estimated total cost adjustment (salary / benefits / one time):

Total annual cost \$31,015.00

Net County Cost \$0.00

Total this FY \$12,925.00

N.C.C. this FY \$0.00

SOURCE OF FUNDING TO OFFSET ADJUSTMENT 100% Town of Danville

Department must initiate necessary adjustment and submit to CAO.

Use additional sheet for further explanations or comments.

Mary Jane Robb

(for) Department Head

REVIEWED BY CAO AND RELEASED TO HUMAN RESOURCES DEPARTMENT

TME

12/30/2013

Deputy County Administrator

Date

HUMAN RESOURCES DEPARTMENT RECOMMENDATIONS

DATE 1/9/2014

Cancel one (1) Lieutenant (6XHA) (represented) vacant position #13554 at salary plan and grade V#X 2023 (\$7,381 - \$9,197), and add one (1) Captain (6XDA) (represented) position at salary plan and grade V#X 2189 (\$8,700 - \$10,840) to the Field Operations Bureau – Town of Danville.

Amend Resolution 71/17 establishing positions and resolutions allocating classes to the Basic / Exempt salary schedule.

Effective: ☒ Day following Board Action.

☐ \_\_\_\_\_(Date)

TJC

1/15/2014

(for) Director of Human Resources

Date

COUNTY ADMINISTRATOR RECOMMENDATION:

DATE

1/15/2014

☒ Approve Recommendation of Director of Human Resources

☐ Disapprove Recommendation of Director of Human Resources

☐ Other: \_\_\_\_\_

TME

(for) County Administrator

BOARD OF SUPERVISORS ACTION:

Adjustment is APPROVED ☐ DISAPPROVED ☐

David J. Twa, Clerk of the Board of Supervisors  
and County Administrator

DATE \_\_\_\_\_

BY \_\_\_\_\_

APPROVAL OF THIS ADJUSTMENT CONSTITUTES A PERSONNEL / SALARY RESOLUTION AMENDMENT

POSITION ADJUSTMENT ACTION TO BE COMPLETED BY HUMAN RESOURCES DEPARTMENT FOLLOWING BOARD ACTION

Adjust class(es) / position(s) as follows:

## REQUEST FOR PROJECT POSITIONS

Department \_\_\_\_\_

Date 1/15/2014

No. xxxxxx

1. Project Positions Requested:
2. Explain Specific Duties of Position(s)
3. Name / Purpose of Project and Funding Source (do not use acronyms i.e. SB40 Project or SDSS Funds)
4. Duration of the Project: Start Date \_\_\_\_\_ End Date \_\_\_\_\_  
Is funding for a specified period of time (i.e. 2 years) or on a year-to-year basis? Please explain.
5. Project Annual Cost
  - a. Salary & Benefits Costs: \_\_\_\_\_
  - b. Support Costs: \_\_\_\_\_  
(services, supplies, equipment, etc.)
  - c. Less revenue or expenditure: \_\_\_\_\_
  - d. Net cost to General or other fund: \_\_\_\_\_
6. Briefly explain the consequences of not filling the project position(s) in terms of:
  - a. potential future costs
  - b. legal implications
  - c. financial implications
  - d. political implications
  - e. organizational implications
7. Briefly describe the alternative approaches to delivering the services which you have considered. Indicate why these alternatives were not chosen.
8. Departments requesting new project positions must submit an updated cost benefit analysis of each project position at the halfway point of the project duration. This report is to be submitted to the Human Resources Department, which will forward the report to the Board of Supervisors. Indicate the date that your cost / benefit analysis will be submitted
9. How will the project position(s) be filled?
  - ☐ a. Competitive examination(s)
  - ☐ b. Existing employment list(s) Which one(s)? \_\_\_\_\_
  - ☐ c. Direct appointment of:
    - ☐ 1. Merit System employee who will be placed on leave from current job
    - ☐ 2. Non-County employee

Provide a justification if filling position(s) by C1 or C2

USE ADDITIONAL PAPER IF NECESSARY



Contra  
Costa  
County

To: Board of Supervisors  
From: Ted Cwiek, Human Resources Director  
Date: January 21, 2014

Subject: Suspension of Competition and Direct Appointment in Animal Services Dept.

---

**RECOMMENDATION(S):**

ACKNOWLEDGE receipt of report of suspension of competition and direct appointment in the Animal Services Department to facilitate the return to work of a County employee through the County Rehabilitation Program, as provided for in the Personnel Management Regulations, Section 502, as part of the County Disability Program, as recommended by the Assistant County Administrator, Director of Human Resources.

**FISCAL IMPACT:**

There are no additional costs associated with this direct appointment. Costs associated with filling this position is included in the Department's budget.

**BACKGROUND:**

Personnel Management Regulations, Section 502, Suspension of Competition, provides that the Director of Human Resources may suspend competition and authorize a direct appointment to merit system positions where use of competitive examination procedures are impractical. It also requires that a report of the suspension of competition be reported to the Board of Supervisors.

In accordance with the above

---

☒ APPROVE

☐ OTHER

☒ RECOMMENDATION OF CNTY ADMINISTRATOR

☐ RECOMMENDATION OF BOARD  
COMMITTEE

---

Action of Board On: **01/21/2014** ☐ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

AYES \_\_\_\_\_ NOES \_\_\_\_\_

ABSENT \_\_\_\_\_ ABSTAIN \_\_\_\_\_

RECUSE \_\_\_\_\_

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: January 21, 2014

David J. Twa, County Administrator and Clerk of the Board of Supervisors

Contact: Cheri Branson,  
925-335-1768

By: , Deputy

cc:

**BACKGROUND: (CONT'D)**

regulations, the Director of Human Resources is authorizing the following direct appointment in the Animal Services Department to facilitate the return to work of a County employee through the County Rehabilitation Program:

Animal Services Clerk (BJXB) - effective 12/11/13

**CONSEQUENCE OF NEGATIVE ACTION:**

Department would not benefit from the employee's return to work.

**CHILDREN'S IMPACT STATEMENT:**

Not Applicable.





Contra  
Costa  
County

To: Board of Supervisors  
From: William Walker, M.D., Health Services  
Date: January 21, 2014

Subject: Add and cancel position in the Health Services Department

---

**RECOMMENDATION(S):**

ADOPT Position Resolution No. 21411 adding one permanent full-time Public Health Epidemiologist/Biostatistician (V7VC) position at salary level ZB5 1743 (\$5,836 - \$7,094) and canceling vacant Health Services Planner/Evaluator - Level B (VCXD) position #9222 at salary level ZB2 1323 (\$3,967 - \$6,187) in the Health Services Department. (Represented)

**FISCAL IMPACT:**

Upon approval, this action has an annual cost of approximately \$15,995 with \$3,862 in pension costs. Sufficient funding is available within the current budget allocations.

**BACKGROUND:**

The Health Services Department is requesting to add one permanent full-time Public Health Epidemiologist/Biostatistician position in Public Health's Epidemiology, Planning and Evaluation (EPE) unit. The new position will develop, plan organize and manage epidemiological surveillance efforts for communicable disease control particularly related to HIV/AIDS, Tuberculosis, sexually transmitted diseases and Hepatitis in a variety of populations. Duties include managing

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☒ APPROVE

☐ OTHER

☒ RECOMMENDATION OF CNTY ADMINISTRATOR

☐ RECOMMENDATION OF BOARD  
COMMITTEE

---

Action of Board On: **01/21/2014** ☐ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

AYES \_\_\_\_\_ NOES \_\_\_\_\_

ABSENT \_\_\_\_\_ ABSTAIN \_\_\_\_\_

RECUSE \_\_\_\_\_

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: January 21, 2014

David J. Twa, County Administrator and Clerk of the Board of Supervisors

Contact: Jo-Anne Linares, (925)  
957-5246

By: , Deputy

cc:

BACKGROUND: (CONT'D)

the epidemiological research surveys that investigate the prevalence and incidence of diseases affecting residents as well as risk factors associated with the occurrence, developing project objectives and protocols, consulting on program evaluation strategies, coordinating data collection methods, monitoring the input of epidemiological and biostatistical data and coordinating the preparation of reports. To offset the cost, the department is canceling Health Services Planner Evaluator - Level B position #9222, which has been vacant since September 2010.

Upon approval, there is an annual cost of approximately \$15, 995 with \$3,862 pension costs, which is already included in the 2013-2014 fiscal budget.

CONSEQUENCE OF NEGATIVE ACTION:

If this action is not approved, the Department will not have adequate staff to meet the needs of the Epidemiology, Planning and Evaluation unit in Public Health.

CHILDREN'S IMPACT STATEMENT:

N/A

ATTACHMENTS

P-300 21411

# POSITION ADJUSTMENT REQUEST

NO. 21411  
DATE 1/6/2014

Department Health Services Department

Department No./

Budget Unit No. 0450 Org No. 5869 Agency No. A18

Action Requested: ADD one permanent full-time Public Health Epidemiologist/Biostatistician position and cancel vacant Health Services Planner Evaluator Level B position #9222 in the Health Services Department.

Proposed Effective Date: 1/22/2014

Classification Questionnaire attached: Yes ☐ No ☒ / Cost is within Department's budget: Yes ☒ No ☐

Total One-Time Costs (non-salary) associated with request: \_\_\_\_\_

Estimated total cost adjustment (salary / benefits / one time):

Total annual cost \$15,995.00

Net County Cost \$0.00

Total this FY \$6,664.00

N.C.C. this FY \$0.00

SOURCE OF FUNDING TO OFFSET ADJUSTMENT 2013-14 Budget

Department must initiate necessary adjustment and submit to CAO.  
Use additional sheet for further explanations or comments.

Jo-Anne Linares

\_\_\_\_\_  
(for) Department Head

REVIEWED BY CAO AND RELEASED TO HUMAN RESOURCES DEPARTMENT

Dorothy Sansoe

1/13/2014

\_\_\_\_\_  
Deputy County Administrator

\_\_\_\_\_  
Date

HUMAN RESOURCES DEPARTMENT RECOMMENDATIONS

DATE \_\_\_\_\_

Exempt from Human Resources review under delegated authority.

Amend Resolution 71/17 establishing positions and resolutions allocating classes to the Basic / Exempt salary schedule.

Effective: ☒ Day following Board Action.

☐ \_\_\_\_\_(Date)

\_\_\_\_\_  
(for) Director of Human Resources

\_\_\_\_\_  
Date

COUNTY ADMINISTRATOR RECOMMENDATION:

DATE

1/13/2014

☐ Approve Recommendation of Director of Human Resources

☐ Disapprove Recommendation of Director of Human Resources

☒ Other: Approve as requested by Department

Dorothy Sansoe

\_\_\_\_\_  
(for) County Administrator

BOARD OF SUPERVISORS ACTION:

Adjustment is APPROVED ☐ DISAPPROVED ☐

David J. Twa, Clerk of the Board of Supervisors  
and County Administrator

DATE \_\_\_\_\_

BY \_\_\_\_\_

APPROVAL OF THIS ADJUSTMENT CONSTITUTES A PERSONNEL / SALARY RESOLUTION AMENDMENT

POSITION ADJUSTMENT ACTION TO BE COMPLETED BY HUMAN RESOURCES DEPARTMENT FOLLOWING BOARD ACTION

Adjust class(es) / position(s) as follows:



Contra  
Costa  
County

To: Board of Supervisors  
From: William Walker, M.D., Health Services  
Date: January 21, 2014

Subject: Add and cancel position in the Health Services Department

---

**RECOMMENDATION(S):**

ADOPT Position Resolution No. 21412 adding one (1) Disease Intervention Technician Project (V7W1) position at salary level QT5 1284 (\$3,704 - \$4,503) and canceling vacant Disease Intervention Technician (V7WB) position #12712 at salary level QT5 1284 (\$3,704 - \$4,503) in the Health Services Department. (Represented)

**FISCAL IMPACT:**

This personnel action is cost neutral; full funding of the project position is in the 2013-2014 State fiscal budget. (Ryan White Part B Agreement funds)

**BACKGROUND:**

The Health Services Department is requesting to add a Disease Intervention Technician Project position in Public Health's HIV Care Services program to assist with various case aide and related work. The program funding for this position is approved on an annual basis. The project position will ensure the Department meets the goals associated with the Ryan White CARE Act, the Affordable Care Act, and the Demonstration Incentive Service Reimbursement Program. The project position is fully funded in the 2013-2014 fiscal State budget. (Ryan White Part B Agreement)

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☒ APPROVE

☐ OTHER

☒ RECOMMENDATION OF CNTY ADMINISTRATOR

☐ RECOMMENDATION OF BOARD  
COMMITTEE

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Action of Board On: **01/21/2014** ☐ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

AYES \_\_\_\_\_ NOES \_\_\_\_\_

ABSENT \_\_\_\_\_ ABSTAIN \_\_\_\_\_

RECUSE \_\_\_\_\_

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: January 21, 2014

David J. Twa, County Administrator and Clerk of the Board of Supervisors

Contact: Jo-Anne Linares, (925)  
957-5246

By: , Deputy

cc:

BACKGROUND: (CONT'D)

funds)

The Disease Intervention Technician (V7WB) position #12712 has been vacant for four years due to fluctuations in annual program funding.

CONSEQUENCE OF NEGATIVE ACTION:

If this action is not approved, there will not be adequate staff to meet the goals of the AIDS Program in Public Health.

CHILDREN'S IMPACT STATEMENT:

N/A

ATTACHMENTS

P-300 #21412

# POSITION ADJUSTMENT REQUEST

NO. 21412  
DATE 1/8/2014

Department Health Services Department

Department No./

Budget Unit No. 0450 Org No. 5829 Agency No. A18

Action Requested: ADD one permanent full-time Disease Intervention Technician - Project position and cancel vacant Disease Intervention Technician position #12712 in the Health Services Department.

Proposed Effective Date: 1/22/2014

Classification Questionnaire attached: Yes ☐ No ☒ / Cost is within Department's budget: Yes ☒ No ☐

Total One-Time Costs (non-salary) associated with request: \_\_\_\_\_

Estimated total cost adjustment (salary / benefits / one time):

Total annual cost \$0.00

Net County Cost \$0.00

Total this FY \$0.00

N.C.C. this FY \$0.00

SOURCE OF FUNDING TO OFFSET ADJUSTMENT Neutral costs

Department must initiate necessary adjustment and submit to CAO.  
Use additional sheet for further explanations or comments.

Jo-Anne Linares

\_\_\_\_\_  
(for) Department Head

REVIEWED BY CAO AND RELEASED TO HUMAN RESOURCES DEPARTMENT

Dorothy Sansoe

1/15/2014

\_\_\_\_\_  
Deputy County Administrator

\_\_\_\_\_  
Date

HUMAN RESOURCES DEPARTMENT RECOMMENDATIONS

DATE \_\_\_\_\_

Exempt from Human Resources review under delegated authority

Amend Resolution 71/17 establishing positions and resolutions allocating classes to the Basic / Exempt salary schedule.

Effective: ☒ Day following Board Action.

☐ \_\_\_\_\_(Date)

\_\_\_\_\_  
(for) Director of Human Resources

\_\_\_\_\_  
Date

COUNTY ADMINISTRATOR RECOMMENDATION:

DATE 1/15/2014

☐ Approve Recommendation of Director of Human Resources

☐ Disapprove Recommendation of Director of Human Resources

☒ Other: Approve as requested by Department

Dorothy Sansoe

\_\_\_\_\_  
(for) County Administrator

BOARD OF SUPERVISORS ACTION:

Adjustment is APPROVED ☐ DISAPPROVED ☐

David J. Twa, Clerk of the Board of Supervisors  
and County Administrator

DATE \_\_\_\_\_

BY \_\_\_\_\_

APPROVAL OF THIS ADJUSTMENT CONSTITUTES A PERSONNEL / SALARY RESOLUTION AMENDMENT

POSITION ADJUSTMENT ACTION TO BE COMPLETED BY HUMAN RESOURCES DEPARTMENT FOLLOWING BOARD ACTION

Adjust class(es) / position(s) as follows:



Contra  
Costa  
County

To: Board of Supervisors  
From: Vincent L. Guise, Director of Agriculture/Weights & Measures  
Date: January 21, 2014

Subject: Agreement #13-0369-SA Weighmaster/Petroleum Product Program

---

**RECOMMENDATION(S):**

APPROVE and AUTHORIZE the Agricultural Commissioner, or designee, to execute Agreement #13-0369-SA Weighmaster/Petroleum Product Program with the California Department of Food and Agriculture (CDFA) in an amount not to exceed \$4800 to inspect recycling establishments licensed as weighmasters and determine compliance with Business and Professions Code Section 12703.1, for the period January 1, 2014 through June 30, 2014

**FISCAL IMPACT:**

This agreement will reimburse the department up to \$4800 to support inspection and enforcement activities at recycling establishments on behalf of the California Department of Food and Agriculture (CDFA) in Contra Costa County as well as gasoline service stations and others selling petroleum products. There is no cost share requirement and the revenue from this agreement has been anticipated in the departmental FY 13/14 budget.

**BACKGROUND:**

Gasoline service stations and others selling petroleum products are required by state law to meet advertising and signage requirements. Service stations are also required to provide water and air free of charge to customers and to provide handicap service to customers with some exception. This agreement will reimburse the Department for work done that involves enforcement of these laws.

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☒ APPROVE

☐ OTHER

☒ RECOMMENDATION OF CNTY ADMINISTRATOR

☐ RECOMMENDATION OF BOARD  
COMMITTEE

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Action of Board On: **01/21/2014** ☐ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

AYES \_\_\_\_\_ NOES \_\_\_\_\_

ABSENT \_\_\_\_\_ ABSTAIN \_\_\_\_\_

RECUSE \_\_\_\_\_

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: January 21, 2014

David J. Twa, County Administrator and Clerk of the Board of Supervisors

Contact: 646-52509

By: , Deputy

cc:

CONSEQUENCE OF NEGATIVE ACTION:

Failure to accept Agreement #13-0369-SA will cause a loss of revenue. The department would be unable to hire employees to support the inspections and enforcement activities as require.

CHILDREN'S IMPACT STATEMENT:

None





Contra  
Costa  
County

To: Board of Supervisors  
From: Vincent L. Guise, Director of Agriculture/Weights & Measures  
Date: January 21, 2014

Subject: CA Seed Law MOU13-sd07

**RECOMMENDATION(S):**

APPROVE and AUTHORIZE the Agricultural Commissioner, or designee, to execute a contract with the California Department of Food and Agriculture (CDFA) in an amount not to exceed \$100, to enforce California seed marketing and labeling requirements for the period July 1, 2013 through June 30, 2014.

**FISCAL IMPACT:**

This MOU will reimburse the department up to \$100 for services. There is no cost share requirement and the revenue has been anticipated in the departmental FY 13/14 budget

**BACKGROUND:**

The goal of seed law enforcement (Section 52288, California Food and Agricultural Code) is to protect seed consumers, including vegetable and field crop growers, as well as urban landscapers. Poor quality seeds can cost farmers and home gardeners alike considerable amounts of time, money, and resources, by way of reduced yields, poor crop quality, contamination by weeds or other unwanted species. By enforcing California Seed Law regarding marketing and labeling, the Department is able to ensure that consumers receive the desired product, and that there is supportive legal action for those who are wronged.

☒ APPROVE

☐ OTHER

☒ RECOMMENDATION OF CNTY ADMINISTRATOR

☐ RECOMMENDATION OF BOARD  
COMMITTEE

Action of Board On: **01/21/2014** ☐ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

AYES \_\_\_\_\_ NOES \_\_\_\_\_

ABSENT \_\_\_\_\_ ABSTAIN \_\_\_\_\_

RECUSE \_\_\_\_\_

Contact: 646-5250

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: January 21, 2014

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

cc:

CONSEQUENCE OF NEGATIVE ACTION:

Failure to accept CA Seed Law MOU 13-sd07 will result in loss revenue for the department.

CHILDREN'S IMPACT STATEMENT:

None



Contra  
Costa  
County

To: Board of Supervisors  
From: Mark Peterson, District Attorney  
Date: January 21, 2014

Subject: Approval to Submit an Application and Execute a Grant Award for Funding of Disability and Healthcare Insurance Fraud Prosecution

**RECOMMENDATION(S):**

ADOPT Resolution No. 2014/18 approving and authorizing the District Attorney to submit an application and execute a grant award agreement, and any extensions or amendments thereof, pursuant to State guidelines, with the California Department of Insurance - Fraud Division for funding of the Disability and Healthcare Insurance Fraud Prosecution Program in the amount of \$95,438 for the period July 1, 2013 through June 30, 2014.

**FISCAL IMPACT:**

The grant will fund salaries and benefits for .38 of an FTE Attorney assigned to the program. Supplantation is prohibited. (State Funds - no match required).

**BACKGROUND:**

The State Legislature has determined that one of the significant factors driving up the cost

☒ APPROVE

☐ OTHER

☒ RECOMMENDATION OF CNTY ADMINISTRATOR

☐ RECOMMENDATION OF BOARD  
COMMITTEE

Action of Board On: **01/21/2014** ☐ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

AYES \_\_\_\_\_ NOES \_\_\_\_\_

ABSENT \_\_\_\_\_ ABSTAIN \_\_\_\_\_

RECUSE \_\_\_\_\_

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: January 21, 2014

David J. Twa, County Administrator and Clerk of the Board of Supervisors

Contact: Cherie Mathisen

By: , Deputy

cc:

BACKGROUND: (CONT'D)

of disability and healthcare insurance is fraud. The Disability and Healthcare Insurance Fraud Prosecution award is financed by an assessment of \$1.00 on all new individual life and annuity products sold to California residents. A portion of the assessment amount is earmarked for distribution to District Attorneys for purposes of enhanced investigation and prosecution of disability insurance fraud cases.

ATTACHMENTS

Resolution No. 2014/18

**THE BOARD OF SUPERVISORS OF CONTRA COSTA COUNTY, CALIFORNIA**  
**and for Special Districts, Agencies and Authorities Governed by the Board**

Adopted this Resolution on 01/21/2014 by the following vote:

AYES: ☐  
NOES: ☐  
ABSENT: ☐  
ABSTAIN: ☐  
RECUSE: ☐



**Resolution No. 2014/18**

**Funding for the Disability and Healthcare Insurance Fraud Prosecution Program.**

**WHEREAS**, the Board of Supervisors, Contra Costa County, desires to undertake a certain program designated as the Disability and Healthcare Insurance Fraud Program to be funded in part from funds made available through Disability and Healthcare-California Insurance Code Section 1872.85, California Code of Regulations, Title 10, Section 2698.95 *et.seq.* and administered by the California Department of Insurance.

**NOW, THEREFORE BE IT RESOLVED** that the District Attorney of the County of Contra Costa District Attorney's Office, Special Operations Division is authorized on its behalf to submit a grant proposal to the California Department of Insurance and is authorized to execute on behalf of the Board of Supervisors the Grant Award Agreement, including any extensions or amendments thereof.

**BE IT FURTHER RESOLVED** that the grant funds received hereunder shall not be used to supplant expenditures controlled by this body.

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

**Contact: Cherie Mathisen**

**ATTESTED: January 21, 2014**

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

**cc:**



Contra  
Costa  
County

To: Board of Supervisors  
From: Cathy Sanford, Interim County Librarian  
Date: January 21, 2014

Subject: Library Application for \$20,000 Big Read Grant from the National Endowment for the Arts

---

**RECOMMENDATION(S):**

APPROVE and AUTHORIZE the Interim Librarian, or designee, to apply for and accept a Big Read grant in the amount of \$20,000 from the National Endowment for the Arts to provide materials and programming in West County libraries for the period September 1, 2014 through June 30, 2015.

**FISCAL IMPACT:**

No Library Fund match.

**BACKGROUND:**

The Big Read grant is awarded by the National Endowment for the Arts. The purpose of the grant is to revitalize the role of literature in American culture and to encourage citizens to read for pleasure and enlightenment. The Big Read will bring together diverse cultures and ages in reading and discussing a single book, *The Things They Carried*, by Tim O'Brien. The Big Read will also provide funding for library programs and for purchasing 900 copies of the selected title. Books will be available through libraries, high schools and colleges to supplement book discussions. In addition to funding, the grant provides resources such as school curriculum guides and promotional materials designed to support widespread community and student involvement.

**CONSEQUENCE OF NEGATIVE ACTION:**

The Library will not be able to provide cultural and reading enrichment programming.

---

☒ APPROVE

☐ OTHER

☒ RECOMMENDATION OF CNTY ADMINISTRATOR

☐ RECOMMENDATION OF BOARD  
COMMITTEE

---

Action of Board On: **01/21/2014** ☐ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

AYES \_\_\_\_\_ NOES \_\_\_\_\_

ABSENT \_\_\_\_\_ ABSTAIN \_\_\_\_\_

RECUSE \_\_\_\_\_

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: January 21, 2014

David J. Twa, County Administrator and Clerk of the Board of Supervisors

Contact: Gail McPartland,  
925-927-3204

By: , Deputy

cc:

**CHILDREN'S IMPACT STATEMENT:**

The Big Read grant meets outcomes #1 and #5 established in the Children's Report Card. Funding from the grant will provide direct curriculum support for high school students to help them succeed in school. Grant funding will also provide high-quality cultural and literary programming for teens and will promote intergenerational discussions leading to a better quality of life.



Contra  
Costa  
County

To: Board of Supervisors  
From: Mark Peterson, District Attorney  
Date: January 21, 2014

Subject: Facility Dog Program to Provide a Service Dog to Work With Victims of Crimes in Contra Costa County

---

**RECOMMENDATION(S):**

APPROVE and AUTHORIZE the District Attorney, or designee, to execute a contract with Canine Companions for Independence in an amount not to exceed \$3,000 to provide a facility dog trained to work with victims of crimes to provide comfort and assist them in remaining calm while being interviewed or providing testimony in the courtroom.

**FISCAL IMPACT:**

The cost is estimated to be approximately \$2,500 - \$3,000 for the first year. Most of these costs are one time training costs for the handler. (100% State Forfeiture Funds)

**BACKGROUND:**

Facility dogs, also known as courthouse dogs when working in a criminal justice environment, are specially trained by a certified organization to work with victims of crimes and to help them remain calm in the courtroom. Since 2003 courthouse dogs have provided comfort to sexually abused children while they undergo forensic interviews and testify in court. These dogs also assist court participants in their recovery, visit juveniles in detention facilities, greet jurors and lift the spirits of courthouse staff who often conduct their business in an adversarial setting.

Courthouse dogs specialize in assisting individuals with physical, psychological, or emotional trauma due to criminal conduct. These facility dogs graduate from assistance dog organizations that are accredited members of Assistance Dogs International to ensure that they do not create a public danger and are stable, well-behaved, and unobtrusive to the public

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☒ APPROVE

☐ OTHER

☒ RECOMMENDATION OF CNTY ADMINISTRATOR

☐ RECOMMENDATION OF BOARD  
COMMITTEE

---

Action of Board On: **01/21/2014** ☐ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

AYES \_\_\_\_\_ NOES \_\_\_\_\_

ABSENT \_\_\_\_\_ ABSTAIN \_\_\_\_\_

RECUSE \_\_\_\_\_

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: January 21, 2014

David J. Twa, County Administrator and Clerk of the Board of Supervisors

Contact: Cherie Mathisen, 957-2234

By: , Deputy

cc:



**BACKGROUND: (CONT'D)**

. Courthouse facility dogs are handled by criminal justice professionals, such as a deputy prosecutor, a law enforcement officer, a victim advocate, or a forensic interviewer.

The use of courthouse dogs can help bring about a major change in how we meet the emotional needs of all involved in the criminal justice system. Their calming presence promotes justice with compassion. The dog's handler in the District Attorney's office will be an assistant investigator and a victim advocate who will use the dog to provide emotional support to victims to help them through the trial process.



Contra  
Costa  
County

To: Board of Supervisors  
From: Kathy Gallagher, Employment & Human Services  
Date: January 21, 2014

Subject: 2014 Low Income Home Energy Assistance Program funding

---

**RECOMMENDATION(S):**

APPROVE and AUTHORIZE the Employment & Human Services Director, or designee, to execute a revenue agreement with California Department of Community Services and Development, including an indemnification clause, in an amount not to exceed \$481,046 for Low Income Home Energy Assistance Programs with term January 1, 2014 through January 31, 2015.

**FISCAL IMPACT:**

100% State funds  
California Department of Community Services and Development  
Pension costs: \$45,051  
County match: \$0  
CCC: 39-806-24

**BACKGROUND:**

The County receives funding from the State to operate a low income home energy assistance program for eligible residents. This board order accepts funding to operate the program during the 2014 program year.

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☒ APPROVE

☐ OTHER

☒ RECOMMENDATION OF CNTY ADMINISTRATOR

☐ RECOMMENDATION OF BOARD  
COMMITTEE

---

Action of Board On: **01/21/2014** ☒ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

AYES \_\_\_\_\_ NOES \_\_\_\_\_

ABSENT \_\_\_\_\_ ABSTAIN \_\_\_\_\_

RECUSE \_\_\_\_\_

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: January 21, 2014

David J. Twa, County Administrator and Clerk of the Board of Supervisors

Contact: J. Bhambra, 313-1545

By: , Deputy

cc: Jagjit Bhambra, Sam Mendoza, Cassandra Youngblood

CONSEQUENCE OF NEGATIVE ACTION:

If not approved, County may not receive funding to operate LIHEAP.

CHILDREN'S IMPACT STATEMENT:

The Employment & Human Services Department, Community Services Bureau energy program supports one Contra Costa County community outcome - Outcome #4: "Families that are Safe, Stable and Nurturing." This outcome is supported by the provision of home energy assistance to keep households warm in winter and to increase household energy efficiency.



Contra  
Costa  
County

To: Board of Supervisors  
From: Kathy Gallagher, Employment & Human Services Director  
Date: January 21, 2014

Subject: InTelegy Corporation Amendment

---

**RECOMMENDATION(S):**

APPROVE and AUTHORIZE the Employment and Human Services Director, or designee, to execute a contract amendment with InTelegy Corporation, effective November 1, 2013, to increase the contract amount by \$123,480 from \$661,912 to a total contract amount of \$735,392 for integrated customer service model(s) development and implementation from July 1 2013 through June 30, 2014.

**FISCAL IMPACT:**

\$785,392: 10% County, 45% State, 45% Federal

**BACKGROUND:**

The Employment and Human Services Department (EHSD or Department) has been tasked with the critical challenges of implementing two significant aspects of the Affordable Care Act. County was awarded the contract to establish a health benefit exchange call center in partnership with Covered California. At the same time, the Department is required to plan, develop, and implement a new system and set of business processes for the Medi-Cal Expansion component under health care reform. The Department does not have sufficient staff resources to provide the quality and quantity of project management oversight required to ensure the successful design and implementation

---

☒ APPROVE

☐ OTHER

☒ RECOMMENDATION OF CNTY ADMINISTRATOR

☐ RECOMMENDATION OF BOARD  
COMMITTEE

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Action of Board On: **01/21/2014** ☐ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

AYES \_\_\_\_\_ NOES \_\_\_\_\_

ABSENT \_\_\_\_\_ ABSTAIN \_\_\_\_\_

RECUSE \_\_\_\_\_

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: January 21, 2014

David J. Twa, County Administrator and Clerk of the Board of Supervisors

Contact: Elaine Burres, 313-1717

By: , Deputy

cc:

**BACKGROUND: (CONT'D)**

of these multiple and complex aspects of health care reform.

To meet these challenges, the Department is in the ongoing process of re-engineering the client service-delivery systems with InTelegy Corporation providing established expertise in the management of multiple projects. EHSD has had a positive contractual relationship with InTelegy Corporation as they have provided high-quality goal-oriented services to the Department.

This amendment will increase the total hours necessary for project management services and process development.

**CONSEQUENCE OF NEGATIVE ACTION:**

Without increased funding, the Employment and Human Services Department will not complete Service Center design and implementation & maintain the services of project management experts.

**CHILDREN'S IMPACT STATEMENT:**

Not applicable.



**Contra  
Costa  
County**

To: Board of Supervisors  
From: Philip F. Kader, County Probation Officer  
Date: January 21, 2014

Subject: Contract Extension with Rubicon Programs

---

**RECOMMENDATION(S):**

APPROVE and AUTHORIZE the County Probation Officer, or designee, to execute a contract extension with Rubicon Programs to change the contract termination date from December 31, 2013 to February 28, 2014 to provide reentry services to probationers enrolled in the Second Chance Reentry Initiative with no change to the payment.

**FISCAL IMPACT:**

No fiscal impact. Funding for the existing contract to provide reentry services is received from the Second Chance Act Adult Offender Reentry Program for Planning and Demonstration Projects awarded by the Department of Justice. No General Funds are being used for this contract.

**BACKGROUND:**

Effective October 1, 2012, the County was awarded the FY2012 Second Chance Act Adult Offender Reentry Program for Planning and Demonstration Projects in the amount of \$750,000. The budget included funds for Rubicon Programs to provide reentry services including job readiness coaching, job placement and retention services, housing placement, financial education classes and legal services. On February 5, 2013, the Board of Supervisors approved a contract with Rubicon

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☒ APPROVE

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Action of Board On: **01/21/2014** ☐ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

AYES \_\_\_\_\_ NOES \_\_\_\_\_

ABSENT \_\_\_\_\_ ABSTAIN \_\_\_\_\_

RECUSE \_\_\_\_\_

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ATTESTED: January 21, 2014

David J. Twa, County Administrator and Clerk of the Board of Supervisors

Contact: Danielle Fokkema,  
925-313-4195

By: , Deputy

cc:

BACKGROUND: (CONT'D)

Programs in the amount of \$130,000 with a term of October 1, 2012 to September 30, 2013.

Because the County got off to a late start implementing this grant, the Probation Department submitted a Grant Adjustment Notice (GAN) on August 31, 2013 to extended to grant period three months to December 31, 2013. On November 5, 2013, the Board of Supervisors approved extending Rubicon's contract term to coincide with the grant term (C.56).

One of the grant requirements was a \$750,000 match from the County. The largest part of the match (\$335,000) was the new Probation Case Management System (CMS). Contract negotiations with the CMS vendor have taken much longer than anticipated and it is necessary to extend the grant term for a second time. The Probation Department submitted a Grant Adjustment Notice (GAN) on November 25, 2013 to extend the grant period two more months to February 28, 2014. As a result of the grant extension, Rubicon's contract needs to be extended as well.

CONSEQUENCE OF NEGATIVE ACTION:

Rubicon Programs will not be able to utilize all the grant dollars available to them.

CHILDREN'S IMPACT STATEMENT:

Not applicable.



**Contra  
Costa  
County**

To: Board of Supervisors  
From: William Walker, M.D., Health Services Director  
Date: January 21, 2014

Subject: Contract #27-781-3 with The Bay Area Cardiology Medical Group, Inc.

---

**RECOMMENDATION(S):**

Approve and authorize the Health Services Director, or his designee, to execute, on behalf of the County, Contract #27-781-3 with The Bay Area Cardiology Medical Group, Inc., a corporation, in an amount not to exceed \$600,000, to provide professional Cardiology services, for the period from January 1, 2014 through December 31, 2015.

**FISCAL IMPACT:**

This Contract is funded 100% by Contra Costa Health Plan member premiums. Costs depend upon utilization. (No rate increase)

**BACKGROUND:**

On February 14, 2012, the Board of Supervisors approved Contract #27-781-2 with The Bay Area Cardiology Medical Group, Inc. for the provision of professional cardiology services, for the period from January 1, 2012 through December 31, 2013.

Approval of Contract #27-781-3 will allow Contractor to continue providing professional cardiology services through December 31, 2015.

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☒ APPROVE

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COMMITTEE

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Action of Board On: **01/21/2014** ☐ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

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ATTESTED: January 21, 2014

David J. Twa, County Administrator and Clerk of the Board of Supervisors

Contact: Patricia Tanquary  
313-6008

By: , Deputy



CONSEQUENCE OF NEGATIVE ACTION:

If this contract is not approved, certain specialized professional health care services for its members under the terms of their Individual and Group Health Plan membership contracts with the County will not be provided.

CHILDREN'S IMPACT STATEMENT:

NOT APPLICABLE



**Contra  
Costa  
County**

To: Board of Supervisors  
From: Philip F. Kader, County Probation Officer  
Date: January 21, 2014

Subject: Contract with National Council on Crime and Delinquency (NCCD)

---

**RECOMMENDATION(S):**

APPROVE and AUTHORIZE the County Probation Officer, or designee, to execute a contract with the National Council on Crime and Delinquency (NCCD) in the amount of \$140,000 to provide evaluation and assessment of the County's Smart Probation program for the period of October 1, 2013 through September 30, 2016.

**FISCAL IMPACT:**

100% Federal Grant Funded. Funds for evaluation services are received from the "Smart Probation: Reducing Prison Populations, Saving Money, and Creating Safer Communities" grant awarded by the Department of Justice. No General Funds will be used.

**BACKGROUND:**

Effective October 1, 2013, the Contra Costa County Probation was awarded the FY2013 "Smart Probation: Reducing Prison Populations, Saving Money, and Creating Safer Communities" grant. The budget included funds for NCCD to provide evaluation and performance assessment.

The goal of this grant is to increase effective evidenced-based probation programs that address offender's needs and reduce

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☒ APPROVE

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Action of Board On: **01/21/2014** ☐ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

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ATTESTED: January 21, 2014

David J. Twa, County Administrator and Clerk of the Board of Supervisors

Contact: Danielle Fokkema,  
925-313-4195

By: , Deputy

cc:

BACKGROUND: (CONT'D)

recidivism. Funds will increase capacity within the Probation Department to implement evidence-based practices that target high-risk probationers by developing and promoting the integration of probation supervision strategies and tools to facilitate effective reentry, expand options for access to health care upon re-entry, and evaluate the results of new strategies and tools tested through this initiative. Additionally, data gathered will be used to evaluate and validate delivery of probation services and improve customer service.

CONSEQUENCE OF NEGATIVE ACTION:

Contra Costa County Probation will not be able to evaluate the effectiveness of the Smart Probation grant program.

CHILDREN'S IMPACT STATEMENT:

Not applicable.

ATTACHMENTS



Contra  
Costa  
County

To: Board of Supervisors  
From: Sharon Offord Hymes, Risk Manager  
Date: January 21, 2014

Subject: Risk Management Legal Defense Contracts

---

**RECOMMENDATION(S):**

APPROVE and AUTHORIZE the County Risk Manager to execute contracts with selected legal firms for defense of the County in workers' compensation, medical malpractice and civil rights claims for a period of one year effective January 1, 2014 through December 31, 2014 in accordance with a specified fee schedule for the following: Craddick, Candland & Conti; D'Andre, Peterson, Bobas & Rosenberg; Edrington, Shirmer & Murphy; Gordon, Watrous, Ryan, Langley, Bruno & Paltenghi; Hanna, Brophy, MacLean, McAleer & Jensen; Law Offices of John F. Martin; McClellan & Corren; McNamara, Ney, Beatty, Slattery, Borges & Brothers; Mullen & Filippi; Thomas, Lyding, Cartier & Gaus.

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☒ APPROVE

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☐ RECOMMENDATION OF BOARD  
COMMITTEE

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Action of Board On: **01/21/2014** ☐ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

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RECUSE \_\_\_\_\_

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: January 21, 2014

David J. Twa, County Administrator and Clerk of the Board of Supervisors

Contact: Sharon Hymes-Offord  
925.335.1450

By: , Deputy

cc:

**FISCAL IMPACT:**

Legal costs are funded through the Workers' Compensation, Liability and Medical Malpractice Internal Service Funds.

**BACKGROUND:**

Legal firms were selected for their experience and expertise in particular areas of legal defense. Risk Management assigns cases to the various firms. The following legal firms selected for defense of claims agree to new one-year contracts without a rate increase from January 2014 to December 31, 2014: Craddick, Candland & Conti; D'Andre, Peterson, Bobas & Rosenberg; Edrington, Shirmer & Murphy; Gordon, Watrous, Ryan, Langley, Bruno & Paltenghi; Hanna, Brophy, MacLean, McAleer & Jensen; Law Offices of John F. Martin; McClellan & Corren; McNamara, Ney, Beatty, Slattery, Borges & Brothers; Mullen & Filippi; Thomas, Lyding, Cartier & Gaus.

**CONSEQUENCE OF NEGATIVE ACTION:**

The County will not have the benefit of aforementioned firms' legal expertise.

**CHILDREN'S IMPACT STATEMENT:**

None.



Contra  
Costa  
County

To: Board of Supervisors  
From: William Walker, M.D., Health Services Director  
Date: January 21, 2014

Subject: Approval of Purchase Order with R-Computer

---

**RECOMMENDATION(S):**

Approve and authorize the Purchasing Agent, on behalf of the Health Services Department, to execute a Purchase Order with R-Computer, in the amount of \$113,000 for maintenance and upgrades on IBM servers and related equipment software, for the period from January 1, 2014 through December 31, 2014.

**FISCAL IMPACT:**

100% Funding is included in the Enterprise Fund I Budget.

**BACKGROUND:**

Health Services Department has had IBM Lotus Notes support since 2000 and would like to continue support for its email systems. R-Computer has provided this renewal in the past and the Department would like to continue using them. R-Computer will provide the Department the renewal licenses that provide support for seven Lotus Notes email servers that run Lotus software for over 3000 email accounts, Sametime instant messaging, and other support applications that run on these servers.

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Action of Board On: **01/21/2014** ☐ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

AYES \_\_\_\_\_ NOES \_\_\_\_\_

ABSENT \_\_\_\_\_ ABSTAIN \_\_\_\_\_

RECUSE \_\_\_\_\_

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: January 21, 2014

David J. Twa, County Administrator and Clerk of the Board of Supervisors

Contact: David Runt, 313-6228

By: , Deputy

cc: T Scott, C Rucker, T Benedict

CONSEQUENCE OF NEGATIVE ACTION:

If the Purchase Order is not approved the software would not be covered on a maintenance contract and when an incident occurs, IBM will not support us. This may cause extended downtimes impacting healthcare operations.

CHILDREN'S IMPACT STATEMENT:

Not applicable.



Contra  
Costa  
County

To: Board of Supervisors  
From: William Walker, M.D., Health Services Director  
Date: January 21, 2014

Subject: Purchase Order for Hyland Software, Inc.

---

**RECOMMENDATION(S):**

Approve and authorize the Purchasing Agent, on behalf of the Health Services Director, to execute, a purchase order with Hyland Software, Inc. in an amount not to exceed \$133,000 for renewal of annual software maintenance and licensing for OnBase Document Management and Image Scanning Software for the period from January 1, 2014 through December 31, 2014.

**FISCAL IMPACT:**

100% Funding is included in the Enterprise Fund I budget.

**BACKGROUND:**

OnBase software maintenance is a critical component of the enterprise-wide EMR solution. OnBase facilitates the capture, management, archiving, storage, and retrieval of electronic and paper documents including all Electronic Health Record (EHR) related documents integrated with the CCLink (Epic) application, reports used by the Finance and Patient Accounting Units, and archived records for other Health Services Divisions including Behavioral Health Services, Contracts and Grants, Contra Costa Health Plan, Environmental Health and Hazardous Materials.

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☒ APPROVE

☐ OTHER

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COMMITTEE

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Action of Board On: **01/21/2014** ☐ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

AYES \_\_\_\_\_ NOES \_\_\_\_\_

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ATTESTED: January 21, 2014

David J. Twa, County Administrator and Clerk of the Board of Supervisors

Contact: David Runt, 313-6228

By: , Deputy

cc: T Scott, C Rucker, T Benedict



CONSEQUENCE OF NEGATIVE ACTION:

If this purchase is not approved, the workflows associated with the above-stated functions would be adversely impacted. Hyland provides real-time application support to Health Services for ccLink (Epic) scanning, workflow management, and reporting solutions. That support would cease, and the integrity of data from integration of internal scanning and printing hardware interfaced to the EHR application via web services and other interfaces could be compromised. Connectivity failures in any of these areas could potentially result in incorrect or incomplete data capture and management, loss of critical archived data due to inability to perform system functions, and non-compliance with future Epic releases.

CHILDREN'S IMPACT STATEMENT:

Not applicable.



Contra  
Costa  
County

To: Board of Supervisors  
From: William Walker, M.D., Health Services Director  
Date: January 21, 2014

Subject: Contract #23-441-3 with DJR Healthcare Consulting, Inc.

---

**RECOMMENDATION(S):**

Approve and authorize the Health Services Director, or his designee, to execute on behalf of the County, Contract #23-441-3 with DJR Healthcare Consulting, Inc., a corporation, in an amount not to exceed \$552,000, to provide professional management and oversight of the Department's Information Technology (IT) Unit, for the period from January 1, 2014 through December 31, 2015.

**FISCAL IMPACT:**

This Contract is funded 100% by Enterprise Fund I. (No rate increase)

**BACKGROUND:**

On December 6, 2011, the Board of Supervisors approved Contract #23-441-2 with the DJR Healthcare Consulting, Inc. to provide professional management and oversight of the Department's IT Unit including, but not limited to, providing a qualified Chief Information Officer who will provide day to day on-site management, act as the technical expert with regard to all

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☒ APPROVE

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COMMITTEE

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Action of Board On: **01/21/2014** ☐ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

AYES \_\_\_\_\_ NOES \_\_\_\_\_

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ATTESTED: January 21, 2014

David J. Twa, County Administrator and Clerk of the Board of Supervisors

Contact: Patrick Godley, 957-5405

By: , Deputy

cc: D Morgan, C Rucker

**BACKGROUND: (CONT'D)**

Health Services Department IT Systems, lead the IT Steering Committee, develop formal written strategic plans, policies and procedures, create processes for identifying system user needs and translate them into system enhancements, work in collaboration with Department staff, physicians, providers and clients of IT systems, for the period from January 1, 2012 through December 31, 2013.

Approval of Contract #23-441-3 will allow the Contractor to continue to provide services, through December 31, 2015.

**CONSEQUENCE OF NEGATIVE ACTION:**

If this contract is not approved, the Department would not have management and oversight of the Health Services Department's IT Unit, which is responsible for supporting the technology infrastructure including, but not limited to, clinical systems development, data analysis, reporting, end-user training and customer support services for the Contra Costa Regional Medical Center and Contra Costa Health Centers, Contra Costa Health Plan, Public Health, Environmental Health, Emergency Medical Services, Behavioral Health Services Division and Office of the Director/Finance Division.

**CHILDREN'S IMPACT STATEMENT:**

**Not applicable**



**Contra  
Costa  
County**

To: Board of Supervisors  
From: William Walker, M.D., Health Services Director  
Date: January 21, 2014

Subject: Amendment #24-681-73(13) with LTP Carepro, Inc. (dba Pleasant Hill Manor)

---

**RECOMMENDATION(S):**

Approve and authorize the Health Services Director, or his designee, to execute, on behalf of the County, Contract Amendment Agreement #24-681-73(13) with LTP Carepro, Inc. (dba Pleasant Hill Manor), a limited liability company, effective November 1, 2013, to amend Contract #24-681-73(11), (as amended by Contract Amendment/Extension Agreement 24-681-73(12) to increase the payment limit by \$6,000, from \$168,000 to a new payment limit of \$174,000, with no change in the term of February 1, 2013 through January 31, 2014.

**FISCAL IMPACT:**

This amendment is funded 83% by Mental Health Realignment funds and 17% by Mental Health Services Administration Housing (MHSA). (Rate increase)

**BACKGROUND:**

This Contract meets the social needs of the County's population in

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☒ APPROVE

☐ OTHER

☒ RECOMMENDATION OF CNTY ADMINISTRATOR

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COMMITTEE

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Action of Board On: **01/21/2014** ☒ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

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ATTESTED: January 21, 2014

David J. Twa, County Administrator and Clerk of the Board of Supervisors

Contact: Cynthia Belon, 957-5201

By: , Deputy

cc: D Morgan, C Rucker

BACKGROUND: (CONT'D)

that it provides augmentation of room and board, and twenty-four hour emergency residential care and supervision to eligible mentally disordered clients, who are specifically referred by the Mental Health Program Staff and who are served by County Mental Health Services.

On February 26, 2013, the Board of Supervisors approved Contract #24-681-73(11) (as amended by Contract Amendment/Extension Agreement #24-681-73(12) with LTP Carepro, Inc. (dba Pleasant Hill Manor), for the period February 1, 2013 through January 31, 2014, for the provision of augmented board and care services for County-referred mentally disordered clients.

Due to the department needing to place two additional mentally disordered older adults, County requested and Contractor has agreed to the immediate placement. Approval of Contract Amendment Agreement #24-681-73(13) will allow the Contractor to provide additional (24) twenty-four hour emergency residential care and supervision services through January 31, 2014.

CONSEQUENCE OF NEGATIVE ACTION:

If this amendment is not approved clients will not be placed and additional services will not be provided by this contractor.

CHILDREN'S IMPACT STATEMENT:

**Not Applicable**



Contra  
Costa  
County

To: Board of Supervisors  
From: David O. Livingston, Office of the Sheriff  
Date: January 21, 2014

Subject: Purchase Order - Buchanan Food Service

---

**RECOMMENDATION(S):**

APPROVE and AUTHORIZE the Purchasing Agent, or designee, to execute a purchase order on behalf of the Sheriff-Coroner with Buchanan Food Service in the amount of \$120,000 to provide bread loaves, rolls and all related bakery items as needed for the West County, Martinez and Marsh Creek detention facilities for the period of 01/01/2014 through 12/31/2014.

**FISCAL IMPACT:**

\$120,000 maximum. 100% County General Fund; Budgeted in fiscal year 2013/14.

**BACKGROUND:**

This replaced the previous bread vendor (IBC Sales Corp) for the West County, Martinez and Marsh Creek detention facilities. Buchanan Food Service is a GSD-solicited bid that provides lower pricing for the bread loaves, rolls and other related bakery items as needed to support the inmate feeding program requirements of the three (3) county detention facilities.

**CONSEQUENCE OF NEGATIVE ACTION:**

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☒ APPROVE

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☒ RECOMMENDATION OF CNTY ADMINISTRATOR

☐ RECOMMENDATION OF BOARD  
COMMITTEE

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Action of Board On: **01/21/2014** ☒ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

AYES \_\_\_\_\_ NOES \_\_\_\_\_

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RECUSE \_\_\_\_\_

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: January 21, 2014

David J. Twa, County Administrator and Clerk of the Board of Supervisors

Contact: Liz Arbuckle,  
(925)335-1529

By: , Deputy

cc: Liz Arbuckle, Heike Siewell, Tim Ewell

CHILDREN'S IMPACT STATEMENT:



Contra  
Costa  
County

To: Board of Supervisors  
From: David O. Livingston, Office of the Sheriff  
Date: January 21, 2014

Subject: Purchase Order - Producers Dairy Products, Inc.

---

**RECOMMENDATION(S):**

APPROVE and AUTHORIZE the Purchasing Agent to execute, on behalf of the Sheriff-Coroner, a purchase order with Producers Dairy Products Inc., in an amount not to exceed \$175,000 for the purchase of dairy products as needed for the Martinez and Marsh Creek detention facilities for the period January 1, 2014 through December 31, 2014.

**FISCAL IMPACT:**

\$175,000. 100% County General Fund; Budgeted in fiscal year 2013/14.

**BACKGROUND:**

The vendor is a General Services Department-selected vendor providing the dairy products and other related products needed by Martinez Detention Facility and Marsh Creek Detention Facility to support the feeding program requirements of the inmate population.

**CONSEQUENCE OF NEGATIVE ACTION:**

**CHILDREN'S IMPACT STATEMENT:**

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☒ APPROVE

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☐ RECOMMENDATION OF BOARD  
COMMITTEE

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Action of Board On: **01/21/2014** ☒ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

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ABSENT \_\_\_\_\_ ABSTAIN \_\_\_\_\_

RECUSE \_\_\_\_\_

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ATTESTED: January 21, 2014

David J. Twa, County Administrator and Clerk of the Board of Supervisors

Contact: Liz Arbuckle, 335-1529

By: , Deputy

cc: Liz Arbuckle, Heike Siewell, Tim Ewell





Contra  
Costa  
County

To: Board of Supervisors  
From: David O. Livingston, Office of the Sheriff  
Date: January 21, 2014

Subject: Purchase Order - Producers Dairy Products, Inc.

---

**RECOMMENDATION(S):**

APPROVE and AUTHORIZE the Purchasing Agent to execute, on behalf of the Sheriff-Coroner, a purchase order with Producers Dairy Products Inc., in an amount not to exceed \$200,000 for the purchase of dairy products as needed for the West County Detention Facility for the period January 1, 2014 through December 31, 2014.

**FISCAL IMPACT:**

\$200,000. 100% County General Fund; Budgeted in fiscal year 2013/14.

**BACKGROUND:**

The vendor is a General Services Department-selected vendor providing the dairy products and other related products needed by West County Detention Facility to support the feeding program requirements of the inmate population.

**CONSEQUENCE OF NEGATIVE ACTION:**

**CHILDREN'S IMPACT STATEMENT:**

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☒ APPROVE

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COMMITTEE

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Action of Board On: **01/21/2014** ☒ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

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RECUSE \_\_\_\_\_

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ATTESTED: January 21, 2014

David J. Twa, County Administrator and Clerk of the Board of Supervisors

Contact: Liz Arbuckle, 335-1529

By: , Deputy

cc: Liz Arbuckle, Heike Siewell, Tim Ewell



Contra  
Costa  
County

To: Board of Supervisors  
From: David O. Livingston, Office of the Sheriff  
Date: January 21, 2014

Subject: Purchase Order - Allen Packaging

---

**RECOMMENDATION(S):**

APPROVE and AUTHORIZE the Purchasing Agent to execute, on behalf of the Sheriff-Coroner, a purchase order with Allen Packaging Company in the amount of \$125,000 to provide three-compartment trays for Seal-a-Meal food to be used at the West County, Martinez, and Marsh Creek Detention Facilities for the period January 1, 2014 through December 31, 2014

**FISCAL IMPACT:**

\$125,000; 100% County General Fund, Budgeted.

**BACKGROUND:**

Allen Packaging supplies the packaging equipment and supplies used for the seal-a-meal food central production system at WCDF, where inmate meals are produced and distributed to MDF and MCDF. This central production system has proven to increase efficiency and reduce costs for mandated provided meals to inmates.

**CONSEQUENCE OF NEGATIVE ACTION:**

**CHILDREN'S IMPACT STATEMENT:**

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☒ APPROVE

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COMMITTEE

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Action of Board On: 01/21/2014 ☒ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

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RECUSE \_\_\_\_\_

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ATTESTED: January 21, 2014

David J. Twa, County Administrator and Clerk of the Board of Supervisors

Contact: Liz Arbuckle,  
925-335-1529

By: , Deputy



Contra  
Costa  
County

To: Board of Supervisors  
From: David O. Livingston, Sheriff-Coroner  
Date: January 21, 2014

Subject: Purchase Order - National Food Group, Inc.

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**RECOMMENDATION(S):**

APPROVE and AUTHORIZE the Purchasing Agent, or designee, to execute, on behalf of the Sheriff-Coroner, a change to a purchase order with National Food Group, Inc., to increase the payment limit by \$43,000 to a new payment limit of \$142,000, to provide frozen and dry food as needed for the West County, Martinez and Marsh Creek detention facilities for the period April 1, 2013 through March 31, 2014.

**FISCAL IMPACT:**

\$142,000 maximum. 100% County General Fund; Budgeted in fiscal year 2013/14.

**BACKGROUND:**

The vendor provides the Office of the Sheriff with opportunity buys, enabling the department to take advantage of last minute deals from manufacturers for cut rates on high quality bulk food items, such as frozen green beans, potato products and poultry items as needed by the three detention facilities to support the feeding program requirements of the inmate population.

**CONSEQUENCE OF NEGATIVE ACTION:**

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☒ APPROVE

☐ OTHER

☒ RECOMMENDATION OF CNTY ADMINISTRATOR

☐ RECOMMENDATION OF BOARD  
COMMITTEE

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Action of Board On: **01/21/2014** ☒ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

AYES \_\_\_\_\_ NOES \_\_\_\_\_

ABSENT \_\_\_\_\_ ABSTAIN \_\_\_\_\_

RECUSE \_\_\_\_\_

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: January 21, 2014

David J. Twa, County Administrator and Clerk of the Board of Supervisors

Contact: Liz Arbuckle, 335-1529

By: , Deputy

cc: Liz Arbuckle, Heike Siewell, Timothy Ewell

CHILDREN'S IMPACT STATEMENT:



Contra  
Costa  
County

To: Board of Supervisors  
From: Catherine Kutsuris, Conservation and Development Director  
Date: January 21, 2014

Subject: Contra Costa County Planning Commission 2013 Annual Report

---

**RECOMMENDATION(S):**

ACCEPT the Contra Costa County Planning Commission 2013 Annual Report.

**FISCAL IMPACT:**

None.

**BACKGROUND:**

On December 13, 2011, the Board of Supervisors adopted Resolution No. 2011/497, which requires each regular and ongoing board, commission, or committee report annually to the Board of Supervisors. The attached report presented for Board consideration fulfills this requirement.

**CONSEQUENCE OF NEGATIVE ACTION:**

The annual reporting requirement to the Board of Supervisors would not be fulfilled.

**CHILDREN'S IMPACT STATEMENT:**

Not applicable.

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☒ APPROVE

☐ OTHER

☒ RECOMMENDATION OF CNTY ADMINISTRATOR

☐ RECOMMENDATION OF BOARD  
COMMITTEE

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Action of Board On: **01/21/2014** ☐ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

AYES \_\_\_\_\_ NOES \_\_\_\_\_

ABSENT \_\_\_\_\_ ABSTAIN \_\_\_\_\_

RECUSE \_\_\_\_\_

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: January 21, 2014

David J. Twa, County Administrator and Clerk of the Board of Supervisors

Contact: Aruna Bhat, (925)  
674-7784

By: , Deputy

cc:

## ATTACHMENTS

2013 Annual  
Report

**COUNTY PLANNING COMMISSION**  
**ANNUAL REPORT 2013**

Meeting Time: Generally meets on the 2nd and 4th Tuesdays of the month at 7:00 P.M.  
Location: Conservation and Development Department, 30 Muir Road, Martinez  
Chair: Marvin Terrell May 22, 2012 - present  
Vice Chair: Don Snyder September 24, 2013 - present  
Karen Peterson May 22, 2012 – August 27, 2013  
Staff: Aruna Bhat  
Recording Secretary: Hiliana Li  
Reporting Period: January 2013 – December 2013

**I. Activities/Purpose**

The County Planning Commission exercises all powers and duties prescribed by law (statute, ordinance or board order), including consideration of matters referred to it by the zoning administrator except those powers and duties specifically reserved or delegated to other divisions of the planning agency; initiates preparation of general plans, specific plans, regulations, programs and legislation to implement the planning power of the county; is generally responsible for advising the legislative body of matters relating to planning, which, in the opinion of the commission, should be studied; is the advisory agency as designated in Title 9 of the County Code for the purpose of passing on subdivisions; hears and decides all applications or requests for proposed entitlements estimated to generate one hundred or more peak hour trips unless otherwise provided by the code or board order; and hears and makes recommendations regarding proposed development agreements when it is hearing the related project applications being processed concurrently with the development agreements.

**II. Accomplishments**

The County Planning Commission made decisions and recommendations to the Board of Supervisors on twenty one projects in the calendar year 2013. The Commission made recommendations to the Board of Supervisors on 1) two general plan amendment, rezoning, major subdivision and development plan in the Discovery Bay area, 2) on revisions to the County Code Meteorological Towers (MET) Ordinance which would apply to the unincorporated areas of Contra Costa County, and 3) on a general plan amendment and specific plan amendment in the Dougherty Valley area. In addition, they made decisions on a zoning text amendment, a heritage tree permit, two general plan amendments, two rezoning applications, two major subdivisions, two mandatory referrals, five land use permits, two appeals, and one variance. The following are brief descriptions of the projects considered.

**Zoning Text Amendments:** County File #ZT12-0003: Consideration of a proposed zoning text amendment that would modify sections of the County Code Chapter 88-22 – Meteorological Towers (MET) Ordinance which would apply to the unincorporated areas of Contra Costa County (3-26-13).

**Heritage Tree:** Tom Newlin (Applicant & Owner), County File #HT12-0001: A request to nominate two Valley Oak trees pursuant to the Heritage Tree Preservation Ordinance (Chapter 816-4) at 2444 Lunada Lane in the Alamo area (8-27-13).

**Tentative Map and Subdivision Plan:**

- 1) William Schrader, Jr. (Applicant) – Disco Bay Partners LLC (Owner), County Files GP08-0002, RZ09-3214, SD09-9278, and DP09-3029: Request for approval of a General Plan Amendment, Rezoning, Major Subdivision and a Preliminary and Final Development Plan (2-26-13).
- 2) Pantages at Discovery Bay, LLC (Applicant) – C & D Discovery Bay, LLC & East Contra Costa Irrigation District (ECCID) (Owners), County Files GP99-0008, RZ04-3146, SD06-9010, and DP04-3062: Request for approval of a General Plan Amendment, Rezoning, Major Subdivision and a Preliminary and Final Development Plan in the Discovery Bay area (10-22-13).

- 3) Steve Savage (Applicant) – Shapell Homes (Owner), County Files DP12-3032, GP12-0004, GP12-0005, SP12-0001, SD12-9298 and SD12-9297: Request for approval of a General Plan Amendment, Dougherty Valley Specific Plan (DVSP) amendment and a modification of the Gale Ranch Phase III and IV Final Development Plans in order to accommodate the establishment of a new elementary school within Phase IV of Gale Ranch. Also requesting approval of an amendment to Chapter 6 (Circulation) of the Dougherty Valley Specific Plan to include revised roadway sections for the future Dougherty Road and local roads within Gale Ranch Phase IV (12-10-13).

**Mandatory Referrals:**

- 1) Acquisition of 2.3 (+/-) acres of land, Assessor Parcel No. 094-100-011, located north of Kirker Pass Road, in unincorporated Pittsburg, by the East Bay Regional Park District (CP#13-07) (2-26-13).
- 2) Acquisition of 111.9 (+/-) acres of land, Assessor Parcel No. 080-070-014, at 6041 Morgan Territory Road, by the East Bay Regional Park District (CP13-08) (2-26-13).
- 3) Acquisition of 165 (+/-) acres of land, Assessor Parcel No. 432-040-005, located along Castro Ranch Road in El Sobrante adjacent to the city of Richmond by the East Bay Regional Park District. (County File #CP13-35)(11-19-13)
- 4) Acquisition of 90 (+/-) acres of land, Assessor Parcel No. 015-200-009, located at 4571 Orwood Road near the Town of Discovery Bay by the East Bay Regional Park District. (County File #CP13-38) (11-19-13)

**Land Use Permit:**

- 1) New Cingular Wireless – AT&T Mobility (Applicant) – Contra Costa County/Northern California Joint Pole Association (Owners), County File #LP13-2009: A request for a land use permit to attach a New Cingular Wireless distributed antenna system (DAS) node to an existing utility pole in the Kensington area (9-10-13).
- 2) New Cingular Wireless – AT&T Mobility (Applicant) – Contra Costa County/Northern California Joint Pole Association (Owners), County File #LP13-2010: A request for a land use permit to attach a New Cingular Wireless distributed antenna system (DAS) node to an existing utility pole in the public right-of-way in the Kensington area (9-10-13).
- 3) New Cingular Wireless – AT&T Mobility (Applicant) – Contra Costa County/Northern California Joint Pole Association (Owners), County File #LP13-2011: A request for a land use permit to attach a New Cingular Wireless distributed antenna system (DAS) node to an existing utility pole in the public right-of-way in the Kensington area (9-10-13).
- 4) New Cingular Wireless – AT&T Mobility (Applicant) – Contra Costa County/Northern California Joint Pole Association (Owners), County File #LP13-2017: A request for a land use permit to attach a New Cingular Wireless distributed antenna system (DAS) node to an existing utility pole in the public right-of-way in the Kensington area (9-10-13).
- 5) New Cingular Wireless – AT&T Mobility (Applicant) – Contra Costa County/Northern California Joint Pole Association (Owners), County File #LP13-2019: A request for a land use permit to attach a New Cingular Wireless distributed antenna system (DAS) node to a new utility pole in the public right-of-way in the Kensington area (9-10-13).
- 6) New Cingular Wireless – AT&T Mobility (Applicant) – Contra Costa County/Northern California Joint Pole Association (Owners), County File #LP13-2020: A request for a land use permit to attach a New Cingular Wireless distributed antenna system (DAS) node to an existing utility pole in the public right-of-way in the Kensington area (9-10-13).
- 7) Phillips 66 (Applicant & Owner), County File #LP12-2073: Implement and construct the Propane Recovery Project, which proposes refinery processing equipment improvements to recover for sale additional amounts of propane and butane from refinery fuel gas (RFG) and other process streams; and to decrease sulfur dioxide (SO<sub>2</sub>) emissions from the refinery as a result of removing sulfur compounds from RFG streams. The proposed project would add and modify processing and ancillary equipment within the Phillips 66 Rodeo refinery in Contra Costa County (11-19-13).

**Board of Appeals:**

- 1) Gwen Douglass (Appellant) – Gordon Jurgenson (Applicant & Owner), County File #VR11-1024: An appeal of the Zoning Administrator's decision to approve a minimum front yard setback variance and a minimum side yard setback variance for the construction of a retaining wall structure with driveway curb and bollards on top (5-14-13).



- 2) Mesa Outdoor LLC (Applicant) – John Traverso (Owner), County File #LP11-2008: An appeal of the Zoning Administrator’s decision to deny an application for approval of a land use permit to establish a two-sided, freestanding billboard on a 2.76-acre site at 4080 Cabrihlo Drive (Vine Hill, unincorporated Martinez) (8-13-13).

### **III. Representation/Attendance**

The County Planning Commission consists of seven members. There is one commissioner nominated from each of the five Supervisorial Districts and two are nominated as at large members. The Board of Supervisors appoints the nominees. The term for a County Planning Commissioner is four years. There were 23 scheduled meetings. The Planning Commission met nine times at which a quorum was always present. There were 13 cancelled meetings due to lack of items.

### **IV. Training/Certification**

Commissioners were previously provided with a copy of the Advisory Body Handbook and were requested to view two training videos titled, “The Brown Act and Better Government Ordinance – What You Need to Know as a Commission, Board, or Committee Member” and “Ethics Orientation for County Officials.” Jeffrey Wright was appointed to the District I seat in August and Rand Swenson was appointed to the District II seat in September. They received the training materials and submitted certification that they viewed both videos (attached). Certifications are on file for all of the commissioners.

### **V. Proposed Work Plan/Objectives for Next Year**

The work plan and objectives for 2014 are the same as the Commission Activities/Purpose statement.



Contra  
Costa  
County

To: Board of Supervisors  
From: Julia R. Bueren, Public Works Director/Chief Engineer  
Date: January 21, 2014

Subject: Disposal of Surplus Property

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**RECOMMENDATION(S):**

DECLARE as surplus and AUTHORIZE the Purchasing Agent, or designee, to dispose of fully depreciated vehicles and equipment no longer needed for public use as recommended by the Public Works Director, Countywide.

**FISCAL IMPACT:**

No fiscal impact.

**BACKGROUND:**

Section 1108-2.212 of the County Ordinance Code authorizes the Purchasing Agent to dispose of any personal property belonging to Contra Costa County and found by the Board of Supervisors not to be required for public use. The property for disposal is either obsolete, worn out, beyond economical repair, or damaged beyond repair.

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☒ APPROVE

☐ OTHER

☒ RECOMMENDATION OF CNTY ADMINISTRATOR

☐ RECOMMENDATION OF BOARD  
COMMITTEE

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Action of Board On: **01/21/2014** ☐ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

AYES \_\_\_\_\_ NOES \_\_\_\_\_

ABSENT \_\_\_\_\_ ABSTAIN \_\_\_\_\_

RECUSE \_\_\_\_\_

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: January 21, 2014

David J. Twa, County Administrator and Clerk of the Board of Supervisors

Contact: David Gould  
925-313-2151

By: , Deputy

CONSEQUENCE OF NEGATIVE ACTION:

Public Works would not be able to dispose of surplus vehicles and equipment.

CHILDREN'S IMPACT STATEMENT:

Not applicable.

ATTACHMENTS

Surplus Vehicles & Equipment

JANUARY 21, 2014

[illegible]



Contra  
Costa  
County

To: Board of Supervisors  
From: David Twa, County Administrator  
Date: January 21, 2014

Subject: Accept Bequest from Lili Mai Albertoni-Weedin to the Concord Homeless Shelter

---

**RECOMMENDATION(S):**

ACCEPT bequest from Lili Mai Albertoni-Weedin to the Health Services Department Homeless Shelter in Concord in the amount of \$450,000.

**FISCAL IMPACT:**

The bequest of \$450,000 was made to the Central County Interim Housing program and will be used to benefit the shelter. Because these funds are one time in nature, they will be used for one time expenses, including, but not limited to the purchase of vehicles and infrastructure improvements such as painting, ceiling repairs, and internet access.

**BACKGROUND:**

Lili Mai Albertoni-Weedin of Oklahoma upon her death left to the Health Services Department Homeless Shelter in Concord a bequest in the amount of \$450,000. The only stipulation on these funds is that they be used for the Concord Homeless Shelter.

California Government Code Section 25355 and Administrative Bulletin No. 117 - Gifts and Bequests require Board of Supervisors approval on any gift, bequest or devise over \$10,000.

**CONSEQUENCE OF NEGATIVE ACTION:**

The County would not receive the bequest.

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☒ APPROVE

☐ OTHER

☒ RECOMMENDATION OF CNTY ADMINISTRATOR

☐ RECOMMENDATION OF BOARD  
COMMITTEE

---

Action of Board On: **01/21/2014** ☐ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

AYES \_\_\_\_\_ NOES \_\_\_\_\_

ABSENT \_\_\_\_\_ ABSTAIN \_\_\_\_\_

RECUSE \_\_\_\_\_

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: January 21, 2014

David J. Twa, County Administrator and Clerk of the Board of Supervisors

Contact: Dorothy Sansoe,  
925-335-1009

By: , Deputy

cc:

CHILDREN'S IMPACT STATEMENT:

Not Applicable



**Contra  
Costa  
County**

To: Board of Supervisors  
From: Jeff Carman, Chief, Contra County Fire Protection District  
Date: January 21, 2014

Subject: REFERRAL TO FINANCE COMMITTEE VEHICLE LEASE, MAINTENANCE, AND FLEET MANAGEMENT PROGRAM & REVIEW OF EMS FIRST RESPONDER FEE IMPLEMENTATION

---

**RECOMMENDATION(S):**

1. REFER to the Finance Committee a proposal to enter into a long-term vehicle leasing, maintenance, and fleet management program for the Contra Costa County Fire Protection District's light vehicle fleet, and
2. REFER to the Finance Committee a review of implementation of an EMS First-Responder Fee to offset expenses incurred while providing Emergency Medical Services on over 35,000 incident annually.

**FISCAL IMPACT:**

There is no direct cost related to examination of the proposal by the Committee. The estimated \$275,000-\$350,000 annual cost of the proposed program at full implementation would be funded within the authorized operating budget of the Fire District. Full implementation of the proposed program would result in estimated light vehicle fleet maintenance savings of approximately \$80,000 per year annually as well as provide predictable annual costs to support, maintain, and replace the light vehicle fleet in subsequent years.

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☒ APPROVE

☐ OTHER

☒ RECOMMENDATION OF CNTY ADMINISTRATOR

☐ RECOMMENDATION OF BOARD  
COMMITTEE

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Action of Board On: **01/21/2014** ☐ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

AYES \_\_\_\_\_ NOES \_\_\_\_\_

ABSENT \_\_\_\_\_ ABSTAIN \_\_\_\_\_

RECUSE \_\_\_\_\_

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: January 21, 2014

David J. Twa, County Administrator and Clerk of the Board of Supervisors

Contact: Lewis Broschard,  
941-3520

By: , Deputy

cc:

## **BACKGROUND:**

### **Fleet Management Referral:**

The Fire District operates a fleet of approximately 80 light vehicles to fulfill its emergency response and support functions including supply, maintenance, and facilities, as well as administration and fire prevention activities. The fleet has been significantly reduced in size from over 100 light vehicles since 2010. Historically, the Fire District purchased light vehicles and maintained them with private sector vendors. With very few exceptions, there have been no purchases made or replacements scheduled to the aging light vehicle fleet since 2007. The majority of our light vehicles are in excess of County replacement guidelines for age and/or mileage and are presenting increased costs for operation, fuel, and unpredictable maintenance. Reliability of our emergency response and support functions is compromised because of increased age and maintenance issues.

The management of the light vehicle fleet was coordinated and performed by a dedicated position that was eliminated in 2010 due to budget cuts. This function is now performed by the Fire Marshal as an additional adjunct duty.

The Fire District has researched several innovative programs in the public and private sector for the replacement, maintenance, and management of our light vehicle fleet. Due to the quantity of vehicles needing replacement, coupled with insufficient capital to meet this need, a long-term leasing strategy is proposed. The leasing concept will provide acquisition of light vehicles with no initial capital outlay and manageable monthly leasing costs. In addition, the leasing program includes a maintenance program which will dramatically reduce our annual maintenance costs and eliminate unpredictable costs in the future. The maintenance program allows for flexibility and convenience in locating and selecting vendors for routine maintenance. The program includes a fleet management component with online fuel consumption tracking, consultation on appropriate and economical vehicle selection based on anticipated needs and use, and monitoring of maintenance programs and service intervals for compliance with the manufacturer's recommended service for each vehicle.

### **EMS Responder Fee Referral:**

The Fire Protection District Law of 1987 provides clear direction on fiscal management and case law in California offers logical solutions such as EMS cost recovery for advanced life support (ALS) first responder fees. Insurance companies throughout the State currently pay reimbursements to first responder agencies for these services. EMS cost recovery is a reasonable mechanism for the District to recoup some of its operating expenses for providing these essential services to the community. Based on a conservative collection expectation, the Fire District estimates there is a potential to generate over one-million dollars annually. Insurance companies will provide reimbursement for emergency medical services and there will be no impact to those patients who are uninsured. These fees are currently being collected by other fire agencies within Contra Costa County and around the state and the program has proven to be very successful.

## **CONSEQUENCE OF NEGATIVE ACTION:**

The referrals will not be made to the Finance Committee and will not become part of the Committee work-plan for 2014.

## **CHILDREN'S IMPACT STATEMENT:**

No impact.





Contra  
Costa  
County

To: Board of Supervisors  
From: David Twa, County Administrator  
Date: January 21, 2014

Subject: 2013 Annual Report for the Finance Committee

---

**RECOMMENDATION(S):**

RECEIVE 2013 Annual Report submitted by the Finance Committee.

**FISCAL IMPACT:**

No fiscal impact. This is an informational report only.

**BACKGROUND:**

On December 13, 2011, the Board of Supervisors adopted Resolution No. 2011/497, which requires that each regular and ongoing board, commission, or committee shall annually report to the Board of Supervisors on its activities, accomplishments, membership attendance, required training/certification (if any), and proposed work plan or objectives for the following year. The attached report fulfills this requirement for the Finance Committee.

All Finance Committee reports from 2009 onward and attachments can be found on the County website at <http://ca-contracostacounty.civicplus.com/index.aspx?NID=2286>.

In 2013, the Finance Committee received reports and/or made recommendations to the Board of Supervisors concerning issues related to:

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☒ APPROVE

☐ OTHER

☒ RECOMMENDATION OF CNTY ADMINISTRATOR

☐ RECOMMENDATION OF BOARD  
COMMITTEE

---

Action of Board On: **01/21/2014** ☐ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

AYES \_\_\_\_\_ NOES \_\_\_\_\_

ABSENT \_\_\_\_\_ ABSTAIN \_\_\_\_\_

RECUSE \_\_\_\_\_

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: January 21, 2014

David J. Twa, County Administrator and Clerk of the Board of Supervisors

Contact: Lisa Driscoll, County Finance Director  
925-228-4188

By: , Deputy

cc: Robert Campbell, Auditor-Controller

#### BACKGROUND: (CONT'D)

- ◆ Community Development Block Grant (CDBG) Funding for economic development and infrastructure/public facilities;
- ◆ Methodology for Interest Calculations on Construction Deposits;
- ◆ Establishing and Funding a Capital Renewal Fund for Facility Maintenance and Replacement;
- ◆ Real Estate Asset Management Plan (RAMP) Annual Report and Policy;
- ◆ Regular Capital Facility Updates and Specific Building Projects Including the Sheriff-Coroner Administration Central County Office;
- ◆ Specific On-Call Differentials for Unrepresented Management Positions;
- ◆ Single Audit;
- ◆ Changing the Community Development Block Grant Funding Cycles to Coincide with the Five-year Consolidated Plan;
- ◆ Special Revenues Administered by the Board of Supervisors (Livable Communities Trust Fund, Child Care Affordability Fund, CCCFutures Fund);
- ◆ Policy Governing the Use of Special Revenues; and
- ◆ Proposal to Initiate a Voter Education and Information Pilot Program to Create Opportunities for the Public to Become More Informed, Award, and Involved with Current Civic Issues and to Foster a Culture of Civic Responsibility and Engagement.

At year end, the Finance Committee had pending referrals on:

- ◆ Continuing to develop strategic priorities to guide the budget development process including defining core services;
- ◆ Continuing to evaluate funding priorities for FLIP;
- ◆ Continuing to implement and evaluate the Real Estate Asset Management Plan (RAMP); and
- ◆ Continuing to review and update the binder on Special Revenues Administered by the Board of Supervisors.

#### CONSEQUENCE OF NEGATIVE ACTION:

The committee will not be in compliance with Resolution No. 2011/497.

#### CHILDREN'S IMPACT STATEMENT:

None.



AIR-16615

BOS Agenda

Meeting Date: 01/21/2014

Time (Duration):

CONTINUE Extension of Emergency Declaration Regarding Homelessness

Submitted For: David Twa, County Administrator

Department: County Administrator

Noticed Public Hearing: No

Presenter/Phone, if applicable:

Handling Instructions:

Contact, Phone: Lavonna Martin, 925-313-6736

Consent

Other Actions

Division: Health &amp; Human Services

Official Body: Board of Supervisors

Audio-Visual Needs:

District: All Districts

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**Information**
**Recommendation(s):**

CONTINUE the emergency action originally taken by the Board of Supervisors on November 16, 1999 regarding the issue of homelessness in Contra Costa County.

**Fiscal Impact:**

None.

**Background:**

Government Code Section 8630 required that, for a body that meets weekly, the need to continue the emergency declaration be reviewed at least every 14 days until the local emergency is terminated. In no event is the review to take place more than 21 days after the previous review.

On November 16, 1999, the Board of Supervisors declared a local emergency, pursuant to the provisions of Government Code Section 8630 on homelessness in Contra Costa County.

With the continuing high number of homeless individuals and insufficient funding available to assist in sheltering all homeless individuals and families, it is appropriate for the Board to continue the declaration of a local emergency regarding homelessness.

**Consequence of Negative Action:**

The Board of Supervisors would not be in compliance with Government Code Section 8630.

**Children's Impact Statement:**

None.

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**Budget Information**

*Information about available funds*

Budgeted: ☐

Funds Available: ☐

Adjustment: ☐

Amount Available:

Unbudgeted: ☐

Funds NOT Available: ☐

Amendment: ☐

Account Code(s) for Available Funds

1:

**Fund Transfers**

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**Attachments**

*No file(s) attached.*

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Contra  
Costa  
County

To: Board of Supervisors  
From: Kathy Gallagher, Director  
Date: January 21, 2014

Subject: 2013-14 Community Services Bureau Policies & Procedures manual and Service Plan

---

**RECOMMENDATION(S):**

APPROVE 2013-14 Policies and Procedures and Service Plan for the Community Services Bureau of the Employment & Human Services Department.

**FISCAL IMPACT:**

None

**BACKGROUND:**

Head Start Performance Standard 1305.3 (c) (6) mandates that the Head Start grantee set criteria, based on a community assessment, that define types of children and families who will be given priority for recruitment and selection. It also requires annual approval of written plans for implementing services which is described within the Policies and Procedures manual. This board order accepts the Community Services Bureau Policies and Procedures and Service Plan for the 2013-14 program year. The document is scheduled for review and approval by the Head Start Policy Council on January 15, 2014.

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☒ APPROVE

☐ OTHER

☒ RECOMMENDATION OF CNTY ADMINISTRATOR

☐ RECOMMENDATION OF BOARD  
COMMITTEE

---

Action of Board On: **01/21/2014** ☒ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

AYES \_\_\_\_\_ NOES \_\_\_\_\_

ABSENT \_\_\_\_\_ ABSTAIN \_\_\_\_\_

RECUSE \_\_\_\_\_

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: January 21, 2014

David J. Twa, County Administrator and Clerk of the Board of Supervisors

Contact: J. Sanchez-Rosa, 313-1779

By: , Deputy

cc: Joanne Denardo, Cassandra Youngblood

CONSEQUENCE OF NEGATIVE ACTION:

If not approved, Department will not be in compliance with Head Start regulations.

CHILDREN'S IMPACT STATEMENT:

The Employment & Human Services Department Community Services Bureau supports three of Contra Costa County's community outcomes - Outcome 1: "Children Ready for and Succeeding in School," Outcome 3: "Families that are Economically Self-sufficient," and, Outcome 4: "Families that are Safe, Stable, and Nurturing." These outcomes are achieved by offering comprehensive services, including high quality early childhood education, nutrition, and health services to low-income children throughout Contra Costa County.

ATTACHMENTS

2014 CSB Policies and Procedures

Clean Copy 2014 CSB Policy and Procedure

CONTRA COSTA COUNTY EMPLOYMENT & HUMAN SERVICES DEPARTMENT  
COMMUNITY SERVICES BUREAU

# POLICIES AND PROCEDURES

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2013-2014



Policy Council Approved:  
Board of Supervisors Approved:

CONTRA COSTA COUNTY EMPLOYMENT & HUMAN SERVICES DEPARTMENT  
COMMUNITY SERVICES BUREAU

# POLICIES AND PROCEDURES

## SECTION 1-ADMINISTRATION

~~2013-2014~~

Policy Council Approved:  
Board of Supervisors Approved:

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~~2013-2014~~

Policies and Procedures  
Section 1: Administration

<b>PART I</b>	<b>PROGRAM GOVERNANCE</b>		
A	Service Area	4	Deleted: 2012...013-2013
B	Service Recipients	4	Deleted: 4
C	Program Governance	4	Deleted: 4
			Deleted: 4
			Deleted: 15
			Deleted: 15
			Deleted: 18
			Deleted: 18
			Deleted: 18
			Deleted: 19
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<b>PART II</b>	<b>PLANNING</b>		Formatted Table
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**J. Program Governance**

**A. Service Area**

Contra Costa County Employment and Human Services Department, Community Services Bureau (CSB) is the designated Community Action Agency for Contra Costa County. CSB is the Head Start and Early Head Start Grantee for Contra Costa and also administers the California Department of Education Child Development Programs, Community Services Block Grant, Stage 2/Alternative Payment Programs, Low-Income Home Energy Assistance and Weatherization Programs.

**B. Service Recipients**

The Bureau's services are directed toward building self-sufficiency among the county's low-income residents and vulnerable populations. CSB serves pregnant women and children ranging in age from birth through kindergarten, individuals and families. All service recipients served under the various CSB funding streams must meet the eligibility requirements of the funding source.

**C. Program Governance**

**1. The Board of Supervisors**

The Board of Supervisors is a body of publically elected officials whose role is to oversee the operations of county departments and to exercise executive and administrative authority through the county government and county administration. The BOS also is charged with responsibility and oversight to the Head Start and Early Head Start grants as outlined in Appendix A in this section.

**2. Policy Council Composition and Formation**

The County Board of Supervisors and the Policy Council determine the total size of the Policy Council, procedures for electing parent members, and selection of community representatives.

Policy Council composition is reviewed annually to ensure that it meets the General Membership guidelines of HSPS 1304.50(b)(2). Consideration is given to the number of Head Start and Early Head Start currently enrolled children along with program options (Full Day, Part Day, and Home Base). The following steps explain how to determine Policy Council composition:

- Determine the total number of Head Start and Early Head Start slots
- Determine the total HS/EHS slots for each site by program option based on the current CSB slot map (HS/Full Day, HS/Part Day, EHS/FD, and Home Base (EHS/HS collectively). Calculate the percentage of each program option (multiply the number of program option slots for each site by the total number of slots). This will give you the percentage of membership that each option should represent.
- The number of currently enrolled representatives is set at 39. This is determined using the formula  $1/60$  (1 representative per site for every 60 HS or EHS slots).

Head Start Part Day 29%	9 Representatives
Head Start Full Day 50%	13 Representatives
Early Head Start 17 %	5 Representatives
Home Based Option 4%	1 Representative

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This information will be included in the Policy Council Bylaws approved annually by the Board of Supervisors and the Policy Council. The term for members is one year, ~~October~~ to September. Parent representatives will be (re)elected annually by each center's parent committee. Community representatives will be selected annually. The maximum number of one-year terms an individual can serve is three. No grantee or delegate agency staff (or members of their immediate family) may serve on the Policy Council or on the Delegate Agency's Policy Committee, except parents who occasionally (no more than 10 hours/month) substitute for regular Early Head Start or Head Start staff. Immediate family is defined as any parent, child, sibling, grandparent, significant other, co-parent or spouse of Community Services Bureau staff. At least 51% of the Policy Council members must be parents of currently enrolled children.

### 3. Procedures for Electing Parent Representatives to the Policy Council

The parent committees at each site will elect parent representatives as early as possible in the program year. This is done by voting at the parent meeting. Parent representatives must be parents of currently enrolled children in the program.

### 4. Procedures for Electing Community Representatives to the Policy Council

Community representatives are drawn from the local community. They represent past parents and local community agencies. All Community Representatives must be elected by the Policy Council. Membership for Individual Community Representatives is also limited to 3 one-year terms (1304.50(b)(5)).

- Past Parent Community Representatives

The past parent representatives must submit a letter to the Policy Council requesting consideration to be a community representative. Letters are read during a business meeting, and the Policy Council must vote to approve the parent's request. If the Policy Council receives more requests than vacancies, all letters are read for consideration, and the Policy Council votes, and the majority decision rules.

- Community Agency Representatives

The Policy Council determines which community agencies they would like to invite to participate on the Council. Agencies are drawn from the local community and are familiar with resources and services for low-income children and families. CSB staff to Policy Council assists by contacting agencies to seek interest in joining and requesting the name of an agency representative to be elected onto the Policy Council as early in the program year as possible. Agency representatives are presented and considered for approval by the Policy Council.

### 5. Parent Committee

The Parent Committee must carry out at least the following minimum responsibilities:

Advise center staff in developing and implementing local program policies, activities, and services.

Plan, conduct, and participate in informal, as well as formal, programs and activities for children, parents and staff.

### 6. Policy Council Responsibilities

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The Policy Council has policy-making authority and is governed by its By-Laws. Each year, through ongoing trainings, the Policy Council and Board of Supervisors are trained on Governance and Head Start Performance Standards, and oriented to CSB program services. CSB staff provides a comprehensive orientation to CSB and Policy Council roles and responsibilities each year. A make-up orientation is also provided for members joining later in the program year. A joint training with the Board of Supervisors is also scheduled annually.

### 7. Appendix A: Governance and Management Responsibilities

The following chart outlines the shared responsibilities between the Board of Supervisors, Policy Council, Head Start Director and EHSD Director.

FUNCTION	BOARD OF SUPERVISORS	POLICY COUNCIL	HS* PROGRAM DIRECTOR	AGENCY DIRECTOR
I PLANNING 1304.50(d)(1)(iii)				
(a) 1304.50(d)(1)(iii) Procedures for program planning in accordance with this Part and the requirements of 45 CFR 1305.3 (this regulation is binding on Policy Councils exclusively).	A & C	C	B	C
(b) 1304.50(d)(1)(iv) The program's philosophy and long - and short - range program goals and objectives (see 45 CFR 1304.51(a) and 45 CFR 1305.3 for additional requirements regarding program planning).	A & C	C	B	C
(c) 1304.50(d)(1)(v) The selection of delegate agencies and their service areas (this regulation is binding on Policy Councils exclusively) (see 45 CFR 1301.33 and 45 CFR 1305.3(a) for additional requirements about delegate agency and service area selection, respectively).	A & C	C	B	C
(d) 1304.50(d)(1)(vii) Criteria for defining recruitment, selection, and enrollment priorities in accordance with the requirements of 45 CFR Part 1305.	A	C	B	(Review Only)

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(e) 1304.50(d)(1)(i)	A & C	C	B	C
All funding applications and amendments to funding applications for Early Head Start and Head Start, including administrative services, prior to the submission of such applications to the grantee (in the case of Policy Councils).				
(f) 1304.50(f)	A	C	B	(Review Only)
Policy Council, Policy Committee, and Parent Committee reimbursement. Grantee and delegate agencies must enable low income members to participate fully in their group responsibilities by providing, if necessary, reimbursements for reasonable expenses incurred by the members.				
(g) 1304.50(d)(1)(viii)	A	C	B	C
The annual self-assessment of the grantee or delegate agency's progress in carrying out the programmatic and fiscal intent of its grant application, including planning or other actions that may result from the review of the annual audit and findings from the federal monitoring review (see 45 CFR 1304.51(i)(1) for additional requirements about the annual self-assessment).				

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FUNCTION	BOARD OF SUPERVISORS	POLICY COUNCIL	HS* PROGRAM DIRECTOR	AGENCY DIRECTOR
<b>II GENERAL PROCEDURES 1304.50 (d)(1)(vi)</b>				
(a) 1304.50(d)(1)(vi) The composition of the Policy Council or the Policy Committee and the procedures by which policy group members are chosen.	A & C	C	B	C
(b) 1304.50(g)(1) Grantee and delegate agencies must have written policies that define roles and responsibilities of the governing body members and that inform them of the management procedures and functions necessary to implement a high quality program.	A & C	C	N/A	C
(c) 1304.50(d)(1)(ii) Procedures describing how the governing body and the appropriate policy group will implement shared decision-making.	A & C	C	B	C
(d) 1304.50(h) Internal dispute resolution. Each grantee and delegate agency and Policy Council or Policy Committee jointly must establish written procedures for resolving internal disputes, including impasse procedures, between the governing body and policy group.	A & C	C	B	C
(e) 1304.50(d)(2)(v) Establish and maintain procedures for hearing and working with the grantee or delegate agency to resolve community complaints about the program.	B	B	B	B
(f) 1304.50(g)(2) Grantee and delegate agencies must ensure that appropriate internal controls are established and implemented to safeguard federal funds in accordance with 45 CFR 1301.13.	A	N/A	B	B
(g) 1304.50(d)(1)(ix) The annual independent audit that must be conducted in accordance with 45 CFR 1301.12.	A & C	N/A	B	B

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FUNCTION	BOARD OF SUPERVISORS	POLICY COUNCIL	HS* PROGRAM DIRECTOR	AGENCY DIRECTOR
<b>III HUMAN RESOURCES MANAGEMENT 1304.50(d)(1)(x)</b>				
(a) 1304.50(d)(1)(x) Program personnel policies and subsequent changes to those policies, in accordance with 45 CFR 1301.31, including standards of conduct for program staff, consultants, and volunteers.	A & C	C	B	B
(b) 1304.50(d)(1)(xi) Decisions to hire or terminate the Early Head Start or Head Start Director of the grantee agency.	A & C	C	N/A	B
(c) 1304.50(d)(1)(xii) Decisions to hire or terminate any person who works primarily for the Early Head Start or Head Start program of the grantee agency.	C	C	B (Grantee Only)	C
(d) 1304.50(d)(1)(xi) Decisions to hire or terminate the Early Head Start or Head Start Director of the delegate agency.	N/A	N/A	N/A	B
(e) 1304.50(d)(1)(xii) Decisions to hire or terminate any person who works primarily for the Early Head Start or Head Start program of the delegate agency.	N/A	N/A	B (Delegate Only)	C

### KEY AND DEFINITIONS AS USED IN CHART

\* When a grantee or delegate agency operates an Early Head Start program only and not an Early Head Start and a Head Start program, these responsibilities apply to the Early Head Start Director.

A. General Responsibility. The group with legal and fiscal responsibility that guides and oversees the carrying out of the functions described through the individual or group given operating responsibility.

B. Operating responsibility. The individual or group that is directly responsible for carrying out or performing the functions consistent with the general guidance and oversight from the group holding general responsibility.

C. Must Approve or Disapprove. The group must be involved in the decision-making process prior to the point of seeking approval. If it does not approve, a proposal cannot be adopted, or the proposed action taken, until agreement is reached between the disagreeing groups.

D. Determined locally. Management staff functions as determined by the local governing body and in accordance with all Head Start regulations.

### Procedures, Plans, & Applications

Requiring Board & Policy Council Approvals (rev. 5/19/09)

(Existing Appendix A requirements PLUS the added ones from the 2007 HS legislation)\*\*

Procedure/Plan/Application	Approval Required		Frequency of Approval
	Board of Directors	Policy Council	
Planning Procedure (Road Map)	X	X	Annually

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Goals and Objectives	X	X	Annually
Child Recruitment/Selection Procedures	X (added)	X	Annually
Budget and Grant Application	X	X	Annually - and as needed for supplements
Self Assessment and Plan for Corrections	X (added)	X	Annually
Board Composition Requirements for non-governmental agencies	X (added)	—	One-time (until changed)
Board and PC Conflict of Interest requirements	X (added)	X (added)	One-time (until changed)
Board approval of PC Composition Procedure for how PC members are selected	X X (added)	— X (added)	One-Time (until changed)
Policy defining roles/ responsibilities of governing board members for implementing a high quality program	X	—	One-Time (until changed)
Procedures describing how shared governance is implemented	X	X	One-Time (until changed)
Dispute Resolution & Impasse Procedure (OHS will issue procedure)	X	X	One-Time (until changed)
Procedures to resolve community complaints, conduct investigations.	X Previously "operating" role	Previously "operating" role	One-Time (until changed)
Personnel Policies & Procedures (Revisions to originally approved)	X	X	As Needed
Service Area Plans	—	X	Annually
Financial Management Accounting & Reporting Policies including audit	X (added)	—	One-Time (until changed)
Board: Hiring/Termination procedures for Executive, Head Start, Fiscal, and HR Directors	X (added)	—	One-Time (until changed)
Policy Council: Hiring and firing criteria for program staff.		X (added)	

Required Reports	To Board	To PC	Frequency
Budget and Program Reports	X	X	Periodic
Budget Reports	X	X	Monthly
Credit Card Expense Reports	X	X	Monthly

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USDA Meals/Snacks	X	X	Monthly
Program Information Summaries	X	X	Monthly
Enrollment Reports	X	X	Monthly

\*\* Additional clarifications and revised regulations will be forthcoming from OHS.

### 8. Responsibilities of Board of Supervisors, Policy Council, Employment and Human Services Executive Director and Community Services Bureau Director

#### i. Background

- The responsibilities of the Board of Supervisors, Policy Council, and Director of Program Services are described in the Head Start Performance Standards. The Performance Standards describe certain responsibilities for the Director of the Head Start program, leaving decisions regarding other responsibilities to Executive Directors of the local Head Start Grantee.

#### ii. Reference

- Head Start Performance Standards, 45 CFR 1304.50(g)(i)
- Policy

The Employment and Human Services (EHSD) Director and the Community Services Bureau Director shall ensure that the Policy Council and the Board of Supervisors are routinely and frequently informed of, and trained on, management procedures and functions, as well as the Federal laws and regulatory compliance issues required to ensure a quality program. Mutual communication and understanding between the governing board, the policy council and program management are fundamental prerequisites for a healthy Head Start Program. The EHSD Director and the Community Services Bureau Director will also ensure that the Board of Supervisors has an understanding and appreciation of the Head Start Philosophy and the role of parents and Policy Council in shared governance. Careful and complete communication and planning will ensure effective oversight and appropriate actions and interventions that will foster the mutual understanding and actions of all entities responsible to maintain a quality Head Start Program.

#### iii. Procedures

- The Employment and Human Services Department (EHSD) Director will meet monthly with the County Administrator's Office.
- Topics for the monthly meetings will include, but not be confined to:
  - Fiscal/budget issues
  - Personnel matters
  - Facility issues
  - Policies and Procedures
  - Program planning
  - Annual Self Assessment
  - Annual independent audit
  - Grant development and submission
  - Correspondence with ACF
  - Program issues
  - Enrollment and Average Daily Attendance
  - Regulatory changes
  - Parent Involvement
  - Planning for joint Board of Supervisors/ Policy Council training activities

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- A meeting report will be generated by the Employment and Human Services Director and the Community Services Bureau Director.
- The report of the meeting will be sent monthly to the Health and Human Services Committee of the Board of Supervisors, agendized by the Board of Supervisors and the Policy Council.
- The Employment and Human Services Director and Community Services Bureau Director will jointly meet throughout the program year, individually, with each member of the BOS to review reports, give updates and advice, and train on new regulations and initiatives.

### 9. Role of Policy Council in the Annual Grant Development Process

Throughout the year, the Policy Council is involved in the grant process through a variety of ways:

- The Program Services/Ongoing Monitoring subcommittee meets throughout the year to review and update the annual program goals and objectives and the annual parent services budget and activities.
- The Fiscal subcommittee meets monthly to develop, adjust and approve the program budget for the coming year's grant and tracks it throughout the year.
- The Policy Council approves the annual program goals and objectives.
- The Policy Council reviews and approves the Community Assessment annual updates and the full assessment every three years.
- The Policy Council also reviews and approves the Annual Planning Calendar, Child Recruitment and Selection Criteria, the Self Assessment and Plan for Corrective Actions, all of which are included in the submission of the Annual Grant Application.

Once these components of the grant are reviewed and approved, the Policy Council approves the full grant in the fall before submission to ACF.

### 10. Resolution of Disputes between the Board of Supervisors and the Policy Council (Impasse Policy)

#### i. Background

- The Performance Standards require that Head Start grantees establish a policy and necessary implementation procedures for the resolution of internal disputes between the Board of Supervisors and the Policy Council.

#### ii. Reference

- Head Start Performance Standards, 45 CFR 1304.50(h)

#### iii. Policy

- It is the policy of Contra Costa County to resolve any disagreements between the Board of Supervisors and the Head Start Policy Council fairly and expeditiously. Whenever possible, disagreements will be resolved through processes of mediation and conciliation, including discussion, compromise, and consensus-seeking between parties, and, if necessary, professional mediation.

#### iv. Administrative Procedure

- Informal Resolution

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The Chairpersons of the Board of Supervisors and the Policy Council will monitor actions and decisions of each body as they relate to their respective responsibilities. In the event that a conflict exists, they will initiate informal discussions between representatives of the two bodies and seek a mutually acceptable resolution.

- Mediation

If informal resolution is not effective, the Chairpersons of the Board of Supervisors and the Policy Council shall request that the Community Services Bureau Director identify qualified individuals who provide professional mediation services. The Chairpersons will confer and mutually designate a professional mediator who will be retained to mediate the disagreement. The mediator will use conciliation, compromise and consensus-seeking between the two bodies. The mediation process shall be non-binding.

### 11. Resolution of Community Complaints

i. "Community complaint" is defined as any complaint from anyone other than staff.

ii. The Policy Council is generally responsible for (and has the legal and fiscal responsibility for guiding/directing/carrying-out the establishment of) a method of hearing and resolving community complaints about the Contra Costa County Community Services Bureau.

#### iii. Process for Solving Disputes/Complaints

- Any parent (enrolled or applying for services) or community member may report a complaint to a program staff member of any of our program/sites, i.e. Site Supervisor, Teacher, Associate Teacher, or Comprehensive Services, Analyst, or clerical staff. If the complaint comes in by phone, the staff member documents that complaint. Complaints may come from sources other than the site, i.e. Board of Supervisors. Anyone receiving a complaint will immediately contact a program manager by phone with the following information:
  - Step 1: Document the complaint in writing to include the following information:  
Contact information of the complainant: Name, Address, Phone Number, email (if appropriate);  
Information Shared: When was the occurrence, Who was involved, What happened, Where did it occur, What was the impact.  
Other information that the complainant wishes to share.  
If the complaint comes in by phone: program staff document call, note time, date & staff member name
  - Step 2: Complaint goes first to Site Supervisor who must discuss the details with their Assistant Director within 24 hours of the report. The Assistant Director works with the program staff to attempt resolution within 48 hours.
  - Step 3: Complaints not resolved within 48 hours will be brought to the attention of the Division Manager, Bureau Director, or their designee.
  - Step 4: If the complaint is then resolved, the Bureau Director will send a memo to all involved, stating remedial actions to be taken by staff and the time line for these actions.
  - Step 5: If satisfactory resolution is still not achieved, the Bureau Director will request the EHSD Director to review all documentation. When the complaint is then resolved,

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the EHSD Director will send a memo to all involved, stating remedial actions to be taken by staff and the time line for these actions.

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### II. Planning

#### A. Philosophy

The Community Services Bureau Philosophy of Program Management is as follows:

To establish a culturally competent, systematic and innovative process of program planning that demonstrates forward mobility and strategic thinking, in an effort to meet the changing needs of the children and families within the community.

In efforts to fulfill our philosophy, ~~administrative~~ staff, including fiscal, personnel, information technology and administration, is committed and dedicated to carry out the following program goals:

- (1) ~~Poor health and nutrition are significantly correlated to children and families living in poverty. CSB will address the need to improve indicators of nutritional health through increased education and physical activity.~~
- (2) ~~Disabilities and mental health needs continue to trend upwards. CSB will expand mental health and disabilities assessment, treatment, and case management linkage opportunities for children and families.~~
- (3) ~~Exposure to violence has a lasting impact on children's development including their emotional, mental and physical health. CSB will promote positive and enduring adult-child relationships that increase a child's level of secure attachments by providing services to promote the safety and well-being of children and families.~~
- (4) ~~CSB will provide ongoing learning opportunities to enhance employees' career development and assist in meeting new job requirements.~~

CSB implements a systematic, ongoing process of program planning that includes consultation with the programs' governing body, policy groups, program staff, and with other local community organizations that serve enrolled families. CSB planning includes: ~~community assessment~~, multi-year (long-range) program goals and short-term objectives, ~~systems planning calendar~~, and written plans for implementing services in each of the program areas.

#### B. Methodology

##### 1. Community Assessment

- The Community Assessment is conducted once every three years with annual updates during the onset of each program year. ~~The community assessment helps keep CSB abreast of substantive issues facing the community which informs all systems and services of the bureau. Strengths, resources, needs and trends in the CSB service area are identified and integrated into the planning process and into the development and implementation of policies, procedures, service plans, goals and objectives.~~ The findings of the Community Assessment are used to help reach decisions in areas such as: to help determine CSB program philosophy, long-range and short-range program objectives, help determine the type of services and program options to be provided, help determine the recruitment areas of the program, help identify locations of centers and home-based programs, and help set the criteria for recruitment and selection.
- The Community Assessment ~~process is led by a CSB Analyst.~~ The data that is collected externally and internally consists of, but is not limited to demographic make-up of eligible children and families, other child development and child care programs serving eligible children including infant/toddler, and pregnancy programs, services for children with disabilities, education, health, nutrition and social services needs for eligible children and families and community resources that could address the needs of eligible children and families.

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(2) Work collaboratively with community based organizations and other stakeholders to address the root causes of poverty by increasing the access of low income Contra Costa County residents to programs and services providing job training and employment supports; ¶  
(3) To educate, role model, and establish healthy habits in the areas of oral health, nutrition and mental health in an effort to prevent dental decay, obesity, and community violence and to achieve health equity for families, staff and the greater community; and ¶  
(4) Sustain our current Continuing Education Programs that ensures 50% Head Start teachers' attainment of an associate degree by October 1, 2011 and 50% attainment of a baccalaureate or advance degree by September 30, 2013, as well as support additional initiatives that promote distance learning opportunities and increase that accessibility to higher education. To better support children and families, staff will adequately assess needs, plan and implement both short and long-term goals and objectives, conduct ongoing evaluation of program goals...

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## Policies and Procedures

### Section 1: Administration

- The Community Assessment helps to identify strengths, disparities, needs and trends in the community which guides management, Policy Council, and the County Board of Supervisors in the planning process for eligibility, recruitment, selection criteria, site and classroom placement, as well as general program management, including curriculum and family support services. The Community Assessment also guides the program goals and objectives.

#### 2. Self-Assessment

- Once each program year, CSB conducts a joint Grantee and Delegate Agency ~~self-assessment~~ of the effectiveness and progress of our programs in meeting program goals and objectives and in implementing federal regulations. Self-assessment tools include resources from the OHS Monitoring Protocol, and CLASS assessment. The modes of assessment in the protocols include: Observation, Interview, and Records Review.
- A training and overview of the self-assessment process is given prior to the designated week the self-assessment is conducted. The role of the Bureau Director and Delegate Director and/or their designees in the self-assessment process are as “advisor” to the team. The analyst responsible for the self-assessment is the Team Leader and may be supported by a consultant. Teams are comprised of grantee and delegate agency management and non-management staff, parents, community partners, and representatives of the Board of Supervisors. Teams are formed in November of each year.
- The self-assessment process concludes with the team leader and/or his designee(s) writing a cumulative and comprehensive report that addresses program strengths as well as potential non-compliances. If needed, a corrective action plan is developed to remediate areas of non-compliance. The final report of the self-assessment, including the certifications of corrective actions, is presented to the Policy Council, Local Policy Committee, Delegate Board, and Board of Supervisors for approval in March of each year. As soon as these approvals are secured, the final report is then forwarded to the ACF Program Specialist.
- The results of the self-assessment are used in the planning process, in developing and improving program services, and in formulating the program approach included in grant applications.

#### 3. Strategic Plan

- With the support of the Employment and Human Services Director, CSB adopts the Program Goals and Objectives as the bureau’s ~~five~~ year Strategic Plan. The plan addresses needs and concerns that are identified through the community assessment, self-assessment, and ongoing monitoring results. They are also developed with input provided from parents through the Policy Council’s Program Services Subcommittee. The strategic plan is reviewed and updated ~~semi-annually~~ by the Senior Management Team. Annual updates are presented to the Policy Council and Board of Supervisors.

#### 4. Bureau Systems Planning Calendar

- The purpose of the CSB Planning Calendar is to provide chronological guidance and a timeline for critical events such as: reviews, audits, reports, etc. that occurs within the year.
- The planning calendar ensures continuity within the programs as well as throughout the bureau. Included in the planning calendar are methods to ensure consultation and collaboration with the program’s governing body, policy groups and program staff. The planning calendar is updated and ~~submitted for approval~~ annually by the Policy Council and the Board of Supervisors.

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## Policies and Procedures Section 1: Administration

### 5. Management Planning Meetings

- Planning is conducted on an on-going basis at varying levels throughout the bureau during planning meetings, staff summits, and management retreats. **Additional information regarding management planning meetings is found under Section III-Communications.**

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## Policies and Procedures Section 1: Administration

### III. Communications

#### A. General Description

All staff is expected to communicate within the department and externally using the following communication tools:

- Common, not technical terms
- A professional tone
- Assurance that the approach is based on each family's cultural/linguistic preferences
- Adherence to the principles of Facilitative Leadership
- Encouragement of a team approach
- Ensure that translation services are available when needed

#### B. Internal Communication

Employees must follow County policy with regards to courtesy and confidentiality. High staff morale is dependent on friendly greetings, active listening and a display of a helpful attitude toward team members. The following are methods of internal communication with program staff:

- Staff summits
- Regularly scheduled staff meetings at varying levels, such as:
- Senior Administrative Management
- Senior Management
- Comprehensive Services
- Cluster-based
- Site-level
- Daily Interactions
- Staff newsletters
- Internal memos
- Policies and Procedures
- Fax
- Email
- Payroll notices
- Telephone
- Bureau Reports
- Computerized Tracking Systems (COPA)/CLOUDS
- Video Conferencing System
- Annual Planning Calendar

#### C. The following are methods of internal communication with parents:

- Monthly Policy Council meetings – program planning, policy and financial information is shared
- Monthly Policy Council sub-committee meetings
- Monthly Policy Council executive board meetings
- Monthly parent meetings
- Parent surveys
- Parent-teacher conferences
- Home visits
- Monthly Comprehensive Services Team newsletters

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## Policies and Procedures

### Section 1: Administration

- Quarterly family newsletters
- Parent bulletin board that includes:
  - Upcoming activities; posted memos; health and safety information logs; site emergency procedures; parents' and child's rights; and Policy Council minutes and agendas
- Daily classroom schedules
- Weekly lesson plans
- Parent policies and procedures
- Dissemination of pertinent information regarding program planning, communications from Office of Head Start, financial reports and grant applications.
- Planned site activities
- Planned community events
- Social Media Tools
- Communication with Delegate Agency and Community Childcare Partners:
- Regularly scheduled meetings
- Regular monitoring
- Joint trainings
- Appointed members from the delegates on the Policy Council
- Joint annual self-assessments
- Email
- Telephone
- Fax
- Monthly reports

#### D. Communications with Governing Bodies and Policy Groups

1. The Policy Council serves as a link between public and private organizations, Delegate Agency Policy Committee(s), Subcontractors, the Grantee-Operated Program Site Committees, the Grantee, County Board of Supervisors and the community it serves.

Mutual communication and understanding between the governing board and program management are fundamental for a high quality Head Start Program.

2. Monthly meetings with the County Administrator's Office: The Employment and Human Services Department (EHSD) Director and the CSB Director also ensure that the Board of Supervisors has an understanding and appreciation of the Head Start philosophy and the role of parents and Policy Council in shared governance.

Monthly meetings are held with the County Administrator's Office to discuss various areas of the program. A meeting report is generated by the EHSD Director and the CSB Director. The meeting's report is sent monthly to the Health and Human Services Committee of the Board of Supervisors. In addition, the CSB Director and other assigned staff, meet throughout the program year, individually, with each member of the BOS to review reports, tour centers, give updates and advice, and train on new regulations and initiatives.

#### E. External Communication

##### 1. Communication with Partnerships

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## Policies and Procedures Section 1: Administration

CSB has several types of Community Partnerships and all of them provide valuable services to our children and parents. Our reputation in the community is often dependent upon the respect and assistance provided our partners when in contact with them. Every employee is responsible for delivering clear and helpful information to the public at large and to our partners in particular. External Partners include:

- State/Local Policy Groups
- State Department of Education
- Local Planning Council
- First Five Commissions
- County Departments
- Community-based Organizations
- Contra Costa County SELPAs
- Child Care Partners
- Policy Forum
- County Board of Supervisors
- Local Education Agencies
- Contra Costa County School Superintendents
- Contra Costa One Stop Consortium
- California Welfare Directors Association Committees
- News / Media Inquiries

### 2. Press Calls

i. All press calls should come to, or be referred through, Legislative and Community Relations Coordinator at (925) 313-1676 or the Advanced Level Secretary at (925) 313-1769 in the Office of Administration for the Employment and Human Services Department. This will guarantee that the Bureau Director and Senior Administrative Staff know which stories and issues are attracting press attention. It will also make it easier for the reporter to be connected with the proper Department spokespersons who can respond fully and accurately. It will enable the Legislative and Community Relations Coordinator or the Advanced Level Secretary in the Office of Administration for the Employment and Human Services Department to follow up with reporters and Department Staff to ensure that deadlines are honored and follow up questions, issues and photography are well managed.

The Legislative and Community Relations Coordinator or the Advanced Level Secretary in the Office of Administration for the Employment and Human Services Department will be available to prepare staff for interviews, review the topic of interest and discuss points that will help the interview be complete and accurate while getting the Department's message across to the public.

On occasion, members of the press will take a shortcut into the Department and contact staff directly. If the staff member has been authorized by their Bureau Director to respond to the press, they are free to respond to the reporter. They should then contact the Legislative and Community Relations Coordinator at (925) 313-1676 or the Advanced Level Secretary at (925) 313-1769 in the Office of Administration for the Employment and Human Services Department to discuss the story and allow for the Legislative and Community Relations Coordinator or the Advanced Level Secretary in the Office of Administration for the Employment and Human Services Department or designee to follow up.

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## Policies and Procedures Section 1: Administration

ii. If the staff person has not been authorized by their Bureau Director to respond to the press, they are required to adhere to the following:

- Do not respond directly to print, vocal, and/or visual media representatives;
- Politely refer all contacts to the Legislative and Community Relations Coordinator at (925) 313-1676 or the Advanced Level Secretary at (925) 313-1769 in the Office of Administration for the Employment and Human Services Department;
- Inform your manager/supervisor immediately;
- Provide the following information: date, time, and location of contact;
- Media representative's name, organization, and phone number and
- Summary and nature of the inquiry

There are many differing aspects and/or components related to the successful operation of our program. It is unfair for individual staff members to be placed in and/or to place themselves in a position of stating, explaining, and/or formulating policy for the department. An innocent comment intended to project a positive view can be reproduced with a negative spin or violate the right to privacy of our clients. Proposed dialogue:

- "I would like to respond to your questions. My concerns rest with preserving and protecting the privacy of our children and their families. Please give me your name, organization, and phone number so that I can properly refer your request."
- Staff with story ideas or events to promote are asked not to contact the press directly, but to call the Legislative and Community Relations Coordinator at (925) 313-1676 or the Advanced Level Secretary at (925) 313-1769 in the Office of Administration for the Employment and Human Services Department, so these stories can be channeled to the press most likely to publish them.

4. Tools for External Communication are as follows:

- Formal/informal agreements
- Regular meetings
- E-mail
- Telephone
- Membership activities
- Social Media Tools (Facebook/Twitter and etc.)

### F. Reporting for County Child Protective Services and State Community Care Licensing

The purpose of these policies and procedures are to provide all department employees with instructions on what specific steps they must take to properly handle any incident involving an abused and/or neglected child, the injury of a child, or a potential child's rights violation. It is important to note that while all employees are charged with the responsibility of reporting incidents involving an abused and/or neglected child, only the EHSD Director or Bureau Director or designee is charged with the responsibility of reporting potential child's rights violations to State Community Care Licensing.

In addition, this policy is intended to make clear the procedure for reporting incidents that may occur both off site and on site.

#### 1. Definitions

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- CCL (State): The acronym for State Community Care Licensing, which is a Division of the State of California Social Services Department, and which is responsible for the licensing of the Department's Child Care facilities.
- EHSD Director: The Director of the Employment and Human Services Department
- Bureau Director: The Director of the Community Services Bureau.
- CFS (County): The acronym for Children and Family Services, formerly Child Protective Services, which is a Division of the County's Employment and Human Services Department and is mandated by the Federal and State government to assess and investigate all referrals which allege that a child is endangered by abuse, neglect, or exploitation.
- Major Injury: Any incident involving a child that requires the intervention of any medical professional (examples of medical professional include: medical advice nurse, hospital, clinic, doctor, ambulance service, emergency room).
- Minor Injury: Any incident involving a child that does not require the intervention of any medical professional as noted above.
- Child's rights violations: Any incident that occurs at a Community Services Bureau facility and involves an employee, contractor, or volunteer of the Department that might violate either the Head Start Code of Conduct or the rights of a child in accordance with State Child Care Licensing Regulations.

✓ All employees, at all levels, are expected to follow the policies and procedures so that accurate and timely reporting can be assured to both the County CPS and the State CCL.

### 2. Children and Family Services (CFS) (Protective Services, County)

Any employee or contractor who knows or suspects that a child has been abused and/or neglected off site should immediately discuss his/her concerns with a Site Supervisor or Assistant Director.

If the discussion leads to the reasonable suspicion that a child has been abused and/or neglected off site, the employee or contractor should report his/her concerns immediately to CFS.

The employee or contractor making the report will provide a copy of the above referenced report to their Site Supervisor and Assistant Director.

### 3. Child Injuries

i. Minor Injuries: (any incident not involving any medical professional) immediately report the injury to your Supervisor and the parent after you have tended to the child.  
Employees do not report minor injuries to CCL.

If a parent of a child who has sustained a minor injury reports back to the center that they subsequently took the child to be seen by any medical professional, the injury needs to be reported as a major injury. All head injuries regardless of staff determination that it is minor or major shall be reported to the Supervisor immediately who shall contact the parent immediately to pick up the child. "Head Injuries" are defined as injuries to the skull or cranium, and do not include the mid and lower facial areas. Staff shall complete a written injury report for the parent prior to pick-up time and at pick-up time talk with

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## Policies and Procedures Section 1: Administration

the parent to explain the injury, action taken by staff, and provide a copy of the written report. Supervisor shall make a complete entry in the Supervisor's Injury Log for all injuries, minor and major.

ii. Major ~~Injuries~~: Report the incident immediately to a Site Supervisor, the Assistant Director, and the parent. Depending on the severity of the injury, all staff present shall:

- Comfort the child.
- Phone 911 immediately.
- Report the injury to the Assistant Director, Bureau Director and/or Executive Director.
- The Site Supervisor or designee will make an Unusual Incident Report to Licensing in accordance with the Unusual Incident Reporting policy and procedure.
- The Bureau Director may assign staff to investigate.
- The Department's Licensing Liaison may prepare a written report.
- Staff shall complete a written injury report (form CSB-208) for the parent immediately and provide a copy of the written report to the parent.
- Supervisor shall make a complete entry in the Supervisor's Injury Log for all injuries, minor and major.

iii. Potential Child's Rights Violations

- Any incident that occurs on site at a facility and involves employee(s), contractor(s), or volunteer(s) of the Community Services Bureau that might violate the rights of a child in accordance with Child Care Licensing Regulations or the Community Services Code of Conduct must be immediately reported to the CSB Administration in Martinez using the following protocol:
  - Any potential and/or unusual incident must be reported by CSB employees to the Center's Site Supervisor or the designated person-in-charge no later than 15 minutes after being made aware that an alleged incident has or may have taken place.
  - The reporter shall be any employee, contractor or volunteer who has witnessed or heard about an alleged incident, or any employee, contractor or volunteer who was involved in an alleged incident.
  - The Site Supervisor or person-in-charge must phone-in the alleged incident to the Assistant Director and, as directed by the AD, one or together the AD and Site Supervisor will call CSB Administration Office at (925) 313-1777 no later than one hour after being made aware of the alleged incident.
  - Caller shall make it clear to the clerk answering the phone at CSB Administration Office that you are reporting a possible licensing incident that must be handled by the appropriate staff immediately.
  - When the Unusual Incident Report is phoned into the CSB Administrative Office, the front desk clerk who receives the phone call shall immediately and personally notify the Division Manager. If the Division Manager is not in, the notification succession shall be to the Bureau Director.
  - The Site Supervisor or person-in-charge will then complete, obtain AD approval of report, and fax CSB Unusual Incident Report to CSB Administrative Office within two hours of the alleged incident. The completed form shall be faxed to (925) 313-1772 to the attention of the Division Manager immediately followed up with a telephone call to CSB Administrative Office at (925) 313-1724 to verify that a copy of this report has been received.

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Deleted: In accordance with CCL protocol, the Site Supervisor remains the official contact with the CCL during any on-site CCL review/investigation process

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## Policies and Procedures Section 1: Administration

- Site Supervisor shall compile and send upon request all written documentation related to the incident to the Assistant Director, Division Manager and Personnel Services Assistant III. Documentation may include but is not limited to CSB incident Report, small group conference forms, notes on discussions with parents or other employees, and observation notes. Materials shall be complete, legible, objective, and fact-based.
- It is a requirement of CCL that unusual incidents must be reported to CCL by a telephone call within 24 hours of the County learning that an incident may have occurred.
  - In accordance with CCL protocol, the Site Supervisor remains the official contact with the CCL during any on-site CCL review/investigation process.
  - The Assistant Director must be notified by the Site Supervisor any time a representative from CCL conducts an on-site visit for any reason.
- Any employee who fails to report an alleged incident as outlined above will be subject to disciplinary action, up to and including termination.
- Any Site Supervisor or person-in-charge who fails to follow the protocol instructions as outlined above will be subject to disciplinary action, up to and including termination.

### iv. CSB Administration Responsibilities

- When the Unusual Incident Report is received by CSB Administrative Office, the front desk clerk will personally deliver copies of the faxed report to the Personnel Administrator, Division Manager, and Bureau Director, and EHSD Director for review. When the review process is completed and approved, copy of the Unusual Incident Report will be faxed to the appropriate Assistant Director to sign and either fax/scan to CCL or authorize the Site Supervisor or designee to fax/scan to CCL.
- A fact finding team will be immediately convened and directed to visit the center to gather information and determine if a child's rights have been violated and report these facts back to the Bureau Director.
- After reviewing the facts, if the Bureau Director determines that a true incident has not occurred, the case will be documented as such and closed.
- After reviewing the facts, if the Bureau Director determines that an incident may have occurred, the EHSD Director, Bureau Director or designee will make the mandatory telephone call to State Licensing.
- Only the EHSD Director or designee has the authority and responsibility on behalf of the County to report these matters to Licensing.
- Upon the notification by the EHSD Director or Bureau Director that an incident may have taken place, an investigation team will be sent out by the next business day to investigate and prepare a draft investigative report and findings.

CSB Administrative Office, in conjunction with the Assistant Director and Site Supervisor of the impacted center, will make all decisions related to protecting the rights of children on behalf of the Department until the investigation has been concluded.

Any employee who is considered to be involved with the violation of the rights of a child in connection with the incident report will be directed to leave the facility for the day and then report to the 40 Douglas Drive office in Martinez, or other designated site, for work by the next business day.

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## Policies and Procedures Section 1: Administration

Failure on the part of the employee to report to, and remain at the 40 Douglas office, or other designated site as directed, will cause the employee to be docked for absence without leave and subject to further discipline, up to and including termination.

The investigative team will have three business days to perform the required investigation and prepare a draft report for the Bureau Director and EHSD Director.

The Bureau Director and EHSD Director will review the report and decide next steps, including, if necessary, any disciplinary or remedial action that should be implemented as a result of the report's findings and conclusions.

The investigator's written report shall also include a "holistic analysis" of the causes associated with the incident, and develop specific recommendations to prevent their recurrence.

Recommendations will be reviewed by the Bureau Director and EHSD Director for consistency with appropriate personnel policies prior to being entered into the final report.

After appropriate action is taken by the Department, pertinent information regarding each incident shall be shared with key managers and Site Supervisors to prevent the recurrence of a similar incident at another site (1).

For major incidents, a detailed critique by management of the incident itself shall be provided to all employees on a Department-wide basis to prevent the recurrence of a similar incident at another site.

G. Reporting for Partner Agencies including the Delegate Agency shall:

- Notify and provide County with copies of any licensing citations, licensing visit reports, unusual incident report, and/or any other citations within 48 hours of Contractor's receipt of the report or citation.
- Maintain full compliance with Community Care Licensing Regulations and State and/or Federal Regulations as applicable given other funding sources received by CSB.
- Notify and provide CSB with copies of any Medical Alerts (such as infectious disease outbreaks) within 48 hours.

<sup>1</sup> Any report information shared with Department employees must be pre-reviewed by CSB Administration to ensure that it does not violate the confidentiality of any employees or children involved in the incident.

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## Policies and Procedures Section 1: Administration

### **IV. Record Keeping and Reporting**

#### A. General Description

##### Record-Keeping and Reporting Systems

The effective and efficient reporting system used in CSB meets federal guidelines as spelled out in the Performance Standards Record-Keeping Instruction and the state guidelines as required by state contract and licensing requirements.

The system provides for accurate and timely information regarding children, families and staff and meets the Confidentiality Policy of the bureau.

Each area of program services maintains the appropriate record-keeping and reporting systems according to the above mentioned federal and state guidelines to include: child and family records, site safety records, child records, child health records, family records, and personnel records. Systems for maintaining the records, specific to a program service area, are described in each section of these policies and procedures.

A file and records system is established/maintained by the Contra Costa County Community Services Bureau personnel office. In addition, copies of certain personnel records pertaining to all permanent staff, including Teacher Assistant Trainees job qualifications are kept at each child care center as required by state licensing.

i. Confidential files and records system shall be maintained in a locked cabinet to include official documents for each staff member.

- Procedure for File Transfers

When staff transfers to another site, it is the responsibility of the Site Supervisor at the new site to assure all required personnel files are sent to the new site by communicating with the Site Supervisor of the site from which the employee is transferring.

- The following procedures are in place to protect confidentiality of all sensitive material:

If files are faxed by CSB Personnel to the employee's new location, CSB Personnel will contact the site supervisor and request the site supervisor to oversee the fax machine to verify all confidential information is transmitted to the site supervisor only, protecting the employee's HIPAA rights to privacy.

- After the Personnel Staff receives a confirmation from the fax machine, the Personnel Staff will call or e-mail the Site Supervisor to ensure that all the documents sent to that site have been received.

- The site supervisor at the employee's previous location will shred all documents pertaining to the transferred employee, and will send email verification to CSB Personnel when shredding is complete.

- Employees have the option of personally transporting their files to their new site. The employee must sign for the file material, and immediately transfer the file contents to their new site supervisor. The site supervisor must send verification to CSB Personnel when proper filing procedures have been completed.

- Under no circumstances may files be transmitted by interoffice or "pony" mail.

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## Policies and Procedures Section 1: Administration

### B. Personnel Files

All personnel files are stored in the Personnel Unit in a locked cabinet and in a locked office. The access to the personnel files is granted only to the authorized personnel. An employee's union representative must have a written authorization from the employee to obtain access to his/her personnel file. When reviewing a personnel file, a member from the personnel staff must accompany the authorized personnel at all times in the closed door office. The authorized personnel must sign, date and write the reasons on the "Access to File" card located in front of each personnel file.

### C. Family Files

The Site Supervisor, comprehensive service staff or the head teacher at each site is responsible for maintaining the family's basic data file at each site. All children's files must be kept in a locked file cabinet. Access to files is permitted only by authorized personnel. When authorized personnel must access a child's file, the protocol must be adhered to. Two types of access and removal of a file from the cabinet can take place.

- The file is taken off site for audit or review  
Authorized staff must record the removal of the file off the site premises on the Shared Folder called "Record Keeping Log" He/she must log: "check in/out status by completing the required information on the site template. "
- The file is accessed on site  
Authorized staff needing to work on a file on site must pull the file and in its place insert the file, check-out card indicating: date, name and signature of staff pulling file. Upon return of the file, staff must sign in verifying the return of the file, and the check-out Card is removed.

In both of the above situations, an Access to File form must also be completed by the authorized person accessing the file. This is located on the right hand side of the first section of the child's file. One must indicate date, name, and purpose for accessing the file.

Files are kept on site for the current enrollment year until after the annual audit is complete. After the audit, files are prepared to be archived, and sent to a warehouse for storage. Children's files are kept for five years after our services to the family ends. Files are then shredded.

Effective January 1<sup>st</sup> 2014, any document or record may be maintained on electronic format if it was originally created in an electronic format and kept in its original unconverted electronic format. Documents or records created in paper form cannot be scanned and stored electronically alone. These records must be stored in their original paper format. Independently of being hard copy or electronic format, all records must be kept for at least five years.

### D. Fiscal Files

Fiscal records and documents are stored and filed in designated cabinets inside the Fiscal, Purchasing and/or Personnel units. Staff is required to maintain current and accurate records of financial activities. This includes fiscal and accounting records in order to show the costs incurred by each program. Records adequately identify the use of funds for Federal and State programs. Accounting records are supported by documentation such as purchase and travel receipts, invoices, journals, etc. and show a clear audit trail for all funds received and disbursed.

The following documents are maintained by the designated units:

- Accounting Policies & Procedures Manual

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## Policies and Procedures Section 1: Administration

- Administrative Reports - Head Start & Early Head Start
- BRASS Files
- Budget Statement
- CAFR
- CDE Projections
- CDE Contracts
- CDFS8501
- CDFS9500
- CDFS9529
- CDFS9530a
- CDFS ~~CalWORKS~~, APP or FCCH Fiscal Report
- CDFS ~~CalWORKS~~ Caseload Report
- Child Development Audit Reports
- Child Nutrition Expenditure/Revenue Report
- Child Start Allocations Binder
- Contractors' Files – Purchasing Unit
- Delegate Agency Files
- Employee Timesheets – Personnel & Purchasing Units
- Expenditure Activity Report - Energy Programs
- Expenditure Detail Report
- **Federal Financial Reports to ACF (SF-425:Semi-Annual, Annual and Final)**
- Financial Monitoring Report - Head Start & Early Head Start
- Financial Projections Package
- Financial Report for Drawdown - Head Start & Early Head Start
- Financial Status Report (SF425) - Head Start & Early Head Start
- Journals
- Open Encumbrances Report
- Partners' Files – Purchasing Unit
- Payment Ledgers – Contracts/Purchasing Units
- Payroll Detail Report – Payroll/Purchasing Units
- Payroll Register Report – Payroll/Purchasing Units
- Policy Council Financial Reports
- Procurement Card Files – Personnel Unit
- Program Improvement Grant
- Purchase Requisitions/Orders – Purchasing Unit
- Recommended Budget Binders
- Revenue Detail Report
- SBFS Files
- Single Audit Reports
- Supplemental Funding Applications
- Travel Demands – Purchasing Unit
- Vendors' Invoices, Bills, D-15 – Purchasing Unit

### E. Contract Files

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Contract files are stored in designated cabinets in the Contract & Grants Administration office. Contract staff is required to maintain current and accurate records of contract activity. This includes contracts, board orders, insurance verifications, required clearances and Internal Revenue Service (IRS) documentation. The documents are kept in individual contract files, labeled by contractor name and contract number. Board orders are kept with each corresponding contract and in a general board order file, organized by month and year. EHSD Contracts and Grants Unit will maintain a record of all contractors' files and will include all licensing and program mandated forms. The following documents are maintained by the Contracts & Grants Unit:

- Independent Contractor contract files
- County Administrator Office Questionnaire for determining Independent Contractor status
- Corporation (non-profit and for-profit) Contractor contract files
- Contract files for contracts with other legal status, such as general partnership
- Contra Costa County Small Business Enterprise award forms (where applicable)
- Board of Supervisors board orders
- IRS W-9s and IRS W-4s (where applicable)
- Certificate of Liability Insurance
- Fingerprint clearance form (where applicable)
- Current Health Screening Form or proof of current physical exam and TB clearance (where applicable)
- Contra Costa County Auditor-Controller Insurance clearance
- CSB Contract Request forms, with authorizing signatures

### F. Public Access to County Records

In accordance with the California Public Records Act and the Better Government Ordinance, any person is entitled to inspect and to receive copies of the public records of the County, including records of individual departments. Upon a request for a copy of public records, county staff is to make the requested records available to any person upon payment of applicable fees. Disclosable county records may be inspected anytime during regular business hours. Every attempt should be made to allow prompt inspection of the requested disclosable records. If copies are requested, they should be provided no later than the next business day if possible to do so.

#### i. Disclosable Records:

Any existing writings containing information relating to the conduct of the public's business prepared, owned, used or retained by the County regardless of physical form or characteristics are considered public records and should be disclosed by request. These include, but are not limited to, papers, books, maps, charts, photographs, audio tapes, and video tapes, information stored in non-paper form on a computer or other electronic media and other material. Additionally, writings that are not, in whole or in part, exempt from disclosure under the Public Records Act and the Better Government Ordinance.

#### ii. Exempt from Disclosure Records:

Personnel, medical or similar records which cover intimate and personal information such as: employee performance evaluations, employee home address, home telephone number and all personal information. Certain other public employee information may be released: (1) amount of an employee's

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## Policies and Procedures Section 1: Administration

gross salary and benefits, job classification, and job duties; (2) Merit board and arbitration disciplinary proceedings and writings submitted in such proceedings; (3) information in case of emergency or need when such disclosure appears reasonable to protect any person's health or welfare; (4) information for authorized criminal law enforcement purposes; (5) information required by subpoena, testimony or other legal process; (6) information authorized to be released to third parties by the written consent of the effected employee; and (7) any other information, when reviewed and approved by CC County Counsel prior to release.

- Investigatory records compiled for correctional or law enforcement purposes such as: records of complaints, preliminary inquiries if a crime or violation has been committed, full investigations, and memoranda "closing" an investigation.
- Examination data such as questions, scoring keys, examination data used to administer a licensing, employment or academic examination.
- Confidential legal writings such as writings to or from the CC County Counsel to an attorney who represents the County or writings especially prepared for or by the County Counsel providing legal advice, analysis of proposed legislative actions or positions, terms of settlement of litigation, post-negotiation reports.
- Health Services contracts between the County and the State and writings related to those contracts.
- Particular statutory exemptions related to specific situations such as information about health facilities, assessment records, agricultural information, etc.
- Real estate appraisals or engineering studies relating to the acquisition of properties or to prospective construction contracts.
- Preliminary drafts, notes, memoranda and "deliberative process".

CSB employees are encouraged to contact Personnel when approached with requests for disclosure of documents by the public. Personnel staff will provide advice or contact County Counsel for additional clarification. In such cases, the employees are expected to provide the requestor/s with timelines in which the requested information will be provided to them.

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### ~~V. Monitoring~~

#### ~~A. Purpose~~

CSB Ongoing Monitoring is a key management system for ensuring program quality and compliance with Head Start/Early Head Start Performance Standards, California Child Development Title V Regulations, California Desired Results and Environment Rating Scales, NAEYC Standards and Title XXII Child Care General Licensing requirements. Ongoing Monitoring ensures that the program is moving toward achieving its goals and objectives while providing high quality, comprehensive services to the ever-changing needs of the children and families served. CSB is committed to the continuous improvement of our programs through regular and ongoing monitoring of all aspects of our operations.

#### ~~B. Methodology~~

The ongoing monitoring process is comprehensive in scope. The system provides a method to examine service delivery including the tracking of child and family outcomes on an ongoing basis and incorporates a process to connect the results to management systems. Staff at all operational levels participate in the ongoing monitoring process and any identified concerns are communicated in writing to the appropriate staff responsible. Corrections are validated according to specific timelines.

Ongoing monitoring occurs on a regular and routine basis to assess systems and program operations for evaluation and continuous improvement of our programs. It includes the review and evaluation of services and systems, documentation of results, tracking and analyzing areas of concern and correction, and validation that correction has been completed. Results of monitoring and completion of corrective actions for findings are shared by the Bureau Director or designee with: EHSD Director, Board of Supervisors, Policy Council, Assistant Directors, Site Supervisors and their staff. Results are used to conduct root cause analysis and develop plans for improvement and program planning.

#### ~~C. Multi-Level Monitoring~~

i. Center-Level and Cluster Level Monitoring is conducted by Site Supervisors, Comprehensive Services Assistant Managers, Clerks, and Teachers for the purpose of monitoring day-to-day center operations, delivery of services, and overall health and safety of internal and external environments of children at the center for which they are assigned. Assistant Directors receive monthly reports from Site Supervisors that provide an overview of each of the centers they are assigned to track any concerns as well as highlight strengths and special activities occurring each month.

For partner centers, the CSB Partners Unit visits subcontracted centers weekly to monitor the delivery of services and health and safety to ensure ongoing communication. The delegate agency provides monthly communication reports to the Analyst responsible for partners and the delegate agency.

ii. Content and Service Area Monitoring is conducted by Comprehensive Services Managers and Analysts responsible for a specific content or service area to ensure that staff are trained and comply with funding requirements and regulations around a specific content or service. CSMs and Analysts review trends across centers and services and identify risks or concerns and provide ongoing training as well as targeted training when needed.

For partner agencies, the designated Analyst reviews monthly reports and monitoring performed by the agencies and provides support and training as needs are identified. The delegate agency completes its

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**A. Purpose¶**  
CSB Ongoing Monitoring is a key management system for ensuring program quality and compliance with Head Start/Early Head Start Performance Standards, California Child Development Title V Regulations, California Desired Results and Environment Rating Scales, NAEYC Standards and Title XXII Child Care General Licensing requirements. Ongoing Monitoring ensures that the program is moving towards achieving its goals and objectives while providing high quality, comprehensive services to the ever-changing needs of the children and families served. CSB is committed to the continuous improvement of our programs through regular and ongoing monitoring of all aspects of our operations. ¶

**¶**  
**B. Methodology¶**  
The ongoing monitoring process is comprehensive in scope. Monitoring is performed on an annual, semi-annual, monthly, weekly and daily basis. The system provides a method to examine service delivery including the tracking of child and family outcomes on an ongoing basis and incorporates a process to connect the results to management systems. Staff at all operational levels participate in the ongoing monitoring process and any identified concerns are communicated in writing to the appropriate staff responsible. Corrections are validated according to specific timelines. ¶  
Ongoing monitoring occurs on a regular and routine basis to assess systems and program operations for evaluation and continuous improvement of our programs. It includes the review and evaluation of services and systems, documentation of results, tracking and analyzing areas of concern and correction, and validation that correction has been completed. Results of monitoring and completion of corrective actions for findings are shared by the Bureau Director or designee with: EHSD Director, Board of Supervisors, Policy Council, Assistant Directors, Site Supervisors and their staff. Results are used to conduct root cause

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own internal ongoing monitoring. Monthly reports on these activities, including corrective actions, will be submitted to the Analyst overseeing the Partner Unit.

iii. Agency-level monitoring is conducted by the CSB Quality Management Unit (QMU). This unit is responsible for conducting compliance monitoring of directly operated, partner and delegate agency centers in five key areas: center health and safety, comprehensive services compliance, need and eligibility, education (environment), and CLASS observations. Corrections for non-compliances are completed by the responsible person at the center and are validated by a Comprehensive Services Manager or designee. The Assistant Director or designee completes a final review of correction and validation.

Each directly operated; partner and delegate agency center is monitored once per year (July-June). A random sample of 30% of files is reviewed in the areas of need and eligibility and comprehensive services compliance. Thirty percent sample of classrooms in the center receives a health and safety monitoring. All directly operated and partner agency classrooms are monitored for education environment.

Classroom Assessment Scoring System (CLASS) Observations are conducted by a trained CLASS observer working with the QMU. Fifty percent of the eligible classrooms are randomly selected using an automated system. Selected classrooms receive CLASS observations twice in the year. Ratings below cut-off scores require a corrective action. CSB's CLASS cut-off scores for corrective action may vary from year-to-year as they are established after the National Designation Renewal System trigger scores have been made available.

Upon completion of each area of monitoring, the QMU distributes results and the Feedback Form listing areas of non-compliances and strengths to the predetermined group responsible for that center, classroom, or service area monitored. The designated responsible person corrects non-compliances which are then reviewed and validated by a Comprehensive Services Manager. The Assistant Director reviews all non-compliances, validations, and submits verification to the QMU.

Data collected from monitoring is compiled into agency reports for review by staff, managers, the Policy Council and Board of Supervisors to inform of agency trends, strengths and areas in need of improvement. All reports and findings are shared with the partner and delegate agencies.

The Analyst overseeing the QMU compiles results and findings and distributes reports to senior management, Comprehensive Services Managers, Site Supervisors, center staff, Board of Supervisors, and the Policy Council twice per year. These reports are a high-level representation of the agency's compliance and non-compliance concerns in the five areas monitored by QMU. Comprehensive Services Managers and senior managers responsible for a content or service area reviews these bi-annual reports to identify trends and develop staff training.

iv. The Bureau Director or her designees will monitor all administrative internal team members with responsibility over service areas. This may include periodic walk-through activities or unannounced visits to sites.

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v. Additional information on multi-level monitoring is available in the Appendix of the Policies and Procedures.

### D. Fiscal Monitoring of the Delegate Agency by the Grantee

The Grantee certifies that the Delegate Agency is complying with regulations and generally accepted accounting principles. Monitoring is conducted using the following format:

- Monthly Reports:

Delegate Agency shall submit monthly financial reports that record cumulative and accrued expenditures and obligations through the end of the contract year. Monthly reports are due on the 20th of each month for the preceding month. Reports shall be submitted on Form M2092 (Monthly Financial Report) and shall include, at a minimum:

- Separate reports for Program Accounts 20 and 22
- Reimbursement reports for the Child Food Program
- Line item documentation of administrative expenditures
- Copies of contractor's monthly financial statement and payroll reports
- A separate monthly report summarizing the local share reported in the financial report.

### E. Early Childhood Environmental Rating Scale and Infant Toddler Environmental Rating Scale (ECERs and ITERs)

- ECERs and ITERs observations are conducted annually for the grantee operated programs. Corrective action plans are developed to address any identified areas of weakness.
- For the partners, the Education Manager assigned to the partners will conduct annual validations on the ECERs and ITERs that they submit. If a partner site has more than one classroom, one classroom will be randomly selected for validation. If a significant discrepancy is found between the partner's ECERs/ITERs scores and the CSB validation of the scores, additional ECERs/ITERs from other classrooms will be validated.

### F. Fiscal Officer or his/her designee reviews the financial information for content and consistency before reimbursing monthly expenditures

- Annual On-Site Monitoring:

After the annual audit by a Certified Independent Accountant, the Grantee performs an on-site review of the Delegate Agency records using the OHS Monitoring Protocol. This procedure is performed no later than May of each year for the prior award year. The following is monitored:

- Accounting Records:

Records are reviewed to assure that they adequately identify the source and application of funds for contract-supported activities, and that they are maintained. Records are reviewed to make sure that they contain information pertaining to contract awards, authorizations, obligations, unobligated balances, assets, outlays, income, and liabilities.

- Internal Controls:

Controls are reviewed for effectiveness, and that accountability is maintained for all contract cash, real and personal property, and all other assets. Contractor is reviewed for adequately safeguarding all such property and that property is used solely for contract purposes.

- Budgetary Controls:

The actual and budgeted amounts for each contract allocation are compared.

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The grantee will conduct regular and routine monitoring including delegate agency annual management and fiscal systems review.

### G. Center Visit Documentation

- CSB Director, Assistant Directors, or other Administrative Managers may conduct unscheduled/unannounced monitoring visits at directly operated or partner agency sites. These visits are documented on the Center Visit Documentation form. Any issue requiring a corrective action is documented and validation of correction is assigned and verified upon completion.

### H. Procedures for Review, Analysis and Reporting

The monitoring analyst will ensure that the data is entered into the Monitoring database and that reports are distributed to all stakeholders, including the Bureau Director, Assistant Director, and Comprehensive Services Managers and site staff. A monitoring results report is also prepared for the Delegate Agency. All monitoring results will be formally submitted to the delegate agency. Issues or corrections cited will be communicated with corrective action requirements as part of the notification.

#### i. Monitoring Database

- The program uses databases designed in-house to track monitoring findings and areas of strength to inform the reporting process and ensure the system is working effectively and efficiently. The databases produce lists such as the top ten issues to improve, the top ten areas performing well, as well as the top 10 sites to improve and the top 10 sites that are performing well. The analyst responsible for the ongoing monitoring system uses the database to track completion or corrective actions to ensure that closure is established for any item found to be non-compliant.
- The databases allow program managers to view trends and isolated incidences and assist them in conducting root cause analysis and plans for improvement as appropriate in a timely fashion.
- Non-compliances will be utilized by all staff to: to identify program weaknesses; to correct identified non-compliance issues; and to seek continuous improvement.

#### ii. Monitoring Reports

- Monitoring analyst compiles results and findings such as: program strengths, areas of improvement, site performance reports and other reports as needed.
- Reports are disseminated to: senior management, comprehensive services unit, site supervisors, and site staff Board of Supervisors, and Policy Council.
- Monitoring Analyst will complete Analysis Reports and Roll Up Summaries within 4 weeks of completion of monitoring cycles (Cycle 1: December 31 and Cycle 2: April 30).

#### iii. Root Cause Analysis

- Content Area Managers will review semi-annual monitoring reports for trends across their service area and complete a Root Cause Analysis and provide an Ongoing Monitoring Corrective Action Plan in response to areas identified as needing improvement within 4 weeks of report distribution.
  - Review the monitoring reports for areas needing improvement to address and identify root causes for non-compliances (tangible, materials items failed, something was done incorrectly, system or process to do work requires revision).
  - Define the problem, collect data, identify possible causal factors surrounding the problem, and identify the root cause.

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- Submit an action plan to the Assistant Director to recommend and implement solutions, identify responsible persons.
- Effectiveness of action plan will be reviewed at the release of the following semi-annual monitoring report.

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**VI. Self-Assessment**

A. Self-Assessment Team

The Grantee and the Delegate Agency conduct a joint Self-Assessment each year. The role of the Bureau Director and Delegate Director and/or their designees in the self-assessment process are as “advisor” to team. The analyst responsible for the Self-Assessment is the Team Leader and may be supported by a consultant. Small teams are comprised of grantee and delegate agency management and non-management staff, parents, community partners, and representatives of the Board of Supervisors. A cross-section of staff is represented on each team. Teams are formed beginning in October of each year and finalized in January.

B. Methodology

1. In January of each year, the team leader and consultant, if applicable, identify sites and classrooms for the self-assessment. The following factors are considered in site selection:

- Monitoring results, including recent Federal Review, licensing ~~visits, and~~ assessment Findings
- History of site inclusion in last three years of self-assessment
- Program options and funding models to ensure all ~~variations~~ are assessed
- Representation of Supervisory Districts
- Site based special initiatives and projects
- Operational days

2. The current **Office of Head Start (OHS)** Program Monitoring Instrument and the Classroom Assessment Scoring System (CLASS) are the tools used for the self-assessment each year. Slight modifications may be made to the tool by the team leader to streamline it for ease of use by community partners, parents, and board representatives. Other tools may be introduced ~~as needed~~.

3. A timeline is established which includes ample time for site visits and report writing, scheduled team check-in sessions, and ongoing training and technical assistance.

4. Training is provided to all team members in January of each year and addresses the following items:

- Purpose and Approach
- Self-assessment process
- Methods of collecting applicable data
- TimeJines
- Confidentiality
- Reporting procedure used in the “non-compliant” portion of each review team’s report
- Report writing format and techniques

C. Parent Involvement

The Policy Council has a Self-Assessment sub-committee, which forms in October of each year after being provided with a description of the work of the committee. The Policy Council is oriented to the self-assessment process and timeline in November, at which time additional members of the sub-committee are recruited. These parents are trained fully with the rest of the team in January and are paired with an experienced manager to mentor them through the process, if necessary. The varying availability of parents is accommodated to maximize the involvement of all parents who express an

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interest in participating. Non-English speaking parents are encouraged to get involved and are paired with a staff person who speaks their language.

#### D. Process of Self-Assessment of Agency's Program Services

The Self-Assessment is conducted in February of each year. Each team is assigned specific service areas and several sites to assess and determine compliance. Examples of tasks of the various teams include:

- Interviewing appropriate staff, community partners, and parents
- Observing the classroom environment
- Reviewing documents such as policies, procedures, and service plans
- Observing procedures as they are implemented in the field
- Completing checklists for health and safety and eligibility

Teams check in regularly to report progress, problem solve questionable compliance areas, and plan their next day. At the conclusion of the data-collecting process, individual teams meet and review their findings, and determine the following:

- Program strengths and compliances
- Non-compliances
- Recommendation of a plan of action to meet compliance
- Evaluate the process using a plus/delta approach which is used to inform the process for the next year.

#### E. Self-Assessment Results

Individual results of the self-assessment teams are submitted to the Analyst, who consults with the Bureau Director and Delegate Agency Director, and then compiles a complete report of the self-assessment.

The written report is sent out to staff, and if non-compliances are found, content area experts are assigned to develop a corrective action plan. Once the corrections are validated (immediately for health and safety items and within 30 days for all other items), the self-assessment report and plan of action are submitted to the Policy Council and Board of Supervisors in March. An approval is obtained for any corrective action plan involved. The final report, inclusive of the validation of submission and/or approval by the Policy Council and Board of Supervisors, is then submitted to the Administration for Children and families (ACF).

The results of the self-assessment are to be used in the planning process, in developing and improving program services, and in formulating the program approach, service plans, and goals and objectives for the program.

#### F. Monitoring the Plan of Action Resulting from Self-Assessment

Throughout the year, management staff responsible for any areas of non-compliance identified in the self-assessment process shall continue to monitor the status of the corrective action, using the results of ongoing monitoring efforts, to ensure the issue is resolved and continues to remain compliant.

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### ~~VII. Program Human Resources Management~~ (Personnel Policies & Procedures)

#### A. Statement of Purpose of Policies and Procedures

These personnel policies are produced for the purpose of:

- Promoting an effective, efficient, and economic operation of programs;
- Providing fair and equal opportunity to all qualified individuals to enter employment with Employment and Human Services Department, Community Services Bureau (CSB) and assuring that employees are promoted or advanced under impartial procedures;
- Maintaining a program of recruitment and advancement which will provide career development opportunities;
- Maintaining a uniform plan of evaluation, duties and wages based upon the relative duties and responsibilities of positions in CSB;
- Employing persons who can perform their duties with competence and integrity.

#### B. Governing Board

The ultimate authority to manage the Head Start and Early Head Start program is vested in the County Board of Supervisors. According to Contra Costa County, Personnel Management Regulations, the Executive Director or Department has the authority to act on behalf of the County Board of Supervisors on certain personnel actions as stipulated throughout the regulations. All authority for day-to-day administration of CSB is delegated to the Community Services Director.

The Board of Supervisors, upon the recommendation of the Employment and Human Services Director, reserves the exclusive right to hire, evaluate, compensate or release the CSB Director (HS/EHS Director), Human Resources and Fiscal Officers. The Policy Council shall approve or disapprove in advance the hiring of the Community Services Director.

The Board of Supervisors delegates the authority of the Head Start and Early Head Start program to the Community Services Director or his/her designee, who is responsible for carrying out the policies, procedures, and intent of these policies to include power to employ, promote, assign duties and responsibilities, evaluate, train, reprimand, suspend, discharge, or reward employees within the guidelines of all applicable federal, state and local regulations.

CSB will observe standards of organization, management, and administration that will ensure, so far as reasonably possible, that all program activities are conducted in a manner consistent with the purpose of Head Start Performance Standards and the objective of providing assistance effectively, efficiently, and free of any taint of partisan political bias or person or family favoritism.

#### C. Organizational Structure

This section contains policies governing the activities of all CSB employees. It is not intended to supersede the Memorandum of Understanding between Contra Costa County and Public Employees Union, Local One (MoUs), the Personnel Management Regulations (PMRs) or any other policies adopted by the County Board of Supervisors. It establishes standard procedures which are applicable to all programs operated by CSB, irrespective of funding source. Unless otherwise noted, all provisions of the manual apply to each and every employee of CSB. If the requirements of MoUs, PMRs, funding sources, et cetera are less stringent than the provisions of this section, then these provisions will apply. If personnel provisions imposed by the MoUs, PMRs, funding source, et cetera conflicts with the provisions of these policies, then such regulations shall apply.

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The Community Services Director or designee has the authority to identify and interpret regulations which conflict with these policies. Employees may not take it upon themselves to interpret regulations which may permit them or require them to behave in a manner which is inconsistent with the provisions of this policy. If doubt arises, employees must request their supervisors to secure a ruling from the Community Services Director or designee.

In addition to these policies, the MoUs, PMRs, management bulletins, memos, side letters, et cetera regarding personnel policies issued by the County and funding sources shall be considered a part of CSB's personnel policies and procedures whenever applicable. All personnel policies and practices contained herein are established in accordance with current applicable rules and regulations of CSB funding sources and other mandates. All CSB staff members are required to become thoroughly familiar with these policies and adhere to their provisions.

The Community Services Director and senior management are charged with the responsibility for assuring that all provisions of these policies are administered fairly and impartially.

According to Contra Costa County, Personnel Management Regulations, the Executive Director or Department has the authority to act on behalf of the County Board of Supervisors on Certain personnel actions as stipulated throughout the regulations.

### D. Additional Personnel Policies Relating to Employees of Program Services

#### 1. Criminal Record Clearance (Fingerprinting)

##### i. Live Scan Process

- According to the Head Start Act, 45 CFR 1304.3(a)(18) and California DSS, 101170(f), all employees/adults must be fingerprinted. Failure to obtain clearance free of an exemption or to comply with fingerprinting regulations will result in refusal of employment.
- Applicable employees must be fingerprinted and cleared before their first day of employment. CSB will not employ anyone without an active clearance nor will they hire anyone who has a clearance with an exemption.
- CSB Personnel schedules a Livescan appointment and provides the applicant with a Livescan form to take to their appointment.
- After the Live Scan is completed, the Department of Social Services notifies CSB Personnel Unit of the following clearances via a Letter of Criminal Record Clearance. The following checks are conducted:
  - FBI
  - Child Abuse Index
  - State Department of Justice
- Should a conviction occur while the employee is employed, CSB receives an "Immediate Action Required (IAR)" letter from the Department of Social Services Caregiver Background Check Bureau. In this case:
  - The Community Services Bureau Director determines the appropriate action to be taken based on individual circumstances.
  - If a manager receives an IAR letter, he/she is to notify CSB Personnel Unit immediately. If CSB Personnel Unit receives an IAR letter, they will notify the Manager, Site Supervisor and immediately have the employee removed from the facility. Disciplinary actions may be taken up to and including termination.

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- It is the responsibility of the employee to obtain a waiver form from DSS and submit the waiver. Any employee who obtains a waiver may apply for reinstatement and applications will be considered by personnel. If no waiver is obtained as requested by the Personnel Unit, the employee may be terminated from employment with Contra Costa County.
- Declaration-The State requires that all current/prospective employees must sign a declaration, Criminal Record Statement prior to employment, which reveals any background information that might be detrimental to their employment with CSB. The declaration or Criminal Record statement must list:
  - All pending and prior criminal arrests / charges related to child sexual abuse and their disposition
  - Convictions related to other forms of child abuse / neglect
  - All convictions
- The grantee must review each application for employment individually in order to assess the relevancy of an arrest, a pending criminal charge, or a conviction.
- The declaration may exclude listing of:
  - Any offense, other than the ones related to child abuse and/or child sexual abuse or violent felonies, committed before the prospective employee's 18th birthday which was adjudicated in a juvenile court or under a youth offender law
  - Any conviction the record of which has been expunged under Federal or State law
  - Any conviction set aside under the Federal Youth Corrections Act or similar State authority

### 2. Emergency Procedures

#### i. Chemical Accident

In case of a shelter-in-place emergency, a manager will notify all affected sites. In this case, all employees are required to follow shelter-in-place protocols.

**SHELTER**—Go inside a building immediately to avoid exposure to airborne chemicals.

**SHUT**—Seal all doors and windows/turn off ventilation systems. (Locking doors and windows creates the best seal.) Parents must be informed during orientation that staff is not authorized to release children during a shelter-in-place accident.

**LISTEN**—Turn on the radio/listen for up-to-date information. Avoid using the telephone unless you have a life-threatening emergency. All sites must have a working radio available at all times.

#### ii. Earthquake Emergency

Duck and cover under a table or desk, crouching on knees with face down and hand covering the back of the head.

Stay clear of outer walls, windows, glass, cabinets, files, or shelves.

Evacuate the building to Assembly Area after counting 100.

- Avoid re-entry into the building.
- Allow the Building Warden to re-enter the building (searching for missing persons, assessing the extent of damage, turning off utilities as needed, and checking for gas leaks).
- Keep clear of overhead wires, poles, buildings, trees, and falling objects if outside.
- Prepare for aftershocks.

#### iii. Fire Emergency

Notify the fire department immediately, giving required information:

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## Policies and Procedures

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- CSB building, room number, address, and other means of identifying location of the fire
- Description of size / type of fire
- Information regarding any injured people
- The name, telephone number, and extension of the employee reporting
- Evacuate all people from the fire area and close off the fire area using posted emergency routes.
- Report to Assembly Area (consult the Evacuation Plan)
- Use appropriate type of fire extinguisher. If smoke or heat endangers safety, evacuation of the area is required (to allow emergency personnel to handle the situation).

#### iv. Medical Emergency

- Provide appropriate first aid and/or cardiopulmonary resuscitation (CPR).
- Call the Fire Department if advanced first aid is required (911).
- Call an ambulance if appropriate (911).
- Send the injured to either the physical location of his or her choice or to the nearest medical emergency center or hospital. Notify the family of the injured.
- Report injuries to the appropriate supervisor immediately. The supervisor is responsible for notifying Community Care Licensing via telephone within 24 hours and in writing within 7 days.
- If an injury results in death or hospitalization of an employee for over twenty-four hours, notify CSB Personnel and the Workers' Compensation/Safety Coordinator. She/he is responsible to inform the CCC Risk Management and the State Division of Occupational Safety and Health (CAL/OSHA).

#### 3. Work-Related Injury and Illness

All County employees who are injured or become ill as a result of their job are covered under Workers' Compensation.

Workers' Compensation is a no-fault insurance plan paid for by the County and supervised by the State. It is a plan where fault does not have to be proven to receive medical expenses and lost wages. If an employee is unable to work because of a work-related injury or illness, (s)he is eligible for benefits. All benefits are determined by the California State Legislature.

#### i. If an employee is injured or becomes ill as a result of her/his job, the following steps should be taken:

- The employee must immediately notify her/his supervisor. All work-related injuries/illnesses, including first-aid, need to be reported
- The supervisor must notify CSB Personnel (the designated Workers' Compensation/Safety Coordinator)
- The supervisor and the employee are to complete the required workers' compensation forms: CCC Supervisor's Occupational Injury or Illness Report Procedures (AK 30 –Part A & B), and Workers' Compensation Claim Form (DWC – 1), as soon as possible
- The supervisor is to submit the completed forms to CSB Personnel (CSB Workers' Compensation Coordinator) by the end of the business day of the injury/illness or by the end of the day (s)he became aware of the injury or the illness; The Supervisor is to fax the first white page of the DWC-1 and parts A & B of the AK-30, Supervisors Report, to the CSB Worker's Compensation/Safety Coordinator at Personnel on the day of the injury and to send the original paperwork via the Interoffice Mail.

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- The CSB Workers' Compensation Safety Coordinator will submit the required documentation to CCC Risk Management Office. County policy requires the documentation to be submitted to Risk Management within 24 hours of the injury/illness
- Injured/ill employees are encouraged to seek immediate medical attention. The CSB Workers' Compensation/Safety Coordinator will provide information on medical facilities that can be visited in case of a work-related injury/illness
- The injured/ill employee may only return to work with a doctor's note stating that employee is cleared to return to work on that date. If the employee is placed on "Off Work" or any modified work status, (s)he must notify her/his supervisor and the CSB Workers' Compensation/Safety Coordinator about her/his status and fax/deliver the appropriate doctor's note to both parties
- Modified work will be assigned only by the CSB Workers' Compensation/Safety Coordinator in coordination with the employee's supervisor if accommodations are viable
- If an employee is ordered for follow-up doctor visits or therapy as a result of a job-related injury or illness, (s)he is required to attend all prescribed visits and furnish Work Status Reports to her/his supervisor and the CSB Workers' Compensation/Safety Coordinator after each visit
- Employees leaving work for appointments connected to work-related injuries/illness are to claim the time off as workers' compensation time (WC) on their time cards
- Doctor bills and hospital expenses related to on the job injuries or illness will be paid directly by the County. If an employee receives a bill that is related to a job-connected injury or illness, (s)he should notify the CSB Workers' Compensation/Safety Coordinator and should not pay the bill.

### ii. Return-To-Work Program

CSB participates in the Return-To-Work (RTW) Program. It is a plan utilized by Contra Costa County with the main objective to manage the employees' successful and timely return to work after a work related injury. The program facilitates the earliest possible return of an injured employee to meaningful, productive work within the parameters of her/his physical capabilities. If necessary, the program allows for temporary modifications to the employee's job description or position to accommodate the physical restrictions identified by the medical provider. Employees participating in the program are assigned transitional jobs. Two main transitional jobs are available for employees through the RTW program:

- Modified work within the employee's unit – this is usually for on-the-job injured employees who can perform their usual jobs full time or part time with significant accommodations
- Bridge Assignments – these are for employees who cannot perform their usual jobs, but can be assigned to other meaningful jobs. Usually, Bridge Assignments are much broader and employees assigned to them may be placed in any of the EHSD's Bureaus or even other County Departments.

Assigning employees to transitional jobs is facilitated by the CSB RTW Coordinator (Personnel) in collaboration with the employee's supervisor. While in the RTW program, each employee is required to furnish Personnel with Work Status reports after each visit with the Worker's Comp doctor.

Employees with work related injuries benefit from participating in the RTW Program by returning back to work quickly, by continuing to participate in meaningful jobs and maintaining their self-esteem, by the on-the-job hardening, and faster recovery.

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### 4. Ergonomic Safety and Evaluation

All employees are expected to maintain their work environment and equipment safe and in good repair. Employees are to organize their work space considering basic ergonomic and safety practices such as, easy access/reach of desk equipment, appropriate lighting, use of appropriate equipment, avoidance of forceful lifting, pushing or pulling, prolonged repetitive motions. Employees performing mainly sitting jobs are encouraged to periodically change activities and positions, take small stretch breaks to reduce repeated stress to various parts of the body.

Employees who experience discomfort by using their work equipment or have doctor's recommendation for ergonomic evaluation are to notify their direct supervisor and request evaluation. The supervisor should contact CSB Personnel, the Workers' Compensation/Safety Coordinator and request ergonomic evaluation for the employee. The CSB Workers' Compensation/Safety Coordinator will review the request and arrange for the evaluation.

After the completion of the ergo evaluation, the employee and her/his supervisor will receive a copy of the evaluation report and an Ergonomic Equipment Acknowledgment Form. The employee is to review and keep the copy of the evaluation. Both the employee and the supervisor are to sign the Ergonomic Equipment Acknowledgment Form and return the original to the CSB Workers' Compensation/Safety Coordinator at the Personnel Unit for authorization of the recommended ergonomic equipment.

The CSB Workers' Compensation/Safety Coordinator will work with the CCC Ergo Lab to ensure the appropriate accommodations are made and that the employee is trained on ergonomic and safety practices. Ergonomic Equipment Acknowledgment forms sent by the employees directly to the CCC Ergo Lab without the authorization of the CSB Workers' Compensation/Safety Coordinator will not be accepted by the Ergo Lab and the requested equipment/accommodations will not be provided.

### 5. Employee Relations

As a part of a team providing services for the benefit of the public, each employee must cooperate with co-workers and supervisors and the public through professionalism and mutual respect in order to set a high standard of work performance. The entire staff of CSB must function as a team. Each employee is required to make a positive contribution in the interest of efficient public service.

Unwillingness or failure to cooperate will not be tolerated and will be cause for disciplinary action.

### 6. Smoke-Free Environment

CSB will create a smoke-free environment and eliminate exposure to tobacco smoke by children, staff and parents in the Head Start program.

By state regulation, smoking is prohibited at all times in all space utilized by the program. This includes classrooms, staff offices, kitchens, restrooms, parent and staff meeting rooms (used in the evenings as well as during the day), hallways, outdoor play areas, county vehicles and vehicles used for transporting children.

If there is a designated smoking area, it will be located out of the children's sight, and at least 20 feet away from the main entrances, exits and operable windows of the building (California Government Code, Sections 7596-7598). All smoking trash, including butts and matches, will be extinguished and

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disposed of in appropriate containers. Staff is encouraged to wear protective wear, such as a smoke or “smoking jacket” so that when they finish smoking, they can remove it so as to not carry the tobacco chemicals on their clothing into the classrooms or offices.

If a CSB program shares a building with other occupants, staff will take steps to reduce children’s exposure to smoke from other sources in the building by altering traffic patterns or establishing a “smoke-free zone” around the site.

Adults are also prohibited from smoking during group socialization activities, such as field trips, neighborhood walks, and other outdoor activities. The only situation under which this does not apply is during a presentation or field trip related to American Indian cultural customs in which tobacco is utilized.

Educational and wellness activities, such as smoking cessation programs for adults and inclusion of developmentally appropriate activities in health education for children will be developed to assist in carrying out smoke-free policies. Staff and parents are encouraged to call the California Smokers Helpline at 1-800-NO-BUTTS for help in quitting. Smoking cessation programs for adults are available through the program’s collaboration with the WIC Program. Additional information and resources are available by contacting the Comprehensive Services Unit’s Health Services Manager.

### 8. Drug-Free Work Environment

In Compliance with the Federal Drug-Free Workplace Act 1988, the Contra Costa County Board of supervisors instituted a Drug-Free Workplace Policy (Resolution No. 90/674 from October 16, 1990). The Board is committed to a Drug-Free Workplace because of the inherent dangers to employees who abuse drugs and/or alcohol. According to the Drug-Free Workplace Policy:

- The County prohibits the unlawful manufacture, distribution, dispensing, possession, or use of controlled substance in the workplace, and/or during work hours.
- Any violation of this policy may result in disciplinary action, up to and including termination, or when needed, mandatory participation of the employee in a drug-abuse assistance or rehabilitation program.
- Any employee convicted of any State or Federal criminal drug statute for a violation occurring in the County workplace or on County time, shall report the conviction to their supervisor, department manager or personnel officer no later than five (5) days after such conviction.

CSB strives to maintain a workplace that is reflective of the County Smoke-Free and Drug-Free Workplace Environment Policy. CSB employees are expected to conduct themselves responsibly. Upon report that an employee appears to be under the influence of alcohol or illegal drugs, the employee’s supervisor must notify the Assistant Director or the Division Manager, or the Personnel Administrator. One of these CSB Senior Managers and the employee’s supervisor will immediately meet with the employee and determine if she/he is under the influence of alcohol or illegal drugs. If they determine that the employee is under the influence, the employee shall be instructed to immediately leave the workplace. An employee under the influence of alcohol or illegal drugs is to report back to work sober and clean of drugs at least one day after the incident. The employee has the option to claim unpaid time or to use her/his own accruals.

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### 8. Solicitation of Goods

Contra Costa County prohibits the solicitation of goods on any County property. Goods for sale will not be accepted, bought, or sold at any Grantee office or CSB center. This applies to commercial activities only. This does not apply to parent fundraising. Parent fundraising activities are reviewed and approved by the Policy Council and the Bureau Director.

### 9. CSB Telephone Usage Policy

There may be times when personal telephone calls must be made or received during working hours. Personal telephone calls must be kept to a minimum, and may not interfere with classroom or business activities. CSB expects employees to make these calls during break or lunch periods. No long distance calls can be made on CSB telephones. Personal cellular phone usage, unless in an emergency situation, is prohibited in the classroom and business offices at all times.

### 10. Food in the Classroom

Food for individual staff consumption is not allowed in the classroom unless the staff member is eating a meal or snack with the children. Any other food and drink must be consumed by the staff member during break or lunchtime, away from the classroom.

### E. Analysis of Staff Needs

The needs of individual staff members for assistance and training, as well as the training tools are analyzed regularly to ensure optimal performance and efficiency of services. The Community Services Director or designee assesses staff needs by considering levels of responsibility, experience, performance of assigned tasks, and other relevant factors. On the basis of such assessment, the Community Services Director or designee determines the delivery of needed assistance after considering funding limitations. Assessment of staff needs is performed annually or as needed.

### F. Recruitment and Selection

It is the policy of CSB to employ qualified, capable, and responsible personnel who are of good character and reputation. Consideration will be given to provide employment opportunities to parents of enrolled Head Start and Early Head Start children. CSB will follow the guidelines for recruitment as required by the MoUs, PMRs, Management Bulletins and other provisions established by the County and funding sources.

CSB shall make certain that its recruiting procedures afford adequate opportunity for the hiring and career advancement of its parents and staff. The attainment of a high level of education may be important to performance in certain positions; however, formal educational qualifications, unless required by state, local or federal law, where practical, shall be made discretionary rather than required for employment and advancement. Head Start staff will be required to meet the educational requirement as established in the Head Start Act and/or Head Start Performance Standards.

The Policy Council will approve or disapprove all Head Start and Early Head Start employees prior to employment including the Head Start Director, Director of Human Resources, Chief Fiscal Officer and any other person in an equivalent position in CSB.

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### G. Hiring of CSB Staff

A position will not be filled until concurrence is reached between the Community Services Director and the Policy Council. The following steps are taken when hiring staff:

- Following the approved Contra Costa County Personnel Management Regulations, the Personnel Unit will work with the County Human Resources Department, as required, to publicly announce a position for employment.
- Upon receipt of applications, the Human Resources Department or designee will screen the applications to ensure that applicants meet the minimum requirements for filling the position.
- The Human Resources Department shall designate selection procedures that may be written tests, oral tests, physical agility tests, assessment centers, training and experience evaluations or other selection procedures, or any combination of these. Selection procedures shall be practical and job related, constructed to sample the knowledge, skills, abilities and / or personal attributes required for successful job performance.
- When, after public announcement, the number of accepted candidates is equal to or less than the number necessary for a full certification, after consulting with the Community Services Director, the Personnel Unit may waive competitive testing and certify the applicants without rank or score. Under these circumstances, the Community Services Director will appoint a Qualifications Appraisal Board within the Community Services Bureau to conduct oral interviews of the applicants.
- In examinations where an oral interview is to be conducted as part of the total examination, the Personnel Unit shall appoint two or more qualified staff, as well as a Head Start Parent to conduct oral interviews.
- After completion of the examination process, the Personnel Unit will certify to the Bureau Director in rank order, according to the overall scores in the examination process, the names, addresses and phone numbers of the persons entitled to certification.
- The designated interview panel consisting of staff and parents will interview the prospective employee to determine:
  - If the individual will be able to work effectively with parents and/or children in a positive, supportive manner;
  - If the individual will be able to work with staff in a cooperative, team-like manner;
  - The individual's commitment to low income families and the community;
  - The experience the individual has working with or the understanding the individual has of culturally diverse groups;
  - Personal characteristics such as warmth, strength, flexibility, understanding, empathy, ability to respond quickly under stress;
  - The ability of the individual to work within systems;
  - The individual's respect for authority and ability to work under supervision; and
  - Any other special skills such as speaking, reading, or writing in other languages.
- After the interview, the Personnel Unit will conduct personal and employment reference checks on all potential new hires prior to names being recommended to the Community Services Director or designee and Policy Council.
- After the interview, staff will submit a recommendation to the Policy Council that will include the prospective employee's suitability for employment in the position being considered.

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- The name and qualifications of the candidate/s will be considered for approval by the Policy Council. Only after the candidate has been approved for employment by the Policy Council may the candidate be officially employed and report for work.
- No Head Start funds may be obligated for payment of salary to any permanent employee not previously approved by the Policy Council.
- All newly hired employees will serve a probationary period as outlined in Section 9 of the Personnel Management Regulations and Section 20 of the Memorandum of Understanding between Contra Costa County and Public Employees Union, Local One.

### H. Reject from Probation

When an employee is being separated from employment while on probation, a CSB Manager or Assistant Director will serve a copy of a Project Employee Probation Report (CSD-50) to the employee and at that time shall ask for any keys and/or employee badges they may have to the facility.

### I. 9/80 Work Schedule

A 9/80 work schedule has been established for a period determined by the Community Services Bureau Director. The schedule is available for Senior Management and some management and middle management classifications. There may be some job functions or classifications that are not feasible for participation in the 9/80 schedule. Additionally, probationary employees are not eligible for a 9/80 schedule until successfully completing their probationary period. Furthermore, temporary employees are excluded from the 9/80 work schedule. The Director of Community Services Bureau has the authority to determine the exclusion or the participation of particular jobs or classifications in the 9/80 shift.

The 9/80 schedule is voluntary. An employee who participates in the 9/80 schedule is not obligated to maintain it except for a two-week cycle from the beginning of the 9/80 shift. If an employee opts out of the schedule, she/he may opt back in once in the following three-month period. Work expectations do not change as a result of an employee's participation in a 9/80 schedule. If her/his performance deteriorates due to participation in the 9/80 schedule, the employee may be returned to a regular schedule. This action requires the approval of the Community Services Director or designee.

Employees requesting participation in the 9/80 work schedule should complete a Participation Request form that can be obtained from CSB Personnel Unit. The employees are to submit the completed form to their supervisor. Approval is granted by the Community Services Director or designee with consideration for adequate coverage of the Department and the individual units. A copy of the approved request should be submitted to the Fiscal unit and to CSB Personnel to be filed in the employee's personnel file.

Employees participating in a 9/80 schedule must take a day off during the two-week pay period. During the period, the employees work one 8 hour day and 9 hours each day thereafter. The total work hours for the pay period should equal 80. If a holiday falls on the employee's day off, the employee should take her/his 9/80 day within the pay period before or after the holiday. If a holiday falls on a work day, the employee must use 1 hour accruals to make the required 9-hour work day since a holiday is 8 hours.

### 9/80 Work Schedule For Employees Temporary Disabled Due To Industrial Injury

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In accordance with the Memorandum of the Office of the County Administrator, dated November 23, 2009, and the Contra Costa County's Return to Work Policy for Industrial Injury or Illness, Section VI, A. Restrictive Duty, the 9/80 or flexible work schedule for every employee who has sustained industrial injuries, who has an accepted worker's compensation claim and is temporarily disabled from working full time will be temporarily revoked. Upon release to full time work by the treating physician and only if the employee is able to work more than 8 hours per day, the 9/80 or flexible schedule may be resumed.

### J. Separation

Employees are dismissed, suspended, and demoted in accordance with Contra Costa County, Personnel Management Regulations Part 11, Separation and Memorandum of Understanding between Contra Costa County and the Labor Unions.

### K. Resignation

A resignation letter from the employee shall be made in writing and submitted to the employee's immediate supervisor and/or Assistant Director. The original letter should be sent to Personnel Unit.

### L. Nepotism

No immediate family member of a supervisor shall work directly under his/her supervision. Immediate family member shall be defined as spouse, natural child, stepchild, foster child, child in employee's custody, legally adopted child, legal guardianship, foreign adoption, tribal adoption, disabled adult child, domestic partner, and child of domestic partner.

### M. Enrolled Children of CSB Employees

To maintain an equitable educational environment at our child care centers, CSB requires that every effort will be made to place the enrolled child of a CSB employee at facility that is different from the employee's worksite. In NO case will an employee's child be placed in the employee's classroom. CSB employees' children may be enrolled in the program only if eligible.

### N. Staff Qualifications – General

All site-based staff must meet the minimum qualifications of the State Department of Education matrix and the Early Head Start and Head Start staff qualification requirements as stated in Sections 645(A) and 648(A) & (B) of the 2007 Head Start Act. This includes Assistant Directors, Site Supervisors, Infant/Toddler Master Teachers, Master Teachers, Infant/Toddler Teachers, Teachers, Infant/Toddler Associate Teachers, and Associate Teachers.

It is the employee's responsibility to maintain and provide to Personnel and their Site Supervisor a current Permit or Temporary Certificate issued by the Office of Education and to meet the Head Start and Early Head Start staff qualification requirements by the established timelines.

In addition, all staff must meet the minimum qualifications as stated in the Community Services Bureau Job Descriptions and as set forth by state and federal regulations. Should an employee fail to meet the minimum qualification of his or her job while employed with Contra Costa County, he or she will be dismissed as stipulated in the Personnel Management Regulations, Part 1108 and the Public Employees Union, Local One MoU, Section 24.2.

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### O. Qualification Requirements for Positions

Minimum qualification requirements are set for all Contra Costa County Community Services Bureau positions.

The Personnel Director, in conjunction with the Assistant Directors and/or other managers, drafts minimum qualification requirements for certain positions. These are received by Policy Council for input and review.

Where minimum qualification requirements affect health, education, food service, or other component positions, the draft is received by the appropriate committee for input and review.

The draft is then submitted to the Community Services Director for review and approval. After Community Services Director's approval, the draft is sent to the CSB Personnel Unit for further processing.

Managers receive copies of job descriptions and qualifications adopted by Human Resources. Preference will be given to former and current parents who meet the qualifications as set forth in the job descriptions.

All families must be able to perform the Essential Functions as set forth by the Department at all times (please refer to Essential Functions documentation). If staff is unable to perform the functions at any time during employment, the Department will try to accommodate needs; however there are some instances where this may not be possible.

New Hires: Before a new employee / volunteer who will work directly with the families and children begin work, (s)he must have completed the following:

- Complete health screening by a physician including a tuberculosis test (prior to employment) or a written statement from a doctor stating a TB test is not required.
- Fingerprint / criminal record clearance without any exemptions.

### P. Classroom Staffing and Ratios and Comprehensive Services Staffing

#### 1. Classroom Staffing and Ratios

Each classroom maintains the adult/child ratios required by Title V: For children ages 3-5, 1:8; for toddlers, 1:4; for infants 1:3. Children under three years of age may not be in groups with more than eight children. Each full-day classroom is staffed with a qualified Teacher and 2 Associate Teachers. If this is not possible, an Associate Teacher may be substituted for a Teacher and a Teacher Assistant Trainee for an Associate. Each part-day classroom is staffed with two Teachers and Teacher Assistant Trainees.

CSB center classrooms will have no more than 20 children enrolled at any time, except in State Preschool classrooms where there may be 24 children enrolled at one time and in Head Start classrooms with an approved 24-waiver from the Administration for Children and Families (ACF).

The Supervisor must ensure that adult/child ratios are maintained at all times. If a staff member is absent, the Site Supervisor must do the following:

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- Assess the staffing needs of the classroom based on the number of children present and the staff/child ratios in other classrooms at the site.
- Request the services of a parent volunteer.
- If a substitute is needed, the Supervisor must contact the clerk who coordinates the substitutes.

All staff inside the classroom and outside in the yard are responsible to ensure that all children are visible at all times and that they are being supervised at every moment.

- Whenever the classroom is outside on the yard or on a field trip, all members of the teaching team must be present to ensure the health and safety of children. No scheduled prep time or breaks are permitted during times scheduled outside of the classroom.

Teaching staff supervise infants and toddlers/twos by sight and sound at all times. When infants and toddlers/twos are sleeping, mirrors, video or sound monitors may be used to augment supervision in sleeping areas, but such monitors may not be relied on in lieu of direct visual and auditory supervision. Sides of cribs are checked to ensure that they are up and locked.

Teachers, assistant teachers, or teacher aides are aware of, and positioned so they can hear and see any sleeping children for whom they are responsible, especially when they are actively engaged with children who are awake.

CSB management ensures that the staff reflects the cultures and languages of the children and families served in the program whenever possible. If this is not possible, the Supervisor must contact the main office to obtain the services of a translator or the CSB Language Line in order to communicate with families.

### 2. Comprehensive Services

The program is supported at all times by the following personnel:

A health services content area expert who is trained and experienced in public health, nursing, health education, maternal and child health, or health administration. Additionally, when a health procedure must only be by a licensed or certified health professional, the agency will ensure that this requirement is met.

- A nutrition services content area expert who is a registered dietitian or nutritionist.
- A mental health services content area expert who is a licensed or certified mental health professional with experience and expertise in serving young children and their families.
- A family and community partnership or parent involvement content area expert who is trained and experienced in field(s) related to social, human, or family services and who is skilled in assisting parents of young children in advocating and decision-making for their families.
- A disabilities services content area expert who is trained and experienced in securing and individualizing needed services for children with disabilities.

### Q. Site Administration

Each site that receives State Department of Education funding must have a full time Site Supervisor housed in the building. For sites with more than nine classrooms, an additional Site Supervisor will be housed at the building. This Supervisor may be counted in the ratio if working directly with the children. Sites with infant/toddler care must have a Site Supervisor who, in addition to the regular qualifications, has completed 3 units of Infant and Toddler Care.

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As an entity operating child care and development programs, providing direct services to children at two or more sites, CSB shall employ Assistant Directors that meet the minimum qualifications of a Program Director as outlined in the State Department of Education matrix.

### R. Teacher Assistant Trainees (TATs)

CSB may employ Teacher Assistant Trainees (TATs) through the County or the ROP program. The following applies for all teaching staff with less than 12 units in Early Childhood Education courses:

- The TAT must be at least 18 years of age UNLESS: (S)he has a high school diploma or equivalent or a part of the ROP or other occupational program.
- The TAT may never be alone with the children – the Teacher/Associate must always supervise the interactions with the children.
- If the TAT has enrolled in or completed at least 6 units in Early Childhood Education, (s)he may supervise children at nap time and escort children to the bathroom without the direct supervision of a Teacher/Associate.

In order to support the professional development and career advancement of Teacher Assistant Trainees, CSB will afford a select number, appropriate to funding availability, of Teacher Assistant Trainees the opportunity to participate in the Teacher Assistant Trainee Program, as outlined in 31(a)(4).b of this section.

### S. Volunteers

CSB encourages volunteers from the community whenever possible. Each year, program staff recruits volunteers through flyers and other announcements. Before a volunteer begins in the program, (s)he must go through the ~~ASA III~~ responsible for volunteer coordination. This ensures that the volunteer has fulfilled the necessary requirements prior to being given an assignment. All potential volunteers must complete a Volunteer Application. If the volunteer works more than sixteen (16) hours at one facility s/he must obtain fingerprint clearance. ~~All volunteers, regardless of the number of hours they are planning to work, must submit a statement of good health. The statement could be issued by a doctor, a medical professional or be a self-disclosure signed by the volunteer. Each volunteer must undergo a TB risk assessment and if at risk submit a negative TB test result at their own cost prior to volunteering. The statement of good health and the TB result should be provided to the ASA III and kept on file by the Site Supervisor as~~ outlined in California DSS section 101170(b), certain volunteers may be exempt from the requirement to submit fingerprints.

Once fingerprint and TB clearance is received, the volunteer coordinator will contact site supervisors to see if there is an appropriate volunteer opportunity at their site. The volunteer coordinator will forward all paperwork to the site supervisor for their Licensing and Health file. The Site Supervisor or designee will review the Volunteer Policy with the volunteer and have him/her sign the Standards of Conduct, Certification Statement and all other Licensing forms. Only then will CSB make the final volunteering assignment which includes: start date, end date, and number of days and hours per week. ~~The~~ The volunteer enters hours worked daily on an in-kind form for the whole month. At the end of the month, the volunteer submits the completed in-kind reporting form to the assigned volunteer supervisor to have them sign their approval and to make a copy of form for the volunteer. The volunteer's supervisor or designee submits the in-kind records monthly to the cluster clerk for entry into the In-Kind Log in the shared drive.

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## Policies and Procedures Section 1: Administration

### T. Standards of Conduct

CSB ensures that all staff, consultants, and volunteers will observe the program's Standards of Conduct. All employees must sign the Standards of Conduct annually and the original will be maintained in their personnel file.

Every employee, consultant and volunteer involved in the Program, must subscribe to the following:

- Respect and promote the unique identity of each child/family.
- Refrain from stereotyping on the basis of gender, race, ethnicity, culture, religion, or disability.
- Follow program confidentiality policies concerning information about children, families, and other staff members.
- Never leave a child alone/unsupervised while under their care.
- Use positive methods of child guidance.
- Never engage in corporal punishment, emotional/physical abuse, humiliation, intimidation, ridicule, coercion or threats.
- Never prohibit a child from attending religious services outside the agency.
- Never use methods of discipline that involve:
  - Isolation
  - The use of food as punishment or reward
  - The denial of basic needs
- Provide a safe, healthy and accommodating environment that meets the children's needs.

Every employee engaged in the award/administration of contracts or other financial awards will sign a statement to the effect that they will not solicit or accept personal gratuities, favors, or anything of significant monetary value from contractors or potential contractors. Additionally, employees will not engage in any form of picketing, protest, or other direct action that is in violation of law and must comply with Contra Costa County Administrative Bulletin 405.4.

If a staff member, consultant, or volunteer violates any of the above Standards of Conduct, the following disciplinary steps may be followed:

- Conference(s) with the individual's supervisor to discuss implications of their behavior, and corrective action plans.
- Further training for the individual may be provided.
- A letter of Coaching and Counseling may be sent to the individual, detailing the seriousness of their violation(s) of the Standards of Conduct.
- If the letter of Coaching and Counseling is ignored, the employee may receive further disciplinary action.
- If the behavior of the individual does not change, disciplinary measures may be applied, such as Letter of Reprimand, suspension, and/or termination of employment. In some cases, termination may be the first discipline.

### U. Professional Behavior and Attire

To ensure the health and safety of enrolled children and to foster professionalism at our child care centers and offices, staff is expected to adhere to the following dress code.

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## Policies and Procedures Section 1: Administration

Staff at child care centers, whether direct caregivers or support staff, must wear clean, neat, comfortable clothing and footwear suitable for the daily tasks of significant bending, walking, lifting, sitting and running. Central Kitchen staff must adhere to policies that specifically pertain to hygiene and attire.

- Professional Behavior and Attire

As representatives of County government, it is important that staff adhere to high standards of professional behavior at all times. Public and client perceptions of our staff and services can be significantly affected by a single negative interaction with any employee in our department.

As professionals, staff members need to refrain from excessively negative behavior in all interactions with their colleagues, in meetings and training sessions, with clients, or the public. Such behavior can over time create a hostile work environment, be experienced as harassment, interfere with client access to services, or violate client rights.

Examples of excessively negative behavior can include: rudeness, being overly brusque and impatient, showing contempt for others, being excessively critical and fault-finding, demeaning and sarcastic, disrespectful, slamming doors or files, raised voices, use of profanities, sexual and national origin harassment and discrimination. There may also be other behaviors that create a hostile or extremely unpleasant environment for staff or clients.

Staff who engages in such behaviors will receive counseling and coaching from their supervisors. Continued engagement in unprofessional behavior after counseling and coaching has been provided may result in disciplinary action.

- CSB Standards for Appropriate Attire

- Shoes: heel height to a maximum of 1 inch, closed toe and heel required
- Shorts: must reach the knee, transparent fabric is unacceptable.
- Tops: prohibited are tops that expose the midriff, low cut necklines, backless, strapless, halter or tube tops, spaghetti straps, or any transparent material.
- Skirts/dresses: hem must be knee length or longer; fabric may not be transparent.
- Pants: hems of pants cannot drag on the floor, and waistband may hit no lower than the top of the hip. Transparent fabric is unacceptable.
- Jewelry: Earrings must be shorter than 1 inch from lobe, rings no higher than ¼ inch from shank. Any jewelry that may pose a hazard to children or staff may not be worn to work.
- Any articles of clothing with statements deemed by CSB to be political, offensive, or inappropriate are prohibited. The display of 'gang colors' is prohibited.
- Administrative staff shall dress in a manner that reflects a positive public image. In general, appropriate business attire will include well maintained clothing, as described above. 'Casual Friday' attire is acceptable, but must incorporate the above standards. Administrative staff may wear blue jeans on Casual Friday but may not be worn with sneakers, thong shoes, or T-shirts.

### V. Non-Discrimination and Anti-Harassment Policies

It is the policy of Contra Costa County to maintain a work, service and program environment free of discrimination, harassment, or intimidation based on sex, gender, age, race, religion, national origin, ancestry marital status, sexual orientation, disability or medical condition. These policies are also

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## Policies and Procedures Section 1: Administration

mandated by state and federal law. It is the policy of the Community Services Bureau to comply with all applicable state and federal statutes and regulations prohibiting discrimination in employment, contracting, buildings, facilities, and provision of services. All employees should be familiar with all of the provisions in the County's "Notice of County Non-Discrimination and Anti-Harassment Policies" and the procedures for "Reporting Discrimination, Harassment, and Retaliation".

In addition to policies and regulations which prohibit harassment on the job on the basis of one's membership in one of the protected classes as well as all forms of sexual harassment, please note that the County policy also states that:

- "Employees are entitled to, and will be provided with, a workplace environment which is free from harassment...All employees are individually responsible for conducting themselves in ways that ensure others are able to work in an atmosphere free of discrimination, harassment or intimidation...Each employee has a duty to report incidents of unlawful discrimination and harassment. Retaliation for reporting discrimination or harassment or participating in an investigation of a discrimination claim is both unlawful and against County policy."

Supervisors have an affirmative and legal duty and responsibility to report all allegations of sexual and other forms of harassment or discrimination to their managers or supervisors. The Employment and Human Services Department will fully comply with these policies and will not tolerate discrimination, harassment, or intimidation in any form. Reports of violations of these policies will be promptly investigated and appropriate disciplinary action taken if warranted. This policy also includes more subtle forms of harassment, such as threats, name-calling, and use of slurs, innuendo, or misrepresentation of actions or intent to damage an employee's reputation.

### ~~W. Whistleblowers are Protected~~

Community Services Bureau adheres to the California Whistleblower Protection Act (Government Code Sections 8547-8547.13) and EHSD Policy against Retaliation. It is the public policy of the State of California to encourage employees to report or "blow the whistle" to an appropriate government or law enforcement agency when they have reason to believe their employer is violating a state or federal statute, or violating or not complying with a state or federal rule or regulation. These violations may include fraud, waste, abuse, unnecessary government spending, an unsafe or unhealthy employer practices.

A "whistleblower" is an employee afforded with the following protections:

1. ~~An employer may not make, adopt, or enforce any rule, regulation, or policy preventing an employee from being a whistleblower.~~
2. An employer may not retaliate against an employee who is a whistleblower.
3. An employer may not retaliate against an employee for refusing to participate in an activity that would result in a violation of a state or federal statute, or a violation or noncompliance with a state or federal rule or regulation.
4. An employer may not retaliate against an employee for having exercised his or her rights as a whistleblower in any former employment.

Information regarding possible violations of state or federal statutes, rules, or regulations, or violations of fiduciary responsibilities should be reported by calling the California State Attorney General's Whistleblower Hotline at 1-800-952-5225.

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## Policies and Procedures Section 1: Administration

A copy of this Labor Code and how to report improper acts is posted at each CSB center.

### ~~X~~. Protocol for Tracking Staff Absences

Consistent staff attendance is critical to the operation of quality child development centers. To maintain our daily staffing levels so that our work is completed effectively and efficiently it is necessary to keep accurate account of the use of these benefits.

Use of vacation and personal leave accruals is by mutual agreement between the employee and the supervisor. Request for use of this time must be made and approved in advance using the form provided by CSB.

For employees who do not have pre-approved absence from work, each Site Supervisor is required to maintain a daily employee call-in log to record employee absences that were not pre-approved. Employees calling off of their shift must do so by 6:00am on the day of the absence. For consecutive absences, employees must notify their supervisor by 3:00pm of the day prior. If no communication between the employee and supervisor takes place during the first day of absence it is expected that the employee will be present for their shift on the next business day. The employee is required to provide the following information when calling in: Name, date of the absence, job classification, shift, time of the call, reason for not reporting to work.

Supervisors are to track absences on the monthly Staff Absentee Tracking log that is provided in an Excel workbook. Assistant Directors are to review monthly Staff Absentee Tracking logs for analysis of staffing patterns, site needs for substitutes, etc.

### ~~Y~~. Family Medical Leave Act (FMLA)

CSB provides coverage under the Family Medical Leave Act (FMLA). Eligible employees can receive up to 18 weeks unpaid, job-protected leave in any 12 months period. An "eligible" employee is an employee who had work for his/her employer for at least a year and had worked a minimum of 1,250 hrs. and meets any of the qualifying reasons listed below:

- The birth of a child or placement of a child with the employee for adoption or foster care
- The employee's own serious health condition
- The employee's need to care for her/his spouse, child, parent, due to his/her serious health condition
- The employee is the spouse, son/daughter, parent, next of kin of a service member with a serious injury or illness (in this case the FMLA may be up to 26 weeks in a single 12 month period)
- Qualifying emergency arising out of the fact that the employee's spouse, son/daughter, parent is on active duty or call to active duty status in support of a contingency operation as a member of the National Guard or Reserves

Employees needing to take FMLA are required to notify their supervisor and Personnel, and submit a medical certification or appropriate document/s issued by a court, law/enforcement agency or a military service entity showing need for the employee to take time from work. Medical certification has to be provided on CCC Certification of Health Care Provider Form. This form can be obtained from the CSB Personnel Unit. The employee is required to submit the completed and signed by his/her doctor

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## Policies and Procedures Section 1: Administration

document within 15 calendar days of receiving the form from Personnel. The CSB FMLA Coordinator will provide the employee with official letter approving/disapproving the FMLA and information on the employee's benefits and rights while away of work.

If a supervisor is aware that an employee is off work due to a condition qualifying under the FMLA, she/he should notify CSB Personnel on behalf of the employee. Personnel will contact the employee and will provide information on his/her rights under the FMLA.

While on FMLA, an employee may be eligible for Temporary Disability Benefits or Paid Family Leave. The employee is to make personal decision if (s)he wants to take advantage of these benefits. Employees are encouraged to contact CCC Benefits Unit at (925) 335-1746 for specific information regarding their benefits during time off work. While on FMLA, employees may choose to use their accruals. In this case, they are to contact their payroll clerk and make specific arrangements for the use of their accruals.

### ~~2.~~ Confidentiality

As public employees, CSB is governed by numerous federal, state, and county regulations that are designed to ensure that public resources are being administered in an ethical manner and that the right of both employees and the public CSB serves are respected and honored. These include regulations that ensure that the rights of individual employees are respected to work in an environment that is free of discrimination, intimidation, hostility, or retaliation. CSB department's mission to serve the most vulnerable members of the community also requires even higher standards of professional conduct to ensure that rights are respected and that there will be no cause of additional harm and suffering.

Knowing what these myriad regulations are and understanding their relationships to each other can be confusing. The purpose of this policy is to update and summarize the major policies that govern employee conduct. References will be made to other policy documents that contain the more detailed provisions.

These policies will be reviewed with all existing employees and will be presented to and discussed with all new employees and temporary staff at the time of their orientation. New employees will sign a statement that certifies that they have received and read these Standards of Conduct.

1. General Policies-Policies and procedures in this matter bind CSB employees who have access to confidential information. The policy is:

- No information about a child or family is to be released without written, parental informed consent if the material is personally identifiable.
- "Personally identifiable" information is defined as information about a child or family that would make it possible to identify the child or family with reasonable certainty. Such information includes:
  - The child's name, address, telephone number
  - Medical record
  - Social Security number
  - Any other data that can readily identify the child or family.

When the child's name is attached to any of the following, that information is considered confidential:

- Specific educational/medical screening
- Diagnostic data

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- Disability
- Categorical diagnosis
- Child's functional assessment
- Family needs assessment
- Home visit reports
- Progress reports

### 2. Confidentiality Procedure

All records containing information pertaining to a child and/or family must be kept in a locked file. The locked file should be maintained at each center location, and the Site Supervisor shall designate a staff member to be responsible for the key.

A list of individuals authorized to review files must be available at every center. Any individual not on the list, but requesting access to files must be approved by the lead Teacher/Site Supervisor prior to release of files.

Please refer to Record Keeping and Reporting Section for protocols for file review.

An Individual Access Log must be kept in each file, and any individual working with/reviewing/monitoring the file must sign his/her name, date, and reason for accessing the file.

Files or papers containing confidential material regarding a family must not be left on desks, tables, or other areas where others may have access to them. After current business concerning a file is completed, the file must be returned to the file cabinet, and the cabinet locked.

Discussions of family problems or situations are to be held only with those staff members working directly with the family. Information should be shared only if it is relevant to that staff member in assisting the family. The normal mode of information sharing is the Case Conference/Case Management. The following must be followed:

- Problems of one family must not be discussed with another family.
- Family situations/problems must not be discussed in the presence of parents, children, or visitors at the centers or division office.
- Written information regarding families must not be shared with any community agency without express prior written authorization from the family.
- After a child's participation in the program has ended, no records of home visits, Case Conferences/Case Management, IEP's or other confidential reports are to be forwarded to any school without prior written authorization from the parent(s).
- Prior to using children's photographs outside the program or allowing children to participate in research, parents' written permission must be secured.

### 3. Parent Access to Family Records

The following protocols are followed with regards to family records:

- Parents have full review / access rights to information regarding their children and themselves.
- CSB has an obligation to explain to parents any information in the records that pertains to the child/family.

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- Parents have the right, after reviewing their child's records, to have them amended or corrected. The request can be written or verbal; the Site Supervisor must approve it.
- If the parents cannot come to an agreement with the Comprehensive Services team/Site Supervisor, then all explanations and requests for change must be kept with, and become part of, the child's permanent record.
- Parents may obtain from the Site Supervisor, upon written request, a list of locations of all personally identifiable information kept by CSB.

### ~~AA~~. Staff Performance Appraisals

1. A Uniform Service Rating System includes provision for periodic rating of employees' performance for the purposes of:

- Promotion
- Transfer
- Demotion
- Termination
- Salary adjustment
- Re-hiring
- Recommendation to future employers
- Performance improvement

Every employee is evaluated within the first six months of employment, in accordance with Contra Costa County probationary requirements. A formal, written review of the employee is completed annually by the immediate supervisor.

In the process of formal evaluation of the employees, CSB utilizes also peer feedback evaluation and self evaluation. The information collected through the feedback evaluation tool is analyzed and summarized by the supervisor and included in the employee's Performance Evaluation. The employee is given the opportunity to evaluate his/her Professional Goals and submit the self evaluation form to his/her supervisor before the Performance Evaluation meeting. The employee's self evaluation is included in the Performance Evaluation.

The initial six-month period is used as the final phase of the examination process. It is utilized by the appointing authority for effective adjustment of new employees, and for release of employees whose performance is unsatisfactory. Ongoing evaluation continues throughout employment. (For more information on the probationary period, see "Personnel Management Regulations, "Part 9, Sections 901 and 902, pages 9-10.)

Performance Evaluation Schedules (due dates) are tracked monthly by the Personnel Unit and notifications are given directly to the immediate supervisors as well as the 2nd line supervisor and the Bureau Director. The immediate supervisor is also notified via the COPA/CLOUDS electronic system.

### 2. When Completing Employee Evaluations

The immediate supervisor rates an individual employee on work performance, efficiency, dependability, and adaptability. Step ratings are made in a formal report by the immediate supervisor (responsible for

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## Policies and Procedures Section 1: Administration

the work of the employee being rated) for each employee at the end of the probationary period, and at the end of the first year of employment in the job occupied (and annually thereafter).

In completing the Performance Evaluation for each employee the supervisor takes in consideration the feedback information received from the employee's peers, as well as, the self evaluation completed by the employee. At least two weeks before completing the employee's evaluation, the supervisor will ask 2-3 employees working closely and familiar with the employee to complete the appropriate feedback tool. The supervisor will summarize and analyze the results and include them in the employees review. Prior to the meeting with the employee, the supervisor will also ask the employee to evaluate his/her performance in the area of Professional Goals. The employee self-evaluation will be reviewed at the time of the Performance Evaluation meeting and included with the Performance Evaluation.

Evaluations are filed in the employee's personnel records. The formal report becomes a part of the employee's permanent personnel record.

An employee who receives an unsatisfactory rating may be ineligible for a higher pay or job rating until a satisfactory rating has been received.

An employee may be reassigned, demoted, or discharged for receiving an unsatisfactory rating.

Both the employee and supervisor may review and discuss his/her performance and service rating, as well as their goals. The employee may review a step rating (as soon as possible) after the supervisor prepares the rating, but unauthorized persons may not see the rating. After discussion, the employee must sign the rating form.

Each employee shall receive a copy of his/her rating.

The primary functions of supervisory personnel are: 1) guidance, and 2) improvement of the operation. Each supervisory visit shall be a positive approach to improvement, and add to the employee's contribution to the department.

In accordance with section 648(A)(f) of the Head Start Act, staff and supervisors will collaboratively complete a Professional Development Plan that connects the employee's professional goals to training and educational programs and/or resources that support attainment of such goals. Each plan will clearly outline high quality activities that will improve the knowledge and skills of staff as relevant to their roles and functions in a manner that will improve delivery of program services to enrolled children and families. Supervisors shall ensure that the plans are regularly evaluated for their impact on teacher and staff effectiveness. Professional Development Plans are part of the performance evaluation process and must be submitted with the completed evaluation tool.

### 3. Supervisor's Approval

Before evaluations are reviewed with employees, they must be approved by the second level supervisor.

The supervisor's supervisor or designee reviews step ratings. That reviewing official must:

- Approve or disapprove the service rating
- Change the service rating, without formal appeal procedures, when in the interest of sound administration
- Discuss the rating with the employee
- Upon request of the employee, provide an impartial review of the service rating.

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### 4. Appealing a Performance Evaluation

If the employee is dissatisfied with the review/decision, the employee may appeal in writing (within ten days) to the CSB Director for an impartial review of their service rating. The Bureau's Director shall render a written decision, sustaining or modifying the rating to the employee within ten days following a hearing.

If the employee is dissatisfied with the decision of the Community Services Director, the employee may appeal in writing (within ten days) the decision to the local authority for a review. This authority reviews the appeal, rating, and Community Services Director's decision, and renders (in writing) a decision to the employee (within ten days).

Policy Council must be involved in the decision if a recommendation to terminate an employee is given. Policy Council must approve the termination, in accordance with CSB regulations.

### ~~BB~~. Chronological Supervision and Filing System

Chronological Supervision is a management and record-keeping system that organizes and facilitates the tasks of supervision, staff development, and progressive discipline. It is based on the concept that all employees are trained and supervised over a chronological period of time. Since this training and supervision occurs over an indefinite time period, the documentation of these activities should be filed in the chronological order that they happened. Chronological supervision supports non-discriminatory documentation of employee professional growth and performance, increases management accountability, and contributes to personal and organizational development. Chronological Supervision files will contain all non-disciplinary correspondence and documents pertaining to the supervision of subordinate employees. Examples of mentoring and supervision include, but are not limited to recognition for excellent and/or consistent performance of assigned tasks; written instructions for improving job functioning with follow-up of monitoring activities; and documentation of meetings held with employees.

Each site will maintain a site Chronological and Supervision File. If a staff person's site assignment changes, Site Supervisors are responsible for transferring the employee's Chronological and Supervision File to the new assigned site.

### ~~CC~~. Staff and Volunteer Health

#### 1. Volunteer Health

In accordance with California Care Licensing Regulations, all volunteers (regardless of the number of hours volunteering) must sign and date form CSB232-Volunteer Health Statement (See Forms CSB232), indicating that they are in good health and pose no threat to the health and safety of the staff and children of the program. **All volunteers** must provide proof of a negative TB test or negative chest x-ray, certified by a health care professional. TB tests are not required for visiting experts.

The test must be administered and the results documented by an authorized medical provider. CSB will help in obtaining a TB test with our LVN. Also, provide all potential volunteers with information regarding the latest schedule for the immunization clinics throughout the county. Call 1-800-246-2494 for clinic times and locations. The cost is approximately \$10.00, but may be covered under some insurance policies.

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A signed statement from a provider indicating the test date and result must be on file before the first day of volunteering at the site(s). For parent volunteers, place the documentation behind the volunteer health statement in the health section of the comprehensive file. For non-parent volunteers, place the documentation in file specific to that volunteer along with other required documentation such as fingerprints and volunteer applications. Keep all information confidential.

For frequency of testing and other details regarding TB test results, please refer to "Tuberculosis Screening Guidelines," below.

### 2. Staff Health

New employees must obtain and submit to CSB Personnel Unit a Physical and an Intradermal Mantoux 5TU PPD skin test (note: Tine or other multiple puncture tests are not acceptable.) prior to starting work. If an employee has had a positive PPD skin test in the past, a negative chest x-ray and physician's statement must be obtained. Initial Physicals and TB tests must be obtained within one year of the date of employment with CSB.

In compliance with California Community Care Licensing regulation 101216(g)(1), staff shall obtain a health screening performed by or under the supervision of a physician not more than one year prior to or upon employment. No further re-examination is required by the State of California.

### 3. Tuberculosis Screening Guidelines for Staff and Volunteers

If staff or volunteers present a positive TB test (10mm or more of indurations), it must be followed by a chest x-ray and a statement from the examining physician indicating that the employee or volunteer is free from active disease.

Employees and volunteers with a negative initial TB test, who do not live in the Richmond or San Pablo area, must repeat the test every four years. Employees and volunteers with a negative initial TB test must complete a TB Risk Assessment every year (See Form CSB262) to determine whether annual TB testing is recommended.

An employee or volunteer who lives in the Richmond or San Pablo area must have a TB test done yearly. Employees and volunteers with a documented positive initial TB Test that was followed with an x-ray showing no active disease do not require any additional exam. These employees and volunteers must complete the TB Symptom Review (CSB260) every year to determine whether they require further medical evaluation.

### 4. Hand Hygiene Standards at Sites

To assist in the prevention of spreading infection and viruses, and for safety reasons, all staff at child care facilities, whether considered direct caregivers, clerical or management must adhere to the following standards of hand and fingernail hygiene.

Artificial or natural fingernails must be clean, and at a maximum, ¼ inch in length.

Large rings that extend above the ring base more than ¼ inch may not be worn while at work.

Hands must be washed, at a minimum, before and after diapering, before and after food preparation or handling, before and after morning health check-in, after contact with any bodily fluid (blood, mucus

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etc.), after personal use of the restroom, after playing with pets or other animals, after handling garbage, and after playground activities, including sandbox play.

If staff are found in violation of the hand hygiene policy, they may be required, at the Site Supervisor's or CSB management's discretion, to rectify the problem by washing their hands, removing rings or trimming or cleaning nails before returning to their position.

### ~~DD~~ Career Development Opportunities

The County encourages/supports employees' efforts to improve their skills, abilities, and knowledge to be more productive in their current assignments and to be prepared for career advancement (as opportunities arise). Staff may be required to attend trainings and/or educational advancement programs to meet licensing, state and/or federal regulations. For example, the staff qualifications requirement in Section 648A(a) of the Improving Head Start for School Readiness Act of 2007, which requires teachers to obtain specific degrees by October 1, 2011 and September 30, 2013 may necessitate that staff complete additional training or other academic programs. As resources are available, CSB will support staff in attaining certain goals; however, it is the responsibility of CSB staff to meet the minimum qualifications and requirements of their position.

Service Requirements may be established for certain professional development programs to comply with federal, state, or local regulations. As mandated in the Improving Head Start for School Readiness Act of 2007, Section 648A (6), employees who receive financial assistance to pursue a degree shall:

- Teach or work in a Head Start program for a minimum of 3 years after receiving the degree; or
- Repay the total or a prorated amount of the financial assistance received based on the length of service completed after receiving the degree.

Contra Costa County Community Services Bureau agrees that:

- Career development activities are the joint responsibility of the individual and the County.
- All staff members should engage in continuing education, whether it takes the form of formal courses of study, participation in technical society activities, attendance at meetings, reading, or other forms of communication with the profession. CSB will make every effort possible to accommodate working schedules to permit occasional attendance at educational meetings.
- To encourage continuing education, the Board of Supervisors has established a career development education policy. Applications for assistance will be considered by the department and, subject to funding limitations. The details of this policy are outlined in Administrative Bulletin 112.9. Funds may be provided for tuition, books, and other direct costs, providing that the following criteria are met:
  - The employee must start and complete course while associated with the County, within timelines.
  - The field of study must relate to assigned duties or prospective assignments.
  - Attendance at all meetings or classes is required, unless compelling reasons for missing sessions occur.
  - Passing grades must be maintained throughout the course.

Certain classified, exempt, and project management employees may be eligible for reimbursement for up to \$625 every two years for memberships in professional organizations, subscriptions to professional publications, professional engineering license fees required by the employee's classification, and

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## Policies and Procedures Section 1: Administration

attendance fees at job-related professional development activities. Individual professional development reimbursement requests are authorized by the department head.

Training sessions are held to provide opportunities for staff development and to help employees grow professionally. Such sessions help orient employees to their assignments, explain policies and procedures, teach new skills and methods, and help prepare for a particular program. Professional growth is accomplished through staff meetings and conferences, supervisory interviews, correspondence, extension courses, attendance at professional conferences, inspection tours, and directed readings.

If an employee is directed to undertake a course of study or to attend any meeting or lecture requiring travel and/or expenditure of funds, the County reimburses the authorized expenses. Time out of the office during normal working hours attending meetings will be counted as regular hours worked. The details of allowable training travel and reimbursable expenses are outlined in Administrative Bulletins 111.7 and 204.13 respectively.

The department provides opportunities for employees to attend conferences which may benefit the employee and which would help to improve the department's operation or service. All employees must submit written reports to their supervisor within fourteen (14) days after attending a conference. The written report should include a summary of ideas or methods, which may benefit or improve the services or operation of the department. Requests to attend conferences are made to the department head.

Teaching and technical staff members are encouraged to participate as active members of technical societies and professional organizations of their choice. With prior approval, time off to attend local meetings of particular interest and benefit may be arranged. The same pertains to national meetings dealing with subjects benefiting professional advancement.

Ongoing staff meetings are held for all employees. Individual employees may be called upon to present assigned topics to the group or be appointed to a committee to study special problems/lead discussions. All such meetings are held on department time and are designed to improve overall job performance/efficiency and services of the department.

CSB has designated the Personnel Unit as the lead for professional development and training activities within the program.

### ~~EE~~. Staff Training and Development

#### 1. Training and Technical Assistance Plan

The Training and Technical Assistance Plan is reviewed and updated annually and included as part of the continuation grant process to promote program improvement and enhancement. Senior managers, Content Area Experts, and other stakeholders are to submit projected trainings for each year that support the needs of their staff and meet program mandates, and are responsible for the delivery of such trainings. These trainings are included in the Training Calendar for each program year. Any training requested after the Training and Technical Assistance Plan is finalized will require approval by the Community Services Director or designee.

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The designated Staff Development Coordinator should be informed of all scheduled CSB trainings in advance. Aside from their own recordkeeping, training leaders are responsible for submitting original sign-in sheets and copies of training agendas and materials to the Staff Development Coordinator. The Training Calendar that has been developed is based, in part, on career development training needs.

#### 2. Staff Training and Development System

Purpose/Philosophy: CSB delivery of high quality services depends on enhancing the skills, knowledge, and ability of the staff. The management staff and Training Committee carefully design training and professional growth opportunities for staff, which serve as critical resources for maintaining and improving program quality.

##### i. Strategic Training Plan

This reflects the training and staff development needs identified through Community Assessment, Program Self-Assessment, Performance Indicator Report (PIR), Ongoing Monitoring, Federal and State Reviews and Regulations. The Strategic Training Plan is closely aligned to CSB short and long term goals and objectives.

ii. Annual Training Plan is developed based on: Staff Training and Professional Development Survey results from the program's self-assessment and the ongoing monitoring, staff's needs and goals identified in their performance evaluations, and federal, state and county regulations.

##### iii. Training Calendar

This identifies training topics and events for a 12-month period. It is updated quarterly and training opportunities and events are reflected on a monthly program calendar available to each CSB staff member. In addition, staff members are informed of ongoing community training events and opportunities.

##### iv. Training Budget

This is developed annually to support the implementation of the Training Plan. The budget also provides for additional training activities, as well as for training materials and equipment.

##### v. Training Delivery / Implementation-Required Staff/Management Training

- Orientation – All new staff are required to complete a bureau orientation covering all Department and County policies relating to employment. A site-based and program orientation is conducted within the first 2 weeks of employment. Additional orientation information is included in the New Employee Orientation section below.
- Ongoing Training – provided throughout the year in a timely and balanced fashion to ensure that staff possess the knowledge, skills, and expertise required to fulfill their job responsibilities and to operate a successful program.
- Head Start Required Training – provided to ensure that line and management staff develop skills and knowledge needed to operate a successful and effective Head Start program, one that fully meets the Head Start Performance Standards and the program objectives of the grantee.
- California Department of Education (CDE) Required Training – provided to meet the requirements of the Exemplary Program Standards and the State regulations.

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## Policies and Procedures Section 1: Administration

- Community Care Licensing (CCL) Required Training – provided to ensure that line and management staff have knowledge and skills to provide services and operate a program in congruence with the Community Care Licensing requirements.
- Contra Costa County (CCC) Required Training – provided to all CSB staff to ensure that the program creates a working environment that meets the County requirements and that staff members conduct themselves in a manner prescribed by the Code of Conduct.
- Domestic Violence Training- All Head Start and Early Head Start staff are trained on an annual basis regarding domestic violence. This training includes identifying the effects these situations may have on a child's behavior, how to talk with a parent who has made a disclosure of domestic violence, and community resources available to those in need. The role of staff is to listen to the parents' needs and provide specialized resources/assistance as requested and appropriate following the procedure for supporting families in crisis.

### vi. Staff/Professional Development

Staff/Professional Development activities are the joint responsibility of the individual and CSB. All staff members are encouraged to improve their knowledge and skills to advance in their career and effectively serve enrolled children and families. Staff/Professional Development training supported/offered by CSB are as follows:

- Basic Professional Level – Staff members are encouraged and supported to engage in continuing education.
- Participation in activities leading to an associate or bachelor degree – Teaching staff working toward their associate or bachelor degree are supported by various continuing education programs offered by CSB. Additional information is included in the Continuing Education Programs section below.

All permanent County employees are eligible for financial assistance as specified by the policy for training (Administrative Bulletin 112.9) and reimbursement (Administrative Bulletin 204.13).

Additional financial support may be provided for CSB teaching staff through the Teacher Degree Program, while funding is available, as approved by the Board of Supervisors in May of 2009.

With the support of educational advancement grants for teaching staff awarded to CSB, staff is eligible for the benefits specified in such grant.

Whenever possible, appropriate accommodations are made to allow staff participation in the training opportunities leading toward an associate or bachelor degree.

CSB makes every effort to accommodate the work schedule to permit staff's attendance in formal training classes, conferences, and professional meetings.

Staff receive information about classes offered through the Community Colleges, Adult Schools, community based workshops, and conferences.

vii. Teacher Assistant Trainee (TAT) Program – Staff with less than 12 units in Early Childhood Education (ECE) are given the opportunity to participate in an 18-month training program to receive their 12 units in ECE as required for the Associate Teacher Permit. Head Start parents seeking a career in early

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childhood education and development are encouraged to apply for the TAT position and participate in the TAT program.

viii. Clerical Assistant Trainee (CAT) Program – Income-eligible Contra Costa Residents, including parents, are provided with employment, mentorship, on-the-job training and support in establishing and pursuing career advancement objectives and goals within the field of clerical support and administrative services.

ix. Professional Growth Activities for renewal of existing or receiving of a new Child Development Permit – staff are provided the opportunity to participate in a variety of training/ professional development activities offered by CSB or the educational community, leading to completion of the CDE required professional growth hours for Child Development Certification. It is the responsibility of the employee to ensure that all renewal or upgrade requirements are met to maintain a valid Child Development permit as required by their position. ~~x~~

- CSB managers and supervisors, who are certified Professional Growth Advisors, counsel program staff and provide them with effective guidance and assistance in accomplishing their professional goals.
- Participation in professional organizations and technical societies – staff are encouraged and supported to participate in technical societies and professional organizations.
- Staff are given time off to attend meetings/conferences, whenever possible.
- Staff's membership in the NHSA is paid by CSB. Participation in other professional organizations and technical societies is governed by the CCC Personnel Management Regulations (PMRs).

x. Parent training is conducted throughout the year in a variety of settings including:

- Annual Parent Conferences
- Monthly Policy Council Meetings
- Monthly Parent Committee Meetings
- Policy Council training events
- Monthly Parent Trainings (in each part of the County)
- Annual Trainings

xi. Evaluation and Monitoring

Evaluation and monitoring of the training activities are effective ways to determine the extent to which the training achieved its objectives and to plan follow-up activities. They also ensure a consistent sequence in the whole training process. The following tools are used to evaluate and monitor the Staff Training and Development process:

- Staff Performance Evaluations - provide information for effectiveness of training, follow-up activities, individual training needs.
- Tracking System - provides data regarding individual staff training and the sequence for balance of training opportunities in general.
- Training Summary - provides information about effectiveness of the training, the follow-up activities and the need for technical assistance.
- Ongoing Monitoring and Self-Assessment findings - provide information for the update of the training plan. Monitoring and Self-Assessment are used to determine the training needs and professional development activities for the next school year and for the next three-year

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Strategic Plan. The Staff Training and Development System operate in a cycle. The results from the Evaluation and Monitoring are crucial elements for the beginning of the new planning cycle.

### ~~FF.~~ New Employment Orientation

1. All new employees will receive a CSB orientation covering department and county policies and programs ~~and will sign a New Employee General Orientation Record form.~~ The Personnel Unit is responsible for conducting New Employee Orientation Trainings, which include but are not limited to:

- CSB Mission Statement and Organizational Structures
- Employee Rights and Responsibilities
- Payroll and Claiming Expenses
- Employee Benefits and Training
- Information Technology and Systems

2. All newly employed teaching staff, including Site Supervisors, will receive an Education Orientation. The CSB Education Team is responsible for conducting the Education Orientation, which includes, but is not limited to:

- Performance Standards
- Job Descriptions
- Curriculum goals and objectives
- Screenings, assessment, individualization, and parent-teacher conferences
- Kindergarten transition
- Positive Guidance and Discipline
- Project Approach
- Lesson Planning

Additional initial and ongoing orientation trainings will be provided to new ~~employees~~ as ~~required by~~ County, State and Federal regulations.

All volunteers and temporary/substitute staff will review the CSB Substitute and Volunteer Handbook, and will sign the Handbook receipt which will be kept on file at the center and the personnel files. Both volunteers and substitute staff will also receive on-site orientation at the center/office. Substitute staff additionally will complete the Substitute Orientation Checklist with the Substitute Coordinator.

### ~~GG.~~ Continuing Education Programs

CSB will make every effort to support staff pursuing a degree in higher education that is relevant to the public services provided by CSB.

#### 1. Community Services Degree Program (CSDP)

This program is offered to CSB staff in accordance with Administrative Bulletin 112.9 and section G.25 of these Policies and Procedures. CSB staff enrolled in courses required to complete an associate or bachelor degree are encouraged to participate in this program and receive the benefits outlined in Administrative Bulletin 112.9.

In addition, CSB is committed to support teaching staff required to obtain an advanced degree in early childhood education, or related field, as specified in the Teacher Qualifications Section 648(A)(2) of the

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## Policies and Procedures Section 1: Administration

Improving Head Start for School Readiness Act of 2007. With the financial support of grants issued by the Administration of Children and Families, CSB has established the following continuing education programs through the duration of such grants:

### 2. Teacher Degree Program (TDP)

This program is available to all teaching staff interested in pursuing an associate degree or baccalaureate degree in early childhood education or related field. Two program models are offered through the TDP, which provide several support systems to financial, tutorial, mentoring, and technological training and equipment.

i. Individualized Education Plan: Established between the TDP participant and a college counselor/advisor at the college or university of attendance. These participants have chosen to take the required courses for their associate or bachelor degree at their own pace, under the guidance of the college or university. They are aware of the degree completion timelines and will ensure timely completion of all required coursework to meet the mandate deadline.

ii. Structured Cohort with a local four-year college: CSB has established a partnership with California State University Sacramento (CSUS) to deliver a cohort program with 14 CSB teaching staff working towards a Bachelor of the Arts in Early Development, Care and Education after completion of eight consecutive semesters. Additional cohorts may be offered as funding sources become available.  
Program Requirements:

- All participants must sign the Teacher Degree Program Agreement with Contra Costa County. The Agreement outlines both parties' responsibilities as follows:

The TDP participant agrees to:

- Enroll in a program leading to an associate or baccalaureate degree in Early Childhood Education, or related field.
- Consistently maintain enrollment in part-time classes; at a minimum of 8 quarter units or 6 semester units until you complete an associate or baccalaureate degree program.
- Earn a grade of "C" or better for each course.
- Complete the required coursework for an associate or baccalaureate degree in Early Childhood Education, or related field.
- Meet with a CSB mentor and/or college/university academic advisor at least once every quarter/semester to discuss your academic progress.
- Submit a copy of the classes registered for at the beginning of each quarter/semester to CSB's Personnel Office.
- Submit a copy of transcripts at the end of each quarter/semester to CSB's Personnel Office.
- Return ALL books reimbursed/paid by CSB to the Personnel Office at the end of each quarter/semester. The books will be available for future use by other TDP participants.
- As stated in Section 648A (6) of the Improving Head Start for School Readiness Act of 2007, commit to continue your employment with Community Services Bureau for a minimum of three years after having completed your degree program, or repay the total or a prorated amount of the financial assistance received based on the length of service completed after receiving the degree.

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- Not drop or withdraw from any class. If you drop a class, it is at the discretion of CSB to reinstate you in the program.
- Maintain an updated Teacher Degree Program binder with all required degree tracking information.

Contra Costa County Community Services Bureau agrees to:

- Reimburse/pay tuition fees for courses taken at an accredited college or university required to complete an associate or baccalaureate degree in Early Childhood Education, or related field, up to a maximum of \$1,115 per quarter or \$1,486 per semester.
- Reimburse/pay for books required for the courses taken to complete an associate or baccalaureate degree, up to a maximum of \$300.00/quarter or \$400.00/semester.
- Reimburse/pay for your campus Parking Permit.
- Work with CSB staff, local colleges and universities, and community organizations to provide mentorship, tutorial, and other support services.
- Provide a Teacher Degree Program Binder where program information and degree tracking documents can be organized.

▼ Degree Completion Timelines:

- Participants must have a bachelor degree in early childhood education or related field by September 30, 2013.

▼ HH. Delegate Agency Policies

The Delegate Agency develops their own policies and procedures and are reviewed annually by the Grantee during the Self-Assessment.

The Delegate Agency is under contractual agreement to adhere to all local, state, and federal regulations, as applicable.

II. Short-Term Contract Employees

Contract employees working over one year must have the approval of Contra Costa County. The need for contract labor is determined and funds must be available for contract labor.

Selection of persons to fill contract labor positions is determined by the appointing authority or designee.

Contra Costa County Managers and Directors give input into the development of the Service Plan.

Please see reference to contracts and grants under Record Keeping and Reporting.

JJ. Union Membership

Contra Costa County follows the State of California Legislature, adopting a set of codes pertaining to employer-employee relations for public agencies as follows:

- The Contra Costa County Board of Supervisors recognizes collective bargaining units to represent certain classifications of County employees - to determine the wishes to be represented, and by which organizations.

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- Representatives of the collective bargaining unit provide literature/information regarding the services of that unit, and conditions of employment (agreed to by the Board of Supervisors and that collective bargaining unit).

The Board of Supervisors approves processes by which representatives of the bargaining unit may use Contra Costa County time, facilities, and bulletin boards to communicate with members.

The collective bargaining unit provides its members with information regarding these matters.

Questions relating to policies guiding the collective bargaining process are directed to:

*Human Resources Department  
Employee Relations Division  
651 Pine Street, Second Floor  
Martinez, CA 94553*

### ~~KK~~. Equal Opportunity/Affirmative Action Policy

CSB shall not illegally discriminate in their recruitment, selection, promotion, or implementation of personnel policies and procedures against any person without regard to race, religion, sex, sexual orientation, national origin, age, disability, or military status. All applicable state and federal laws will be followed including, but not limited to Title VI, and Title VII, of the Civil Rights Act of 1964, as amended; the Age Discrimination in Employment Act of 1967, as amended, Section 504 of the Rehabilitation Act Amendments of 1974; the Civil Rights Restoration Act of 1987; the Americans with Disabilities Act of 1990 and the Civil Rights Act of 1991. Employment Discrimination procedures are set forth in Contra Costa County Administrative Bulletin 429.3.

### ~~JL~~. Approval of New Personnel Policies and Revisions

All personnel policies must be approved by Community Services Bureau, Policy Council, the County Human Resources Department, and the Board of Supervisors. Personnel policies and procedures must be consistent with collective bargaining agreements, and approved by County Counsel and County Human Resources as appropriate. The process is as follows:

- A policy is drafted with input from managers and program staff, related committees, and appropriate department personnel.
- County Counsel and County HR review it as appropriate.
- The draft policy is submitted to appropriate Managers and Assistant Directors for review/input before it is submitted to the Community Services Director for review and approval.
- After the Community Services Director's approval of the draft policy, it is submitted to the Policy Council for review and approval.
- If the draft policy is health-related, the draft is reviewed by the Health Advisory Committee before submission to the Policy Council.
- The draft policy must be consistent with written policies of collective bargaining agreements.
- The draft policy is submitted to the Board of Supervisors for review and approval.
- If the content of a policy has changed since the Policy Council's original approval, the Policy Council must approve the final version.
- After personnel policies and procedures have been approved, they are made available to staff electronically and in hard copy if requested.
- Policies and procedures are translated as needed.

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- Policies and procedures are being made available in Braille as needed.
- Community Services Director and Personnel Director are responsible for amending, revising, or otherwise modifying these policies and procedures.

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### **VIII. Fiscal**

#### A. Advance Amount for Travel

Advance amounts for travel are not allowed for County employees.

#### B. Travel Reimbursement-County Employees

County employees are allowed compensation for mileage, meals and miscellaneous other travel expenses. Eligible individuals are entitled to claim reimbursement for actual, reasonable, and necessary expenses arising from the discharge of their official duties, subject to limitations established by law and policy.

##### 1. Mileage

As authorized by the department head or designee, use of private automobiles may be reimbursed for mileage between an individual's normal work location and other designated work locations. The reimbursement rate is set by the County, adjusted periodically to conform to IRS approved rates. Please see note in item #4 below for the time frame of submitting mileage reimbursements.

##### 2. Meals

Actual expenses, including tax and gratuity, for individual meals will be reimbursed. However, such reimbursement shall not exceed the following individual maximums:

- Breakfast: \$10.00
- Lunch: \$20.00
- Dinner: \$35.00

When away from the normal work area for an entire day, individuals eligible for meal reimbursement may claim reimbursement for the actual cost of each individual meal, notwithstanding the maximum per meal amounts specified above. However, the total amount claimed for the day shall not exceed \$65.00.

##### 3. Other Travel Expenses

- Bridge tolls, parking; Telephone and facsimile charges required in connection with County business; BART or bus fares; and Tips, parking, and checking fees in accordance with local custom.

See County Admin Bulletin #204.13 (02-20-08) regarding expense reimbursement and #111.7 (07-18-06) regarding travel.

#### C. Travel Reimbursement-Parent Reimbursement for Policy Council Activities

Per HSPS 1304.50(f), Policy Council, Policy Committee, and Parent Committee reimbursement- Grantee and delegate agencies must enable low-income members to participate fully in their group responsibilities by providing, if necessary, reimbursements for reasonable expenses incurred by the members (i.e. childcare and transportation).

Parents requesting reimbursement should complete and submit Form CSB 325 to the Clerk of the Policy Council who will verify the request and determine the amount of reimbursement. After approval is received from the ASAILL for Policy Council, a check will be issued, no later than 30 days after the request.

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Reimbursements are given for approved Policy Council activities only (i.e. monthly PC meetings or committee meetings). Exceptions must be preapproved before reimbursements are issued. Mileage is calculated using distance from home to meeting location. Childcare hours include reasonable travel time to and from meeting and is based on reasonable arrival time to the approved activity.

Representatives attending conferences and out-of-area meetings will be given a per diem allotment for meals and ground transportation, and reimbursed for childcare expenses. Travel requests must be submitted a minimum of 30 days prior to the travel date to allow ample time for approval and advance processing. Upon return from the trip, Liquidation of Cash Advances requires that all receipts must be submitted to the appropriate PC staff person no more than 7 days after return from travel.

If receipts are not received within the 7 day timeframe, a verbal reminder will be given via the ASAIH responsible for Policy Council.

If receipts are still not received after a reasonable amount of time, a certified letter will be sent to the representative and a copy will be maintained in the CSB PC travel files.

Failure to return receipts within the allotted time will prevent the opportunity to attend future conferences and can prevent reimbursement for other PC activities.

*\*Note-Approved travel reimbursement rates are provided to parents at the beginning of each program year and prior to travel.*

### D. Using Employee's Own Funds for County Expenditures

Only in an emergency should an employee use his/her own funds or personal credit cards to purchase materials/services for a County purpose. An "emergency" is when:

- An event occurs which requires material or service to correct a safety hazard, or to prevent damage to facilities or equipment.
- A significant program need occurs which will have a significant impact on the goals of the program.
- Note: Lack of planning is not considered an emergency.
- While it is not encouraged, employees may purchase minor items that would not meet the criteria of an emergency as stated above. The purchase of minor items that are required to meet program needs must:
  - Be approved by the Assistant Director (AD) in writing if under \$100.00.
  - Anything over \$100.00 must be approved by the Director, Division Manager or designee.

### E. Reimbursement for Expenses - Employees

Employees will be reimbursed for approved, necessary eligible expenses, provided that reimbursement requests are made on the appropriate forms, in a timely manner and with receipts. When employees incur expenses for an approved purpose, one of the following procedures occurs for getting reimbursed:

1. Petty Cash – Most of the emergencies involving minor purchases can be met by use of the department's petty cash fund maintained in each Division Administrative Office. Normally, this fund is to be used for general office needs and for minor emergency requirements. A supervisor or employee

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may present a request for petty cash approved by an Assistant Director, to the Petty Cash Fund Custodian for payment.

2. Demand (Form D15) – (See EHSD Intranet> Community Services> CSB Forms > Fiscal > Demand D15). In the event you are unable to get payment from the petty cash fund, you may use the Demand (Form D-15) to get reimbursed. This form is to be used to reimburse employees for non-travel related purchases. This form should be used for items of small value, as defined above, not related to travel or entitlements.

3. Employee Travel Demands (See EHSD Intranet> Community Services> CSB Forms > Fiscal > Travel Demand (Form M8154 Rev. 11/09) — This form is designed for reporting an employee's expenses relating to travel, mileage, or for other employee benefits or entitlements such as training costs. It will normally not be used for any other purpose. The purpose for each expense must be shown; for example, mileage should show the destination, and the reason for the trip (See Employee Handbook).

Note: County regulations allow you to include expenses for only one month on a single Travel Demand. For example, if you have expenses for May and June, you may not combine expenses on one form, but must submit two separate forms - one for May and one for June. Demands are to be submitted to your immediate supervisor for approval. Claims should be submitted within one month of completion of travel. The Bureau has no obligation to pay travel expense reimbursement submitted more than three months following completion of the travel. If an employee has over three months of mileage reimbursement to claim, the employee must submit a request letter, stating the reason for submitting a late claim, to Bureau Director or designee for approval.

### F. Use of Procurement Cards

County Procurement Cards are assigned to an employee at the discretion of the EHSD Director and CSB Director. Card holders must abide by all policies as stated in the Procurement Card Manual, County Administrative Bulletin 111.8, and County Administrative Bulletin 204.13.

CSB card holders must obtain written approval from a Senior Administrative Manager prior to making a purchase to ensure that all expenditures are known about at the time the Approving Official is reviewing and approving the monthly Statement of Account.

- The Procurement Card is to be used for official County business purposes only and may not be used for any personal transactions.
- Card holders are responsible for adherence to all County Policies and Procedures regardless of whether a transaction is allowed at the point of sale.
- The Procurement Card is not intended to avoid or bypass appropriate purchasing procedures.
- Each card has a preset transaction, 24 hour, and billing cycle spending limit which varies by card. Employees are not authorized to exceed their spending limits.
- Disputes to charges must be made within 60 days of the statement date.
- Authorized Purchases include:
  - Small Tools/ Computer supplies
  - Safety/ First Aid
  - Books/Subscriptions

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- Office Supplies (If not available through our office supply contractor)
  - Conference Registration/ Travel ( an approved travel request is still required)
- Unauthorized Purchases include:
  - Repetitive purchases better served under a blanket purchase order
  - Meals/ Alcohol /Entertainment
  - Local/ Long distance telephone charges/Internet connection costs
  - Parking/Fuel
  - Committee membership/Professional Membership Dues
  - Services of any kind
  - Items to be reimbursed through a travel demand
  - Items available under a County Contract
  - Cash/ Gift Card/ Gift Certificate/ Money Order, etc.
  - Fines/Donations
  - Any expense prohibited under County Administrative Bulletins
- A log must be kept of all purchases which includes:
  - Charges split between the appropriate org codes
  - Original sales receipt/ credit or return receipts/packing slips

### G. Other Compensation

See Contra Costa County Personnel Policies and Procedures.

### H. Salary

Employee salaries are set according to procedures established by the County Board of Supervisors and the Memorandum of Understanding as agreed to by the Board and collective bargaining units.

The Salary schedule and range of steps for Community Services Bureau classifications is available in each work location.

New employees generally are appointed at the minimum step of the salary range established for the particular class of positions to which the appointment is made. The appointing authority, however, may fill a particular position at a step above the minimum of the range.

Upon satisfactory completion of the probationary period, employees receive a salary increase to the next step.

The performance of each employee, except those employees already at the maximum salary step of the appropriate salary range, is reviewed on the employee's anniversary date to determine whether the salary of the employee is to be advanced to the next higher step in the salary range. Advancement is granted on the affirmative recommendation of the appointing authority, based on satisfactory performance by the employee. The appointing authority may recommend denial of the increment or denial subject to one additional review at some specified date before the next anniversary, with the date set at the time the original report is returned. This decision may be appealed through the Grievance Procedure.

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## Policies and Procedures Section 1: Administration

Except as provided by County procedures, increments within range shall not be granted more frequently than once per year, nor shall more than one step within range increment be granted at one time, except as otherwise provided in deep class resolutions. Nothing may be construed to make the granting of increments mandatory on the County.

If an operating department verifies in writing that an administrative or clerical error was made in failing to submit the documents needed to advance an employee to the next salary step on the first of the month when eligible, the advancement will be made retroactive to the first of the month when eligible.

A part-time employee is paid a monthly salary (in the same ratio to the full-time monthly rate to which the employee would be entitled as a full-time employee) as the number of hours per week in the employee's part-time work schedule bears to the number of hours in the full-time work schedule of the department.

Any employee who is appointed to a position of a class allocated to a higher salary range than the class previously occupied - except as provided by County procedures - receives the salary in the new salary range, which is next higher than the rate received before promotion. If this increase is less than five percent, the employee's salary is adjusted (to the step in the new range which is at least five percent greater than the next higher step), provided that the next step does not exceed the maximum salary for the higher class.

Any employee who is demoted (except as provided under Contra Costa County procedures) will have the salary reduced to the monthly salary step in the range for the class of positions to which he or she has been demoted next lower than the salary received before demotion. If this decrease is less than five percent, the employee's salary will be adjusted to the step in the new range which is five percent less than the next lower step provided that the next step is not less than the minimum salary for the lower class.

Whenever a demotion is the result of layoff, cancellation of position, or displacement by another employee with greater seniority rights, the salary of the demoted employee will be the step on the salary range which would have been achieved if the employee had been continuously in the position to which he/she has been demoted, all within range increments being granted.

Whenever any employee voluntarily demotes to a position in a class having a salary range lower than that of the class from which he/she demotes, the salary remains the same if the steps in the new demoted salary range permit. If not, the new salary is set at the step next below the former salary.

### I. Bilingual Pay Differential

A salary differential of one hundred dollars (\$100) per month is paid to incumbents of positions requiring bilingual proficiency as designated by the appointing authority and the Bureau Director of Human Resources.

The bilingual salary differential is prorated for employees working less than full-time and/or who are on an unpaid leave of absence for a portion of any given month.  
(See Contra Costa County Management Handbook.)

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## Policies and Procedures Section 1: Administration

### J. Accounting Certificate Differential

Incumbents of Management professional accounting, auditing or fiscal officer positions who are duly qualified as a CPA, CIA, CMA or CGFM shall receive a positive differential of five percent (5%) of base monthly salary.

(See Contra Costa County Management Handbook.)

### K. Management Longevity Pay

Employees who have completed ten (10) years of appointed service for the County shall receive a two and one-half percent (2.5%) longevity differential.

Employees who have completed fifteen (15) years of appointed service for the County shall receive an additional two and one-half percent (2.5%) longevity differential.

(See Contra Costa County Management Handbook.)

### L. Management Paid Personal Leave (Admin Leave)

Un-represented management employees (exempt from payment of overtime) receive paid administrative leave (90 hours per year) annually.

All management employees exempt from payment of overtime are authorized paid administrative leave credit for each year, in accordance with current Contra Costa County policies.

Use of administrative leave credits may be requested whenever desired by the employee; however, approval of requests is subject to the same department process as used for vacation requests.

All unused paid administrative leave will be canceled on December 31 of each year.

For further information on management paid administrative leave, see Contra Costa County Admin Bulletin #423.3 (06-23-98).

### M. Unemployment Compensation

Employees of Contra Costa County may be eligible for unemployment compensation. The cost of unemployment compensation is borne by the County. To qualify for unemployment compensation, an employee must:

- Be unemployed and registered with the State Employment Development Department for work
- Have separated for good cause
- Have received minimum base-period wages as currently established by State law or regulation
- Comply with regulations in regard to filing claims
- Be available to immediately accept suitable work
- Be actively seeking work
- Be physically able to work

On all voluntary resignations, a Notice of Voluntary Termination of Employment (AK-219) must accompany the Notice of Separation (AK-16), and must be immediately forwarded to the Personnel Office, Records Division.

On non-voluntary separations, complete details must be attached to the separation notice (with the exception of rejection of probation separation).

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See County Admin Bulletin #420.1 (01-19-81) for further information.

### N. Vehicle Use

The County establishes policies on the use and operation of vehicles, both County-owned and privately owned, on County business.

Please see County Admin Bulletins #507.8 (02-20-08), County Vehicle Operation, and #535 (06-22-90), Use of Private Vehicles, for further information.

NOTE: For Contra Costa County's Policies and Procedures, please refer to the Contra Costa County's Administrative Bulletins and Management Handbook.

### O. In-Kind (Non-Federal Share)

#### 1. Background

The Head Start Act stipulates that the Federal share of the total costs of the Head Start program will not exceed 80 percent of the total grantee budget unless a waiver has been granted (Head Start Act Section 640(b)). If the grantee agency fails to obtain and document the required 20 percent, or other approved match, a disallowance of Federal funds may be taken. Non-Federal share must meet the same criteria for allowability as other costs incurred and paid with Federal funds.

#### 2. Definitions

- Allowable Cost: Third party in-kind contributions shall count toward satisfying a cost-sharing or matching requirement only where, if the party receiving the contribution were to pay for them, they would be an allowable cost. Allowable costs are determined by the tests of reasonableness, necessity and allocability as defined in Office of Management and Budget (OMB) Circulars A-21, A-87 and A-122.
- In-Kind: Property or services that benefit a grant supported project or program and are contributed by non-Federal third parties without charge to the grantee. In-kind contributions may consist of the value of real property and equipment and the value of goods and services directly benefiting the grant program and specifically identifiable to it. In-kind match is counted for the period when the services are provided or when the donated goods are received and used.
- Volunteer: An individual providing a service that is necessary to the operation of the Head Start program at no cost to a grantee agency.
- CSB Categories for third party in-kind contributions:
  - Classroom Help (CH): In-Kind to assist in the classroom.
  - Field Trip Help (FT): In-Kind to assist supervising children and their activities during a field trip.
  - Home Visits (HV): Volunteer at Home visits where parent is involved in child-directed activities.
  - Parent Meetings/Family Events (PM): Volunteer at Parent Meetings: Participating in site based events.
  - Policy Council Meetings/Subcommittees (PC): Volunteer at Policy Council and approved related events.
  - Home Activities (HA): Volunteer working on educational goals with child at home.
  - Donated Goods (DG): Materials donated directly to HS including land, buildings, or space that offset normal operating expenses.

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## Policies and Procedures Section 1: Administration

- Donated Services (DS): Time provided by professionals within the community on a professional level; i.e. Fire person, fence builder, mechanic, library aide, doctor, dentist, counselor and other professions.

3. Values of third party in-kind contributions will be determined and computed by CSB Fiscal Unit for the following contributions:

- Classroom Help
- Field Trip Help
- Home Visit Volunteer
- Site Meeting/Family Events Volunteer
- Policy Council Meetings/Subcommittee Volunteer
- Home Activities Volunteer

4. Donated Goods and Services (professional) will be determined by the community member or professional delivering the contribution within the standards of reason for the value and goods of the service.

5. CSB Staff will adhere to the following procedures for collection, documentation, calculation and record keeping of Third Party In-Kind contributions:

- Head/Lead Teachers: Daily/Monthly
  - Prepares CSB320 (CSB-320), in-kind form for classroom
  - Ensures proper completion of in-kind form-Full Name, Type of in-kind contribution, Service Time, signature of volunteer
  - Submit the CSB320 to Site Supervisor by 1st of each month with the 9400 sign-in sheets
- Site Supervisor: Monthly
  - Ensures collection of in-kind forms from every classroom by the 1st of each month
  - Reviews and monitors forms for completion and accuracy
  - Sign form indicating review and approval
  - Follows up with any classrooms submitting zero or low in-kind
  - Submits the in-kind form to the Cluster Clerk by the 5th of each month with the 9400s
- Assistant Director: Monthly
  - Reviews in-kind sheets and signs off
  - Follows-up with any sites submitting zero or low in-kind
  - Submits to Cluster Clerk for data entry
- Cluster Clerk: Monthly
  - Calculates the total number of in-kind hours per activity for each site
  - Calculate EHS and, HS separately as directed by CSB fiscal unit
  - Inputs data into COPA/CLOUDS by the 20th of each month
  - If a cluster clerk receives in-kind forms after the 15th, hold for next month tracking
  - Maintains original documents
- Fiscal: Annually, Monthly
  - Determines the in-kind rate calculation for volunteer contributions (Non-professional)
  - Monitor volunteer in-kind hours once a month
  - Ensure proper value of in-kind rates and calculations

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## Policies and Procedures Section 1: Administration

- CSM in charge of Parent Involvement / PC Clerk:
  - Reviews monthly in-kind data entered by Cluster Clerks
  - Reports in-kind hours by site as reported to CSM in charge of Parent Involvement
  - Reports in-kind hours by cluster as reported to Assistant Directors
  - Provides training and support, as needed, to teachers and/or Site Supervisors
  - Provides total in-kind contributions as needed or requested

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CONTRA COSTA COUNTY EMPLOYMENT & HUMAN SERVICES DEPARTMENT  
COMMUNITY SERVICES BUREAU

# POLICIES AND PROCEDURES

## SECTION 2-CHILD DEVELOPMENT

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Board of Supervisors Approved:

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Board of Supervisors Approved:

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## Policies and Procedures Section 2: Child Development

### I. ~~Prevention and Early Intervention~~

#### A. Determining Child Health Status

Community Services Bureau establishes and maintains individual, comprehensive files for children and families. Health records, developmental progress portfolios, and files, including Administrative, Delegate Agency, and Grantee-Operated Program and Subcontractor's filing systems, are kept confidential with use of the "Access to File" form (See Form CSB900) and following the approved Confidentiality Policy. All staff with access to health information is trained on HIPAA (Health Information Portability Accountability Act) requirements.

##### 1. Physical Examinations

As much pertinent health information as possible is accumulated and recorded for each child, paying particular attention to the items required by the Early and Periodic Screening, Diagnosis and Treatment Schedule (EPSDT) to ensure that children are following a schedule of complete well child care.

The child's initial physical examination required for program entry must be current (in accordance with the EPSDT schedule) and received no later than thirty days after entry into the program. One extension is allowed with documentation of a pending appointment. Children returning for a second year require additional physical exams in accordance with the EPSDT Schedule.

##### 2. TB Clearance – CSB Center-Based Program

In accordance with section #101220 of Licensing Code, TB Clearance documentation must be obtained for each child within 30 days of enrollment (admission) into the program. TB Clearance documentation must consist of either:

- A negative TB Skin Test or Chest X-Ray result, or
- A physician's check mark indicating "Risk Factors not present" or "Communicable TB disease not present" on CSB207–Report of Health Examination for Program Entry (See CSB Forms) or other signed or stamped document from physician/clinic.

The TB screening referenced in the TB Clearance documentation must be in accordance with the EPSDT schedule. The one extension allowed for pending Physical Exam appointments does not apply to TB Clearance documentation. Children without TB Clearance will be excluded if clearance is not obtained within 30 days of enrollment.

##### 3. Health Insurance

Each parent is provided with a Report of Health Examination for Program Entry form (See CSB Forms > CSB207) for use in obtaining a physical examination. In the event that the child has no insurance, staff will refer the child to the Child Health and Disability Prevention (CHDP) Gateway program, **assist with Covered California**, or another appropriate resource, to obtain a free **or low cost** exam. Comprehensive Services Teams enter all data on the physical form into the CLOUDS system. This enables program staff to track services and follow-up on needed treatment. Managers access reports to help monitor progress in meeting program requirements in a timely manner.

At intake, children and families with no medical and/or dental insurance are identified. Comprehensive Services Teams assist parents in determining eligibility and applying for medical/dental insurance such as Medi-Cal/Denti-Cal, ~~the~~ Kaiser Permanente Child Health Plan **or services through Covered California**. Comprehensive Services Teams also assist parents in establishing a medical/dental home (ongoing

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## Policies and Procedures Section 2: Child Development

source of accessible health/oral care) and navigating the managed care system to access needed services.

### 4. Health Records

In the event that health records are returned to the program with information missing, Comprehensive Services Teams obtain consent for release of information from parents. ~~This consent is used~~ to obtain information from medical/dental offices, medical records ~~departments~~, and laboratories. Every effort is made to educate parents regarding the EPSDT schedule and the documentation needed prior to visiting a dentist or doctor.

The following information shall be obtained and entered into CLOUDS and the child's confidential file:

- Health and developmental history
- Immunization Record
- Treatment plans, including immunizations ~~and~~ in series/waivers
- Age-appropriate physical exams, dental exams and screening results
- Records of major/minor illnesses and injury during program activities
- Schedule of daily medications, including fluoride and vitamins if applicable
- Allergic reactions,
- Dietary intake and food habits
- Age and gender-appropriate growth charts
- Source of payment for services, including free federal, State of California, and locally funded health services
- Medi-Cal number or private insurance identification
- Referral and follow-up information
- Record of follow-up and documentation of actual services provided
- Emergency information/Parent Contact,
- Signed parent consent forms
- Case Management Documentation
- Teacher observations
- Progress reports
- Other information as needed

A child whose authorized representatives adhere to a religious faith that practices healing by prayer or other spiritual means shall not be required to meet the requirements of the health examination. In this case, the authorized representatives must provide:

- Information on the child's health history
- A signed statement that indicates:
  - Their acceptance of full responsibility for the child's health.
  - Refusal to obtain a medical examination for the child.
  - Request that no medical care be given to the child.

### B. Protocols for Determining Child Health Status

#### 1. Application

Before enrollment, Comprehensive Services Clerks are responsible for:

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## Policies and Procedures

### Section 2: Child Development

- Reviewing the electronic application information/intake documents.
- Noting concerns (known or suspected) using the Red/Yellow Flag System as indicated on the Eligibility Certification Checklist Form (See Form CSB604).
- Generating a CLOUDS referral based on application information, as needed and clearly noting details of child's condition in Case Notes.

Before enrollment, the Comprehensive Services Assistant Managers are responsible for:

- Reviewing the application information/intake documents and ensuring referrals are generated and Red/Yellow Flags are in place if needed.
- ~~Coordinating with the Site Supervisor to set up case management or interventions as appropriate.~~

Before enrollment, the Site Supervisors are responsible for:

- Reviewing the application, Red/Yellow Flags, and referrals.
- ~~Coordinating~~ with the CSAM to set up case management or interventions as appropriate.

#### 2. Immunizations

The State of California Immunization Branch requires that programs institute a "No Shots, No School" policy, however, parents and medical providers may indicate that a child may not have any or all immunizations. In this case, the waiver on the back of the California School Immunization Record Card (blue card) must be completely filled out. Medical exemptions must be accompanied by documentation from a physician as to which immunization is prohibited and the date, if any, when a child may have the immunization. Immunization waivers based on personal beliefs require the signature of the parent on the Personal Beliefs Affidavit ~~section on the back of the California School Immunization Record Card (blue card) and effective January 1, 2014, personal belief exemptions require the completion of the Personal Beliefs Exemption to Required Immunizations Form (CDPH-8262) prior to admission to school.~~

Names of all exempt children will be maintained on an exempt roster for immediate identification in case of disease outbreak in the community. Annual immunization training, including the most current immunization schedule for children 0-5, is provided to staff each August prior to the completion of the Annual Immunization Report due to the local health department in September/October of each year. Children are tracked throughout their enrollment to ensure they remain up-to-date or in-series. Records are updated accordingly.

Prior to enrollment the Comprehensive Services Clerks are responsible for:

- Collecting valid immunization records from parent.
- Obtaining parent consent for use of California Immunization Registry (See CSBForms > CSB243 CAIR Consent) and requesting immunization registry search if parent is unable to provide immunization verification.
- Entering ~~immunization~~ data into CLOUDS ~~and completing the results column on the right to indicate one of the following: In Compliance, In Series, Personal Belief Waiver, Medical Waiver or Non Compliance.~~
- Emailing the name of child exempt from immunizations to the Comprehensive Services Manager (Health Content Area) for placement on the exempt roster.
- Determining ~~overall~~ immunization status.
- Notifying parent of shots needed.

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## Policies and Procedures

### Section 2: Child Development

- Assisting the parent in obtaining a doctor office/clinic for immunizations needed.
- Using the Red/Yellow Flag system on the CSB-604- Eligibility Certification Checklist form to indicate temp files as needing immunizations prior to start date.
- Printing the Immunization Blue Card from CLOUDS/CAIR or manually filling in blanks, signing it, and placing it in the temporary file **with documentation of a physician's statement for Medical Exemptions and the completed CDPH 8262 Form for Personal Belief Exemptions..**

On an ongoing basis, Comprehensive Services Clerks are responsible for:

- Tracking in-series children and notifying the parent of the next dose due prior to the due date.
- As needed, Comprehensive Services Clerks are responsible for:
  - Preparing exclusion letters if child fails to obtain shots on time.

Each ~~August~~/September, Comprehensive Services Clerks are responsible for:

- Attending the annual immunization training and preparing the annual immunization report.

Responsibilities of Comprehensive Services Assistant Managers

Prior to enrollment, Comprehensive Services Assistant Managers are responsible for:

- Reviewing files to ensure up-to-date or in-series immunizations or waiver is in place before file is provided to Site Supervisor for placement.
- Conducting ongoing immunization registry searches.

On an ongoing basis, Comprehensive Services Assistant Managers are responsible for:

- Ongoing monitoring of CLOUDS for immunization compliance
- As needed, reviewing exclusion letters generated by clerk and verifying information, which is forwarded to the Site Supervisor for action.

Each September, CSAMs are responsible for:

- Reviewing annual immunization reports prepared by clerk, verifying accuracy, and forwarding copies to the Site Supervisor, and the Comprehensive Services Manager (Health Content Area) after online submission is complete.

Site Supervisors are responsible for:

- Reviewing immunization compliance prior to enrollment
- Returning the temp file to the Comprehensive Services Assistant Manager if immunizations are not complete **or required exemption documentation is missing.**
- As needed, verifying, signing, dating and issuing exclusion letters prepared by the clerk and reviewed by the Comprehensive Services Assistant Manager.

Responsibilities of the Comprehensive Services Health ~~Manager~~

- Providing annual immunization training each August.
- Overseeing the process and submission of the annual immunization report to the County / State by the September/October due date of each year.
- Conducting ongoing immunization registry searches.
- Maintaining a roster of children who are exempt **from immunizations** for immediate identification in case of disease outbreak in the community.

#### 3. TB Clearance – CSB Center-Based Program

Comprehensive Services Clerks are responsible for:

- Informing parent of TB requirement

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## Policies and Procedures

### Section 2: Child Development

- Collecting valid TB screening records from parents which include either TB Skin Test or Chest X-Ray results, or a Physician's Clearance indicating: Risk Factors not present -TB test is not required (noted on CSB207 – Report of Health Examination for Program Entry) or other signed or stamped document from physician/clinic.
- Inputting TB screening data into CLOUDS upon receipt.
- As needed, preparing the exclusion letter if TB Clearance is not provided within 30 days of enrollment (TB Clearance: Negative TB skin test or Chest X-Ray results, or a Physician's Clearance)

Site Supervisors are responsible for:

- Notifying the parent of 30 day requirement at enrollment.
- Tracking receipt of TB screening records.
- Ensuring that no child is in the program without TB Clearance beyond 30 days from enrollment.
- Communicating with the Comprehensive Services Clerk to prepare exclusion letters.
- Reviewing, authorizing and signing all exclusion letters, and designating staff for distribution.

#### 4. Health History

Prior to enrollment, Comprehensive Services Clerks are responsible for:

- Completing the Health History on CLOUDS.
- Printing a copy of the Health History for the child's file.
- Obtaining signatures on the Health History if possible.
- Placing a "sign here" sticker on the Health History document if the parent is not present to sign.
- Reviewing information and flagging any suspected or known special needs using the Red/Yellow Flag System on the Eligibility Certification Checklist Form (CSB-604).
- Generating a CLOUDS referral for any special needs noted on the Health History.
- Providing Medical/Dental Home/Insurance intervention with all families that indicate they have no medical / dental provider or coverage. Document the intervention on the Health History in CLOUDS.

Prior to Enrollment, Comprehensive Services Assistant Managers are responsible for:

- Reviewing the child's Health History.
- Ensuring proper Red/Yellow Flags are in place as appropriate with sufficient detail noted for the Site Supervisor.
- Reviewing CLOUDS referrals generated from the Health History.
- Contacting the Comprehensive Services Manager for guidance if unsure of how to proceed with any special needs.
- Coordinating with the Site Supervisor to set up a pre-enrollment case management as needed.

Site Supervisors are responsible for:

- Reviewing the Health History, checking for Red/Yellow flags and referrals, coordinating with the Assistant Comprehensive Services Manager to set up case management / intervention as appropriate and returning any file without a Health History.
- Acquiring a parent signature on the Health History, if necessary at enrollment.
- Ensuring that teaching staff has reviewed the Health History in order to address health conditions/needs and the completion of the consent section.

The Comprehensive Services Health Manager is responsible for,

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## Policies and Procedures Section 2: Child Development

- Providing and/or arranging training and technical assistance as necessary for special needs identified in the Health History.
- Attending Case Management for complex cases as needed.

### 5. Physical Exam

The Comprehensive Services Clerk is responsible for:

- Providing a physical exam form (CSB 207-Report of Health Examination for Program Entry) to the parent and informing the parent of the 30 day requirement prior to enrollment.
- Educating the parent about the Early and Periodic Screening, Diagnosis and Treatment schedule copied on the back side of the CSB-207 exam form.
- Noting in the Child Case Notes in CLOUDS that the parent was given a physical form.
- Referring the parent to a medical provider/~~insurance~~ as needed.
- Inputting the physical exam data into CLOUDS upon receipt and documenting data entry in CLOUDS by placing clerks first initial, last name and date on the upper right hand side of the exam.
- Immediately, upon receipt of exam, reviewing the information and notifying the Comprehensive Services Assistant Manager of any known or suspected disabilities.
- Entering follow-up data ~~on the CSB-207 under "Staff Follow up: and~~ into CLOUDS as needed.
- ~~Collecting~~ Collecting consents for release of information from parents and faxing them to providers to obtain incomplete/missing results.
- Making follow up calls to clinics, doctors' offices, and laboratories to obtain missing results.
- Tracking physical exam due dates and sending reminder notices to parents as needed.
- ~~Providing handouts for screening value results and guidelines as needed.~~
- Providing ~~exclusion letters at the direction of the Site Supervisor.~~

#### CHDP Assessment Guidelines for Blood Pressure Readings:

Further evaluation or follow-up is indicated for a child who sustains a systolic or diastolic reading at or above the 95th percentile for age and gender (measured on at least 3 occasions and averaged together).  
~~In the case results are entered in CLOUDS as "Abnormal" and a CLOUDS health referral is generated.~~

Age in Years	90th and 95th PERCENTILE BLOOD PRESSURE ACCORDING TO AGE and GENDER							
	Boys				Girls			
	Systolic		Diastolic		Systolic		Diastolic	
	90th%	95th%	90th%	95th%	90th%	95th%	90th%	95th%
3	107	111	68	73	106	110	69	73
4	108	112	69	73	107	111	69	73
5	109	113	69	74	109	112	69	73

The Comprehensive Services Assistant Manager is responsible for:

- Reviewing all physicals with known or suspected disabilities immediately upon receipt of exam.
- Initiating care plans with providers as appropriate.
- Conducting follow-up with parents on an ongoing basis.

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## Policies and Procedures

### Section 2: Child Development

- Conducting follow-up with providers to obtain documentation to complete the exam data or to obtain follow-up information.
- Monitoring physical exam due dates to ensure compliance **with the EPSDT Schedule**.

The Site Supervisor is responsible for the following:

- Notifying the parent of the 30 day requirement at enrollment.
- Tracking receipt of the annual physical exam for preschoolers on an ongoing basis
- Tracking receipt of Well Child Exams for infants and toddlers in accordance with the EPSDT Schedule.
- Ensuring that no child is in the program without a physical past 30 days (one extension allowed with documentation of a pending appointment).
- Directing clerks to prepare exclusion letters as necessary.
- Issuing Notice of Action (NOA) for children in state-funded programs that have not complied with requirements.
- Referring families who need assistance in accessing care to the Comprehensive Services Team.
- Reviewing the physical exam for each child and calling for case management when appropriate.
- Working with teaching staff to ensure child's medical and developmental needs are addressed appropriately.
- Ensuring implementation of care plans.

The Comprehensive Services Health Manager is responsible for the following:

- **Supporting staff and attending Case Management for complex cases as needed.**
- **Interfacing with community partners for health education, services and assistance.**

#### 6. Dental Exam

Comprehensive Services Clerks are responsible for:

- Informing parent of the 90 day dental exam requirement upon enrollment.
- **Educating the parent about the Early and Periodic Screening, Diagnosis and Treatment Schedule for Dental/Oral Health Care.**
- Providing parent with the dental form (CSB-206).
- Providing a list of dental providers/**insurance** to the parent as needed.
- Tracking dental exam due dates on an ongoing basis.
- Preparing reminder letters to parents and follow-up letters to dental providers as needed.
- Entering dental exam data into CLOUDS upon receipt and documenting data entry in CLOUDS by placing first initial, last name and date on upper right hand corner of the exam.
- **Collecting consents for release of information from**
- Generating referrals for children without dental care access, treatment needed or non-compliance issues as needed and documenting referral follow up under referral/ case notes.
- Obtaining parental dental consents for onsite dental services and events.

The Comprehensive Services Assistant Manager is responsible for:

- Monitoring dental exam due dates on an ongoing basis.
- Following up to ensure treatment plans are in progress, ongoing or complete.
- Conducting case management for dental access or non-compliance issues as needed.
- Assisting the Comprehensive Services Manager with coordination of exams by volunteer dentists/mobile dental care, and other oral health events/services.

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## Policies and Procedures Section 2: Child Development

The Site Supervisor is responsible for:

- Collecting dental forms and forwarding them to Comprehensive Services Clerks.
- Attending case management for dental issues as needed **and keeping teachers informed with updates.**
- Coordinating with Comprehensive Services staff for onsite dental activities/trainings.

~~The~~ Comprehensive Services **Health** Manager is responsible for:

- Coordinating volunteer dentists, mobile services **and oral health events** on an ongoing basis.
- Attending case management for complex dental issues.
- Interfacing with the Children's Oral Health Program, Contra Costa Dental Society and other community partners for oral health education, services and assistance.

### 7. Staff Protocol for Dental Referrals

If Dental Exam indicates Treatment Needed:

The Comprehensive Services Clerk is responsible for:

- Generating a Dental Referral and updating the status as needed in CLOUDS.
- Determining dental insurance status and providing a list of local community dentists and/or community clinics (dental care providers near family's home, work and/or childcare center) and/or the Ronald McDonald Care Mobile (RMCM) schedule—for families with Denti-Cal or Healthy Families.
- Providing the parent with "Dental Exam/Treatment" Form (See Form CSB206).
- Entering contact information and date provided or RMCM referral information in CLOUDS Dental Referral Case Notes (indicating status "in progress").
- Following-up with the parent regarding the status of scheduled appointment within 2 weeks and frequently thereafter until treatment is complete and enter each follow-up activity in CLOUDS Dental Referral Case Notes (once treatment is finished enter status "complete").
- If parent/child does not have dental insurance
  - Contact the parent to discuss options including community clinics, volunteer dentists, Ronald McDonald Care Mobile, and/or CHDP Gateway to Health Coverage or the Lebow Foundation.
- Providing the parent with "Dental Exam/Treatment Needed" Form (See Form CSB206).
- If the preferred option is RMCM, contacting CSB area liaison for status of services/to begin the referral process.
- If the option selected is CHDP Gateway, providing the parent with contact information for the designated community clinic or Financial Counseling Line for county clinics.
- Entering option selected and date information was provided to parent in CLOUDS Dental Referral/Case Notes (indicate status keep "in progress").
- Referring to the CSAM if the family has exhausted all options without success

The Comprehensive Services Assistant Manager is responsible for:

- Monitoring CLOUDS **reports to identify children in need of dental services, referrals and follow up.**
- Following-up with the Comprehensive Services Clerks and the parent to assist with extended "in progress" referrals.

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## Policies and Procedures

### Section 2: Child Development

- In cases where CHDP Gateway pre-enrollment eligibility determination is “No” and/or parent cannot afford treatment, referring to local clinics, the Children’s Oral Health Program, Give Kids a Smile dentist or the Lebow Foundation.
- Entering status/follow-up data in CLOUDS Dental Referral Case Notes.

Referring to the Comprehensive Services Manager for health if services for treatment cannot be provided. ~~Referring to the Comprehensive Services Health Manager if services for treatment cannot be provided the Comprehensive Services Health Manager is responsible for:~~

- Collaborating with community partners to provide services on site or through local dental offices and dental events.
- Initiating the request process for Head Start funds (last resort) – working with CSAM to acquire treatment estimate, letter from parent, date of dental appointment and additional documents needed.

#### 8. Medical/Dental Home

Comprehensive Services Clerks are responsible for:

- Assisting families with health/oral health homes and coverage as well as applications as needed.
- Documenting Medical/Dental interventions and health/oral health coverage in CLOUDS within 90 days of enrollment.
- Providing ongoing support for families in need of a medical/dental home.

#### C. Developmental, Sensory, and Behavioral Screening

All children are screened by the teaching staff in the areas of social emotional development, speech, self-help skills, motor and cognitive development, and as needed, by the Comprehensive Services Team for hearing, vision, and nutrition, within 45 days of class entry. Parents should be informed about all screenings and their purposes in advance. The results from the screenings are used as part of the individualization process for each child.

It is the Site Supervisor’s responsibility to work with the teacher and Comprehensive Services Team to ensure that the speech/language, mental health, sensory and developmental screenings are completed within 45 days of class entry.

The teacher places **completed** copies of the Speech and Language Checklist, Brigance Cognitive Screening and Behavioral Screening in the Education section of the child’s file and enters screening data in CLOUDS. The originals are placed in the child’s file in the education section. If concerns are noted, the appropriate service area staff will follow up to ensure services meet the needs of the child. Teachers will give each child time to adjust to the new environment before completing this form.

#### 1. Protocols for Sensory (Visual and Hearing) Screening

Screenings are to be completed within 45 days of enrollment for children who do not have results as part of their Well Child Exam and for returning children, as needed, based on the EPSDT schedule.

The Comprehensive Services Assistant Manager is responsible for:

- Identifying those newly enrolled children in need of initial screenings, returning children in need of screenings based on the EPSDT schedule and re-screenings due within two weeks of the initial screening through use of CLOUDS Smart Reports.

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## Policies and Procedures

### Section 2: Child Development

- Coordinating screening team logistics for Comprehensive Services Clerks to administer screenings on an ongoing basis.
- Notifying the Site Supervisor of the upcoming screening schedule with a minimum two week notice. Note – Two week notice may not apply for children absent on the initial screening date.
- Directing Comprehensive Services Clerks to input data results in CLOUDS, preparing referrals as needed and providing follow-up until treatment is established and complete.
- Tracking referrals to physicians and providing ongoing assistance to clerks and parents until testing/treatment is established and the referral is complete.
- Completing vision and hearing screening certification courses as soon as possible after hire.

The Site Supervisor is responsible for the following:

- Obtaining a screening schedule from the Comprehensive Services Assistant Manager and providing a schedule for teaching staff.
- Providing teaching staff with the screening preparation curriculum.
- Monitoring the implementation of screening preparation in the classroom curriculum and on the lesson plan.
- Providing an appropriate screening area on site for the administration of screenings.
- Designating teaching staff to accompany children to and from designated screening location.

The Teaching Staff is responsible for:

- Implementing screening preparation curriculum in the classroom.
- Including screening preparation on the lesson plan. Note – In an effort to complete all screenings within the 45-day deadline, it is important to include screening preparation into the lesson plan for the first week of school for part year programs and two weeks prior to July 1 for year round programs.
- Providing flexibility with the classroom schedule to support Comprehensive Services in completing the screenings.
- Introducing Comprehensive Services Staff to children on the screening day.
- Assisting Comprehensive Services with gathering children to be screened. Tracking children as they are removed from and re-enter the classroom and accompanying children to and from the screenings as directed by Site Supervisor.
- Completing the Educational areas of the Screening Results Form (See Form CSB212) including the Brigance, Sp/Lang and Behavioral areas, signing in the designated area.
- Assisting with the distribution of Screening Results Forms (See Form CSB212-Screening Result) to parents.

Comprehensive Services Clerks are responsible for:

- Engaging parents in conversation about the importance of screenings.
- Notifying parents of dates and screenings to take place by posting a flyer on site, one week in advance.
- Reviewing reports of children to be screened.
- Verifying consents for screenings on the Health History forms of those children to be screened
- Obtaining additional consents for screening to be administered by collaborative agencies as needed.
- Obtaining equipment needed and setting up screening tools on site.

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## Policies and Procedures

### Section 2: Child Development

- Introducing screening staff to the classroom teaching staff and allowing teaching staff the opportunity to introduce the screening staff to the children.
- Encouraging teachers to assist in choosing the order in which the children will be screened.
  - Note – Those children unwilling to participate will be given future opportunities and parents and/or staff may be encouraged to accompany the child to complete needed screenings within the 45-day deadline.
- Partnering with teaching staff and Site Supervisors to accompany children to and from the classroom to the location of the screening administration.
- Administering the vision and hearing screenings and, noting results for input in CLOUDS.
- Cleaning up the equipment and leaving the area as it was found.
- Entering all screening data in CLOUDS and documenting screening results, re-screens and referrals.
- Informing the Comprehensive Services Assistant Manager and Site Supervisor of those children in need of re-screening.
- Administering re-screenings within two weeks of the initial screening and within 45 days of enrollment if the child was unable to condition.
- Preparing referrals to physicians and in CLOUDS for those children identified as needing further evaluation.
- Contacting parents of children with referrals, offering resources for a medical/dental home and additional assistance as needed.
- Completing the Screening Results Form (See Form CSB212-Screening Results) and ensuring that the education section is also completed prior to making a copy for the file and distributing the original to the parent in a confidential manner within 75 days of the child's date of enrollment.
- Providing ongoing assistance for referrals and resources until each referral is complete.
- Completing vision and hearing screening certification courses as soon as possible after hire.

The Comprehensive Services **Health** Manager is responsible for:

- Overseeing the monitoring of all sensory screenings, referrals and follow up.
- Coordinating the annual Vision/Hearing Screening Trainings with CHDP.
- Registering Comprehensive Services Staff in need of vision/hearing training and certification as soon as possible after hire.
- **Coordinating screenings with collaborative agencies and notifying the Site Supervisor and Comprehensive Services Team of those screening dates and requirements.**

#### D. Follow-Up and Treatment

Early medical/dental exams and other screenings enable parents and program staff to identify any concerns and respond in a timely manner. Whenever concerns are present the Comprehensive Services Team works with the parent to obtain necessary follow-up services or treatment. Assistance is provided in the acquisition of equipment needed for medical/dental conditions and parents are educated regarding their child's specific condition and needs. Dental follow up/treatment includes preventive measures and further treatment as ordered by the dental professional.

Medical Treatment includes treatment of any condition as identified in the physical exam, IFSP, or IEP. Follow-up treatment is tracked in the CLOUDS system using the referral feature and is referenced in the child's confidential file.

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## Policies and Procedures

### Section 2: Child Development

Where no resources exist in the community for follow-up and treatment, the program will pay for services as long as funds remain in the budget earmarked for this purpose. To access program funds, the Comprehensive Services Team must document that all available resources have been exhausted and that program funds are being used as a last resort. This information, along with proof of need and the estimated cost for treatment, must be submitted to an Assistant Director for approval and submitted to the fiscal unit and the Bureau Director.

#### 1. Protocols for Referrals, Follow Up and Treatment

The Comprehensive Services Clerk is responsible for:

- Generating a referral in CLOUDS as soon as a need is identified
- Assisting in collecting documentation regarding the case management process on an ongoing basis
- Entering related data into CLOUDS

Comprehensive Services Assistant Managers are responsible for:

- Monitoring CLOUDS reports and following up on referrals on a weekly basis
- ~~Supporting families through the referral/case management process~~
- Updating the status of the referral as it changes
- Contacting the Comprehensive Services Manager for training or technical assistance as needed.

#### 2. Monitoring and Tracking

Comprehensive Services Assistant Managers are responsible for the following on an ongoing basis:

- Monitoring the process for accuracy and compliance.
- Creating action plans as needed
- Providing reports ~~and updates~~ to the Assistant Directors as needed
- Providing training and technical assistance as needed

Assistant Directors are responsible for:

- Reviewing reports
- Ensuring follow-up and corrective action plans completion

#### E. Children with Disabilities- Screenings, Case Management and Referral Procedures

Early childhood experiences are known to shape the developmental outcomes for children. Trauma during the early years also affects long-term outcomes by impacting brain development, cognitive, physical, and social/emotional functioning. The Community Services Bureau has systems in place to mitigate these factors which include early screenings/assessments, case managements and linkage with appropriate agencies to provide any/all necessary comprehensive services the child and family might need. Parents need to ~~agree and~~ provide a written consent (Sign CSB 501 Form) prior to receiving referrals or linkages to any other agencies. Agencies closely working with the Community Services Bureau are: the Regional Center of the East Bay, the Contra Costa School Districts, the Contra Costa Children and Family Services Bureau among others.

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#### 1. Screenings

The Community Services Bureau is committed to early identification of children at risk of developmental delays in order to provide the necessary early intervention that will lead to a better future for the child.

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## Policies and Procedures

### Section 2: Child Development

Prior to enrollment during the application period the child's file might be flagged using the Red and Yellow Flag System to alert the staff of known or suspected concerns based on the completed health history by the parent. The health history briefly screens children for possible health, nutrition, and socio-emotional and developmental risks.

Child's Physical Exams/Baby Well Checkups provide a great source of information and they are given to us by the parents within 30 days of enrollment and thereafter as required by the EPSDT schedule.

In addition, sensory and developmental screenings and assessments are provided to all enrolled children within 45 days of enrollment.

Children determined to be in need of further evaluation/assessment based on screening results, staff observations, and/or parent observation are referred to the appropriate agency with parental consent.

#### 2. Data Gathering, Case Management and Referral

The Community Services Bureau staff follows the next steps when referring a child for a diagnostic assessment and early intervention to an outside agency.

##### i. Data gathering by CSB staff prior to Case Management Meeting

- The child's file and the CLOUDS system are reviewed to identify other related concerns.
- The developmental history taken at enrollment is reviewed. (It provides information regarding the child's history of exceptional items not normally occurring, i.e., low birth weight, allergies, premature and/or post-mature, difficult birth, accidents, eating behaviors, meeting milestones and/or other concerns).
- The medical records completed in the last 12 months are reviewed to identify health concerns or other relevant information given by the pediatrician.
- The sensory/cognitive screening and assessment results are reviewed and verified to ensure further evaluation if necessary.
- The Initial Home Visit form (CSB 170) is reviewed to identify parent's concerns.
- The At Risk Referral Form (CSB 622) is reviewed. (CSB 622 form indicates that the child/family has as an open CFS case and is receiving Child Protective Services and childcare/development services are necessary component of the Child Protective Services Case Plan or the child/family has an At-Risk Case and is NOT receiving Child Protective Services, but is at risk of abuse, neglect or exploitation and childcare and development services are needed to reduce or eliminate the risk).
- Teacher/Site Supervisor/Disabilities Comprehensive Services Disabilities Manager observes the child in the classroom and produces written documentation about child's strengths and challenges.

##### ii. Case Management Meeting

After gathering data, the site supervisor, teacher and CSAM review the strategies that will be presented to the parent in a case management meeting.

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## Policies and Procedures Section 2: Child Development

The Site Supervisor/CSAM invites the parent/s to a case management meeting to be held at the parent's convenient time and to identify if the parent will need an interpreter.

The CSAM invites the additional team members in collaboration with the site supervisor. The case management team members include but are not limited to the class teacher, the Site Supervisor, the assistant manager, content area managers, the interpreter, any other family friend/relatives, the physical therapist, the occupational therapist, the speech/language therapist, CFS welfare social worker and any other professional involved with the child/family receiving services.

The meeting is facilitated by the CSAM but can be led by other agency staff. The meeting is documented in the Case Management Form (CSB 514) **and/or directly entered in CLOUDS under "Disabilities-Case Management Information"**, attached to the Meeting/Event sign-in Sheet Form (CSB 905). All participants are required to sign the CSB 905 form. These original forms will be placed in the child's file under the Special Needs Section.

The purpose of the meeting is to open communication relevant to the individual needs of the child, to provide strategies for the parent and to place necessary referrals to outside agencies for further evaluations. The case management meeting is dismissed after identifying actions, roles and responsibilities for each member and scheduling a follow up meeting if necessary.

### iii. Referral

Based on the agency identified for referral, the CSAM will explain in detail the requirements for their referral process, their timelines, and provide copies of the parent rights and responsibilities under IDEA to the parent. It is crucial that this portion be clear to the parent and an interpreter assist the parent with any clarification.

The parent is encouraged to sign the Child Referral and Parent Consents Form (CSB 501), only after understanding the referral process and his/her parent rights under IDEA. The assistant manager assists the team by providing the copy CSB 501 form to be signed.

For Mental Health referrals, the medical provider information is completed on the referral form and a copy of the child's Medical card (if insured) is attached. When a child is on disciplinary steps and has a behavior action plan, a copy of this plan, the child's Devereux Early Childhood Assessment and Development Screening is included with the referral.

The Child Referral and Parent Consents Form (CSB 501), is reviewed to ensure the document is correctly filled out after acquiring parent signature. Additional signatures are obtained from the Site Supervisor and the Comprehensive Services Assistant Manager. A copy of this form (CSB 501), is given to the parent, one to the assistant manager to process the referral and the original is placed in the file.

The **CSAM** reviews the signed CSB 501 and processes it immediately. Once verified referral receipt by phone with the appropriate School District, Early Intervention Agency, or Mental Health Unit, the assistant manger completes the Response to Referral Form (CSB 502).

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### Section 2: Child Development

The original form (CSB 502) is placed in the child's file while the copy is given to the parent attached to additional relevant informational resources.

The CSAM enters the **referral notes in the "Disability Intervention Referral", "Intervention Notification" and "Case Management Information"**, under the disability tab in CLOUDS. Copy of the case management (CSB 514) **or Case Management CLOUD's print out form** is placed in the child's file.

The CSAM **contacts** the family for a follow-up within 30 and 60 days after submitting the referral to ensure proper evaluation meetings are in place, proper support is given to the parent in preparation of the diagnosis meeting, and ensure participation in the IEP/IFSP meeting.

Additional Case Management will follow up as needed and/or as determined in the initial meeting.

#### F. Child and Family Mental Health Services

##### 1. Description

The Community Services Bureau Mental Health Unit provides individual **psychotherapeutic services to children enrolled in the Early Head Start and Head Start program**. The staff provides individual and group consultation to parents and teaching staff on child abuse, parenting skills, parent advocacy, developmental and mental health issues impacting the 0-5 year-old population and their caregivers. The Mental Health Unit operates a comprehensive Master's level Internship Program in collaboration with Contra Costa County Health Services Department, Mental Health Division on a year-round basis.

The Contra Costa County Community Services Bureau program staff, partners with parents and mental health professionals, to identify mental health concerns of children and parents in the program. The task of the Case Management Team is to:

- Ensure the delivery of appropriate mental health services in a timely manner
- Assist in designing strategies to identify mental health concerns of children
- Recommend appropriate placement and/or program modifications to meet the individual needs of children
- **Support and include parents in the decision making regarding mental health services for their child**

##### Goals of the Mental Health Unit

- Some of the goals of prevention activities address self-concept, building positive relationships among children, their peers and their caregivers; developing coping and problem solving skills, and stress management.

##### 2. Mental Health Services

The Mental Health Unit delivers the following services:

- Prevention, early identification and intervention in problems that may interfere with a child's development
- Developmental/Social and Emotional Screening (ASQ3 and ASQSE)
- Focus on early detection of concerns of caregivers, staff and children who may be in need of mental health services
- Mental health assessment

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## Policies and Procedures

### Section 2: Child Development

- Play Therapy (Individual Psychotherapy with children)
- Family ~~Support~~
- Parent (Guardian) – Child Interaction Therapy
- Staff Training on mainstreaming and social integration techniques
- Parent Training on social, emotional and mental health development of children
- Parent Training on positive child rearing techniques and stress management
- Program evaluation and performance partnership review to ensure planning and delivery of excellent supports and services.
- Case Management
- ~~Crisis Intervention~~
- ~~Provide community resources to families~~
- ~~Child Abuse and Domestic Violence awareness~~

The objectives of Mental Health treatment are to alleviate and resolve identified symptoms per a diagnosed mental health issue and medical necessity. The clinicians perform assessment and ongoing treatment based on a diagnosis by their licensed supervisor. The treatment is provided in accordance with the parent or legal guardian's consent; parents or guardians are encouraged to be active participants in the treatment planning process as outlined by the Head Start Performance Standards.

Services are individualized and are primarily provided at the preschool sites in dedicated play therapy rooms. The Clinical Team coordinates care of children, parents and families with other contracted and non-contracted county child and family service agencies while a child is enrolled in and transitioning out of Head Start. The hours of operation vary depending on the child's school program and individual needs. The school sites are generally open Monday through Friday, 8:00 a.m. to 5:00 p.m., and clinicians provide some services in the early morning or evening to accommodate caretakers' work schedules. Additionally, all Mental Health staff is available via voicemail, and email through the Mental Health unit administrator.

#### 3. Mental Health Referral Procedures

If recommendation is for referral to Mental Health services within Head Start/Early Head Start or other agency, the Education Staff or Comprehensive Services member will follow this protocol:

The child's teacher is responsible for:

- ~~Consulting with Site Supervisor to recommend a referral.~~
- ~~Providing documentation regarding concerns such as Positive Guidance Plan, tracking report, observations.~~

~~The Site Supervisor is responsible for the following:~~

- ~~Reviewing child's file and any pertinent screening results such as Brigance, DECA, Health History to identify and gather additional information to share with appropriate parties as support for the referral.~~
- ~~Scheduling a meeting with parent to offer mental health services for additional services.~~
- ~~Completing referral forms and securing parent consent and signature. (CSB 501 Child Referral and Parent's Consent)~~
- ~~Processing the referral with the appropriate Comprehensive Services Assistant Manager.~~

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## Policies and Procedures

### Section 2: Child Development

- When Comprehensive Services Assistant Managers receive a referral for MH, they must thoroughly review it before processing. All sections of the referral must be filled out on the CSB501 form (See CSB Forms) including:
  - Name
  - Birthdate
  - CLOUDS ID#
  - Center name and EHS or HS checked
  - MediCal #
  - Check if child has a Positive Guidance Plan and provide copy of the plan with referral
  - Check if child is on one of the 4-Step Discipline Policy Steps, and if applicable, indicate which step and provide copy of the Discipline Letter
  - Address
  - Phone #
  - Parent's name
  - Home Language and English skills level of Parent and child
  - If child is being raised by grandparent or foster parent
  - Name of person making referral (not just "teacher")
  - Reason for Referral
  - Initials for consent for assessment and exchange of information, signatures and dates.
  - CSAM name and phone number
- Provide parent with copy of referral
- Entering the referral in CLOUDS
- Entering the reason for the referral in the comment section
- Entering 'Parent Consent for Release of Info' as 'Received' and entering the date that the parents signed the form
- Entering the child's Medi-Cal Number in CLOUDS
- Faxing referral with cover sheet to confidential fax at CSB Mental Health Unit at (510) 374-7033. and including the following documents:
  - Completed Referral Form
  - MediCal Card or other insurance documentation
  - Positive Action Behavior Plan/Discipline Step Policy Letter if on file
  - DECA (as available)
- Sending email or call Mental Health Manager and Mental Health Clerk to advise that referral is being faxed. Include the following information:
- The CLOUDS # of the child
- If it is a high priority case and needs immediate attention, such as a CFS At-Risk referral, use the High Priority Flag on the email, and write in, "High Priority Case-Please process ASAP".
- Changing referral status from "New" to "In Process"
- Changing the referral status in CLOUDS from "In Progress" to "On Going" when a clinician has been assigned
- Adding extra notes under Case Notes as applicable
- Scheduling case management
- Creating a new Referral in CLOUDS if there are no available case openings, the child is not eligible for Medical Services, or the parent declines services and an outside provider is available

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## Policies and Procedures

### Section 2: Child Development

- CSAM will follow-up with the parent to see if they are receiving services. Update in CLOUDS Referral section and note when the child is actually receiving outside services
- CSAM will continue to communicate with Site Supervisor and the Mental Health team regarding services or for support in providing referrals
- If parent fails to obtain outside services, CSAM will assist in finding services and check back periodically with MH clerk to see if CSB MH has case openings and is able to serve the child, CSAM, updates CLOUDS to reflect status of referral (Complete, Parent Refused).

Mental Health Clerk is responsible for:

- Verifying if the child qualifies for services
- Entering in the Case Notes section of the referral, beginning with the date, and ending with her first initial and last name.
- Sending an email to CSAM and Site Supervisor to let them know the referral was received. The referral will be processed and assigned to a mental health clinician who will perform an assessment and provide ongoing services if the child symptomatic behaviors meet medical necessity for treatment.
- Emailing the CSAM and Site Supervisor with child's CLOUDS # with the child's MediCal eligibility status and advise if services can be provided or if an outside referral is needed.
- Entering in the Mental Health Section of CLOUDS "Facilitated Referral"
- Sending an email to CSAM and CSB Site Supervisor to inform that the child's case has been assigned to a clinician and when services will begin.
- Entering the clinician assignment in the Mental Health section and Case Notes of CLOUDS
- Emailing the CSAM and Site Supervisor when a referral is closed or returned.

The Mental Health CSAM is responsible for:

- Advising CSAM if there are no available case openings, the child is not eligible for Medical Services, or the parent declines services.
  - Case Management may be held to provide support/follow up and/or additional resources to parent.
- Recommending a referral for outside services if appropriate (and document in referral section of CLOUDS) and communicating to site supervisor and CSAM.
- Including CSB site supervisors in e-mail notifications. (The CSAM will notify Partner agency staff)

Clinicians are responsible for:

- Contacting the child's parents to obtain informed consent and to start services
- Consulting with CSAM to advise and/or coordinate first parent contact meeting as appropriate

CSAM, or Mental Health Assistant (whichever applicable) will update CLOUDS in the Referral Section and change status of the original referral and select "Complete" from the drop down menu and provide brief explanation in Observation Comments Section.

#### 4. Mental Health Emergency/Crisis Referral Procedures

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<#>Entering in the Mental Health Section of CLOUDS "Facilitated Referral"¶  
<#>Sending an email to the CSAM and CSB Site Supervisor to inform that the child's case has been assigned to a clinician and when services will begin¶  
<#>Entering the clinician assignment in the Mental Health section and Case Notes of CLOUDS¶

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## Policies and Procedures

### Section 2: Child Development

If a CSB Site Supervisor and/or CSAM believe that a child is experiencing and/or responding to an emotional crisis or emergency in their life and need urgent mental health intervention, the following people in this order should be notified before making a referral:

- ~~Mental Health Clinical Supervisor, Lora Groppetti: (925) 890-7540~~
- ~~CSAM/Mental Health, Rowena (Reena) Torres: Cell (925) 383-4913~~
- Lead Assistant Director, Janissa Rowley: Cell (925) 525-9951
- Cluster A Assistant Director, Pam Arrington: Cell (925) 864-9084
- Cluster B Assistant Director, Carolyn Johnson: Cell (925) 852-9735
- ~~Comprehensive Services Assistant Managers (If MH Manager or ADs cannot be reached)~~

The responding Mental Health Manager, Clinical Supervisor or Agency Manager will determine an appropriate intervention or course of action based on the level of crisis and an initial clinical assessment. If CSB Mental Health determines that the case needs specialized intervention that CSB cannot provide, the responding clinical supervisor/manager will assist site staff in the facilitation of an appropriate outside referral. If the CSB Mental Health team can provide treatment and the child is determined to be in crisis, a referral will be processed and treatment will be provided regardless of the child's MediCal eligibility.

The referral should be rushed through the current procedure; MediCal eligibility and/or health insurance information can be checked after the referral is faxed to the mental health unit (refer to Mental Health Referral section: ~~Section 2, Part 1, F3~~).

#### 5. Mental Health Professional Staff

The Mental Health unit employs licensed Clinical Supervisors and unlicensed Master's level staff working towards Marriage Family Therapist or Clinical Social Worker licensure and who are specialized in children and families Mental Health. The staff strives to provide excellent early intervention to children and support services to parent and guardian caretakers that are designed to meet their specific needs.

The Mental Health unit attempts to employ staff to accommodate the linguistic and cultural needs of a diverse Head Start population. The unit is supported by one full-time Bachelors level mental health assistant and seven CSB Comprehensive Services Assistant Managers. These staff help provide with the identification and facilitation of referrals.

To promote children's mental wellness, CSB develops collaborative relationships with local mental health agencies for the purpose of securing ongoing prevention, intervention, consultation, and direct services to the program's children and their families.

#### 6. Mental Health Services & Special Education Services Sign-In Protocol at All CSB Sites When Providing Mental Health and Special Education Services

The Mental Health Professionals and site staff will follow this protocol when Mental Health services are provided at all CSB sites.

Mental Health Clinicians are responsible for:

- Signing the Site Visitor log at each site visit when providing services to a child or attending a meeting. Only sign name and do not identify self as a Mental Health provider to ensure client confidentiality and comply with HIPAA regulations.

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CSAM/Mental Health: Cell 925-383-4913

**Deleted:** <#>Cluster C Assistant Director,  
Suzanne DiLillo: Cell (925) 895-4887

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## Policies and Procedures

### Section 2: Child Development

- Adhering to appropriate classroom protocols when removing/returning child from/to classroom for play therapy services

Special Education Staff are responsible for:

- Accessing the Special Services Log from its locked location and sign it every time the Mental Health Intern or Special Education staff comes to the site to provide services to a designated child.
- Filling in the date and both the child's name and the intern's name.
- Giving special services log back to site staff (secretary at front desk, site supervisor) and ensure the log is returned to a locked file/drawer.

Front Desk Staff is responsible for:

- Signing a confidentiality statement annually.
- Making sure Special Services Log is filled out correctly.
- Ensuring that the Special Services Log remain in a locked location at all times when the intern/special education staff is not using it.

Site Supervisors are responsible for:

- Signing a confidentiality statement annually.
- Monitoring the safe locked storage of the Special Services Log.

CSAMs are responsible for:

- Signing a confidentiality statement annually.
- Entering all Special Services Log entries to the child's chart by the end of the month.

#### 7. Policy Regarding Response to Legal Situations

##### i. Description of CSB Policy Regarding Involvement in Custody Disputes by Treating Mental Health Clinical Staff

If there is a custody dispute involving the child who is receiving Mental Health services from CSB's Mental Health unit, it is the policy of this agency that the treating clinician or Mental Health Clinical Staff not get involved in such a custody dispute. This dispute may be between the parent and the system or between Social Services and the parent(s).

Mental Health Clinical Staff are discouraged from writing letter or reports in support of either side in such a dispute. The treating clinician will serve their client best by staying neutral in a custody dispute. Taking sides opens the door for the clinician to be asked to testify in a court of law and expose confidential client information.

If a parent (or Social Services) requests a written report about the child's treatment, and after a Release form has been signed by the parent, a short treatment summary should be composed and – upon approval by the supervisor – mailed to the child's parent ONLY.

##### ii. Description of CSB Policy Regarding Subpoenas

- Subpoena of Records

If a subpoena for records is served to the treating clinician, the clinician must attempt to have the child's parent sign a release form permitting the release of a treatment summary. If such a

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## Policies and Procedures

### Section 2: Child Development

release cannot be acquired, the clinician must claim the Psychotherapist/Patient privilege. The court will then have to override the privilege and request the records.

- Subpoena to Appear in Person

If a subpoena to appear in person is served to the treating clinician, the clinician, upon consultation with his/her supervisor must also claim the Psychotherapist/Patient privilege. The clinician must not respond to or talk to any court representative, serving officer, or lawyer for any party, without the special written permission of the child's parent(s) (or Social Worker for Social Services). If a Mental Health Intern gets served with a subpoena, he/she should contact his/her supervisor immediately for a consultation.

#### 8. On- Site Mental Health Consultation

The Mental Health ~~Clinical Supervisor~~ and Comprehensive Services Assistant Managers facilitate and make referrals for psychological assessments for children having potential emotional or behavioral problems with parental written parental consent.

The Mental Health ~~Clinical Supervisor~~ and Comprehensive Services Assistant Managers utilize the Directory of County Mental Health Providers to make referrals when appropriate and work with parents to obtain information on available school resources and services in the area of mental health, locating placement for individual children including securing psychological services.

Parents and staff collaborate in the planning of all mental health and educational services.

The Mental Health ~~Supervisor~~, clinical staff and Comprehensive Services Assistant Managers advise the site supervisor and educational staff on integrating mental health activities into the curriculum. Mental Health ~~clinical staff~~ collaborates with site supervisor and classroom teachers to implement strategies and plans related to social emotional curriculum. Periodic observation of children's behavior and classroom learning environment is performed. Case management meetings are held to discuss the observations with education staff, parents and/or Comprehensive Services Managers.

The Mental Health ~~Clinical Supervisor~~ and clinical staff provide workshops to staff and parents on topics relating to child mental health, such as childhood depression, management of difficult childhood behaviors, stress management, recognition of child abuse/neglect, increasing children's self-esteem, and play therapy and positive parenting. Information is also provided to staff on identifying mental health needs, making mental health referrals and utilizing case management to facilitate a referral. The Mental Health ~~Clinical Supervisor~~, and clinical staff provide consultation at case management meetings to discuss children who are presenting with atypical behavior or emotional/behavioral needs.

#### 9. Additional Mental Health Supports

Staff and parent support group meetings are held to discuss child mental health parenting and caregiver issues and challenges. Case management meetings are conducted ~~a minimum of twice per year~~ ~~depending on the needs of the family~~.

##### i. Identifying Mental Health Concerns

Mental Health Staff collaborate with CSB health, disabilities, nutrition, and education colleagues and CFS to determine a child's need for a diagnostic evaluation. Diagnostic evaluations are recommended for all

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## Policies and Procedures

### Section 2: Child Development

children who present with symptomatic behavior indicating signs of severe stress, social, emotional, educational, developmental delays and/or physical concerns.

Program staff, in partnership with parents, uses the following steps:

- The teacher and/or parent assess the child's behavior (through DECA, direct observation, monitoring tool etc.), and determine that there are concerns at school or at home.
- In the case of children involved in the Child Welfare System, the CFS worker may determine that a child needs assessment and/or intervention based on the child's exposure to trauma as a result of early abuse, neglect in addition to risk factors such as prenatal drug exposure, prematurity, low birth weight, poverty, homelessness, parental depression, and other mental health problems. The CFS worker may also deem that the child needs assessment and/or intervention as a result of the removal of the child from the biological home and placement in foster care.
- The teacher observes and records behavior and consults with Site Supervisor before requesting assistance from the Comprehensive Services/Disabilities/Mental Health Supervisor.
- The appropriate content area Comprehensive Services Manager reviews the child's file (or Child Health/Education Passport in CFS child case) for pertinent information (e.g., health issues, family history, Family Partnership Appraisal, screening results, and other areas of concern) that may have significant impact on the referral.
- If the recommendation is for referral to a school district or other agency, the nature of the referral is discussed with parent through a case management meeting, Staff checks with parent for understanding, and parent initials and signs the Child Referral Parent's Consents form CSB501. (see Mental Health Referral section)
- If a parent requests service only for him/herself, the Mental Health Manager or clinical staff will provide brief confidential consultation and appropriate referrals utilizing the County Mental Health Provider directory. If the parent's issues will have significant impact on the child's classroom behavior or emotional and/or physical health and well-being, appropriate steps are taken to ensure the child's safety and stability. Referrals are provided to Child Protective Services, County Health Services, and/or community agencies that assist with crisis, domestic violence, and homelessness.

#### ii. Strategies for Behavior Management

Any form of discipline or punishment that violates a child's personal rights is not permitted (see Discipline Policy section: Section 2, H).

The teaching staff must utilize positive guidance techniques and developmentally appropriate practices in managing children's behavior. Children respond differently to various intervention approaches, and have individual temperaments that staff must consider in behavior management.

- **STRATEGY A**-implement Best Practices
- **STRATEGY B**-Positive Behavior Action Plan (Refer to Form CSB-134B)
  - Case Management with parent/caregiver and site staff to develop plan
- **STRATEGY C**-Case Management
  - If behavior continues/escalates, review and assess the Positive Behavior Action Plan
- **STRATEGY D**-Discipline Policy Implementation

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## Policies and Procedures

### Section 2: Child Development

- Apply only when Strategies A-C have been executed
- Site Supervisor must be consulted prior to implementation

#### STRATEGY A-Implementing Best Practices

Undesirable behavior, while a normal part of growing up, is discouraged or redirected. The following strategies reflect best practices for responding to inappropriate behavior:

- Anticipate/eliminate potential problems
- Evaluate and adjust the environment
- Redirect child away from conflict or negative events to more positive activity
- Offer choices to the child
- Assist child to learn logical/natural consequences of their actions
- Encourage respect for the feelings/rights of others
- Encourage initiative
- Encourage identification and healthy and socially acceptable ways to express emotion
- Encourage development of self regulation and behavior control through positive reinforcement of pro-social behavior

Additional behavior management strategies include:

- Let children know what is expected and why – Inform children what the rules are, and the reasons for these rules. Let children help create classroom rules. Example: “We walk inside – so we don’t bump into tables or other children.”
- Model/encourage expected behavior – Show children, with actions and words, what is expected. Praise children’s actions when appropriate. Example: “Thank you for helping!”
- Respect children’s developing capacities – Ensure that expectations match/respect children’s developing capacities. Example: do not expect a four-year-old to sit still/be quiet for long periods of time.
- Talk to children about why they are behaving a certain way – Kneeling down/getting on the children’s level and listening, communicates caring concern about them as individuals.
- When reminding children of expectations, move close to them, touching them gently on the hand or arm (if culturally acceptable).
- Be patient; wait for children to respond (when appropriate) –Tell a child what behavior is expected, and allow time for the child to process this information. Example: “When the toy is picked up, you may join us in the circle.”
- Allow someone else to step in and help – If a teacher becomes angry with a child, immediately ask another teacher/supervisor to help. (It is best to request another adult to take over until you have calmed down.)
- Observe/record behavior - especially recurring behavior – to determine factors involved in the behavior. Maintain a positive/loving attitude – Keep your sense of humor, do not focus on the difficult behavior. View the behavior and responses as opportunities to help children grow/learn.
- Discuss with children healthy ways to deal with anger, stress, and frustration.
- “Time out” for children is not an acceptable strategy for dealing with inappropriate behavior.
- Use Social Emotional Learning Curriculum (DECA) screening results to determine which protective factors the child needs help building and employ recommended classroom strategies to address the child’s need.

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## Policies and Procedures

### Section 2: Child Development

- Consult with Mental Health clinical staff and collaborate with clinicians and parents to develop effective intervention plans.

#### STRATEGY B-Positive Behavior Action Plan

##### iii. Positive Behavior Action Plan

When the above listed strategies are ineffective, the next step is **for teacher, with site supervisor support and guidance**, to consult with parent to develop a Positive Behavior Action Plan (CSB-134B-Positive Discipline Action Plan). Steps include:

- Identifying the child's protective factors (Review DECA results)
- Defining the child's strengths
- Defining the child's social, emotional, physical, learning needs
- Defining the child's behavioral concerns
- Partnering with parent/caregiver through mutual decision-making process in:
- Developing a plan to redirect the behavior with specific quantifiable and observable goals
- Developing a plan to reinforce the child's positive behavior (specific strategies for intervention related to each goal).
- Set timelines for plan implementation and progress follow up **(2-4 weeks should be given to implement behavior plan and should be followed up with case management within 4 weeks to review implementation and any needed changes)**

##### iv. Case Management Team Meeting

After classroom observations have been completed, and DECA results have been reviewed, a Positive Behavior Action Plan that considers any necessary modification to environment and teacher/child interactions (per DECA), is developed and implemented. If there is little or no progress in relation to the goals of the plan, or the child's behavioral concerns increase, the Site Supervisor follows up with the Comprehensive Services Manager/Disabilities Manager/Mental Health **Staff** to schedule a Case Management Team meeting. A Comprehensive Services Assistant Manager or CS Manager will facilitate this meeting. The Case Management Team will discuss strengths/concerns/recommendations at this time. Please see Case Management section for more details.

##### G. Parent Involvement in Health, Nutrition, and Mental Health Education

CHDP consultants train parents and staff on prevention of common childhood illnesses.

(Contra Costa County Health Services) MediCal representatives provide education and information to parents and staff on MediCal application procedures and the Managed Care system.

Dental representatives train parents and staff on dental hygiene. A Mental Health Consultant trains parents and staff on early prevention/intervention of children's Severe Emotional Disorder, Behavior Disorders, and stress related behavior.

##### H. Discipline Policy

If a child consistently displays inappropriate behavior in the classroom, the teacher is responsible for calling the Site Supervisor immediately **for assistance**. If a child's behavior continues to escalate, the following guidelines will be followed in the classroom with the child **(after having implemented the above strategies-implementing best practices and developing and implementing the Positive Behavior Action Plan)**.

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## Policies and Procedures

### Section 2: Child Development

**In compliance with Section #101221 of the Licensing Code, and in support of children's right to be treated with dignity and respect, the following covers our philosophy and methods for handling behavior of young children.** Examples of hurtful behavior include biting, hitting, spitting, damaging school property or hurting classroom pets.

CSB will report to Community Care Licensing any incidents requiring medical attention

To ensure that CSB provides an environment that fosters the development of a positive self-concept and self-control, CSB will implement this four step discipline policy. After each step, staff and parents are required to sign that each step has occurred:

#### Step 1

If the child bites, hurts someone or damages school property for the first time, the teacher will inform the parent **privately about the incident**. At that time, parent **is** provided with **resources and intervention** strategies to address the specific behavior. The parent **is** asked by the site supervisor if they would like **an** information/linkage to parenting classes and/or **consulting** (confidentially) with a CSB Early Childhood Mental Health/Behavioral Healthcare specialist. The Site Supervisor will evaluate the incident in the classroom.

The following actions shall be taken:

Teachers **are** responsible for:

- Reviewing and completing the Discipline Policy- Step Letter to Parents form (CSB521- Discipline Policy and Step Letter) with parent and provide parent with copy.
- Informing the Site Supervisor about the incident by submitting the Accident/Incident Report (See Forms CSB208)
- Ensuring that the parent signs a copy of the "Accident/Incident Report"
- **Reviewing the** Positive Guidance Plan (if not already created) or provide a copy of the plan and additional documentation relating to child's behavior as applicable

Site Supervisors **are** responsible for:

- Evaluating the incident in the classroom.
- Reviewing and signing the Discipline Policy- Step Letter to Parents form (CSB521- Discipline Policy and Step Letter)
- Reviewing and signing the Accident/Incident Report (form CSB208).
- Offering parent resources and/or linkages to consultation.
- Discussing child referral for assessment with parents if appropriate **and securing** Parent's **signature on a Child Referral Parent's** Consent form (CSB501).

#### Step 2

If the child bites, hurts someone or damages school property for the second time, the parent will receive an incident report. The Site Supervisor will meet with parent to provide resources as needed to help deal with the situation at home and discuss how staff is dealing with the situation in the classroom. The site supervisor will offer the parent linkage to confidential consultation with the CSB Mental Health **Staff**.

The following actions shall be taken:

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## Policies and Procedures Section 2: Child Development

Teachers ~~are~~ responsible for:

- Informing the Site Supervisor about the incident by submitting the second Accident/Incident Report.
- Meeting with the **Site Supervisor and** parent to discuss the second "Accident/Incident Report" and request the parent to sign.
- Reviewing the Positive Guidance Plan with parent for progress and modifications needed.

Site Supervisors ~~are~~ responsible for:

- Calling the parent immediately and setting up a conference to discuss the incident.
- Meeting with the teacher and the parent.
- Reviewing and signing the Discipline Policy- Step Letter to Parents form. (CSB521- Discipline Policy and Step Letter)
- Reviewing the Positive Guidance Plan and provide resources and make adjustments as needed.
- Offering parent linkage to confidential consultation with CSB Early Childhood Mental Health Manager or follow-up on previous referral to linkage.
- **Discussing** child referral for assessment with parents **if applicable. Completing a Child** Referral Parent's Consent form (CSB501) will be signed.
- **Scheduling a case management meeting with parents to discuss new strategies for behavioral modification and the possibility of a more appropriate placement for the child.**
- **Requesting Education Manager to observe classroom.**

### Step 3

If the child bites, hurts someone, or damages school property a third time and the two previous steps are proving to be ineffective, parent ~~is required~~ to attend a team meeting to discuss the possibility of a more appropriate placement for ~~the~~ child and referrals ~~are~~ provided.

The following actions shall be taken:

Teachers ~~are~~ responsible for:

- Informing the Site Supervisor about the incident by submitting the third "Accident/Incident Report".
- Reviewing and modifying child's progress report and the Positive Guidance Plan if needed with team and Site Supervisor for behavioral modification.

Site Supervisors ~~are~~ responsible for:

- Calling the parent immediately to pick up his/her child if necessary.
- Reviewing and signing the Discipline Policy- Step Letter to Parents form. (CSB521- Discipline Policy and Step Letter)
- ~~Following~~-up on previous linkage to referral given.
- ~~Securing~~ parent's ~~signature~~ and date "Accident/Incident Report."
- Provide documentation on the child's progress which may include review of teacher's progress report, Positive Guidance Plan or any other behavioral monitoring tool.
- ~~Requesting~~ assistance from Comprehensive Services Manager ~~and informing~~ Assistant Director as ~~needed and Mental Health Clinician if child is receiving mental health services.~~

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## Policies and Procedures

### Section 2: Child Development

#### Step 4

If the three previous steps prove to be ineffective and the child bites or hurts someone, or damages school property a fourth time, the Site Supervisor and Comprehensive Services Assistant Managers ~~are~~ to assist the parent with securing or transferring the child to a more appropriate environment or program. The parent ~~is~~ given two week's written notice of the change ~~or a Notice of Action to~~ comply with ~~the state~~ regulations and termination notices). During this period program staff ~~is~~ to assist the parent in reviewing alternative referral services and advocating for entry into a new program.

The following actions shall be taken:

Teachers will be responsible for:

- Informing the Site Supervisor about the incident

Site Supervisor will be responsible for:

- Alerting the Assistant Comprehensive Services Manager, Comprehensive Services Manager & Assistant Director
- Reviewing and signing the Discipline Policy- Step Letter to Parents form (CSB521- Discipline Policy and Step Letter)

Comprehensive Services Manager will be responsible for:

- ~~Conducting a case management with Site Supervisor and Assistant Director to consult and discuss child's alternative placement.~~
- Informing the parent about the child's alternate placement and referrals.

#### I. Case Management

##### 1. Description

Case management is a collaborative process involving parents, staff, social workers, specialized providers and specialists for the purpose of developing, implementing, coordinating, monitoring and evaluating plans and the various options and services available and/or required to meet children and family's needs. Shared decision making, open communication and promotion of the family and child's strengths are key elements to the process and essential to quality outcomes.

##### 2. Purpose

Case management at CSB is strengths-based and enhances access to care and improves the continuity and efficiency of services. Depending on the specific setting and location, Comprehensive Services Managers are responsible for a variety of tasks, ranging from linking clients to services to providing the services themselves. Other core functions include outreach to engage clients in services, assess individual's needs, and arrange requisite support services (such as housing, benefit programs, job training, and advocating for parents rights and entitlements).

Case management is not a time-limited service, but is intended to be ongoing, providing families whatever they need, whenever they need it, for as long as necessary. For children with disabilities or receiving mental health services, it is expected that at least two case managements are conducted per year.

##### 3. Role of the Case Management Facilitator

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## Policies and Procedures

### Section 2: Child Development

A case management facilitator serves as a liaison between the family, service providers, teachers and Site Supervisors to identify what services and resources are needed. They meet with parents individually or as a multidisciplinary team; often at their respective sites, via telephone, or even in a casual environment, all for the purpose of enhancing communication between the present parties.

Case management services are best offered in a climate that allows direct communication between the case management facilitator, the parent, and appropriate program staff in order to optimize the outcome for all concerned. These meetings are always facilitated in a manner that is sensitive to the parent, child and family's needs, allowing the parent maximum opportunity for expression of their concerns, and help the parent develop advocacy skills. All concerns, agreements and process of the meeting are documented in the Case Management Report (form CSB514) and the parent is offered a copy of this report for their records.

Case management facilitators are able to identify those providers and facilities that can best serve the family's needs throughout the continuum of services, while ensuring that available resources are being used in a timely and effective manner for families. For example, parents in need of health-related support and services receive assistance in navigating the healthcare system and working with other outside agencies.

#### 4. Case Management Team Members

It is essential to not overwhelm parents by inviting too many people to the meeting or having too many items on the agenda. Many issues being discussed at these meetings are complicated and can be emotionally difficult for parents. It is also important to encourage the parent to bring an advocate if they feel that will help them better understand the information being discussed, or make important decisions. An agenda and introductions should be required for every meeting so that the parent know what the goals are and who they are sharing information with and understand team members roles.

The Case Management Team may include:

- Parents
- Teachers
- Site Supervisors
- Education Manager
- Disabilities Manager
- Mental Health ~~Supervisor~~
- Health Manager
- Nutritionist~~↓~~
- Comprehensive Services Assistant Manager
- Other community professionals such as a Pediatric Nurse, Psychologist, Speech Therapist, Resource Specialist, CFS Child Welfare/Social Worker, Public Health Nurse, Special Education Teacher, and/or Mental Health professional

#### 5. Case Management Team Responsibilities:

- To respect the civil rights of the parents, children and families involved.
- To provide a confidential and safe place for the child/family information to be discussed.

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## Policies and Procedures

### Section 2: Child Development

- To ensure that the child/family's private information is protected and managed in accordance with all state and federal laws.
- To review and discuss assessment, evaluation results, placement and outcomes for children.
- Review and discuss appropriate placement or action to be taken.
- Establish time lines and types of service delivery.
- Develop and implement Family Partnership Agreements with parents.
- Meet on an ongoing basis to review and discuss progress of child.
- Review and evaluate Behavioral Management Plan.
- Ensure that a family-focused approach is taken to ensure service delivery
- Develop and implementing transition plans for children.
- Ensure that strengths of children and families are encouraged and considered in identifying expected outcomes for children.
- Ensure that family priorities, concerns, and resources are recognized and are part of the Family Partnership Agreement.

#### 6. The Case Management Team Meeting

##### i. Description

A Case Management Team meeting may be called at any time for a child as the need arises. This meeting is conducted to exchange information, and to develop the most appropriate action plan for a child with disabilities.

These plans may include development of a Family Partnership Agreement (FPA) with the parent(s), home visits, referrals to outside agencies or professionals, requests for additional information from outside agencies or professionals, and classroom placement decisions or modifications. The following is the case management process:

- Site Supervisors and teachers review all children's files prior to Case Management
- Summary notes from the child's file will include but not be limited to health, dental, nutrition, disabilities, mental health, family services and parent involvement. All confidential mental health or other health records are stored in accordance with HIPAA.
- After files have been reviewed, the Site Supervisor will submit cases to the Comprehensive Services unit. The Comprehensive Services Managers will hold Case Management Meetings for all children with concerns or at high risk at any time as the need arises.

To provide continuity of care for children with disabilities, Case Managements are conducted as needed during the year.

##### ii. Referral for Inappropriate Behavior

If a teacher is concerned about a child's consistent display of inappropriate behavior, she/he should call their Site Supervisor.

The Site Supervisor, Head Teacher, classroom staff and Comprehensive Services Manager/Assistant Manager observe the child in the classroom and complete documentations on their observations for use at a Case Management Team meeting. A Case Management Team meeting must be scheduled to plan strategies on how to effectively meet the child's needs.

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## Policies and Procedures

### Section 2: Child Development

The Comprehensive Services Manager/Assistant Manager will be responsible for:

- Creating an agenda that is provided to all participants and keeping the meeting on time/track and have all participants sign-in
- Facilitating Case Management Team meetings
- Coordinating and gathering relevant information before the meeting
- Keeping on file all documentation of Case Management Team meetings and record meeting notes on CSB514.
- Inviting all applicable parties or individual advocates working on behalf or providing services for child/parent (with parent consent), including but not limited to legal guardian, CFS Worker, Speech/language Therapist, Occupation Therapist, and Mental Health Therapist.
- Following up on next steps.

The Site Supervisor ~~are~~ responsible for:

- Reviewing classroom observations and Positive Guidance Plan with the teaching staff prior to a Case Management Team meeting
- Discussing strategies/intervention techniques with teaching staff prior to the Case Management Team meeting
- Discussing recommendations for referral with the parent(s) of a child with disabilities
- Coordinating meeting with CS staff so appropriate staff may attend

If Applicable, the Nutritionist and Health Services Manager ~~are~~ responsible for:

- Gathering relevant information before the meeting
- Writing nutritional plans for children and families

#### J. Child Abuse Reporting Policies

##### 1. CSB Staff Responsibilities

It is essential that all CSB program staff adhere to Mandated Reporters Law to report suspected non-accidental injury, sexual molestation, or infliction of physical and mental suffering and/or neglect of a child.

All personnel having contact with children are required by law to report all instances of suspected child abuse or neglect.

Grantee, Sub-contractors, and Delegate Agencies will maintain confidentiality of records concerning child abuse and neglect in accordance with state law and Head Start Performance Standards.

CSB ~~staff provides~~ children who are identified by Child Protective Services (CFS) as at-risk highest priority for intervention and placement in the school program; and make every effort to retain abused and neglected children and/or admit allegedly abused and neglected children referred by Child Protective Services (if the families are income-eligible).

The Comprehensive Services/Health/Disabilities/Mental Health Managers will coordinate activities regarding the issues of child abuse/neglect. Their responsibilities are to:

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## Policies and Procedures

### Section 2: Child Development

- ~~Providing~~ training and consultation for staff and parents regarding identification / reporting of child abuse. The purpose of this training will be to educate participants that Abusing parents or caretakers need help and support - not punishment.
- ~~Providing~~ support services so that additional abuse/neglect does not occur.
- ~~Providing~~ training to parents and staff yearly on the significant aspects of abuse / neglect. Comprehensive Services/Disabilities/Mental Health Managers will maintain documentation of such training.
- Establishing liaison with Child Protective Services (which has legal responsibility for receiving reports of abuse and neglect).
- ~~Collaborating~~ with Human Resources to ensure that program staff is properly informed/trained on procedures for identifying/reporting suspected child abuse and neglect.
- ~~Collaborating~~ with Human Resources to ensure there is a signed document in each CSB program personnel file acknowledging that the person has been trained regarding child abuse and neglect.
- ~~Ensuring~~ that information/training is provided for parents and staff on the legal requirements regarding reporting of abuse/neglect. ▼
- ~~Providing~~ written explanation of the legal requirements of reporting (given to every parent when he/she enrolls in the program)
- Obtaining a signed acknowledgment from the parent that he/she has received the information, and understands it (HS-610)
- Reviewing annually child abuse reporting laws and updating all employees on new requirements.
- Maintaining tracking sheet for all reports.
- ~~Ensuring~~ that parents are provided ongoing educational opportunities to learn about positive parenting and child abuse prevention techniques.

#### 2. Child Abuse Reporting Laws - Penal Code Sections

Section 11166 (a) - requires that any:

- Child care custodian
- Medical practitioner
- Non-medical practitioner
- Employee of a child protective agency

Anyone listed above ~~having~~ knowledge of, or ~~observing~~ a child in his/her professional capacity or within the scope of his or her employment whom he/she reasonably suspects has been the victim of child abuse, ~~must~~ report such suspected instance of child abuse to a child protective agency immediately by telephone (or as soon as practically possible), and ~~must~~ prepare/send a written report thereof within 36 hours of receiving information concerning the incident.

Section E of 11166 states, "The reporting duties under this section are individual and no supervisor or administrator may impede or inhibit such reporting duties and no person making such report shall be subject to any sanction for making such report. However, internal procedures to facilitate reporting and apprise supervisors and administrators of reports may be established provided they are not inconsistent with the provision of this article."

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## Policies and Procedures Section 2: Child Development

Section 11172 (b) states, "Any person who fails to report as required by this article an instance of child abuse which he or she knows to exist or reasonably should know to exist is guilty of a misdemeanor and is punishable by confinement in the County jail for a term not to exceed 6 months or by a fine of not more than five hundred dollars (\$500) or both."

### 3. Child Abuse Reporting Procedure

All staff and volunteers in all divisions MUST report child abuse or neglect IF:

- They have knowledge of it,
- They have observed it, or
- They have reasonable suspicion of its occurrence or
- They receive second-hand information of the suspected abuse

The report must be made as soon as the suspected abuse is noticed. Report of child abuse takes priority over other matters. In Contra Costa County, it is the responsibility of the local Welfare Department and the police to assess whether or not abuse has occurred.

If you are unsure if a report should be made, discuss the situation with your immediate supervisor or your second level supervisor and/or consult the CFS directly (see contact information below). You may also call the **Mental Health Unit for additional support**, at the following number: 925-335-8911 or 925-335-8940.

When any member of the CSB staff suspects abuse or neglect of a child, they should first check the child's file to gather pertinent information; this information is for the purposes of reporting. Particular attention should be made to Health History, physical exam, and Family Partnership Agreement (to become familiar with any details that may provide further explanation for the incident prompting suspicion of abuse or neglect).

The following steps must be taken when a member of CSB staff suspects child abuse or receives the information second-hand

- Call Child Protective Services (Law requires the person suspecting child abuse/neglect to report it to Child Protective Services by phone immediately)
  - To report suspected child abuse, call Children & Family (Protective) Services, at (24 hour Hot Line) 1-877-881-1116
- Teachers to report to their Site Supervisor immediately the information that was reported to them
- Site Supervisors report the information to Assistant Director
- Assistant Directors report the information to Division Manager
- After an oral report is made, a written "Suspected Child Abuse Report" (see EHSD Intranet > FormSTAR > SS 8572) must be completed and sent within 36 hours to (mail or fax):

Central Screening Office  
Child Protective Services  
400 Ellinwood  
Pleasant Hill, CA 94523

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## Policies and Procedures Section 2: Child Development

Fax: 925-602-6980/6981

- The Person Making the report must sign the written report and provide the report to their site supervisor.

Site Supervisor is responsible for:

- Maintaining and storing of any/all CFS reports in a locked confidential file, which is separate from the child's cumulative/educational file.
  - Sending a "Notification of Report" email to the appropriate Comprehensive Services Manager and Assistant Manager (of the corresponding Cluster) and Mental Health Clinical Supervisor, (Email should include only the CLOUDS child ID#)
- Only authorized CSB staff will have access to review "confidential" files.
  - Comprehensive Services/Disabilities/Mental Health staff are to discuss the report with the family, when appropriate – with acknowledgment and approval of CPS.
  - Staff may choose to remain anonymous in filing the report.
  - This request must be honored, unless the case goes to court or there is further police investigation.
  - Content area managers meet regularly to discuss mutual areas of concern
  - The Mental Health Clinical Supervisor provides all requested and/or necessary follow-up and/or consultation to support parents and program staff with reporting or incidents involving reports or the removal of a child from the school program or by Child and Family Services.
  - The Mental Health Supervisor or assigned Mental Health staff actively collaborate with Children and Family Services to coordinate delivery of any/all necessary services to children, biological/foster parents to support family preservation, reunification and child/family mental health.

For CSB Mental Health staff, above reporting procedures applicable with the exception of the following:

- Inform and consult with clinical supervisor, rather than site supervisor.
- Provide copy of the CFS report to MH Clerk and file report in child's mental health file, not at site or child's cumulative file.

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¶  
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Central Screening Office

Child Protective Services

400 Ellinwood¶

Pleasant Hill, CA 94523¶

Fax: 925-602-6980/6981¶

The person making the report must sign the written report and provide the report to their site supervisor. ¶

¶

Site Supervisor is responsible for the following:¶  
<#>Maintaining and storing of any/all CFS reports in a locked confidential file, which is separate from the child's cumulative/educational file.¶  
Send a "Notification of Report" email to the appropriate Comprehensive Services Manager and Assistant Manager (of the corresponding Cluster) and Mental Health Manager,¶  
(Email should include only the CLOUDS child ID#)¶

Only authorized CSB staff will have access to review "Confidential" files.¶

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## Policies and Procedures

### Section 2: Child Development

#### **II. Services for Children with Disabilities**

##### A. Purpose

The Contra Costa County Community Services Bureau is consistent with both Federal and center regulations governing the rights of the disabled. Based on Head Start Program Performance Standards at 45 CFR part 1304, children with disabilities who are enrolled in Head Start programs receive all the services to which they are entitled.

The Contra Costa County Community Services Bureau recruitment efforts include recruiting children who have severe disabilities and must not deny placement on the basis of a disability or its severity to any child when:

- (1) The parents wish to enroll the child,
- (2) The child meets the Head Start age and income eligibility criteria,
- (3) Head Start is an appropriate placement according to the child's IEP/IFSP, and
- (4) The program has space to enroll more children, even though the program has made ten percent of its enrollment opportunities available to children with disabilities. In that case children who have a disability and non-disabled children would compete for the available enrollment opportunities.

The Contra Costa Community Services Bureau will access resources and plan for placement options, such as dual placement, use of resource staff and training so that a child with a disability for whom Head Start is an appropriate placement according to the IEP/IFSP is not denied enrollment because of:

- (1) Staff attitudes and / or apprehensions;
- (2) Inaccessibility of facilities;
- (3) Need to access additional resources to serve a specific child;
- (4) Unfamiliarity with a disabling condition or special equipment, such as a prosthesis;
- (5) Need for personalized special services such as feeding, suctioning, and assistance with toileting, including catheterization, diapering, and toilet training.

The same policies governing Head Start program eligibility for children without disabilities apply to children with disabilities.

The Contra Costa Community Services bureau has instituted a variety of enrollment placement options, including:

- Joint placement with other agencies
- Shared provision of services
- Shared district personnel to supervise special education services
- Shared enrollment slots
- Accepting kindergarten-aged eligible children in collaboration with school districts when IEP states the need.
- Increased staff, such as classroom-support aides and volunteers

There are two kinds of children with disabilities identified for services:

- Children who may require special attention due to the specific high risk factors that do not have a diagnostic ability. ~~These children may not have and IEP or IFSP.~~

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### Section 2: Child Development

- Children who have been diagnosed by a certified and/or licensed professional as “possessing a disabling condition, ~~and have and IEP or IFSP.~~”

#### B. Definitions

(a) **ACYF**-Administration on Children, Youth and Families, Administration for Children and Families, U.S. Department of Health and Human Services, and includes appropriate Regional Office staff.

(b) **Children with disabilities**-Children with intellectual delays (mental retardation), hearing impairments including deafness, speech or language impairments, visual impairments including blindness, serious emotional disturbance, orthopedic impairments, autism, traumatic brain injury, other health impairments or specific learning disabilities; and who, by reason thereof, need special education and related services. The term children with disabilities for children aged 3 to 5, inclusive, may, at a State's discretion, include children experiencing developmental delays, as defined by the State and as measured by appropriate diagnostic instruments and procedures, in one or more of the following areas: physical development, cognitive development, communication development, social or emotional development, or adaptive development; and who, by reason thereof, need special education and related services.

(c) **Commissioner**-Commissioner of the Administration on Children, Youth and Families.

(d) **Day**-Calendar day.

(e) **Delegate agency**- A public or private non-profit agency that a grantee has delegated the responsibility for operating all or part of its Head Start program.

(f) **Disabilities coordinator**- Person on the Head Start staff designated to manage on a full or part-time basis the services for children with disabilities described in part 1308.

(g) **Eligibility criteria**- Criteria for determining that a child enrolled in Head Start requires special education and related services because of a disability.

(h) **Grantee**- A public or private non-profit agency that has been granted financial assistance by ACYF to administer a Head Start program.

(i) **Individualized Education Program (IEP)** - A written statement for a child with disabilities, developed by the public agency responsible for providing free appropriate public education to a child, and contains the special education and related services to be provided to an individual child.

(j) **Least Restrictive Environment**- An environment in which services to children with disabilities are provided:

(1) to the maximum extent appropriate, with children who are not disabled and in which;

(2) special classes or other removal of children with disabilities from the regular educational environment occurs only when the nature or severity of the disability is such that education in regular classes with the use of supplementary aids and services cannot be achieved satisfactorily.

(k) **Performance Standards**- Head Start program functions, activities and facilities required and necessary to meet the objectives and goals of the Head Start program as they relate directly to children and their families.

(l) **Related services**- Transportation and such developmental, corrective, and other supportive services as are required to assist a child with a disability to benefit from special education, and includes speech pathology and audiology, psychological services, physical and occupational therapy, recreation, including therapeutic recreation, early identification and assessment of disabilities in children, counseling services, including rehabilitation counseling, and medical services for diagnostic or evaluation purposes. The term also includes school health services, social work services, and parent counseling and training. It includes other developmental, corrective or supportive services if they are required to assist

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## Policies and Procedures

### Section 2: Child Development

a child with a disability to benefit from special education, including assistive technology services and devices.

(1) **Assistive technology Device**- Any item, piece of equipment, or product system, whether acquired commercially off the shelf, modified, or customized, that is used to increase, maintain, or improve functional capabilities of individuals with disabilities.

(2) **Assistive technology service**- Any service that directly assists an individual with a disability in the selection, acquisition, or use of an assistive technology device. The term includes: The evaluation of the needs of an individual with a disability; purchasing, leasing, or otherwise providing for the acquisition of assistive technology devices by individuals with disabilities; selecting, designing, fitting, customizing, adapting, applying, maintaining, repairing, or replacing of assistive technology devices; coordinating and using other therapies, interventions, or services with assistive technology devices, such as those associated with existing education and rehabilitation plans and programs; training or technical assistance for an individual with disabilities, or, where appropriate, the family of an individual with disabilities; and training or technical assistance to professionals who employ or provide services involved in the major life functions of individuals with disabilities.

(m) **Responsible HHS official**- The official who is authorized to make the grant of assistance in question or his or her designee.

(n) **Special education**- Specially designed instruction, at no cost to parents or guardians, to meet the unique needs of a child with a disability. These services include classroom or home-based instruction, instruction in hospitals and institutions, and specially designed physical education if necessary.

#### C. List of Disabling Conditions

The classification of a child as “having a disabling condition” requires diagnosis by a qualified professional. Children with disabling conditions require special education and related services, due to one or more conditions including, but not limited to:

- Autism
- Emotional /Behavior Disorder
- Developmental Delay
- Health Impairment
- Hearing Impairment and Deafness
- Intellectual Disability as of Oct. 2010 instead of Mental Retardation
- Learning Disabilities
- Orthopedic Impairment
- Speech/Language Impairment
- Traumatic Brain Injury
- Visual Impairment and Blindness
- Other impairments

No child will be identified as having a disability because of speaking a language other than English, economic circumstances, ethnic or cultural factors, or normal developmental delays.

#### D. Responsibilities of CSB Full Inclusion Teacher

- Work with the Site Supervisor, Comprehensive Services team and school district full inclusion staff.

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## Policies and Procedures

### Section 2: Child Development

- The CSB inclusion teacher and the School inclusion teacher (Special Education Teacher) share joint responsibility for all students in the class with indoor and outdoor activities.
- Obtain appropriate documentation (~~copy of IEP or IFSP~~) that identifies the child as having a disability and be aware of other services provided to the child.
- Complete classroom child observations.
- Ensure each child's safety and assist identified children with self-help skills while they are receiving services.
- Assist school district full inclusion staff with bathroom procedures including diapering and toileting.
- Participate in case management and IEP/IFS meetings regarding children in the class.

#### E. Responsibilities of School ~~District SDC~~, RTI and Full Inclusion Teachers

~~CSB does not directly supervise the School District staff but works in collaboration to ensure the children and families benefit from their services while ensuring the education and safety of the children under their supervision.~~

##### Full Inclusion Staff

- Follow all Community Services Bureau policies and procedures.
- School ~~Inclusion Teacher~~ (Special Education Teacher) and CSB inclusion teacher share joint responsibility for all students' supervision during small and large, indoor and outdoor activities. Assisting full inclusion children in bathroom procedures (including diapering and toileting).
- Responsible for providing the special education for identified children, maintaining accurate records of evaluations progress, meeting with parents and overall ensuring the children meet their IEP goals.
- Participate in team planning for classroom inclusion strategies, case management team meetings, meeting schedules regarding full inclusion children and IEP meetings.

##### Special Day Class Staff

- Ensure the safety of the children under their direct supervision (SDC).
- Collaborate directly with the Comprehensive Services Team to ensure the family and children comply with CSB mandates.
- While in the playground, SDC teaching staff and CSB Teacher share joint responsibility for all students' supervision during small and large outdoor activities.
- SDC teachers are responsible for providing the special education for identified children, maintaining accurate records of evaluations progress, meeting with parents and overall ensuring the children meet their IEP goals.
- Participate in case management meetings, SDC program collaboration meetings and children IEP meetings.

##### RTI Teaching Staff

- Ensure children's safety while providing direct supervision under RTI. (Tier II and III)
- Collaborate directly with the Comprehensive Services Team to ensure the family and children comply with CSB mandates.
- Participate in case management meetings, RTI program collaboration meetings and children IEP meetings.

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## Policies and Procedures

### Section 2: Child Development

#### CSB Site Supervisor Responsibilities

- Maintain communication with school District staff (teachers and/or therapists) under the various programs in an effort to coordinate delivery of services at the site level such as: Ordering classrooms supplies, ordering meals/snacks, building maintenance/repairs, communicating site events, etc.
- Monitor the safety transition of children going in and out of the classrooms and in and out of sites such as playground transitions, playground rations, bus arrival/departing, etc.
- Ensure the teachers participation or represents teachers in IEP and/or case managements as needed based on family/child needs.
- Maintain communication with Disability Manager and AD about the program progress in an effort to strengthen up the collaboration.

#### F. Responsibilities of the Comprehensive Services Team

##### 1. Comprehensive Services Clerks

- Complete CSB temp file package at intake.
- Flag the file the file using the red/yellow flag system to alert the staff and assistant manager about the child's health, nutrition, socio- emotional, developmental, parental concerns and family needs.
- Communicate to comprehensive services assistant manager if child's physical exam/baby well check and/or sensory/developmental screening results indicate concerns.
- Keep accurate records of children health/nutrition and families services information.

##### 2. Comprehensive Services Assistant Managers

- Review and follow up children intake packages flagged with the red/yellow flag system.
- Review all records related to the child's heath history, medical records and screening results to ensure children with suspected or identified concerns receive further evaluations and services.
- Lead and coordinate case managements as needed to provide early interventions to children with identified concerns based on health, nutrition, socio-emotional and developmental screenings.
- Lead and coordinate pre-enrollment case managements for new children entering our program with identified health, nutritional, socio-emotional and developmental needs.
- Maintain close communication with parents and staff to ensure delivery of services, resources and/or referrals are in place; based on the individual needs of the child and the family.
- With parental consent participate in IEP/IFSP meetings and any other meetings related to the services the child/family are receiving.
- Maintain accurate and up-to-date documentation regarding current IEP/IFSP and other services provided to the child and family in the children's file and in CLOUDS.
- Coordinate, schedule and participate with the site supervisor in transition planning for children moving from Early Head Start to Head Start and from Head Start to preschool; especially for those children with **IEP and IFSP**.
- When no other alternative is available, coordinate and schedule transportation with the comprehensive services team to transport the child/family to receive further evaluations/assessments or to the IEP/IFSP meeting.
- Consult and maintain open communication with the disability services manager and any other content area managers as needed.

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## Policies and Procedures

### Section 2: Child Development

#### 3. Responsibilities of the Comprehensive Services Disabilities Manager

- Coordinate and Monitor the delivery of services provided by Community Services Bureau **in collaboration with** outside agencies to children with suspected and diagnosed disabilities and their families.
- Review, update and implement the Community Services Bureau Disability Services Plan.
- Review, update and train Community Services Bureau staff on following disability protocols to ensure policies and procedures are implemented consistently.
- Create, review, and update interagency agreements with community agencies serving children with disabilities in an effort to:
  - Participate in the public agency's Child Find plan under Part B of IDEA,
  - Joint trainings of staff and parents,
  - Create procedures for mutual referrals and placements,
  - Plan transitions support to children and families,
  - Resource sharing, and
  - Any other items agreed by both agencies.
- Coordinate delivery of services and provision to children with suspected or diagnosed disability.
  - Coordinate with other content area managers the timely completion of health/cognitive screenings.
  - Monitor site data reports to ensure that children received early intervention as a result of their screening and assessments results.
  - Participate in case management meetings and IEP/IFSP meetings as needed.
  - Assist teaching staff with trainings based on a specific disability **or as requested**.
  - **Monitor the implementation of services provided to children with disabilities based on their IEP or IFSP goals and objectives.**
  - **Monitor the disability referrals tracking system to ensure child referrals are followed up accordingly.**
  - Coordinate and monitor classrooms adaptations, accommodations and modification based on the individual needs of the child.
  - Assist identified parents with resources and advocacy information to prepare for meeting with the Regional Center or School District to develop an Individual Family Services Plan (IFSP) or an Individual Education Program (IEP).
  - Regularly visit classrooms to ensure that children with suspected and identified disabilities receive the individualization and accommodation they need based on their IEP and their individual needs. Monitor the delivery of services from both Community Services Bureau and the **collaborative agencies**.
  - Monitor delivery of services to children with disabilities and their families when transitioning from home to center based program, from infant/toddler program (EHS) to Preschool Program (HS) and from Preschool Program (HS) to Kindergarten. Participate in transition plans and meetings as needed.
- Provide disability content area assistance, support to upper management, teaching staff including home based and comprehensive services team.
- Monitor disability reports for accuracy and timely completion of delivery of services to comply with PIR (Program Information Report) requirements.
- Review Program Self-Assessment reports and create follow up action plans when needed.

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## Policies and Procedures

### Section 2: Child Development

- Manage allocated funds to purchase or lease of special equipment and materials for use in the program and home to assist the child to move, communicate, improve functioning or address objectives which are listed in the child's IEP/IFSP.
- ~~Track and provide detail report of the number of children with disabilities in HS/EHS services area, including types of disabilities to Assistant Directors.~~

#### G. Documentation of Disabilities Services

CSB must maintain records from all services provided to children with disabilities and their families. Children's records are confidential and are maintained in locked files and password-protected in the CLOUDS data system. Data from these records are used to prepare the annual Program Information Report (PIR).

#### H. Postural Supports / Protective Devices

The Comprehensive Services Disabilities Manager works with educational and health staff to ensure that children with disabilities use approved medical devices including, postural or supportive restraints that are in accordance with state requirements and have CSB approval.

Children needing protective, postural or medical devices due to a disability condition must have a written request from a physician or an IEP/IFSP Team indicating such need.

The use of any medical appliances, devices or supportive restraints must be secure and able to be released in a way that is in compliance with fire clearance and earthquake safety.

~~CSB Teachers directly working with the children and Site Supervisor should be trained in the use and care of such devices prior to the child starting the program. The training should be documented in the case management notes with attached signatures of the trainer and trainees.~~

#### J. Disabilities Resources

The Comprehensive Services Disabilities Manager works with the Special Education Local Plan Area (SELPA) ~~and other collaborative agencies~~ to utilize all available resources to ensure the best involvement of the child and family in the program. The Comprehensive Services Disabilities Manager is responsible for developing a coordinated plan with all agencies working with the child and family.

#### K. Service Plan

Community Services Bureau develops annually a disabilities service plan based on the community assessment results, providing strategies for meeting the community needs and the special needs of children with disabilities and their parents. The purpose of this plan is to assure:

- That all components of the Community Services Bureau program are appropriately involved in the integration of children with disabilities and their parents.
- Those resources are used efficiently.

The Community Services Bureau Disability Manager coordinates with other service managers the provisions for children with disabilities to be included in the full range of activities and services normally provided to all Head Start children and provisions for any modifications necessary to meet the special needs of the children with disabilities.

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## Policies and Procedures

### Section 2: Child Development

#### ~~J.~~ Disabilities Budget Coordination

The Comprehensive Services Disabilities Manager is the designated liaison for special education services. Disabilities services outlined in the budget follow the regular budget procedure of parent and staff input with final approval.

#### ~~J.~~ Special Education Budget Allocation

The CSB program works within its budget to assist in providing needed services to children with disabilities. The program accesses all available sources to insure that all needs identified in the IEP or IFSP are met. This includes the local and state LEAs, SSI funding, other agency support, and local educational institutions. Every effort is made to utilize community resources to meet the needs of each child with disabilities enrolled in the program.

#### ~~M.~~ Disabilities Screenings

All preschool children are screened by the teaching staff in the areas of social and emotional development, speech and language, motor and cognitive development. All infants and toddlers are screened for cognitive development. The Comprehensive Services Team screens preschool children in hearing, vision, and nutrition, within 45 days of enrollment and follow CHDP schedule thereafter. Parents are informed about all screenings, their purpose, and give consent in advance before staff can complete the screenings. Comprehensive services complete the screening results form to communicate results to parents. The results from the screenings are used for beginning the individualization process for each child.

The ~~Site Supervisors~~ are responsible for working with the ~~Teachers~~ and Comprehensive Services Team to ensure that the speech and language screening tool, the social/emotional, sensory and developmental screenings are completed within 45 days of entry. Lead teachers must review and initial all education screenings to ensure they are accurately completed and meet required timelines.

Designated site staff enters the screening data in CLOUDS. The ~~Teacher~~ places original documents of the Speech and Language Checklist, Brigance Cognitive Screening and Devereux Early Childhood Assessment (DECA) behavioral screening in the Education section of the family file. If concerns are noted, the appropriate service area staff will follow up to ensure services meet the needs of the child. Teachers will give each child time to adjust to the new environment before completing the screenings. Children whose screenings show concerns may be rescreened within thirty days to ensure the validity of the original screening.

If concerns arise after re-screening, the ~~Teacher~~ (for cognitive-Socio emotional-SP/L screenings results) or the ~~Comprehensive Services~~ staff (for sensory screenings results) will communicate with the ~~Site Supervisor~~ and ~~Comprehensive Services Assistant Manager~~ to follow up with strategies to refer the child for further evaluations.

#### ~~N.~~ Evaluations

All children identified as needing further evaluation are referred to the appropriate agency or professional for further evaluation and assessment. The referral follows the established referral procedure:

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## Policies and Procedures

### Section 2: Child Development

- Through a case management, the guardian's permission is obtained.
- The teacher, Home Educator or Comprehensive Services Assistant Manager follows through on accessing the appropriate services.
- When no other alternative is available, the Comprehensive Services Team provides transportation for the family and child to obtain evaluations.
- The Comprehensive Services Assistant Manager monitors the referrals and supports parents and staff as needed.
- The Comprehensive Services Manager is available to provide knowledge and expertise to handle challenging cases.

#### ~~O. Accessibility of Facilities~~

All Community Services Bureau facilities provide for handicapped accessibility; in addition special furniture, equipment and materials are provided in conjunction with other agencies working with the child based on their individual needs and their IEP or IFSP.

#### ~~P. Disabilities Transitioning Services~~

All infant toddler transition plans start when the child turns 30 months old. The Parent, Site Supervisor, Teacher and Comprehensive Service Assistant Manager write the transition using the Infant Toddler Transition Plan Form (CSB 161). This meeting is to plan what needs to be in place for when the child ages out the EHS program. Children with current IFSP are included in this plan.

In addition when a child with IFSP turns 30 months and no later than 90 days prior to their 3<sup>rd</sup> birthday the family and child will transition from the Early Intervention Program (Part C Services of IDEA) to the School District (Part B of IDEA) as part of the IFSP transition. This meeting includes but is not limited to the Parent and any family member for support, the Early Intervention Provider, the School District Coordinator, the Special Education teacher, the Comprehensive Services Assistant Manager or Comprehensive Services Disabilities Manager, and the CSB teacher or Home Educator. The team will create a transition plan; evaluate the child's strengths and areas of concerns, schedule further evaluation by the School District and schedule a diagnosis meeting. At the end of the evaluations the child may or may not qualify for an IEP services under the School District and exit the Early Intervention Program (IFSP) the day before the child turns 3 yrs. old.

Another opportunity for transition starts when the child qualifies for an IEP and CSB placement is available at the site. For that a case management conference is held to evaluate and plan how to best serve the child at the site and how to support his/her learning based on his/her IEP. Evaluation of the classroom and outdoor environment will take place to identify accommodations needed including adaptive furniture or materials, modification of classroom schedules and routines to meet the individual needs of the child. This Transition Plan may include a gradual transition that involves both programs over a period of time. Any needed staff training will be provided as part of the plan.

For children transitioning out of the program into another program, the Teacher, Home Educator or Comprehensive Services Assistant Manager coordinates with parent and School District to how to support the child's transition. The meeting is to explore possible placements for the child. Included in the meeting are the child's Guardian, School District Coordinator, Teacher or Home Educator, and other

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## Policies and Procedures Section 2: Child Development

professionals providing services for the child and family. When the best possible placement is decided for the child, the Teacher and the family initiate a meeting with the new Teacher. At that time, a plan for a gradual transition including visits to the new program and sharing information about the child and their individual plan takes place.

**Q.** Transition Policy for Early Head Start Children Receiving Mental Health or Special Education Services  
As CSB's Mental Health services have expanded to include services for the EHS children, CSB must consider these children with disabilities in transitioning from the EHS program to the HS program. If an EHS child who is receiving mental health or special education services turns 3, the child must not automatically be terminated from the program. Transition planning must consider the child's individual developmental and emotional needs as well as age. The Head Start performance standards, Sections 1304.41(c) (1) and 1304.41(c) (2), require programs to establish transition procedures which take into account the child's health status and developmental level and current and changing family circumstances among others, and allow for a child to remain in Early Head Start, following his or her third birthday, for additional months until he or she can transition into Head Start or another program. (Based on licensing regulation this might not apply to all EHS programs).

In order to meet these Head Start and Early Head Start requirements and to address each child's individual situation, the following policy regarding transitions will be in effect **and only if the EHS blended program can accommodate such transition:**

- If a child is receiving mental health services from Community Services Bureau's Mental Health unit, a transition-planning meeting will take place approximately 3 months before the child's 3rd birthday to address this child's individual circumstances. The family, teachers, Site Supervisor and Mental Health clinician will participate in this meeting. **This meeting is coordinated by the MH clinician.**
- If it is determined that the child is developmentally and/or emotionally not ready to move into the HS program, the child can remain in the EHS program until such time when it is determined that the child is ready to transition to the HS classroom.
- If there is a time gap between the child's 3rd birthday and the beginning of the HS program, in order to ensure continuity in educational and mental health services to this child, the child may remain in the EHS program until he/she can transition into the HS classroom. Follow up meeting with all caregivers can be held as appropriate.

**R.** Special Education and Related Services

All infants/toddlers and preschool age children entering Community Services Bureau must have a well-child exam within 30 days of enrollment. Those preschool children who did not receive a hearing and vision screening as part of their well child exam will be screened by in-house certified trainers within 45 days of enrollment.

Any children identified as having a concern are referred back to their physician for further evaluation or referred to a community agency for assessment. Children who qualify after assessment receive services from the Special Education Local Plan Area (SELPA) or the Regional Center under an IEP or IFSP plan in accordance with our interagency agreement.

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**Deleted:** Prior to a child transitioning from the infant toddler program to the preschool program, an IFSP transition meeting is held. This meeting includes but is not limited to the participation of representation from the family, the infant/toddler care provider, the School District Coordinator, the Special Education teacher, the Comprehensive Services Assistant Manager or Comprehensive Services Disabilities Manager, and the CSB teacher or Home Educator. During this transition, the child will undergo evaluation by the school district to see if he/she qualifies for an IEP. ¶

¶ If he or she qualifies for an IEP, a case management conference is held to evaluate and plan how to best serve the child based on his/her IEP Goals and Objectives. Evaluation of the classroom and outdoor environment will take place to identify accommodations needed including adaptive furniture or materials, modification of classroom schedules and routines to meet the individual needs of the child. This Transition Plan may include a gradual transition that involves both programs over a period of time. Any needed staff training will be provided as part of the plan. ¶

¶ For children transitioning out of the program into another program, the teacher, Home Educator or Comprehensive Services Assistant Manager ensures that an IEP meeting takes place to explore possible placements for the child. Included in the IEP meeting are the child's guardian, teacher or Home Educator, and other professionals providing services for the child and family. When the best possible placement is decided for the child, the teacher and the family initiate a meeting with the new teacher. At that time, a plan for a gradual transition including visits to the new program and sharing information about the child and their individual plan takes place. ¶

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## Policies and Procedures

### Section 2: Child Development

A Mental Health Consultant is available to discuss behavioral/mental health concerns that the family, teacher or home visitor may have about a child. The consultant will share non-confidential results with the teacher/Home Educator and families, and work with them to develop a plan for the child.

When no other alternative is available, the Comprehensive Services Team provides transportation for the guardians and child to obtain evaluations. When services are not provided on site, parents are assisted in finding public transportation to clinics or service providers.

Community Services Bureau works **collaboratively** with all other agencies involved with the child and the family to meet the objectives in the IEP or IFSP.

Community Services Bureau, subject to budgetary allowances, will purchase any assistive devices identified in the IEP or IFSP that cannot be funded through outside agencies.

Comprehensive Services staff undertakes collaborative partnerships with individual families to develop a Family Partnership Agreement twice a year. The Comprehensive Services staff provides **families with community resources such as, parent support groups, parent trainings, advocacy and child development among others to assist families reaching their FPA goals.**

#### ~~S.~~ Special Education Services with Other Agencies

Following the preschool age child assessment administered by the Local Education Agency (LEA), an IEP is held which includes the family, the teacher or Home Educator and/or Comprehensive Services Assistant Manager, and the LEA representative. At that time, the appropriate placement is determined and a service plan is developed for the child. For children who do not qualify for placement with the LEA, Community Services Bureau addresses the child's individual needs within the classroom or home based visit and provides required support and services.

For a child with disabilities transitioning in or out of the program, an IEP meeting is held to develop a plan to work together toward common goals. The meeting includes the **Family**, the **Teacher/Home Educator**, and the other service providers. CSB and the LEA share resources as appropriate. This resource sharing includes use of the classroom for any individual, family or group work that is necessary for the child's success. The LEA staff member shares ideas and materials with the CSB teaching staff when possible to foster attainment of IEP goals. CSB refers children to the LEA as soon as concern is suspected and does not wait until all screenings are completed.

**Children enrolled with a diagnosed disability and have a current IEP or IFSP, receive individualized education based on their unique needs.** For Center Based Care, if a child's IEP or IFSP indicates a part-time schedule, he/she may share that enrollment slot with another child. Children who have joint placement in Community Services Bureau and other agencies receive careful monitoring to insure that the program developed for them in each placement is working in concert with the other to provide an overall program that meets all the needs of the child. Frequent communication among service providers is necessary to insure this. The family plays a key role in assessing the success of the shared placement.

#### ~~T.~~ Volunteers

CSB welcomes community volunteers and student interns from colleges.

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## Policies and Procedures

### Section 2: Child Development

Whether paid or volunteer, all staff working with children with disabilities, are provided training that includes specific identified topics relating to the unique needs of each child. Also, general training topics include working with children in group situations and respecting child/family confidentiality.

#### ~~U~~. Special Education Staff

Community Services Bureau ensures that the Disabilities Services Plan addresses program efforts to meet state standards for personnel serving children with disabilities. Special education and related services are provided by or under the supervision of personnel meeting state qualifications. All staff working with children with disabilities meets state special education standards for personnel serving children with disabilities. Training and supervision that meet special education standards are developed in collaboration with Local Education Agencies.

#### ~~V~~. Interagency Agreements

CSB maintains an interagency agreement with the Contra Costa County Special Education Local Plan Area (SELPA) and the Regional Center of the East Bay (RCEB) to establish shared guidelines for providing services to identify children with disabilities within the CSB program.

CSB participates in the Local Education Area (LEA) Child Find plan (Child Find is a component of the IDEA) by providing information on application and enrollment guidelines to the LEA and working with them to enroll eligible children.

#### ~~W~~. Recruitment and Enrollment

All staff involved with the recruitment and enrollment of children is knowledgeable of all laws (Nondiscrimination on the Basis of Handicap in Programs and Activities Receiving or Benefiting from Federal Financial Assistance and of the American with Disabilities Acts) and Head Start mandates regarding children with disabilities.

Interagency agreements between Community Services Bureau, Local Education Agencies and Regional Centers are developed, maintained and updated annually to aid in the recruitment, enrollment and mainstreaming of children with disabilities. Referral sources are maintained, utilized and updated to provide needed services for children with disabilities. Special efforts are made to recruit children with severe disabilities.

All staff involved with the recruitment and enrollment of children with disabilities receives training on children's records as they apply to each child file.

Obstacles (including staff apprehensions, inaccessibility of facilities, provision of additional resources necessary for child's specific needs, unfamiliarity with a disabling condition or special equipment, and the need for personalized special services) are addressed through needed program adaptations and trainings and do not affect a child's enrollment.

Enrollment placement takes into account the number of children receiving services under the disabilities area, including types of disabilities, severity of the disability, and services and resources provided by other agencies.

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## Policies and Procedures Section 2: Child Development

Resources and placement options are utilized according to a child's IEP or IFSP. Children with disabilities enrolled in Community Services Bureau programs follow the same eligibility enrollment procedures stated in the Community Services Bureau Policies and Procedures and comply with all licensing regulations for center based programs. Children with a current certified IEP or IFSP may have an over income waiver to qualify them for the HS/EHS program.

Families whose children have an IEP or IFSP may qualify for an over income waiver for the HS/EHS program. At the same time families enrolled in double funded programs (State/Federal) may have a fee, based on the state portion of the program.

Children with a current certified IEP or IFSP sharing blended state-federal funding need to comply with state requirements providing CSB with the copy of the IEP or IFSP and the Exceptional Needs Verification Form (See Form CSB65).

The Comprehensive Services Disabilities Manager monitors the recruitment and enrollment of children with suspected disabilities and certified IEPs or IFSPs.

X. American with Disabilities Act (ADA) Policy – Enrollment of Children with Disabilities, Recruitment and Enrollment. Community Services Bureau serves children with disabilities and other exceptional needs, and their families, in all program options. The following steps are taken to ensure full ADA compliance, to identify the unique needs of each child and family, to facilitate the individualization process collaboratively with parent and to make needed modifications in policies, practices and/or procedures as deemed reasonable.

At intake, the individual needs of each child and family are evaluated.

If it is determined that the child has a disability, whether developmental, behavioral, or health related (and may be documented by an IEP/IFSP) the parent is asked to provide documentation/records regarding the identified need.

The site team, as well as appropriate Comprehensive Services Managers will review the records.

A Case Management meeting is conducted with site team, Comprehensive Services Manager, parent and may include special service providers to:

- Further identify child/family strengths and needs
- Define needed accommodations/adaptations
- Identify staff training needs and supports
- Identify additional needed action

Following the Case Management meeting and completion of additional actions needed, the site team, in collaboration with the Comprehensive Services Manager:

- Will enroll the child or, initiate an Individualized Assessment of the child's needs.
- The Comprehensive Services Manager will lead/conduct the Individualized Assessment. The process will be defined on a case by case basis which may include:

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## Policies and Procedures

### Section 2: Child Development

- Reviewing additional medical or special services, records/information.
- Gathering the most current medical knowledge and/or best objective evidence regarding the disability.
- Child observation in the natural environment or through parent/child site visitations.
- Medical guidance obtained from public health agencies, Center for Disease Control, National Institute of Health, including the National Institute of Mental Health, and other like agencies.

Based on the findings of the previous actions, accommodations/ modifications will be identified that would allow for the child to participate in the program.

The findings/case will then be presented to a management team (including the Assistant Director) to determine if identified modifications constitute reasonable accommodations or if CSB can demonstrate that making such modifications would:

- Create undue financial burden/hardship (all resources available for use in funding and program operation will be considered)
- Fundamentally alter the nature of the program (essential elements of program as well as essential elements necessary for participant will be considered)

The management team must also determine that the child's presence would pose a direct threat to the health and safety of the individual child or others (factors to consider include: nature, duration, and severity of risk; probability of occurrence of injury; whether reasonable modifications of policies, practices, or procedures will mitigate or eliminate risk).

The team will then:

- Recommend enrolling the child in appropriate placement.
- Or provide a written statement of the reasons for reaching the conclusion not to enroll the child based on criteria stated above.

#### ~~Y.~~ Assessment Process of Children with Disabilities

The Comprehensive Services Disabilities Manager coordinates with health and education staff the sensory and cognitive screening of all children within 45 days of enrollment.

The Comprehensive Services staff is involved in the screening process of all children, particularly those requiring further evaluation.

The Comprehensive Services Assistant Managers evaluate the need for further specialized assessment after all standard screenings have been completed.

In a case management meeting families are informed of screening results and are encouraged to sign a written consent for requesting ~~further~~ evaluations with an outside agency.

The Comprehensive Services Assistant Managers refer children for further formal evaluation to the LEA (3 years to 5 years) or RECEB (new born to 2.9 years) according to the established referral procedure. LEA agencies have 60 days to process the referrals and develop an IEP upon receipt of family intake package. RCEB has 45 days to process the referrals upon receipt of parent intake package.

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## Policies and Procedures Section 2: Child Development

The evaluation procedure is conducted with the following provisions:

- Obtain parental consent prior to evaluations
- Informing parents of their rights and responsibilities under IDEA
- Administered in a culturally sensitive manner by trained certified/licensed personnel that speak the child's home language. Using more than one criterion in the determining of an appropriate program placement and having a multi-disciplinary team including the child's teacher to do the evaluation using assessment materials validated for the purpose for which they are used

### ~~Z.~~ Eligibility Criteria: Health Impairment

Children will not be discriminated against if they present any health impairments such as, cancer, severe asthma, uncontrolled seizures, neurological disorders, rheumatic fever, heart conditions, lead poisoning, diabetes, blood disorders, cystic fibrosis, heart diseases, ADD, AIDS and other medically fragile conditions.

Children who meet specific criteria including level of functioning, age, onset of indicators and documented reports may be classified as having ~~Health Impairment~~.

Children with suspected health impairments are referred for further evaluation. With the parent's consent, CSB teaching staff will provide documentation of behavior observations relevant to the impairment, to the appropriate professional for assessment. Upon receipt of a physician evaluation, a case management will take place to ensure that CSB can accommodate the individual needs of the child.

### ~~AA.~~ Eligibility Criteria: Emotional / Behavioral Disorders

The identification of children with emotional/behavioral disorder involves specific behavioral characteristics, the use of multiple sources of data, and the review of the child's Head Start physical exam.

Children suspected of having an emotional/behavioral disorder are referred for further evaluation to appropriate community agencies to determine whether IEP services are appropriate. Upon receipt of a diagnosis, a case management will take place to ensure that CSB can accommodate the individual needs of the child in the classroom.

### ~~BB.~~ Eligibility Criteria: Speech or Language Impairments

All children are screened for speech and language delays, within 45 days of enrollment. Children with suspected speech/language delays are referred for further evaluation to RCEB or SELPA. If a determination is made for intervention or special education, an IEP or IFSP will be implemented through the outside agency (Regional Center or SELPAs). When referring children for assessments, careful consideration is given to cultural, ethnic and bilingual differences as well as temporary disorders and delays that fall within the normal range for the child's age. Upon receipt of evaluation and diagnosis, a case management will take place to ensure that CSB can accommodate the individual needs of the child in the classroom.

### ~~CC.~~ Eligibility Criteria: Intellectual Disability

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## Policies and Procedures

### Section 2: Child Development

"Intellectual Disability" is a new term in IDEA for Mental Retardation. In October 2010, Rosa's Law changed the term to be used in future to "intellectual disability." After screening children suspected of having any delays/deficits in adaptive behavior are referred for further evaluation to the LEA and/or physician and/or MH services. A case management will be in place upon receipt of the diagnosis to ensure proper placement and support for the child.

#### DD. Eligibility Criteria: Hearing Impairment

All children are screened for hearing loss through the program or their private physician. Children needing further evaluation are referred back to their private physician and to the SELPA or to the Regional Center. Upon receipt of evaluation and diagnosis, a case management will take place to ensure the CSB can accommodate the individual needs of the child in the classroom.

#### DE. Eligibility Criteria: Orthopedic Impairment, Visual Impairment / Blindness

Children suspected of having an orthopedic impairment including but not limited to spinal bifida, cerebral palsy, loss of or deformed limbs, arthritis, or muscular dystrophy are referred to their pediatrician for further evaluation. Children requiring special services are referred to the SELPA or Regional Center. All children have vision screenings through the program or their physician. Children needing further evaluation are referred to their physician, an ophthalmologist and/or optometrist to determine whether the child is visually impaired.

Upon receipt of evaluation and diagnosis, a case management will take place to ensure that CSB can accommodate the individual needs of the child in the classroom.

#### DF. Eligibility Criteria: Learning Disabilities

All Head Start children are screened for possible learning disabilities. Those with suspected disabilities are referred to their physician and RCEB or SELPA as needed. Site Supervisors with the assistance of Teaching staff provide classroom observations and child's work samples as needed to document the child's needs. Upon receipt of evaluation and diagnosis, a case management will take place to ensure the CSB can accommodate the individual needs of the child in the classroom.

#### DG. Eligibility Criteria: Autism, Traumatic Brain Injury, Other Impairments

Children that present behaviors like autism, traumatic brain injuries or other developmental impairments may qualify for services under the Regional Center or SELPA. CSB supports the early identification and intervention of children at risk and with parental consent children are referred for further evaluation to outside agencies. Upon receipt of evaluation/diagnosis, a case management will take place to review the IEP. CSB will make proper accommodations and maintain the child in dual enrollment if CSB is the proper placement based on the child's IEP/IFSP goals and objectives.

#### DH. Disabilities/Health Services Coordination

The Comprehensive Services Disabilities Manager works closely with the Health Manager, CS Team and other staff in the screening, assessment process and follow-up to meet the needs of children with disabilities.

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With the help of LEA and appropriate professionals, Head Start provides evaluation, if necessary, and special services/assistance for any child meeting the criterion for Head Start.

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## Policies and Procedures

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The Health and Disabilities Managers work together to ensure children's special needs are met and supervision of the administration of all prescriptions and over the counter medications occurs in accordance with state requirements. Children requiring medication must have the doctor's instructions and parental consent before the medication is administered. Individual records of all medications dispensed and a regular review with the child's parents occurs.

All medications must be adequately labeled, locked and stored out of reach of children. Individual medical plans should be shared with the teaching staff and closely monitored for compliance. Any changes in a child's behavior related to a drug must be shared with staff, parents and the physician. ~~Pre-enrollment case management is encouraged to ensure CSB staff is aware of the individual needs of the child and accommodation can be made.~~

#### ~~J~~I. Developing Individualized Education Programs (IEPs)

~~The School District in advance notifies families~~ in writing of the time, date, location and purpose of the IEP meeting in advance, to enable participation. Repeated and documented attempts are made to facilitate the family's participation in the IEP meeting. Opportunities are provided for reviewing the results of the meetings. Efforts are made to assure that families are knowledgeable about their parent's rights and responsibilities under IDEA and understand (including interpreters) the purpose and proceedings of the child's program.

Head Start must evaluate all pertinent information when determining eligibility and placement options of children with current IEPs. The IEP ~~such as~~:

- The child's present level of functioning in all areas of development, ~~strengths~~.
- The identification of needs in areas requiring specific services, ~~challenges~~.
- Short and long term goals and objectives.
- Specific special education and related services necessary for the child to participate in Head Start including those services provided by other LEAs and professionals.
- Personnel responsible for services provided, projected dates for initiation/duration of services ~~and place of services~~.
- And evaluation procedures to determine the achievement of goals including family goals and objectives.

#### ~~J~~I. Disability Referral Procedures

##### 1. Description

The first five years of the children's life are times of rapid growth and learning. CSB provides rich learning and nurturing environment for them to grow and develop; however, some children will develop at different rates and would need some extra support to reach their age appropriate milestones. The Community Services Bureau is committed to early identification of children at risk of developmental delays in order to provide the necessary early intervention that will lead to a better future for the child.

##### 2. Screening for suspected concerns

i. Prior to enrollment during the application period the child's file might be flagged using the Red and Yellow Flag System to alert the staff of known or suspected concerns based on the completed health

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## Policies and Procedures Section 2: Child Development

history by the parent. The health history briefly screens children for possible health, nutrition, and socio-emotional and developmental risks.

ii. Child's Physical Exams/Baby Well Checkups provide a great source of information and they are given to us by the parents within 30 days of enrollment thereafter as required by CHDP (Child Health and Disability Prevention.)

iii. Sensory and developmental screenings and assessments are provided to all enrolled children within 45 days of enrollment.

Children determined to be in need of further evaluation/assessment based on screening results, staff observations, and/or parent observation are referred to the appropriate agency with parental consent.

### 3. Referral

Based on the agency identified for referral, the assistant manager will explain in detail the requirements for their referral process, their timelines, and provide copies of the parent rights and responsibilities under IDEA to the parent. It is crucial that this portion be clear to the parent and an interpreter assist the parent with any clarification.

- Referral for Regional Center (Children 0 to two years **"2.9 yrs"**)  
The process takes about 45 days from the date of referral.
- Referral to Local Education Agencies/**Family Home School District** (Children 3 to 5 years)  
The process takes about 60 days from the date of referral.

**As part of a case management** the parent is encouraged to sign the Child Referral and Parent Consents Form (CSB 501), only after understanding the referral process and his/her parent rights under IDEA. The assistant manager assists the team by providing the copy CSB 501 form to be signed.

For Mental Health referrals, the medical provider information is completed on the referral form and a copy of the child's Medical card (if insured) is attached. When a child is on disciplinary steps and has a behavior action plan, a copy of this plan, the child's Devereux Early Childhood Assessment and Development Screening is included with the referral.

The Child Referral and Parent Consents Form (CSB 501), is reviewed to ensure the document is correctly filled out after acquiring parent signature. Additional signatures are obtained from the Site Supervisor and the Comprehensive Services Assistant Manager.

A copy of this form (CSB 501), is given to the parent, one to the assistant manager to process the referral and the original is placed in the file.

The assistant manger reviews the signed CSB 501 and processes it immediately. Once verified referral receipt by phone with the appropriate School District, Early Intervention Agency, or Mental Health Unit, the assistant manger completes the Response to Referral Form (CSB 502).

Review referral before processing. The referral must be completed including:

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## Policies and Procedures

### Section 2: Child Development

- Child's Name
- Child's Birth date
- Child's CLOUDS ID #
- Child's Center
- Current home address (Encourage family to avoid moving houses while the LEA is evaluating the child)
- Family Phone #
- Parent's name
- Parent's language of preference
- Child's language of preference
- No need of SS# or Medi-Cal for Disability referrals
- CSAM referral contact / name and phone number
- Consents for exchange of information and assessment should be initialed by parent.
- Parent's signature
- Site Supervisor, CSAM or Home Based Teacher signatures

Agency to refer information:

- Determine Home School District for children 3 to 5 years old.
- Access RCEB or other intervention programs if the child is under 2 ½ years old.
- Fax signed form CSB 501 to outside agency and follow up with a confirmation phone call to ensure they have received the referral.
- Complete Response to Referral Form (CSB 502)

The original form (CSB 502) is placed in the child's file while the copy is given to the parent attached to additional relevant informational resources.

- The copy of the Response to Referral Form (CSB 502) is given to the parent
- Community resources such as CARE parent network, IEP/IFPS programs description and advocacy resources are given to the family with any other resources they might have requested.
- The original Response to Referral Form (CSB 502) is placed in the child's file under the Special Needs section.

The comprehensive service assistant manager enters the case management notes and intervention/referral information under the disability tab in CLOUDS (Intervention/Referral). Copy of the case management (CSB 514) is placed in the child's file.

The assistant manager will contact the family for a follow-up within 30 and 60 days after submitting the referral to ensure proper evaluation meetings are in place, proper support is given to the parent in preparation of the diagnosis meeting, and ensure participation in the IEP/IFSP meeting.

Additional Case Management will follow up as needed and/or as determined in the initial meeting.

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For additional information on screenings, case management and referral procedures, please refer to Section 2 Child Development, Part II Services to Children with Disabilities.¶

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## Policies and Procedures

### Section 2: Child Development

The Comprehensive Services Disabilities Manager works with the ~~Health Services Manager and the Nutritionist~~ to ensure that provisions to meet the needs of ~~each~~ child are incorporated into the nutrition program.

Appropriate professionals are consulted on ways to assist Head Start staff and families in regards to children having severe disabilities and problems with eating.

Activities to help children with disabilities participate at mealtimes are implemented in the classroom after discussion in a case management meeting.

~~Case Management~~ meetings with CSB staff, other professionals and families are held to meet the nutritional needs of children with disabilities including the prevention of disabilities with a nutrition basis.

#### ~~II.~~ Parent Involvement in Transition Services for Children with Disabilities

##### Description

In an effort to support the transition of children with disabilities into CSB programs, or children transferring from one Community Services Bureau program to another, the parent will be asked to attend a Case Management meeting (transition planning meeting) prior to enrollment or transfer. The focus of the meeting will be to:

- Review the IEP/IFSP goals and objectives as well as identify parent goals for child
- Determine the needs of the child
- Insure appropriate placement
- Plan program adaptations (if needed)
- Support family and foster team approach for service delivery
- Provide activities and information to the family to foster the child's development.
- Provide activities to the family to reinforce program activities at home.
- Provide family with resources such as Social Security (SSI), Early Periodic Screening Diagnosis and Treatment (EPSDT) programs and other community resources and assist them in accessing these resources.
- Provide family with information to prevent disabilities among younger siblings.
- Provide parent with information about their rights under the Individuals with Disabilities Act. (IDEA)
- Provide resources to family groups for children with similar disabilities who can provide peer and family support.
- Comprehensive Services Team will support family through the children's transition from Early Head Start to Head Start or from Head Start to Kindergarten or to other agencies.

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## Policies and Procedures Section 2: Child Development

### III. Individualization in the Program

#### A. Description

Individualization is the process used to design a plan for each child that reflects their unique characteristics, strengths and needs.

Individualization is based on information gained from:

- Home visits
- Child's health and nutritional screenings and health histories
- Educational screenings: Speech and Language, Brigance Cognitive Screen and DECA (Devereux Early Childhood Assessment Program)
- Desired Results Developmental Profile (DRDP 2010) Assessment
- Portfolio Assessments
- Parent conferences and contacts
- Children's Individual Education Plans (IEP's, IFSP's)

#### B. Individual Goals

Individualization is documented on:

- CSB Individualized Tracking Sheet
- DRDP 2010 Individualization Form
- Lesson Plans
- First and Second Parent Conference Forms
- Progress Notes
- Case Managements
- Behavioral Management plans

Upon completion of the child's first sixty days, teaching staff review the information collected from the parent contacts, educational screenings, the DRDP 2010 assessment, anecdotal records, health histories and IEP's/IFSPs (when applicable) and determine a minimum of seven goals (2 Social emotional, 3 Cognitive, 1 Motor and 1 Health and Safety) based on the Infant/Toddler and Preschool domains.

Each child's goals including their DRDP 2010 measure number are listed on the CSB Individualized Tracking sheet form under the appropriate category. IEP/IFSP goals and special health goals such as nutrition interventions are listed on the form under Special Needs. In addition, each child is assigned a letter code that is used to document individualized activities on the lesson plan.

#### C. First Parent Conference / Individualized Plan

The first parent conference is scheduled within the first ninety days of enrollment.

During this conference, the teacher and parents discuss the child's progress based on screenings, DRDP 2010 assessment, and parent observations. The teacher and parent develop the goals for the child's individual plan. The child's strengths, individualized goals and activities that will support the development of goals are listed on the conference form. A minimum of seven goals (2 Social emotional, 3 Cognitive, 1 Motor and 1 Health and Safety) must be specified with corresponding DRDP 2010 measures. Home activities are also planned for the parent and child to engage in at home. Parent and teacher must sign and date the form.

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### Section 2: Child Development

#### D. Second Parent Conference

A second parent conference is scheduled within 20 days of the completion of the second DRDP 2010. During this conference the parent and teacher review the child's progress on the goals and objectives set during the first conference and discuss parent observations and view the child's portfolio. New learning goals and objectives are determined in collaboration with parent. Parent/child activities to support goals are planned for the home.

If the child is going to kindergarten, the Kindergarten Transition Packet may be discussed with the parent. A signed and dated copy of the second parent conference is placed in the portfolio and the child's file. The Kindergarten Transition form is signed by the parent and included in the file.

#### E. The Infant-Toddler Individual Needs and Services Plan

The Individual Needs and Services Plan (CSB-180) is completed prior to the first day of attendance. The process includes a personal interview with a family member by a staff member. The form is then updated quarterly. Included in the plan is:

- The current feeding schedule and the amount and types of food provided including whether breast milk or formula and baby food is used.
- The meal patterns of the child, new foods introduced, preferences and voiding patterns are shared.

Staff should be aware of and may share information about community nutritional issues that may be identified services that are needed by a child that are different from the normal routines shall be provided including but not limited to special exercises for children with physical disabilities.

#### F. Lesson Plans

Lesson Plans are posted weekly. The lesson plan provides a variety of developmentally appropriate activities and materials for the children to engage in that will stimulate their physical, social and cognitive growth. The lesson plan includes activities that meet the children's individualized needs based on the results of their screenings and assessments. Individualization is documented on a tracking form with the children's alphabetic code. These codes are added to the activities planned to meet the children's individual needs.

The lead teachers are responsible for:

- Planning and developing the weekly lesson plan with their classroom team.
- Submitting the draft plan to the site supervisor every Thursday.
- Posting the weekly lesson plan every Monday,

The Site Supervisor is responsible for:

- Reviewing and approving the draft weekly plan.
- Signing off and dating the approved plan.
- Returning the approved plan to the lead teachers every Friday.
- Ensuring the lesson plans are posted in the classrooms every Monday morning.

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## Policies and Procedures

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#### G. Developmental, Sensory, and Behavioral Screening

All preschool children are screened by the teaching staff in the areas of social emotional development, speech and language, motor and cognitive development, and by the Comprehensive Services Team in hearing, vision, and nutrition, within 45 days of class entry, annually. Infants and toddlers are screened for cognitive development ~~using the Brigance and for behavior development~~. Parents are informed about all screenings and their purposes in advance. The results from the screening will be used ~~to begin~~ the individualization process for each child.

(For more information on screenings, please refer to Part II, Services for Children with Disabilities, Section L, page 37).

#### H. Assessment

The Desired Results Developmental Profile Child Assessment (DRDP 2010) is the required assessment tool mandated by the California Department of Education and ~~also~~ includes the Head Start Outcome requirements. ~~There is a DRDP for preschool, infant, and toddler age children.~~

The tool assesses children in the four areas of the California State specified Desired Results: Children are: Personally and Socially Competent, Children are Effective Learners, Children show Physical and Motor Competence, Children are Safe and Healthy. The DRDP 2010 assessment of children is accomplished through on-going observation of the child.

Infants, toddlers and preschool children are assessed three times a year: The first assessment is completed within the first 60 days of enrollment and the second DRDP 2010 assessment is completed within 150 days of enrollment, and the third DRDP is completed in May. Assessment results are entered in CLOUDS within required guidelines. Results of the assessments are shared with parents during parent conferences, are a basis for developing children's individual goals and plans and are used for individualizing the lesson plans.

#### I. Portfolio Assessment

Portfolio assessment is ~~implemented quarterly~~ as an ongoing assessment process for curriculum development, individualization in the classroom and as a basis for communicating with parents. It enables primary caregivers, teachers and parents to follow children's development over the year within and across curriculum domains.

The teaching staff is responsible for collecting ~~meaningful~~ samples of children's work including but not limited to the child's writing, cutting and drawing skills. ~~Infant and toddler caregivers~~ are responsible to observe ~~children's~~ growth and developmental changes and document ~~those~~ changes in the portfolios. Documentation may include photos, work samples that document developmental change.

Information gathered in the child's portfolio is used as part of the lesson planning process in which teachers reflect on gathered information and observations in relation to program goals for each child. Information gathered in the portfolio is periodically reviewed at parent conferences and home visits. New educational goals are jointly developed as the ongoing assessment process continues.

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## Policies and Procedures Section 2: Child Development

If a child transfers to another center, the portfolio will be placed in the child's file and sent to the office. The Site Supervisor will then route it to the new location; when the school year is complete (June 30), the parent will be given a complete portfolio to utilize with the teacher in kindergarten as part of the transition plan. On July 1, a new portfolio is started for a returning child.

### J. Program Transitions

Parents are given the opportunity to participate in and be supported in the transition of children into Early Head Start, Head Start and Kindergarten.

#### 1. Transition Policies and Procedures for Infant/Toddlers

Transition into the infant/toddler programs will start for families during the enrollment process into CSB program options. Parents and children will be invited to visit the center or other program options to meet center staff, family childcare providers, home educators, ~~or~~ other program staff, and ~~observe~~ the educational environment. Classroom orientation will be done before the child starts the program, followed by the initial home visit.

To ensure a continuation of program services to children and families, infant/toddler staff and preschool staff will work in conjunction to provide a quality and effective transition to preschool. The transition plan from the infant/toddler program to preschool is mandated to begin six months prior to the move. The CSB Transition form (CSB-161) will be completed by the parent, teacher caregiver and site supervisor six months prior to the transition and updated quarterly. At that time, the child will be ~~placed~~ on the CSB wait list and the Comprehensive Services Team will be notified that a transition is being initiated. Comprehensive Services staff will schedule a meeting with the parents to determine eligibility for CSB programs as soon as possible. If the family is eligible, as per Performance Standard 1305.7c, CSB will ensure whenever possible, that the child receives HS services until enrolled in school. If the family no longer qualifies for CSB programs, they will be provided other alternatives including partner sites and fee-based sites. The persons involved during the transition will be:

- Parents
- Teacher/Primary Caregiver
- Teacher in new site
- Site Supervisor(s)
- Comprehensive Services Team

After three months, the above team will meet to update the Transition Plan (CSB161) and to discuss the preschool placement.

Three weeks prior to the transition, the child will begin visiting their preschool classroom accompanied by their caregiver teacher. The length of the visits and the number of visits will be determined by the child's comfort level. A final home visit will close the child's file and the caregiver teacher will continue to visit the child in the new setting as needed. The infant/toddler file will be placed behind the new preschool file.

#### 2. Transition Policies and Procedures for Preschoolers

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## Policies and Procedures

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Transition will begin for children and their families during the enrollment process into CSB program options. Parents and children will be invited to visit the center or other program options to meet center staff, family childcare providers, home educators, and other program staff, and experience the educational environment. The initial home visit will be used to begin the transition. The classroom/home-based orientation will further enhance the process.

A child transition plan will be developed according to the individual needs of each child. The plan will be designed when the parent indicates an upcoming change of placement or when the child is scheduled to transition. Staff involved in the plan development with the parent(s) includes:

- Teacher/Family Childcare Provider/Home Educator
- Receiving site staff
- Site Supervisor
- Comprehensive Services team

Prior to a final transition, the parent, child and CSB staff (when possible) will visit the new program.

A final home visit will be conducted to finalize the process and determine any additional family support that may be needed.

#### 3. Kindergarten Transition

Kindergarten transition meetings are scheduled between December through March. During the kindergarten transition meeting, parents are given information on their local school districts enrollment procedures and are given written resources to help their child transition to kindergarten.

Representatives from the local public schools are invited to speak to parents about the transition to kindergarten. Parents are also encouraged to attend field trips to kindergarten classes and to familiarize themselves and their child with the school facility. Site staff assists parents with the Kindergarten registration process, and if necessary, assist parents to obtain the necessary documents required for Kindergarten entry.

#### 4. Kindergarten transition planning for children with disabilities

- Identify family concerns, priorities, resources that relate to the change, and parents' expectation(s) of kindergarten.
- Provide training to parents to become knowledgeable regarding the application procedure and their parental rights.
- Review placement options, parental rights as they relate to responsibilities within the school system, and steps they can take to help their child do well in school.
- Review child's progress and update records. Complete "Authorization to Release Information" (CSB139).
- Provide activities for parents to do at home to prepare their child for kindergarten.
- Inform parents of transition meetings, and allow them to decide what role they will play.
- Schedule an introduction for parents with their new contact, either in person or by phone.
- Encourage parents/arrange a visit to the prospective school before their children transfers

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#### IV. Curriculum (Education and Early Childhood Development)

##### A. Child Development and Education Approach

All CSB Centers implement The Creative Curriculum for Infants, Toddlers and The Creative Curriculum for Preschoolers. Goals for curriculum promote children's active involvement in their own learning. Children will have a learning environment and varied experiences appropriate to their age and stage of development that will help them grow physically, socially, linguistically, intellectually and emotionally. The education program is guided by Head Start Performance Standards (45 CFR 1304), The California Department of Education, National Association for the Education of Young Children Developmentally Appropriate Practices, Program for Infants and Toddlers Caregivers (PITC) and Reggio Emilia Inspired Project Approach. The Program Services Committee of the Policy Council provides input into the program curriculum and approach to children's education.

##### 1. Educational Options

- Center based: Preschool/infant toddler full-day and Preschool part-day program options.
- Full Inclusion programs: Children with disabilities are mainstreamed into center based classrooms in collaboration with the school districts.
- Preschool Special Day class: school district operates two special day classes in collaboration with CSB.
- Home Based: Home base teachers serve as facilitators of children's learning in the child's home environment. The program provides one home visit per week for a period of 1.5 hours and two group socialization activities per month.

##### 2. CSB Educational Programs

The curriculum goals are based on the State Child Desired Results and Head Start Child Outcomes.

- Desired Result 1: Children are personally and socially competent
- Desired Result 2: Children are effective learners
- Desired Result 3: Children show physical and motor competence
- Desired Result 4: Children are safe and healthy

The curriculum is enhanced by the Project Approach to learning. The Project Approach is a meaningful way to teach content built on children's knowledge and interests. Projects support the development of a child's knowledge, skills, disposition and feelings.

In addition, the curriculum is guided by:

- Growing, Growing Strong: A Whole Health Curriculum for Young Children.
- I Am Moving, I Am Learning ~~infant and toddler gross and fine motor enhancement.~~

##### B. Curriculum Implementation

##### 1. Orientation

The CSB program operates year-round, and children are enrolling and departing throughout the year. Orientation is ongoing throughout the year. Orientation Steps are as follows:

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Infant and Toddler Curriculum is guided by Program for Infant Toddler Caregivers (PITC) approach. The approach is relationship-based and emphasizes child-directed learning and the importance of continuity of care and how to be "in tune" with the infant.¶

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## Policies and Procedures

### Section 2: Child Development

- Phase In: The first day of school is called phase in and lasts a minimum of two hours. The goals for phase in are to welcome the child and family into the program and familiarize them with program philosophy and procedures.
- During phase in, the teacher gives a tour of the classroom and play yard, introduces the daily schedule, lesson plans, parent conferences, emergency procedures, curriculum, screening and assessments, meal-time practices, celebration policies and hygiene practices.
- The Site Supervisor informs parents about sign in-sign out procedures, parent and policy council meetings, attendance and drop off and pick-up policies, volunteer opportunity information, behavior management policies, sick child and medication policy and complaint procedures for parent and completes emergency forms (CSD-112).

#### 2. Classrooms

Preschool Classrooms are divided in clearly defined interest areas including:

- Block, Art, Science, Dramatic Play, Manipulative and Math, Library, Writing, Sand and Water, Computer and a quiet area where children can play alone or with one classmate.
- There is a place where each child can keep personal belongings.
- Learning materials are logically organized, age appropriate, open ended, labeled and accessible to children.
- There are enough materials in each area for several children to work together.
- Classroom displays reflect children's work and activities.
- Classroom rules are generated by the children and posted. Rules are phrased in positive terms, for example instead of saying "no running", say "walk".
- Classroom helper charts are posted.
- The classroom is inviting to families with displays of family photographs, parent information boards, and some adult sized furniture.
- Environments reflect diversity by including visual materials and activities that reflect diversity in gender, family composition, culture, language and ethnicity.
- Rooms are designed to be attractive, comfortable and orderly.

Infant and toddler classrooms are set up considering the needs, interests, and developmental level of each child. In these classrooms, it is the child who drives the curriculum. Teaching staff implement strive to plan based on relationships and adapt their behavior based on cues from the child. In addition, activities are offered that facilitate child-directed learning. Classroom areas include gross and fine motor materials, ~~sensory~~ opportunities, books, and ~~classroom~~ displays that reflect family backgrounds and diversity. For toddlers, materials are offered in logical groupings such as manipulatives, blocks, art, etc. to encourage independent exploration. Materials are rotated regularly as children's interests and disinterests are observed by staff. By encouraging communication with family members, classrooms are also able to reflect the experiences of home and neighborhood.

#### 3. Classroom Transitions

In both the Early Head Start and Head Start classrooms, instructional staff ensures that transitions are considered for each child. Transitions to and from indoor and outdoor activities are implemented intentionally, smoothly, and naturally. ~~Effectively managing and being thoughtful about transitions is important. Around three years of age children begin to internalize a schedule in that they can tell the difference between routine and transition activities from other activities during the day. When activities~~

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## Policies and Procedures Section 2: Child Development

during the day are predictable, it can help children begin to understand the concept of time. Well planned transitions make the difference between a difficult and a harmonious day for early childhood educators as well as for children. Anticipating what is coming next makes children feel they are in control of what is happening. The overall approach to classroom transition is:

- **Be proactive and be alert!** Have strategies to engage children who are having difficulties with transitions, and children who are learning the routines due to irregular attendance or being new in the classroom.
- **Always transition children in small groups**, and ensure children are assigned to a small group at enrollment. This reduces confusion, distraction, and waiting.
- **Plan ahead and make transitions fun!** Transitions are to be planned and anticipated, so that they are engaging for children and “empty” wait-time is minimized. Documentation on the Lesson Plan is recommended.
- **Prepare.** All teaching materials and small group activities are prepared ahead of time so they are ready for the day and easily accessible.
- **Have a back-up plan** for special events or sudden changes, such as when a staff member is out, or other emergencies arise during or before the transition.
- **Talk with the children** and let them know when a transition is going to occur. Give children a warning or signal 3-5 minutes before.
- **Review transition safety with the children** often and whenever needed, especially when providing required Pedestrian Safety at the start of the Program Year.
- **Follow the protocols** outlined in the Transition Head Count Policy and CLOUDS In-Transition feature, which include a visual count and the required sweep of the environment.
- **Always sweep** the environment before leaving the classroom or yard by physically walking the perimeter looking under and around thoroughly.
- **Communicate** counts with all team members.
- Quick and efficient transitions are a **CLASS expectation** in the Classroom Organization domain, Productivity dimension.
- **CSB has zero tolerance for lack of visual supervision!** All designated caregivers are to be present, engaged, and calm during transitions.
- There are a minimal number of transitions in the day.
- All transitions that require children exiting or entering the classroom must be conducted using the Hourly Headcount and Transition form (See Form CSD-700 Head Count Form and CSD-700 Hourly Head Count Protocol). Teacher placement is critical as the children transition, with one staff at the front of the group and one in the back. When there is only one staff member present, his/her placement must be such that she may be able to see every child as they transition.

### 4. English Language Learners

Education for English Learners is enhanced when preschool programs and families partner around children’s education. The learning environment includes usage of the child’s first language. Promoting language understanding and use in this atmosphere encourages easy communication among children and between children and adults. The following examples help promote language understanding:

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**Deleted:** <#>Instructional staff moves children from one place to another in small groups to reduce confusion, distraction and waiting. ¶  
<#>All teaching materials and small group activities are prepared ahead of time so they are ready for the day and easily accessible. ¶  
<#>Children are signaled in advance three to five minutes before transitioning to the next activity. ¶  
<#>Children are informed in advance before the next activity. Teachers may say “after we clean up, we are going to make a delicious snack.” ¶  
<#>Children are engaged in educational transition activities if they must wait (See Teachable Transitions Resource Book by Rae Pica for guidance.) ¶  
<#>There are a minimal number of transitions in the day. ¶  
<#>All transitions that require children exiting or entering the classroom must be conducted using the Hourly Headcount and Transition form (See Form CSD-700 Head Count Form and CSD-700 Hourly Head Count Protocol). Teacher placement is critical as the children transition, with one staff at the front of the group and one in the back. When there is only one staff member present, his/her placement must be such that she may be able to see every child as they transition. ¶

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- Give children ample time to talk to each other and ask questions in the language of their choice. Continued use and development of the child's home language will benefit a child as he or she acquires English.
- Encourage free discussions, shared experiences and conversation between children and adults.
- Provide games, songs, stories, or poems that offer new and interesting vocabulary.
- Encourage children to tell and listen to stories. Interest areas offer opportunities for teachers to teach content as children explore materials.

#### 5. The Project Approach

The CSB curriculum is enhanced by the project approach to learning. Projects are in depth investigations on a topic based on children's interests. Projects:

- Must be relevant to children's experiences.
- Topics of study must be real so that children can manipulate and explore real objects.
- Literacy, math, social studies, art, science and technology are incorporated into project investigations.
- Parents and caregivers are an integral part of the planning and implementation of projects.
- Project Components include:
  - Selecting a topic based on the children's interests
  - Creating a web: ideas to incorporate literacy, math, science, social studies, the arts and technology into the study
  - Opening events
  - Involving parents in the implementation of the project.
  - Project investigations
  - Field trips and visiting experts
  - Documentation of Project process
  - Closing events

#### 6. Program for Infants and Toddlers

The infant and toddler program is enhanced by the Program for Infant Toddler Caregivers (PITC) philosophy, which is based on the belief that infants have their own innate curriculum. The CA Department of Education partnered with PITC to create the state Infant Toddler Foundations and Guidelines. Goals are achieved through a responsive curriculum that is based on supporting the child's internal motivation to learn.

#### PITC Program Components ~~Include:~~

- Care in small groups
- Emphasis on strengthening the child's developing family and cultural identity so children develop a sense of who they are and what is important within the context of their culture
- Primary caregivers
- Continuity of Care
- Individualized schedules and routines
- Inclusion of children with special needs

#### 7. Ready to Learn Curriculum Enhancement

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Teaching staff implement strategies to assist children and their parents to successfully transition into a preschool or infant toddler classroom. Teaching staff facilitate this transition by welcoming new families; nurturing and bonding with children; modifying the classroom environment; establishing school rules; teaching health, safety and nutrition practices; helping children make friends; and by establishing caregiver groups upon entrance to the classroom.

#### 8. Anti Bias and Supporting Diversity

- CSB curriculum is based on an anti-bias, multicultural approach.
- Families are asked to share their culture and traditions.
- Food served at mealtimes is culturally inclusive
- Teaching staffs reflect the populations in the classrooms.
- Classroom activities and environments reflect children's ethnic identity.
- Environments include diverse visual materials such as pictures, books and photographs. Games, music, planned activities and books reflect diversity in gender, family composition, culture, language and ethnicity.

#### 9. Teacher/Child Interactions

Positive teacher child interactions build trusting, nurturing bonds between staff and children, which supports the children's developing a love of learning.

Teachers:

- Welcome children and families into the program daily.
- Foster positive social behaviors such as cooperating, helping, conflict resolution, and turn taking by using modeling, coaching and encouragement.
- Speak to the children at eye level and move to where a child is to speak with them directly.
- Use an appropriate tone of voice. Teacher's voices should not be heard above children's voices.
- Observe children to assess their level of cognitive development and social skills.
- Facilitate child initiated learning by offering children choices and providing them with materials to manipulate and explore.
- Engage children in conversations during work time, mealtimes and throughout the day. Encouraging verbal expression enhances children's self esteem and cognitive growth.
- Comfort children who are crying and validate their feelings.
- Engage in activities with the children on the floor by sitting on the floor with them unless a doctor's note with such limitation has been provided to the personnel office.

#### 10. Caregiver Groups

Upon entry, each preschool child is assigned to a caregiver group of six to eight children based on their developmental and individual needs. The teaching staff assigned to the caregiver group will plan and implement individualized activities for their group during small group time and assist them during classroom transition times.

Upon entry ~~infants~~ are assigned to a caregiver group of three ~~children per caregiver~~ and a caregiver a group of ~~no more than four~~ ~~toddlers~~. Infants and toddlers remain with the same caregiver possible

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throughout their enrollment in the program to ensure continuity of care. Caregivers design the learning environment to be responsive to the individual needs of each child.

#### Caregiver Groups during Transitions:

- It is CSB's policy to transition in small groups.
- Caregiver Groups are maintained throughout the daily activities, including transitions. Groups can be named after animals, shapes, etc. Each instructional staff works closely with that group at lunch and snack times, small group, bathroom time, hand washing, etc. For children, this reduces confusion, distraction and waiting around and promotes attachment with the primary caregiver.
- It is easier for a small group of children to go outdoors to indoors, get settled for nap, wash hands, etc. When children transition in their caregiver groups, teachers enhance bonding, group interactions, and language. Caregiver groups also enable instructional staff to meet individual needs and be more responsive to the children.
- When children are in caregiver groups, staff and children can take time for transitions and their schedule is more relaxed. For example, if children go outside in a small group, there isn't a mass rush to the door to get to the door first.

#### 11. Child Health and Safety

Teaching staff integrates health and safety lessons and activities into the daily lesson plan. Health curriculum includes: I Am Moving, I Am Learning Gross Motor Activities, **Little Voices for Healthy Choices**, oral health, pedestrian safety (first 30 days), sun safety, transportation safety, hygiene practices, home safety, emergency safety including: fire, earthquake, shelter-in-place and school safety.

Children wash hands upon entering school, before eating, after wiping noses, after touching animals, after sand and water play, upon returning from the play yard and after toileting.

Staff inspects classroom and outside area daily to ensure all facilities, furniture, materials and structures are safe and free from hazards. **Daily Playground Checklist (CSB form 136) is completed daily to document inspection of outdoor areas accessible to children.**

Teachers perform a daily health check of each child upon their arrival to school. **Refer to section 2, VI. A daily Health Inspections for further guidance.**

For infants and toddlers, this ~~practice is done~~ using the Daily Communication ~~Form where families and staff document for about each child~~ at the beginning and end of the day. The daily health check is also conducted ~~and documented on this form.~~

Teaching staff conducts head counts hourly and during transitions **using CSB form 700 in accordance with Head County Policy as described in CSB form 700A**, and checks that door alarms are set and all gates are secured **at all times.**

Children are **supervised at all times, and** always supervised while toileting.

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#### 12. Nutrition

Children participate in learning activities planned to affect the selections and enjoyment of a wide variety of nutritious foods.

Nutrition activities include: field trips, planting gardens, reading stories about food and nutrition, and sampling a wide variety of foods. Nutrition activities are planned for work time and circle time.

Children are involved in simple cooking projects including making their own snacks and sandwiches weekly. Teaching staff serve meals family-style at the centers. Children participate in setting the tables, serve themselves, pour their own beverages and scrape their plates.

#### 13. Language / Literacy Curriculum Enhancements

- **Reading is Fundamental:** A federally funded grant that provides for three book giveaways per child. Children participate in motivational activities prior to giveaways to encourage an appreciation of books and reading.
- **Learning through Literature Curriculum Enhancement:** Each month teaching staff receives a picture story book to read to their classroom that contains a written guidance of developmentally appropriate activities based on the content of the story to enhance children's learning.
- **Raising A Reader:** Colorful tote bags filled with books are taken home weekly by each child. Parents are encouraged to read to children daily and discuss the stories. Books are multicultural and include Spanish texts.
- **Books at Naptime:** Each child may choose a book to read to themselves on their mat for at least 10 minutes at the beginning of naptime.

#### 14. Pedestrian Safety

Children and parents are taught the importance of pedestrian safety within the first 30 days of school. This includes educational videos and materials on pedestrian safety for both children and parents, various classroom activities and educating parents at parent meetings.

#### 15. Television in the Classroom

Videos and DVD are not to be used in the classroom unless it is connected to a project topic or is approved as curriculum enhancement. Videos are not to be used for more than 15 minutes at a time. All videos and DVD **must** be approved by the site supervisor before they are viewed at the site.

#### 16. Lesson Plans

The Infant Plans, Toddler Plans, and Preschool Weekly lesson plans are designed to ensure that all classrooms provide developmentally appropriate activities consistent with Performance Standards, NAEYC Guidelines, and Creative Curriculum. **The plan** communicates to staff and parents the activities for each day of the week. The lesson plan must include strategies and activities that are consistent with the emergent, project based curriculum and focuses on the children's individual goals and IEP/IFSP goals. The teacher submits a completed lesson plan form to the Site Supervisor weekly for approval. An approved lesson plan is posted **in the classroom** by 8:00 A.M. Monday morning of the current week.

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Lesson plans are completed at the center by the teaching staff, with input from parents and volunteers (CSB-105A Preschool, CSB-105B Infant Classroom Plans and Weekly Possibilities and CSB-105 Toddler Daily Possibilities). ~~These~~ must include:

- Individualization: activities planned to meet the individual goals of each child including IEP/IFSP goals. Individualization is documented on the lesson plan by adding children's alphabetic code to the activities planned to help them meet their goals.
- Area Enhancements: List of materials that have been added to centers to stimulate children's interests.
- Projects: activities or materials that are provided to facilitate children's project investigations or explorations. Plan should include project related field trips and visiting experts.
- Center Activity: a teacher planned creative activity that children may choose to engage in during work time. Minimum of two science activities planned per week.
- Large Group/Circle Time – includes Music, movement, songs, finger plays, IMIL activities, short discussions, visiting experts.
- Small Group Time: a minimum of three small group language/literacy activities and two small group math activities must be planned.
- Outdoors time: list of activities or materials that will be offered to the children in addition to bikes and balls. I Am Moving, I Am Learning Curriculum enhancement activities must be listed. Outdoor science, art or building activities may be included.
- Health, Safety, Nutrition and Social Emotional activities should be listed at the bottom of the lesson plan in section entitled Weekly Activities Integrated into the Daily Routine. These activities must also be reflected in the upper body of the lesson plan under the appropriate category i.e. Work time, Circle Time, Small Group Time or Outside Time.

### 17. Required Elements of the Children's Daily Schedule

CSB daily routine blocks out times and establishes sequences for activities in the classroom. It includes active and quiet times, large and small group activities, outdoor times and adult initiated and child initiated activities.

- Greeting/ Health Check- each child and family member is warmly greeted when they enter the program daily. A brief health check is conducted by the teaching staff including touching of the child's skin and looking into their eyes. Staff may ask a child how they are feeling. Parents should remain during the health check and may be asked questions if there are concerns.
- Work Time / Independent Choices – Children have access to all interest areas in the classroom. Project investigations and center activities are offered as additional choices for the children. Teachers add materials for children's creative activities during this time. Teachers work with children ~~and ask~~ open-ended questions to stimulate and enhance child learning. A minimum of two science activities must be offered during the week. (Approximately 75 minutes in AM). For full day students, an additional ~~afternoon~~ work time of 60 minutes should be scheduled.
- Small Group Time – The class is divided into small groups of ten children maximum. This is a teacher-guided activity based on the developmental level of the group, (approximately 15-20 minutes ~~in length~~). ~~A minimum of three literacy/language activities must be planned weekly. Two small group activities a week should focus on math skills. Small group time activities may be conducted anywhere in the classroom or outside. Children must not be restricted to tables.~~

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- Large Group/Circle Time – Music, movement, songs, finger plays, IMIL activities, short discussions, visiting experts with large groups of children. Every child is offered the opportunity to participate but no child should be forced to attend circle. Alternate activities can be provided until a child wishes to join the large group. (Approximately 15 minutes).
- Outdoor Play - Children are able to use their large muscles and develop socialization skills; activities include tricycles, wagons, balls, games, water tables, obstacle courses, music, art, and dramatic play activities (not less than 30 minutes). Outdoor play is an extension of a child's learning environment experience and reflects the same care and planning given to indoor activity. For full time students, an additional 60 minutes of outdoor time should be scheduled in the afternoon.
- Meal Times - Breakfast, lunch and a snack are provided for full time students. Part time AM students receive breakfast and lunch and PM students receive lunch and snack. Infants and ~~toddlers~~ are fed on an individualized schedule. Mealtimes are learning times when teachers assist students with setting the tables, serving their own food and engage them in conversations. Breakfast and Lunch approximately 30 minutes, snack 15 minutes.
  - Teachers are role models for the children. Adult portions are to model the CACFP-USDA Meal Patterns for Ages Three to Five Years Old. (CSB Forms > Nutrition > CACFP-USDA Meal Patterns for Older Children).
  - Each child in a part-day program will receive one meal and one snack that provide at least 1/3 of the child's daily nutritional needs. A child in a full-day program will receive meals and snacks that provide 1/2 to 2/3 of the child's daily nutritional needs.
  - Any child who arrives after scheduled breakfast time will be offered a nourishing breakfast.
- Rest Time – Full day classrooms are required to schedule a one and a half to two-hour rest period. Infant and toddler classrooms also provide an "on demand" schedule for their routines, including napping. Every child is required to have a crib, cot or mat and once the children are resting, if all children are sleeping, one staff person may supervise the children. All children must be given an opportunity to rest without distraction or disturbance from other activities or children. Those unable to sleep may be given quiet activities to engage in. Teachers encourage children to rest by offering them a book, engaging them in soft conversation and gently rubbing their backs. No child is to be restrained on their crib, cot or mat at any time.
  - The napping space must be equipped with a sheet and blanket. The crib mattress, cot or mat is wiped with detergent as needed and disinfected weekly and when soiled or wet. Infant toddler bedding must be laundered daily. Preschool bedding is individually stored so that one child's used bedding does not come in contact with another's, and is to be laundered weekly.
  - Napping equipment is arranged to provide access to children and spaced to prevent the spread of germs. Cribs must be placed three feet apart. Cots are placed ~~eighteen~~ inches apart and children are placed napping so that each child is alternating head-to-feet.

#### 18. Infant Toddler Routines

Infant and Toddler Routines include:

- Nurturing time with the teacher caregiver
- Indoor and outdoor activities

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- Quiet and active play
- Group play and individual play
- Rest and relaxation on demand with a nap schedule for children over 12 months old.
- Feeding/eating and diapering/toileting on demand

#### 19. Parent Involvement in Planning and Implementing Curriculum

Parents are partners in the processes of planning and implementing curriculum, and are encouraged to participate in the program in a variety of ways:

##### i. Home Visits

- Initial Home Visit: Within the first 45 days of enrollment, teachers conduct a home visit. Parents begin to develop a positive relationship with their child's teacher through this initial communication. The home visit gathers information about parent's observations of their children and the goals they have for them. The initial home visit gives the child an opportunity to meet the teacher in a familiar setting and may be used to plan individual goals for each child. Staff should make every effort to conduct the home visit at the child's house. If parents request that teachers meet them in an alternate location or if they prefer not to have staff come to their homes, the other location will be considered "home visit." See "Initial Home Visit" form (CSB170-Initial Home Visit and CSB170IT-Initial Home Visit). If the parent chooses not to have the visit in the home the reason for that decision must be stated on the home visit form.
- Each new family will be given a CSB Child Development Brochure, a toothbrush and guidance for tooth brushing and hand washing. The teacher will also assist the parent to complete a DECA behavioral screening. Teaching staff will enter the parent DECA in e-DECA and print out the results and add it to the child's file.
- Returning Child Home Visit: For children who are enrolled for a second year in the program, the returning child home visit form should be completed (CSB-106). As with the initial home visit every effort should be made to conduct the home visit in the child's home. Teaching staff will distribute a toothbrush and hand washing/ tooth brushing guidance and assist the parent with to complete the DECA behavioral screening. Teaching staff will enter the parent DECA in e-DECA and print out the results and add it to the child's file.
- Final Home Visit: During the final home visit, the teacher and parent review the child's progress, portfolio and assessment results. They may establish new goals, discuss kindergarten readiness, plan activities for the parent and child to do at home and address questions or concerns the parent has.

##### ii. Parent Conferences

All parents must be given the opportunity to participate in two conferences a year. Conferences are not home visits.

- First Parent/Teacher Conference – Within 90 days of the child's first day of school, each parent will be given the opportunity to participate in a Parent/Teacher Conference. During this conference, the teacher and parent(s) will discuss the child's progress (based on results of the screening, assessments, observations, and child's work), and will develop an Individual Plan (IP). A minimum of seven goals to include; two social emotional, three cognitive, one motor and one

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~~health~~ and safety must be determined during the conference. If the child has an IEP, the IEP goals must ~~also be~~ included in the plan. DRDP 2010 measure numbers must be reflected next to the written goals. (See Form CSB118A-1st Parent-Teacher Conference.)

- Second Parent / Teacher Conference – A second Parent/Teacher Conference will be scheduled to review the child's progress/objectives set during the first Parent/Teacher Conference. New objectives will be developed if applicable. (See Form CSB118B 2nd Parent-Teacher Conference) For children going to kindergarten, a kindergarten transition packet may be reviewed with the parent during this conference or scheduled at a different time between December and March. Kindergarten transition packet checklist form should be added to the file with the second parent conference.

#### C. Parent Involvement and Participation in Program

##### Other Elements of Participation

- Parents have the opportunity to participate in planning and implementation of field trips.
- Families are encouraged to share their culture and traditions by volunteering in the classroom.
- Parents are provided with individualized home activities by the child's teacher to reinforce child's learning objectives at home.
- Family Literacy: A variety of family literacy programs are offered to support parents in helping their children develop a love and appreciation of books. These include Raising a Reader, Reading is Fundamental and First Books programs.

#### D. Home-Based Option

CSB's Home-based program option provides opportunities for parents to enhance the parent-child relationship, promote the education and development of their children, enrich the home environment to encourage their children's learning, identify and refer children with special healthcare needs, developmental delays, or disabilities. Home Educators serve as facilitators, educators, and a support system for parents and families. They act as vital links to the local community and resources. All services provided to the home-visited family are the same quality as those given in centers. For Early Head Start, the parent-child bonding and attachment is one of the most important home visitation goals.

The Home-based Option uses the center-based sites for socialization and plans activities with the parents to use the home as their primary learning environment.

Head Start's Home-based Option services include:

- Providing one home visit per week per family (a minimum of 42 home visits per year), lasting for a minimum of 1.5 hours each.
- Providing a minimum of two group socialization activities per month for each child (a minimum of 16 group socialization activities each year).
- Nutrition objectives are accomplished through both home visits and group socialization activities. The emphasis is on nutrition education, helping parents learn to make the best use of existing resources. Parents receive information and guidance on menu planning, consumer education, and money management.
- Home Start

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Home Start is a locally designed option to meet the unique needs of our children and their families in collaboration with exempt providers in Contra Costa County. It is a model designed to support the parent's work toward self-sufficiency. It insures quality services for the children, their families, and providers; enriches the exempt providers' home environment to encourage young children's learning; provides early intervention services for the children and their families; identifies and refers children with special health care needs, developmental delays, or disabilities. The program builds bridges for the exempt providers and families to link them to local community resources.

The program maintains an average of 10 to 12 families per Home Educator with a maximum of 12 families for any individual Home Educator. Services include:

- One home visit per week for each child and provider lasting for a minimum of 1.5 hours each
- Two group socializations activities per month for each child. During socialization, activities and training are planned for parents and providers to increase their knowledge about child development issues.
- Monthly parent meetings are planned for all the parents. Parenting classes, parents support groups, and trainings are scheduled through the year.
- All services provided to the home-visited providers are the same quality as those given in centers. The only difference is the home setting is used as the learning environment, and the provider is the educator.
- The resource center for parents and providers allows parents to meet and use materials in a central location. Materials include manipulative and educational games for children, books, and audio and visual training materials for parents and providers.

#### E. Classroom Assignments

Children are assigned to classrooms and teachers in accordance with their needs, available space, and other relevant variables. Each classroom must have a roster listing all enrolled children. The Site Supervisor notifies the teachers of new enrollees.

Copies of class rosters are continuously available on our CLOUDS System and are kept current as children enroll or leave the program.

Classroom rosters do not list more than twenty children on any given day, per federal enrollment regulations except if a waiver has been granted. State Preschool not receiving HS funding may enroll 24. CSB centers maintain a minimum class size of at least 95% and a maximum of twenty children, and must never exceed the licensing capacity of the classroom.

#### F. Adult-to-Child Ratio

CSB's part day Head Start program is governed by California Community Care Licensing Title 22 Regulations which require a 1:12 ratio. However, Head Start regulations require that the maximum class size is 20 (unless a waiver is granted), so the adult-to child ratio in these classrooms is 1:10.

CSB's California Department of Education programs, including those combined with other funding such as Head Start and Early Head Start is governed by California Community Care Licensing Title V

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Regulations which require the following ratios: For children ages 3-5, 1:8; for toddlers, 1:4; for infants 1:3. For preschool classrooms, Title V regulations allow a classroom to be out of ratio for up to 120 minutes per day. These 120 minutes allow for rest time in early morning or late afternoon and do not apply during the core instructional time of day. During those times, children must be supervised according to the Title XXII regulation of State Licensing at 1 teacher per 12 children.

Children under three years of age may not be in groups with more than eight children. Each full-day classroom is staffed with a qualified Teacher and 2 Associate Teachers. If this is not possible, an Associate Teacher may be substituted for a Teacher and a Teacher Assistant Trainee for an Associate. Each part-day classroom is staffed with two Teachers and Teacher Assistant Trainees.

The EHS Infant and toddler classrooms have the following ratios: Infants (birth – 18 months) is one to three (1:3) and toddlers (18-36 months) is one to four (1:4). Maximum group size for infants is six at all times. Maximum group size for toddlers is 8 at all times.

All staff inside the classroom and outside in the yard are responsible to ensure that all children are visible at all times and that they are being supervised at every moment. Teaching staff supervise infants and toddlers/twos by sight and sound at all times.

### G. Sign-In and Out Procedures

#### 1. Signing-In

Everyone must sign in at a center: visitors and guests. Upon arrival, every child must be signed in by a parent, friend or relative over 14 years of age, denoted on the emergency contact list. The full signature is required, along with the time of arrival. If a child arrives at the center unaccompanied, teaching staff must bring that child into the center, and contact the parent (and State Licensing) immediately so they may return and properly sign in the child. Failure to sign children in properly may require a referral to County Child Protective Services.

For our part-day sessions, if a parent and his/her child arrive before the start of session or stay after the closing of the session, the teaching staff will remind them that the child is the parent's responsibility during that time.

#### 2. Signing-Out Procedures

The parent must always sign a child out at the end of the day.

Children who leave and return to the center during the day must be signed out and in by an authorized adult, e.g. a child leaving for a doctor's visit.

Adults who arrive at the center to pick up a child must be listed on the Children's Center File Emergency Card. Picture identification must be provided before child is released. It is the teacher's responsibility to keep emergency numbers current. At least two people must be listed who can pick up the child in an emergency.

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If a person picking up the child is not on the emergency form, written preauthorization from the parents is required before CSB staff will release the child from the center. Children will not be permitted to leave the center unless accompanied by a preauthorized adult. Parents may not give verbal authorization for pick-up of children.

#### 3. Child Release Policy

The safety of the children is the priority for all CSB staff; therefore the following policy must be enforced at all times:

- All parents are required to complete emergency forms during the enrollment process. Emergency forms with the names and telephone numbers of persons authorized to pick up the child will be kept in the child's file. Emergency forms must be updated at least every 12 months or anytime information changes.
- Photo identification will be required of all newly authorized individuals or individuals not recognized by staff prior to release of the child. Under no circumstances will a child be released to an unauthorized person.
- If CSB personnel are not certain the pick-up person is who he/she claims to be, the child will not be released.
- Staff will not release children if the person picking up the child smells of alcohol or if staff has reason to believe the person is under the influence of alcohol or other foreign substance.
- Staff will not release children to the person picking up the child if there is a court ordered restraining order on file against the person.
- Children will not be forced to leave the center with someone they are not familiar with.

#### 4. Sign-Out Disputes Due to Child Custody Issues

If a parent requests that the other parent not be allowed to remove a child from the center, Site Supervisor or Head Teacher must request a copy of the court order, and place it in the child's file in the locked cabinet.

The parent must be informed that CSB is not a law enforcement agency and cannot undertake that role. (A parent cannot be denied access to his/her child unless there is a Court Order.)

If a dispute over custody should occur in the classroom, the teaching staff will deal with the family calmly. The staff will ask the person if they would like to talk with a Supervisor. If it seems likely that the parent may become violent, the teacher may release the child, and inform the parent that they (teacher) must call the police as soon as the likelihood of violence becomes apparent. Should the parent leave with the child prior to the arrival of the police, the teaching team must be prepared to provide a description of the person, the car, and the license plate number. The teacher must call her/his Site Supervisor to report and document the incident. Such unusual incidents must be reported to an Assistant Director and to Community Care Licensing using the standard procedure.

#### 5. Adults Signing Their Child In or Out While Under the Influence of Alcohol or Drugs

If the parent appears to be under the influence of drugs or alcohol, the teaching staff must call 911 immediately to notify the police. They must attempt to keep the adult at the center by discussing the child's day or other broad topics until the police arrive. One staff member will call an Assistant Director

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and inform him/her of the problem. Allow the person to take the child if he/she insists on leaving, or the staff and children are physically threatened. The staff must get the license number of the vehicle for the police. If this happens, the teaching staff must:

- Call the police
- Call County Child Protective Services and file a child abuse report
- Make an unusual incident report to Community Care Licensing.

If the police arrive at the center while the adult is still present, it is their responsibility to determine what further action should be taken. Only a police officer can officially determine if an adult is intoxicated.

#### 6. Late Sign-Out Procedures

A parent is considered to be late when he/she has not picked up their child by the agreed upon time. Staff should not call parents to pick up their children before these times. (See Form CSB132-Late Child Notice Procedure) When a parent is late, the teaching staff will implement the following procedure:

- First Time - The staff will verbally inform the parent of the importance of picking up their child on time. This must be documented on the child's folder at the center.
- Second Time - When the child is picked up, the staff will give a late child notice to the parent. A copy of this notice will be kept in the child's file at the center.
- Third Time - The staff will call the Site Supervisor. The Site Supervisor will inform the parent that if this occurs again the child will be suspended from the center and placed on the waiting list. The Site Supervisor will give a "Late Child" letter to the parent. A copy of this letter will be placed in the child's folder at the center. (See Form CSB132.)
- Fourth Time - The staff will call the Site Supervisor, who will inform the family that their child will be placed on the waiting list. If the family receives collaborative funding from the CA Department of Education, a formal Notice of Action will be given terminating the state funding after the 14-day grace period for appeal. The Site Supervisor will notify the Assistant Director and the Comprehensive Services Assistant Managers of the change in that child's status.

Closing Time - If a child has not been picked up by closing, and no one can be reached to pick up the child, the Site Supervisor will determine the plan of action (which may include calling Child Protective Services). CSB staff must never transport children from the center via vehicle or on foot.

#### 7. Full-Day Program Sign In/Out Procedures

The number of hours for each child enrolled in a full-day program is based upon their Contracted Hours Agreement, completed with the staff responsible for enrollment at that site. All full-day children must be signed in according to their contract hours. Each parent will have an individual sign-out time based on their unique needs for full-day services and Contract Agreement. The same procedures for late pickup are to be followed although "late" times will vary according to the parent's contract hours. Parent(s) may request a change in hours through "Request for Change of Contract Hours" form. (CSB-607)

#### H. General Classroom Celebration Policy

##### 1. Description

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The Community Services Bureau avoids endorsing commercialism surrounding the holidays. The focus is about learning and celebrating diversity. The following guidelines are followed when planning activities with staff and parents:

- Holidays are not a major part of the curriculum. They are integrated within the total curriculum. No more than a few days and few activities are dedicated to any holiday.
- Holidays are not a theme and the whole room is not to be decorated reflecting a holiday.
- Learning about holidays broadens children's awareness of their own, and other cultural experiences. Activities must be thoughtfully planned and implemented for inclusion of all children and families.
- Every group represented in the classroom (children and staff) is to be honored.
- Teachers must not assume that everyone from the same ethnic group celebrates holidays in the same way. Teachers check with the families to ensure that activities are indeed reflective of the cultures represented in the classroom.
- Teachers must plan strategies for working with children whose family beliefs do not permit participation in holiday celebrations. Their parents are to be included in planning a satisfactory alternative for these children in the classroom.

#### 2. Children's Birthdays

Children's birthdays are very important and birthday celebrations are as unique as each child. However, the classroom's daily routine should not be changed to accommodate birthday celebrations. Because children learn by example, and to reinforce the nutrition education in the classroom, the following ideas are suggested:

- Giving and/or reading a book to the child and classmates
- Bringing educational toys to share
- Bringing a baby book or other symbolic item, or a special family story to share
- Lead a game
- Decorating the classroom
- Performing magic acts
- Leading a nutritious class project (any food provided cannot be served in place of regular food service)

#### 3. Inappropriate Activities in the Classroom

- Staged performances, plays, and ceremonies where children have memorized vocal parts or if rehearsals are required
- Lectures, where children have to sit and listen for a long period of time
- Commercial displays
- Adult-directed activities that focus on a product rather than a process (i.e., patterned art / work)
- Combined classrooms with large groups of adults and children.
- Graduation ceremonies with caps and gowns

#### I. Field Trips

##### 1. Procedures

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Field trips complement the classroom educational experience, current curricula, and must be developmentally appropriate. Field trips encourage hands-on exploration and experimentation. Field trips permit the child to learn about his/her world (school, neighborhood, and community).

Site supervisors must inform Nutrition office one week prior to date of a field trip using the Field Trip Form (CSB-115). All field trip lunches will consist of sun butter sandwiches, string cheese, fruit, vegetable, and milk.

Parent volunteers are encouraged to plan and participate in field trips. Only children enrolled in the classroom taking the field trip may participate. Parents may not bring siblings or other children on the field trip.

Parents may drive their own child to a field trip after signing their child out of school. Parents may not drive other students or parents on a field trip.

Field trips are approved in advance by the Site Supervisor and are documented in the classroom lesson plan. Teaching staff notifies the Site Supervisor or designee when leaving/returning from the trip.

Parental permission slips are required for all field trips (CSB-114). Transportation is provided as needed, primarily for staff and children.

Travel time for field trips should be no more than 60 minutes in length, round trip, and allow for heavy traffic conditions when necessary. Walking field trips are encouraged, with the destination within a half-mile radius of the center.

- A field trip should be completed within three hours, including lunch and transportation.
- Full-day programs require a two hour nap/rest period. A field trip should not interfere with the regular naptime schedule.
- Requests for additional time for field trips may be submitted to the Assistant Director for approval.

Size of group – no more than one group of twenty children may go at one time. AM and PM classes do not combine or change program hours to go on a trip. Adult-to-child ratio on all field trips is a minimum of one adult for every four children (1:4). This ratio may be adjusted lower (1:3 or 1:2) at the discretion of the teacher or Site Supervisor. Staff (and volunteers) must have assigned groups of children for whom they are responsible at all times. Each group must stay together, within the teacher's area of vision/supervision. Teachers are responsible for ensuring that each adult volunteer properly supervises his/her assigned group of children on the field trip. Attendance on field trips will be taken at the following times:

- Upon leaving the center
- On the bus or van
- Upon arrival at the destination
- At random times during the field trip
- When boarding the bus or van for the return to the center
- After return to the center

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## Policies and Procedures Section 2: Child Development

Emergency information for each child, three blank accident forms, a cell phone, and a First Aid Kit must be taken on walking or driving trips. (CSB-113-Field Trip Information and CSB-1015-Vehicle Use Request Form)

- During field trips, each child must wear a tag at all times that only identifies the name of the center and the center's telephone number on the front. Child's name may be written on the back of the tag, but never on the front.
- Field trip leaders must keep to their schedule, or call the center if there are any changes.
- If there are insufficient adults, inclement weather or any circumstance that would make it less than an optimal experience, the trip must be cancelled. A well-planned field trip taken under adverse conditions or circumstances may become a danger.

### 2. Planning Protocols

When planning a field trip, the following must be completed:

- Establish educational goals and objectives for the planned trip
- Teacher, or their representative, is to visit the destination to check travel time and accommodations, and to ensure the safety of the children
- The field trip planning form must be completed and submitted one month prior the field trip
- If applicable, the request for change of menu and purchase requisition must be completed and submitted one month prior the field trip
- Parents are notified at least two weeks in advance of the upcoming trip, at which time they are encouraged to volunteer for the trip
- Children are prepared for the trip at least one week in advance through in-class discussions of field trip safety

#### In Case of Minor Accident at Site or on Field Trip

- A designated staff member with a valid First-Aid Certificate assesses the situation, and renders first aid if necessary.
- If a minor accident occurs on a field trip, the teacher of an injured child must notify the child's parents on return to the center. (As noted above, the emergency contact list must be on hand.)
- The "Band Aid Report" form is completed, signed, and dated.
- The teacher retains one copy for the center and gives one copy to the parents.

#### In Case of Major Accident at Site or on Field Trip

- The teacher calls paramedics immediately. Classroom staff assesses the situation, and renders first aid as indicated for life-saving measures.
- Injured children are taken to the nearest emergency facility and the teacher or Site Supervisor accompanies the child.
- The teacher of an injured child must notify the child's parent(s) immediately. (The emergency contact list must be on hand.)
- The teacher must immediately notify the Site Supervisor, who will notify the Assistant Director and/or the Bureau Director or designee.
- Licensing must be notified by telephone (with a follow-up of the "Unusual Incident/Injury" report) as soon as possible.
- The parent may accompany the child in the emergency vehicle.

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- If the parent is not at that location, the child's teacher accompanies the child in the emergency vehicle.
- If necessary, CSB staff will provide transportation for the parent to/from the emergency facility.
- The "Accident/Incident Report" form (See Form CSB208) is completed, signed, and dated by the staff person involved in the situation.
- An insurance form is also completed, signed, and dated.
- The teacher retains one copy of the "Accident/Incident Report" and insurance form for the center, and submits copies of the reports (within 24 hours) to the Site Supervisor.
- The Site Supervisor submits copies of these reports to the Assistant Director and/or the Bureau Director.
- The CDE must be notified by the Bureau Director if the client is in a program funded by the state.

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#### V. Child Nutrition

##### A. General Description-Identifying Children's Needs

To implement a comprehensive system of services for preventing health problems and intervening promptly when they exist, comprehensive services is responsible for identifying cases for nutrition referral, follow-up and parent conference referrals.

##### B. Nutrition Referral

Comprehensive Services Assistant Managers and Clerks perform the following:

- Review medical records, health histories and growth assessments
- Identify nutrition risk following the guidelines listed below
- Initiate nutrition referral in CLOUDS
- Update existing referrals instead of creating new ones, so that all relevant case notes are kept together
- When talking to the parents, use nutrition terminology as indicated on the "What To Say and What To Do" protocol (see Shared Folder > Nutrition > Training-Flyers) based on the specific nutrition risk when the child has a nutritional risk
- Complete WIC/Food Stamp screening form with parent, and provide other nutrition resources as appropriate (weight, iron-rich foods, picky eater, lead poisoning, and other areas of concern)
- Encourage parents to attend nutrition presentations, such as at parent meetings
- Document in CLOUDS all actions/services provided to parent.
- Initial and date all documentation
- Identify nutrition risk following the guidelines listed below

##### 2. Guidelines for Identification of Nutritional Risk

###### Iron Deficiency Anemia – Criteria

Criteria for Providing Nutrition Information to Child's Parent			
Age / Years	Sex	Hgb	Hct
< 2	Both	11.4 – 11.0	34.9 – 32.9
2 < 5	Both	11.4 – 11.1	34.9 – 33.0
5 < 8	Both	11.9 – 11.5	35.9 – 34.5
Criteria for Initiating Nutrition Referral and MD Referral			
Age / Years	Sex	Hgb	Hct
< 2	Both	10.9 or less	32.8 or less
2 < 5	Both	11.0 or less	32.9 or less
5 < 8	Both	11.4 or less	34.4 or less

###### Blood Lead Levels

Provide nutrition resources to parents if child's blood level is below 10 ug/dl. If child's blood level is 10 ug/dl or greater, a referral should be made to the Comprehensive Services Health Manager.

###### Diabetes

If child has been diagnosed with diabetes, obtain "Child Diabetes Care Plan" from child's MD.

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## Policies and Procedures Section 2: Child Development

### *Underweight*

Input child's height and weight under Growth **Assessment** in CLOUDS to determine nutritional status. Refer children with underweight status.

If child's status is underweight and there is a family history of small stature, a nutrition referral should not be made. If CLOUDS triggers an automatic referral, click "no referral needed," and explain why under comments, unless there are additional concerns such as:

- Failure to thrive
- Developmental disabilities
- Anemia

For infants, initiate nutrition referral if following values are determined after plotting on the growth chart:

- Weight-for-age < 3-5%
- Weight-for-length < 5%
- Head circumference < 5%

### *Overweight & Obese*

To effectively manage Child Health and Developmental Services, nutrition follow-up must be accomplished in a timely manner and monitored through resolution of the problem. Assigned staff is responsible for the following.

- Comprehensive Services Clerks
  - Follow steps as indicated on the "What To Say and What To Do" protocol (see Shared Folder > Nutrition > Training-Flyers).
  - Download updated list of Overweight and Obese children, and distribute list to the **respective** Site Supervisors & Partner Agency Staff.
- Comprehensive Services Assistant Managers
  - Monitor to make sure follow-up is completed.
- Site Supervisor and Partner Agency Staff
  - Obtain updated list of Overweight and Obese children from the Comprehensive Services Clerks.
  - Distribute updated list of Overweight and Obese children to the respective teachers in the classrooms.
- Teachers
  - Place updated list in "Nutrition Alert" binder.
  - Follow nutrition interventions for Overweight and Obese children in the classroom as indicated in the Nutrition Alert binder.
  - If child is extremely underweight or obese, staff will follow policies and procedures related to reporting suspected child abuse and neglect. Nutritionist and Health Services Manager are available for consultation as needed.

### 3. Picky Eaters

When picky eaters are identified, Comprehensive Services Assistant Managers and/or Clerks are responsible for providing the nutrition handout to parents, and to document actions and conversations in CLOUDS in the comment section under Health History. No referral is needed.

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#### 4. Tube Feeding

Case management must be conducted with the family and a public health nurse before any child with a feeding tube can be admitted to the program. If, after case management, enrollment is deemed feasible and reasonable, Community Care Licensing must be informed in writing of CSB's intent to provide tube feeding. A care plan must be developed and LIC 701B is to be used to document permission by licensing and the medical provider. Staff must also be trained by a qualified health care professional.

#### 5. Special Meals and/or Accommodations

If dietary modifications are indicated based on a child's medical or special dietary needs and/or religious/personal/cultural belief, the Nutritionist will modify or supplement the child's diet on a case-by-case basis, in consultation with parents and the child's medical provider.

#### 6. CSB is a Peanut-Free Program

Each CSB center is designated a Peanut-Free Zone. CSB does not serve foods that contain peanuts due to this increasing health risk in young children. The prevalence of childhood peanut allergies has increased dramatically in the past few decades. Peanuts are currently the leading food-related cause of severe life-threatening allergic reactions.

#### 7. Food Allergies and Special Diets

When food allergies and special diets are identified, the following will apply

Comprehensive Services Assistant Managers, Clerks, Site Supervisors, and Site-Based Clerks must:

- Identify food allergy/intolerance or need for special diet if any.
- Immediately give parent a "Medical Statement to Request Special Meals and/or Accommodations" (See Form CSB401). This form is to be used only for food allergies and/or intolerances, and is not complete without the designated healthcare provider's signature.
- Use Request for Special Meals Due to a Cultural, Religious, and/or Personal Beliefs form for non-medical special diets (see Form CSB402). This form is not be used for personal food preferences.
- Follow-up with parent until form is returned.
- Submit completed forms to Nutrition Office two business days prior to child's first day. Original to be kept in child's file, with copy sent to Nutrition Office.

Site Supervisor or assigned staff must:

- Schedule case management with Comprehensive Services Assistant Manager before child starts in the program if food allergy is life-threatening or if several different food items are restricted so that meal pattern becomes unbalanced.
- Post meal modifications weekly in both kitchen and classrooms, with names covered for privacy.

Cooks and transporters are responsible for:

- Checking posted meal modification to confirm accurate food preparation and delivery.
- Reviewing meal modifications and addressing any questions to the Nutritionist.

The Comprehensive Services Assistant Manager is responsible for consulting with the Nutrition Office regarding the possibility of accommodating other food substitutes necessary to meet child's needs.

Nutrition Clerk is Responsible For:

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- Adding child's name to the Allergy List of the center in which child is enrolled.
- Forwarding copy of list to center.
- Updating list as information is received from Site Supervisor or Comprehensive Services for children who are enrolled or dropped from program.
- Keeping on file in Nutrition Office the Medical Statement to Request Special Meals and/or Accommodations form and Request for Special Meals Due to a Cultural, Religious, and/or Personal Belief form.

#### 8. Menu Change Protocol for Food Allergy/Modifications

The Nutritionist is responsible for any food modifications/substitutions. When a recommended food item is not available:

- The Nutritionist will be immediately notified by FS Worker III, FS Manager, or AD. Nutritionist will give an alternate food substitute.
- If Nutritionist is not available, the FS Manager will check past meal modifications to determine appropriate substitution. FS Manager will inform kitchen staff of change.
- FS Manager will also inform Nutritionist when substitutions have been made.
- If FS Manager is also not available, the Supervising AD will check past meal modifications to determine appropriate substitution. Supervising AD will then inform kitchen staff of change.
- Supervising AD will also inform FS Manager and Nutritionist when substitutions have been made.
- Nutrition Office will inform Site Supervisor or assigned staff of food substitutes.
- Kitchen staff is not to make any substitutions without approval from Nutritionist, FS Manager, or Supervising AD.

#### 9. Heights and Weights

As part of nutrition screening, heights and weights must be taken regularly by designated staff to determine the nutritional status of each child.

The Child's Teacher is responsible for:

- Following height and weight protocol when filling out Height & Weight log.

Comprehensive Services Clerks are responsible for:

- Recording heights and weights in CLOUDS from the Height & Weight Log completed by the teachers.
- Returning Height & Weight Log to Site Supervisors for grantee and Site Directors for the partners.
- Plotting Early Head Start length-for-age, weight-for-age, and head circumference-for-age on growth chart whenever information is available on well baby exam based on periodicity schedule.

Site Supervisor (Grantee) is responsible for:

- Distributing back to respective teachers the Height & Weight Log to be filed in the Nutrition Alert binder.

Site Director (Partners) is responsible for:

- Filing Height and Weight log in the Height and Weight binder.

#### C. Child Adult Care Food Program (CACFP)

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## Policies and Procedures Section 2: Child Development

### 1. General Description

To ensure our participation in the USDA Child Nutrition Program, the following must be accomplished by assigned staff.

Site Supervisor or designee is responsible for:

- Completing CACFP form before child attends school, or upon enrollment.
- Completing CACFP enrollment document.
- Filling in days and hours child attends and types of meals served to child while in attendance.
- Ensuring enrollment document is signed and dated by the parent.
- Parent's completion of ~~Meal Benefit~~ form for children ~~being~~ enrolled, ~~and for signing Meal Benefit form.~~
- Determining eligibility using current eligibility guidelines.
- Collecting enrollment document and meal benefit form from July 1st to October 31st.
- Sending a CACFP form and CACFP enrollment document to ~~the~~ Nutrition Office.
- Completing Enrollment Eligibility Roster each month, which includes:
  - Listing new children for the current month.
  - Determining whether child is free, reduced or base.
  - Marking whether child is in Head Start.
  - Listing child's certification date.
  - Listing children who have dropped for the current month and the drop dates.
  - Sending monthly Enrollment Eligibility Roster to Nutrition Office by the 5th of the following month.

### 2. Non-Discrimination in Child Adult Care Food Program Services

Community Services Bureau Head Start will comply with Title VI and Title VII of the Civil Rights Act of 1964, Title XI of the Educational Amendments of 1972, Title II of the Americans with Disabilities Act of 1990 and Section 504 of the Rehabilitation Act of 1973.

Each center will prominently display the "And Justice for All" poster.

Staff will receive annual training on Civil Rights requirements and on handling Civil Rights Complaints. Nutrition Office will monitor and oversee training.

### D. CACFP Monitoring

To ensure compliance and meet CACFP requirements, all grantee sites must be monitored three times a year.

The Nutritionist is responsible for:

- Unannounced monitoring of mealtimes.
- Conducting CACFP facility reviews three times per classroom per academic year.
- Using CACFP Centers Facility Review form (see Form CSB440).
- Reporting findings to Site Supervisor or designee immediately after monitoring.
- Writing corrective action plan based on recent findings.
- Sending findings to the Assistant Director.
- Sending original copy of CACFP Center Facility Review form to Nutrition Office.
- Following up to confirm completion of corrective action within 60 days of findings.

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- Completing CACFP 5-day reconciliation to ensure accuracy of meal claims by each site.

Site Supervisors are responsible for:

- Implementing corrective actions and/or responding to monitoring report within 2 weeks.
- Sending Nutritionist documentation of the corrective action plan taken and date of completion, e.g. Individual/Small Group Conference form, agenda and sign-in sheet for verification of completion of corrective action

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#### VI. Child Health and Safety

##### A. Daily Health Inspection

The teacher is mandated by Licensing to perform a daily health check of each child. The daily health check is performed when greeting the child and parent as they arrive. Parents are requested to remain present while the teacher performs this quick assessment which usually takes less than a minute. The Daily Health Inspection is a head-to-toe check of emotional and physical well-being. This is an effective tool to develop a baseline of what is normal for each child. This exercise helps the teaching staff reduce the spread of illness and establish rapport with the child and parent each day. It is important that this health check be conducted in the form of a greeting and that no invasive inspection, such as lifting clothing, or discussing findings out loud in front of others, should take place. For preschool classrooms, team members will complete the Daily Health Check log (CSB for 230) to document completion of the Health Check for each child in attendance. For infants, the daily health inspection includes a diaper change and is documented on the Daily Communication Form (CSB form 155). Teachers must also observe the child throughout the day.

To complete a daily health inspection, the teacher will do the following:

- Listen: Greet the child and parent.
  - Ask the child "How are you today?"
  - Ask the parent the following questions:
    - "How's (name of child)?"
    - "Was there anything different last night?"
    - "How did he/she sleep?"

Listen to what the child and parent tell you about how the child is feeling. If the child can talk, is he/she complaining of anything? Is he/she hoarse or wheezing?
- Look: Get down to the child's level so you can see him/her clearly. Observe signs of health or illness:
  - General appearance (e.g., comfort, mood, behavior, and activity level)
  - Is the child's behavior unusual for this time of day?
  - Is the child clinging to the parent, acting cranky, crying, or fussing?
  - Does he/she appear listless, in pain, or have difficulty moving?
  - Breathing: Is the child coughing, breathing fast, or having difficulty breathing?
  - Skin:
    - Does the child look pale or flushed?
    - Do you see a rash, sores, swelling, or bruising?
    - Is the child scratching his/her skin or scalp?
  - Eyes, Nose, Ears, Mouth:
    - Do the child's eyes look red, crusty, goopy, or watery?
    - Is there a runny nose?
    - Is he/she pulling at his ears?
    - Are there mouth sores, excessive drooling, or difficulty swallowing?
- Feel: Gently run the back of your hand over the child's cheek, forehead, or neck.
  - Does the child feel unusually warm, or cold and clammy?
  - Does the skin feel bumpy?
- Smell: Be aware of unusual odors.

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- Does the child's breath smell foul or fruity?
- Is there an unusual or foul smell to the child's stools?
- Pay particular attention to a child who has been absent or exposed to contagious disease.

After doing the health check, teacher must now use findings to determine if the child looks healthy or sick. Use this chart to identify signs of health and illness:

	Looking Healthy	Looking Sick
General Appearance	Comfortable Cheerful, responsive Active, playing Behavior appropriate for child and time of day	Excessive crying, clinginess, fussiness Doubled over in pain, unable to move Listless, lethargic, unresponsive No appetite Vomiting, diarrhea
Breathing	Breathing slowly Relaxed Quiet	Breathing fast Difficulty breathing Sucking in around ribs Flaring nostrils Persistent Cough Wheezing
Skin	Normal skin color and texture for child Normal skin temperature No rashes, sores, swelling, or bruising No scratching at skin or scalp	Pale, grayish, flushed, yellowish Hot or cold and clammy skin Skin rash, sores, swelling or bruising Scratching at skin or scalp Skin doesn't spring back when pinched
Eyes, nose, ears, and mouth	Eyes bright and clear Nose clean Ears clean Mouth without sores, swallowing comfortably	Eyes swollen, red, crusty, goopy, watery, yellowish, or sunken Nose congested or runny Ears draining pus or blood Pulling at ears Mouth or lips with sores, excessive drooling, difficulty swallowing
Odors	No odor or normal odor for child	Breath smells foul or fruity Stool smells foul

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### B. Hand Washing

Hand washing is the single most important routine in disease prevention. Both children and staff are required to wash hands upon arriving to work or school, before eating, before/after preparing or serving food, and after outdoor play, after wiping noses or using the bathroom, after handling animals/pets, before and after medication administration, and before and after gloving.

All adults and children in the classroom should follow the procedures for proper hand washing:

- Use soap and running water
- Scrub your hands vigorously for at least 20 seconds
- Wash all surfaces, including:
  - Backs of hands
  - Wrists
  - Between fingers
  - Under fingernails
  - Under and around rings
- Rinse well
- Dry hands with a paper towel
- Turn off the water using a paper towel instead of bare hands

### C. Infection Control in the Classroom

In addition to Universal Precautions, the following measures are recommended for infection control in the classroom. It is the teacher's responsibility to insure that simple routine practices which reduce disease risks in the group setting are implemented in the classroom. These practices include:

- Hand washing
- General environmental sanitation
- Sanitary food service
- Good personal hygiene
- Careful diapering procedures
- Prompt exclusion of children and adults who have signs and symptoms of communicable disease
- Placement of cribs at least 3 feet apart and cots at least 18" apart

### Hygiene - Universal Precautions

#### 1. Training

All teachers, site supervisors, managers and food service staff will be trained annually on food sanitation and safety. At least one employee in the Central Kitchen must be trained and certified in Safe Food handling through ServSafe.

#### 2. Tuberculosis (TB) Tests

Licensing requires that proof of a negative TB test or chest x-ray of staff and volunteers (except student volunteers under the age of 18) must be kept in the center Licensing Folder. Resources for obtaining a TB test are available for parents and other volunteers in need.

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### 3. Standard Precautions

Precautions should be used at all times to protect staff and volunteers from the risk of being exposed to blood, fecal material, vomit, urine, or other potentially infectious materials.

CSB Standard Precautions procedures apply to all program staff and volunteers. They will maximize worker protection from the spread of communicable disease resulting from occupational exposures to blood or other potentially infectious materials. Staff will take the same precautions -- hand washing, use of gloves, disinfecting, and other safety measures -- when dealing with the blood or body fluids of all children and adults, whether or not they appear sick.

CSB will supply staff with appropriate standard precaution personal protective equipment (e.g., gloves, aprons, mouthpieces for CPR). The program will ensure that all program staff receives training in the use of all this equipment.

CSB trains staff on standard precautions as a function of the American Red Cross First Aid certification course. Re-certification is required every three years.

If anyone has questions regarding the appropriate use of this equipment, call the Comprehensive Services Health Manager. If your personal protective equipment becomes damaged or lost, ask for a replacement immediately.

### 4. Diapering and Toileting Procedure

#### i. Description

Since diapering and toileting are every day procedures for staff, and are a possible way that infectious diseases can be spread, it is extremely important that proper techniques be used at all times. It should also be noted that no child may be denied the opportunity to participate in any program on the basis of toilet training. The program does not make successful toilet training a condition of enrollment.

Each child must be kept dry at all times. The center staff must ensure that there are sufficient changes of clothing and diapers. Each child's clothing and/or diapers must be changed as often as necessary to ensure that the child is clean and dry at all times.

#### ii. Diapering

- Get organized. Assemble supplies in the changing area within reach, (disposable diaper, wipes, gloves, non-absorbent paper liner, clean clothing and plastic bag if needed). Cover the entire changing surface or table with paper. Wash hands thoroughly with soap and warm running water.
- Place child on paper covered changing surface or table. Never leave child unattended during diapering processes.
- Remove child's clothing and put soiled clothing aside.
- Put on gloves using posted procedure.

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- Unfasten diaper and leave soiled diaper under child. Lift the child's legs and use disposable wipes to clean skin creases, genitalia, and bottom. Thoroughly as needed, wipe front to back using a clean wipe each time. Place used wipers in dirty diaper
- Remove soiled diaper. Fold diaper inward and place in covered, hands-free, plastic-lined container. Fold back paper liner if a clean surface is needed. Remove gloves.
- Clean your hands with a disposable wipe and then clean the child's hands with another fresh wipe.
- Put clean diaper on child. (Put ointment provided by parents upon their written request).
- Dress the child. Change the child's clothing if wet or soiled.
- Wash the child's hands with soap and water. Put child safely in supervised area.
- Clean and sanitize the changing surface or table. Throw away the paper liner in covered, hands-free, plastic lined container. Clean any visible soil with detergent and water. Wet the entire changing surface with sanitizing solution.
- Wash your hands with soap and water
- Follow the posted NAEYC Proper Diapering Procedure.

#### iii. Toileting

The following procedure should be followed when toileting a child:

- Have all materials at hand before starting procedures.
- Never leave a child unattended; ~~visual supervision is required~~.
- Have child sit on potty, but never longer than 5 minutes.
- After child has finished, teach child how to wipe self from front to back.
- If rectal area is still unclear, the adult (using gloves) will clean the perineal/rectal area with disposable, wet towels.
- Before child leaves bathroom, the child is to wash hands properly.
- Adult returns to empty potty, disinfect seat, rinse and dry.
- Staff member washes hands when done.

#### D. Napping Policy

To reduce the risk of Sudden Infant Death Syndrome (SIDS):

- Infants, unless otherwise ordered by the physician, are placed on their backs to sleep on a firm surface manufactured for sale as infant sleeping equipment that meets the standards of the United States Consumers Product Safety Commission.
- Pillows, quilts, comforters, sheepskins, stuffed toys, and other soft items are not allowed in cribs or rest equipment.
- The infants head must remain uncovered during sleep.
- After being placed down for sleep on their backs, infants may then be allowed to assume any comfortable sleep position when they can easily turn themselves from the back position.
- If a blanket is used, the infant is placed at the foot of the crib with a thin blanket tucked around the crib mattress, reaching only as far as the infant's chest.

#### E. Dental Hygiene

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All children with teeth shall brush or have their teeth brushed at least once during the hours the child is in care. For full day and family child care programs, children will brush their teeth after lunch. For part day morning programs, children will brush after breakfast. For part day afternoon programs, children will brush their teeth after lunch. Using a size appropriate toothbrush obtained through the health supply ordering process, the caregiver will either brush the child's teeth (for those children lacking the motor skills to brush themselves), or supervise as the child brushes his/her own teeth. The younger the child, the more the caregiver needs to be involved.

Fluoride toothpaste is available at all centers. The caregiver should use a layer of fluoride toothpaste, not larger than the size of a pea, for children 3 to 5 years of age. Younger children tend to swallow the fluoride toothpaste, which can cause fluorosis. Therefore, children under three shall brush without toothpaste.

After feeding, an infant's teeth and/or gums shall be wiped with a moist cloth, or a product distributed to the sites called "Tenders," to remove any remaining liquid that coats the teeth and gums, which turns to plaque and causes tooth decay. By doing this, caregivers are breaking up the plaque that forms to create a much healthier environment for the teeth that will be coming in later on. Follow these steps when caring for infants:

- Wash hands thoroughly and slip "Tenders" onto your index finger
- Moisten slightly with cool water. Do not use toothpaste
- Carefully swab infant's gums using a gentle circular motion
- Place used "Tender" in garment bag to be washed prior to next use

#### F. Health Issues in the Classroom

Call your assigned Site Supervisor, Comprehensive Services team, or Health Manager when you identify a health concern. It is crucial to provide appropriate intervention or resolution. Any unusual behavior, any injury or any signs of illness requiring assessment and/or administration of first aid by staff must be reported to the parent and documented in the child's confidential file.

Health issues include, but are not limited to rash, high fever, head lice, signs of conjunctivitis ("pink eye"), diarrhea, intestinal problems, vomiting and nutritional problems.

The Comprehensive Services team, Site Supervisor or Health Manager must follow up with the parent and medical provider(s) to confirm any diagnosis offered by the parent or family member. This information will be evaluated, and a decision made as to whether the child can attend school at that time. Both the Site Supervisor and the teaching staff will be kept abreast of the health considerations that impact this decision.

#### G. Child Safety and Supervision

Visiting/socializing on the playground or the premises of a child care facility while on duty is prohibited. Visiting/socializing with fellow employees, who are still on duty regarding non-classroom activities, during break times, is not allowed. All visitors, former employees and relatives must report and sign in at the main office of each center before entering program areas. Information on the nature of the visit will be required.

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- Whenever the classroom is outside on the yard or on a field trip, all members of the teaching team must be present to ensure the health and safety of children. No scheduled prep time or breaks are permitted during times scheduled outside of the classroom.

Semi-annually, during the first month of the program year and in March, each Site Supervisor will complete and submit to their Assistant Director the Semi-Annual Child Safety Checklist (CSB form 751). This checklist will be used to confirm that the following has occurred as required:

- Annual review of Ready To Learn Curriculum safety considerations;
- Annual review of Pedestrian Safety Training for parents and children;
- Semi-annual review of outdoor schedule against staff breaks and prep time and against peek pick-up/drop-off times to ensure no overlap;
- Semi-annual review of schedule and plan of class consolidations in early morning and late afternoon;
- Semi-annual meeting with staff to review child safety, visual supervision, staff placement , and safe transitions;
- Semi-annual completion of Transition Observation Checklist (CSB form 750) in each classroom;
- Semi-annual review of center documentation that all volunteers and substitutes have received an on-site orientation and have reviewed *CSB Substitute and Volunteer Handbook* with a signed *Handbook* receipt on file at the center;
- Semi-annual meeting with front desk/lobby/entrance/exit staff to review procedures to ensure Child Safety at all times; and
- Semi-annual meeting with parents to review Child Safety procedures, facility security, and handout *Parent Guidance for Keeping Children Safe*.

#### H. Child Illness Procedures

##### 1. Admission and Exclusion

The decision to admit or exclude a child with an illness is the responsibility of the Site Supervisor and will be based on whether there are adequate facilities and staff able to care for the ill child and the other children in the group. The Site Supervisor, not the child's family, makes the final determination about whether the acutely ill child can receive care in the childcare program. Children will be excluded if:

- The child's illness prevents the child from participating in activities that the facility routinely offers for well children or mildly ill children.
- The illness requires more care than the childcare staff is able to provide without compromising the needs of that particular child or of the other children in the group.
- Keeping the child in care poses an increased risk to the child or other children or adults with whom the child will come in contact.
- The childcare staff is uncertain about whether the child's illness poses an increased risk to others. The child will be excluded until a physician or nurse practitioner notifies the child care program that the child may attend. A child whose illness does not meet any of these conditions listed above does not need to be excluded.

##### 2. Admission and Permitted Attendance

Specific conditions that do not require exclusion are:

- Children who are carriers of an infectious disease agent in their bowel movement or urine that can cause illness, but who have no symptoms of illness themselves.

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- Children with conjunctivitis (pink eye) who have a clear, watery eye discharge and do not have any fever, eye pain, or eyelid redness.
- Children with a rash, but no fever or change in behavior.
- Children with cytomegalovirus infection, HIV or carriers of hepatitis b.

#### 3. Procedure for Management of Short-Term Illness

The behavior and health of each child must be continually observed during the course of the day, and should a child become ill, the following steps must be taken:

- The ill infant, toddler or child must be isolated on a cot/crib in an area, which is easily supervised and away from the kitchen, bathroom and any other area used by the other children. Infants, toddlers and children in isolation must be under constant visual observation by designated staff.
- Children ill enough to require isolation may not use the same toilets as other children. One toilet and sink must be designated exclusively for the ill child's use. The other children must be prevented from using that toilet and sink until the sick child has been picked up, and those facilities have been thoroughly disinfected.
- The Site Supervisor or designee will call the parent or other emergency numbers to arrange to have the child picked up. If no one can be contacted, the child must remain on the cot/mat under close supervision and staff will continue to try to reach the parents or emergency numbers.
- If the child's condition worsens and becomes life threatening, the teaching staff must call 911. Make a note in the child's file that parents were notified. Notify the Assistant Director immediately.

#### 4. Short-Term Exclusion and Admittance

As the program is not set up to care for ill children, staff and parents should use the following three criteria to exclude children with short-term illnesses from the group care setting:

- The child does not feel well enough to participate comfortably in the usual activities of the program.
- The staff cannot care for the sick child without interfering with the care of the other children.
- The child has any of the following that indicate a contagious disease or an immediate need for medical evaluation:
  - Fever and behavior changes or other signs or symptoms, until the child's inclusion is checked with a health professional who determines that the child may be in child care
  - Signs or symptoms of a possible serious condition, such as those defined below under "Conditions that Require Immediate Medical Attention", until the child is checked by a health professional who determines that the child may be in child care

Children may only be excluded for the period of time when they pose a significant risk to the health and safety of anyone in contact with the child and until the child meets the criteria for re-admission.

#### 5. Conditions that Require Immediate Medical Attention

Get help immediately for a child with any of the following conditions:

- Specific fevers:
  - A baby less than 4 months of age has a temperature of 101 degrees rectally or 100 degrees axillaries (armpit).

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- A temperature of 105 degrees or higher in a child of any age.
- For infants under 4 months, forceful vomiting more than once.
- Looking or acting very ill or getting worse quickly.
- Neck pain when the child's head is moved or touched.
- A stiff neck or severe headache and looking very sick.
- A seizure for the first time.
- Acting unusually confused.
- Unequal pupils (black centers of the eyes).
- A blood-red or purple rash made up of pinhead sized spots or bruises that are not associated with injury.
- A rash of hives or welts that appears and spreads quickly.
- Breathing so fast or so hard that the child cannot play, talk, cry, or drink.
- A severe stomachache without vomiting or diarrhea after a recent injury, blow to the abdomen, or hard fall.
- Stools that are black or have blood mixed in through them.
- Not urinating at least once in 8 hours, a dry mouth, no tears, or sunken eyes.
- Continuous clear drainage from the nose after a hard blow to the head.

#### I. Return to School After Illness

Children who have been excluded from the classroom should not return until:

- A physician has certified that the symptoms are not associated with an infectious agent or the child's symptoms do not threaten the health of other children.
- The child is completely "nit-free" following a head lice infestation.
- The child has an auxiliary or oral temperature of less than 100°F, and does not have symptoms such as:
  - Sore throat
  - Vomiting
  - Diarrhea
  - Headache and stiff neck
  - Undiagnosed rash
- The child has no respiratory problems, such as:
  - Difficult/rapid breathing, severe coughing or a high-pitched croup or whooping sound while coughing.▼
  - The child is unable to lie down comfortably, due to continuous coughing.
- No Diarrhea (an increased number of abnormally loose stools in the previous 24 hours) - observe the child for other symptoms such as fever, abdominal pain, or vomiting.
- No Vomiting (two or more episodes of vomiting within the previous 24 hours).
- No Eye/Nose Drainage (thick green or yellow mucous from the eye or nose).
- No Sore Throat - especially with fever or swollen glands in the neck.
- No Skin Rash (undiagnosed or contagious) - infected sores; sores with crusty, yellow, or green drainage which cannot be covered by clothing or bandages.
- No Persistent Itching (or scratching) of body or scalp.

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### J. Medical Alerts

Medical Alerts need to be posted by the teacher after the Site Supervisor has investigated and determined that there was exposure to a communicable disease.

In some cases, the teaching staff may be notified by the parent regarding a confirmed diagnosis (i.e., a child with Chickenpox). In this event, the Medical Alert may be posted immediately. The Site Supervisor, Comprehensive Services Team member, and Health Manager must still be notified about the illness.

After two weeks, the Medical Alert must be taken down from the classroom where it has been posted. (See Forms CSB221 to CSB238.)

### K. Children Injured at the Center

#### 1. Professional Medical Treatment

All head injuries require an immediate call to the parent. Parents can make the determination to pick up their child or not based on the staff report and advice as the seriousness of the injury. The CSB-208 form must be completed.

In the event that medical treatment is required, the center staff will instruct the parent to take their child to the doctor. If the parent cannot be contacted and a child needs to be transported by ambulance to the hospital, the teacher will accompany the child. The teacher will notify the Site Supervisor if a child needs professional medical treatment.

The parents will be responsible for any medical expenses incurred. If the parent feels that it is the responsibility of the program to pay for these expenses, they must file a claim against the program. Contact the Health Manager for details regarding submission of claims.

#### 2. Student Accident Reports / Band-Aid Reports

Whenever a member of the center staff uses first aid or informs a parent that a child has been hurt, the Site Supervisor or Teacher will call the Assistant Director to report the accident. If necessary, prompt arrangements for obtaining medical treatment will be made.

The teacher is also required to complete an "Accident/Incident Report Form," (CSB208-Accident-Incident Report) noting any recommendations for the parent on spaces provided.

To maintain confidentiality, the names of other children involved in the incident should not be written on the "Accident/Incident Report Form."

If more than one child is injured, a report must be done for each child. The information of who was involved is written and kept confidential, but not given in the report the parents receive.

The Assistant Director should be notified immediately of all accidents/incidents.

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If the Assistant Director notices that an elevated amount of accidents are occurring, he/she should call the Site Supervisor/Teacher to discuss the situation and develop a plan/solution to prevent accidents. Band-Aid Reports are completed for minor injuries such as scrapes or small cuts that require minor first aid. (CSB-255 First Aid-Band Aid Report).

Site Supervisors must maintain a "Site Accident Log" for each injury at all times.

### L. Blood Protocol

#### 1. Description

This protocol is used to prevent the remote and unlikely possibility of the spread of blood and blood diseases in the school setting and applies to all site personnel who have direct contact with children and custodial personnel as necessary

#### 2. General Information

The so-called blood-to-blood diseases (AIDS, Hepatitis B, etc.) are spread by an organism's travel from the blood of an infected person to the blood of a non-infected person.

Blood and semen are the only body fluids that have been demonstrated to be capable of transmitting AIDS (Acquired Immune Deficiency Syndrome).

#### 3. Supplies needed

- Plastic gloves (disposable)
- Plastic bags
- Rubbing alcohol

#### 4. Procedure

- Wash hands and put on gloves when having any contact with child's blood or bodily fluids. Use gloves for one time and only one student.
- After completing the necessary task for the child, remove gloves by grasping the cuff and then stripping it off by turning it inside out. Be careful not to touch the contaminated surfaces of the gloves.
- Dispose of glove in a disposable plastic bag. See "Disposal of Blood/Body Fluid" below.
- Wash hands after de-gloving. This is necessary because bacteria multiply rapidly inside a glove.
- Fill out "Accident/Incident" and "Band-Aid" reports as applicable. (See Form CSB208-Accident-Incident Report and CSB255-First Aid-Band Aid Report) File reports as required.

#### 5. Disposal of Blood / Body Fluid

Put all blood/body fluid disposals in clearly marked garbage containers. Examples: soiled wet diapers, used gloves, wipes, vomit, blood products, and all other contaminated materials/supplies.

Close the bag and tie it, then double bag, and dispose of it in a separate container marked for such disposals. Make sure this container is not used for trash, and that is out of children's reach and can be easily moved around.

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Be safe - always wear gloves. Questions should be directed to the Health Manager.

### M. Medication Administration

#### 1. Administering Medication

Because administration of medication poses an extra burden for staff, and having medication in the facility is a safety hazard, families must check with the child's physician to see if a dose schedule can be arranged that does not involve the hours the child is in the child care facility. Whenever possible, the first dose of medication should be given at home to see if the child has any type of reaction. Parents may administer medication to their own child during the child care day.

#### 2. Procedure

Staff, designated by the Site Supervisor, will administer medication only if the parent has provided written consent, the medication is in an appropriately labeled and stored container, and the facility has on file the written or telephone instructions of a licensed physician to administer the specific medication. (See Form CSB213-Medication Form)

For prescription medications, parents will provide caregivers with the medication in the original, child-resistant container that is labeled by a pharmacist with the child's name, the name of the medication, the date the prescription was filled; the name of the health care provider who wrote the prescription; the medication's expiration date; the administration, storage and disposal instructions. For over-the-counter medications, parents will provide the medication in a child-resistant container. The medication will be labeled with the child's first and last names; specific, legible instructions for administration and storage supplied by the manufacturer; and the name of the health care provider who recommended the medication for the child.

Instructions for the dose, frequency, method to be used, and duration of administration will be provided to the child care staff in writing (by a signed note or a prescription label) or dictated over the telephone by a physician or other person legally authorized to prescribe medication. Instructions from a parent or provider may not conflict with the instructions on the prescription label.

A physician may state that a certain medication may be given for a recurring problem, emergency situation, or chronic condition. The instructions should include the child's name, the name of the medication, the dose of the medication, how often the medication may be given, the conditions for use, and any precautions to follow. Example: children may use sunscreen to prevent sunburn; children who wheeze with vigorous exercise may take one dose of asthma medicine before vigorous activity (large muscle) play; children who weigh between 25-35 pounds may be given 1 teaspoon of acetaminophen for up to two doses every four hours for fever. A child with a known serious allergic reaction to a specific substance who develops symptoms after exposure to that substance may receive epinephrine from a staff member who has received training in how to use an auto-injection device prescribed for that child (e.g., EpiPen®). A child may only receive medication with the permission of the child's parent and when the staff person who will give the medication has the skills required. All documentation regarding a child's medication and its administration shall be kept in the child's confidential file.

Nonprescription medications may be administered without approval or instructions from the child's physician if all of the following conditions are met:▼

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- Nonprescription medications shall be administered in accordance with the product label directions.
- For each nonprescription medication, the parent must provide written approval and instructions that are consistent with product labeling. This documentation must be kept in the child's confidential file.

#### 3. Storage

Medications will be kept at the temperature recommended for that type of medication in a locked container that is inaccessible to children, separate from any other hazardous material storage. An example of an acceptable location is at the back of a locked file cabinet that is not used to store any other hazardous products or materials. Do not place medications that do not require refrigeration, such as inhalers for asthma, in the refrigerator. This can damage them and render them ineffective.

Medications that require refrigeration must be stored in the designated locked refrigerator medication boxes supplied to each center.

Epi pens must be stored in a designated Epi pen box and should be out of reach of children in an easy and quick to access area with Epi pen signage posted.

When the child no longer needs the medication or the child drops from the center, the medication must be returned to the parent or disposed of if the parent cannot be reached.

Medication will not be used beyond the date of expiration on the container or beyond any expiration of the instructions provided by the physician or other person legally permitted to prescribe medication. Instructions which state that the medication may be used whenever needed will be renewed by the physician at least annually.

#### 4. Medication Log Documentation

A medication log will be maintained by the classroom staff to record the instructions for giving the medication, consent obtained from the parent, amount and time of administration, and the person who administered each dose of medication. Spills, reactions, and refusal to take medication will be noted on this log. All records of any changes in the child's behavior, as documented on the Medication Log, will be communicated to the parent. Parents will be assisted in communicating these incidences to the physician as necessary. (CSB213-Medication Form) Parents will be informed as to when authorized medications have been given via this log.

#### 5. Asthma Protocol

Since asthma is a very common health condition and one that typically requires medication, the following protocol will assist the teaching staff. Teachers will receive training regarding asthma, its symptoms, and treatment procedures.

The Comprehensive Services Assistant Manager, upon review of the child's Health History form, will contact both the parent and medical provider(s) to clarify the current status of the asthma condition. It

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is the responsibility of the Comprehensive Services team to obtain confirmation of the diagnosis and any current treatment using the Asthma Action Plan (See Form CSB219).

Subsequent to the initial health review by the Site Supervisor and Comprehensive Services team, if the teacher becomes aware of a possible asthma condition, previously unknown to staff, she must call the Comprehensive Services team assigned to the classroom. The Comprehensive Services team will then follow the procedures described above.

Once all relevant information is obtained, a meeting will be held with the Comprehensive Services team, Site Supervisor, parent, and teacher to ensure teaching staff have the training to carry out the action plan for the child and to review the following:

- Asthma Action Plan from the doctor.
- Medication form (See Form CSB213) completed by parent.
- Inhaled Medication – Nebulizer Consent forms (See Form CSB219a) completed by the parent for each teacher/staff administering the medication.

Copies of the Asthma Action Plan will be kept by the center staff, parent, and in the child's main file. If the plan indicates medication is used routinely or necessary "as needed," then CSB must have medication on site before the child can attend class.

Until complete physician's instructions are provided, medications to treat asthma symptoms will be given according to the prescription labels. Medication will be dispensed outside of center hours whenever possible.

When asthma symptoms occur during center hours, the teaching staff will call the parent to alert them about the child's condition. The child will be sent home if the asthma symptoms interfere with the child's ability to fully participate in the program. In the event that the parent cannot be contacted, the teaching staff will call 911 (if the asthma appears life threatening).

#### 6. Training of Caregivers to Administer Medication

Any caregiver who administers medications shall be trained to:

- Read and understand the Asthma Action Plan, the Medication Form and the Inhaled Medication-Consent Form;
- Check that the name of the child on the medication and the child receiving the medication are the same;
- Read and understand the label/prescription directions in relation to the measured dose, frequency, and other circumstances relative to administration (such as in relation to meals);
- Administer the medication according to the prescribed methods and the prescribed dose;
- Observe and report any side effects from medications;
- Document the administration of each dose by the time and the amount given;
- Store and handle medication appropriately;
- Record changes in child's behavior and help parents communicate observations to their provider;
- Demonstrate ability to comply with medication policy.

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## Policies and Procedures

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#### 7. Inhaled Medications

An Inhaled Medication-Consent Form (See LIC 9166 and CSB Form CSB219a) must be filled out and signed by the parent before staff administers inhaled medications. A copy of the completed form must be kept in the child's file. A separate form must be filled out for each person (staff member) who administers inhaled medication to the child. This requirement includes all inhaled medications.

#### 8. Sun Protection Policy

Sun protection routines in childhood can establish lifelong preventive habits. At CSB, shade is provided at all sites, infants under six months of age are not exposed to direct sunlight, children are encouraged to wear light colored, loose fitting clothing that covers as much skin as possible, parents are encouraged to apply sunscreen to their child's exposed skin as part of their school drop off routine and following the procedure for the over-the-counter medications sunscreen provided by the parent will be applied by teaching staff. Drinking water is available to children during outdoor play.

#### N. Incomplete Health Records

The Site Supervisor or Comprehensive Services team will notify parents and teaching staff if a child is to be excluded from the classroom due to incomplete health records.

Exclusions due to unmet health requirements: Children must be excluded for immunizations that are not up-to-date or a physical or TB clearance that is not received within 30 days of enrollment. Parents are allowed a onetime extension beyond the 30 day requirement for a physical exam with proof of an appointment on file however this extension does not apply to the TB clearance. Children excluded for unmet health requirements are permitted up to three days of excused absences. After that, a Notice of Action (as applicable) will be issued for termination from the program.

Parents will be informed during enrollment and at Parent Conferences that the health requirements are the following: up-to-date immunizations, physical and dental exams, and required TB Clearance. Parents will be assisted in identifying and accessing a source of care and a Case Management will take place as needed to make every possible effort to meet the health requirements for the child. If, after these notifications and assistance, the child has not obtained the needed services, the parents will be informed that they need to schedule an appointment that day and notify the Site Supervisor or Comprehensive Services Team of the appointment date and time.

When the parent has no phone, contact will be made by the Site Supervisor or Comprehensive Services team through the center. The center staff will be asked to have the parent contact the Site Supervisor or Comprehensive Services team the same day. In all cases, teachers will be notified and asked to reinforce the request made by the Site Supervisor or Comprehensive Services Team regarding health requirements.

Children may be excluded from the program for incomplete initial physical exam, incomplete immunizations, and lack of a TB Clearance only.

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For all other health requirements that are incomplete, the Comprehensive Services Team will request updated information from the parent with a Health Records Update Form (See Form CSB242). As needed, case management will take place with the site staff, Comprehensive Services and parents and a plan will be implemented.

#### O. Health and Safety Training for Center Staff

The Site Supervisor of each center must ensure that each of his/her staff members has current CPR / First Aid Certification in the following: Adult / Child/Infant CPR Training (good for one year from date of issue), and First Aid Training (good for three years from date of issue). Staff can be sent to training via a request by the Site Supervisor to the Training Coordinator. The Site Supervisor is responsible for maintaining the personnel records of staff at his/her site to ensure that staff is certified in CPR / First Aid at all times. CPR / First Aid certified staff must be available at all times when children are present at the facility, or when children are offsite for facility activities.

In addition to the CPR / First Aid training, one staff person or Director at each day care center must have at least 15 hours in preventive health practices. This training must include, but is not limited to, pediatric cardiopulmonary resuscitation; pediatric first aid; recognition, management, and prevention of infectious diseases, including immunizations; and prevention of childhood injuries. The training may include sanitary food handling, child nutrition, emergency preparedness and evacuation, caring for children with disabilities and identification and reporting of signs and symptoms of child abuse. The supervisor makes requests for such training to the Personnel Unit.

#### P. Posting of Documents (Health Emergency Procedures)

CSB conforms to all Federal, State, and local regulations by posting or having on file at each facility: mandated notices, licenses, and permits.

Site Supervisors and teachers are required to post mandated facility compliance documents on bulletin boards, which are attractive, neat, updated, and highly visible. Other required posted materials include: Dental Emergencies, Choking, CPR/First Aid, Evacuation Routes, and Emergency Numbers (posted near phone).

The Site Supervisor is responsible for routinely monitoring bulletin boards and classroom files for compliance with this standard. The Comprehensive Services Managers/Assistant Directors are responsible for monitoring all compliance documents.

#### Q. Pet Protocol

Animals can bring joy to the classroom while offering children the opportunity to be responsible for another living creature.

When an animal is being considered for inclusion in the classroom, child and staff allergies and fears must be considered. The animal must be tame and classroom staff must agree to accept responsibility for the care of the pet. Assistant Director's approval must be obtained.

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Turtles and reptiles are not allowed in the classroom because they are potential carriers of salmonella bacteria.

Before the animal is included in the classroom, children will be instructed on the proper care and handling of the animal and the importance of proper hand washing.

When the animal arrives in the classroom, the animal must be provided an appropriate habitat and space with opportunities to exercise, appropriate temperature, and all other natural conditions and activities.

A Pet Care Plan must be posted to designate care needed to provide quality care to the animal. This Pet Care Plan will include details specific to that particular pet and will inform staff and parents about the pet, and noting the specifics required to provide quality care to the animal. The Pet Care Plan must include:

- Name of animal
- Description of the animal - example: rat - nocturnal, affectionate and playful pets
- Description of appropriate housing/cage/bedding and recommended cleaning pattern
- Description of food needed to provide a healthy diet including portion size and frequency
- Explanation of exercise needed
- Explanation of proper handling practices
- List of vaccines needed (if any), date when administered and future due dates
- The name and phone number of a veterinarian in case of emergency- Site Supervisors will be contacted for veterinarian visits approval.

A log must be posted for staff to initial and date as animal care and related duties are completed. The log must include:

- daily feeding (food and water) schedule
- daily exercise
- cage cleaning schedule

Accommodations must be made for:

- scheduling weekend, holiday, and vacation care
- maintaining care in the case of an emergency (natural disaster, animal illness, bites, and other similar situations)

Responsibility of the teaching staff:

- To review each child's Health History to identify children with allergies to specific animals.
- To complete the Pet Care Plan.
- To maintain the overall care of the animal.
- To initial the log noting responsibilities completed.

Responsibility of the Site Supervisor:

- Submit a request to the AD for classroom pet approval.
- To oversee the health and well being of children, staff and animals as they interact in the classroom.

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### Responsibility of Assistant Director

- Provide pet approval for a classroom on an individual basis.

Any bites will be immediately reported to the Site Supervisor, the Comprehensive Services Health Manager and the Assistant Director.

### R. Safety / Sanitation Procedures

#### 1. General Safety

- Facilities have available first-aid kit readily accessible/clearly marked for emergency use.
- Facilities are equipped with a fire extinguisher securely mounted and readily accessible.
- Employees are trained in the use and type of fire extinguishers available.
- All fire extinguishers are tagged, noting months/years/dates of inspections/annual maintenance, and identified use (class of fire).
- Facility exits are clearly marked with visible, approved EXIT signs. Aisles, hallways, and other exits are kept free of obstacles, including furniture and equipment.
- All materials and surfaces accessible to children, including toys, shall be free of toxic substances.
- Air fresheners will not be allowed in any space accessible to children and families.
- Baby walkers shall not be used or kept on the premises.
- Playground equipment shall be securely anchored to the ground unless it is portable by design.
- Equipment and furniture shall be maintained in a safe condition, free of sharp, loose or pointed parts.
- Equipment and furniture shall be age and size appropriate so as to allow children present to fully participate in planned activities.
- All items on shelves above three feet tall (plants, sculptures, books, and other items) shall be secured with museum putty, safety latches, barriers, or other similar items to prevent items from falling onto children.
- Open shelves and cabinets over three feet tall shall be free of heavy objects and
- Tall furniture over four feet tall shall be braced to the wall or floor.
- Cots are maintained in safe condition and bedding shall not be shared by different children without first laundering the bedding.
- Floor mats are constructed of foam at least ¾ inch thick and covered with vinyl, with no exposed foam. Floor side must be marked so that it can be distinguished from the sleeping side.
- Aisles and trafficked areas are kept free of obstacles and obstructions, with empty food containers promptly removed. Cots shall be arranged so that each child has access to a walkway without having to walk on or over the cots or mats of other children.
- Safe stools/ladders are available and used for reaching shelved items.
- Employees are trained in the proper use of equipment that their duties require them to use. Employees who have not been trained in the proper use of equipment may not operate such equipment.
- Employees are required to be attentive to their tasks, especially when cooking or operating moving equipment.
- Smoking is prohibited in all areas.

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- All employees must consume food only in designated areas.
- All employees are required to adhere to procedures for kitchen sanitation and the cleaning schedule.
- Firearms and other weapons shall not be allowed on or stored on the premises of a child care center.

#### S. Safety Surveillance

##### 1. Identification and Correction

The Health and Safety Officer will conduct monthly inspections of the facility for hazards using the Health and Safety Checklist. The Site Supervisor will review the result of the site inspections and will arrange for correction of hazardous conditions identified. Written reports of the inspections and corrections will be kept in a designated binder on-site. Copies of monthly inspections and corrective action plans will be sent to Joanne Sanchez-Rosa.

##### 2. Escape Hazards

The Site Supervisor will maintain and review with the staff annually a list of potential high-risk locations/situations where a child might escape unnoticed from the group. Staff will use this list to plan increased supervision in these high-risk locations and situations. If such a high-risk escape hazard is identified between annual reviews, staff will take action immediately.

##### 3. Evacuation Hazards

The Site Supervisor will be responsible for establishing and updating a checklist of locations to be assessed during evacuation to assure complete surveillance of the building before and after evacuation is declared complete. The checklist will identify usual and likely-to-be-forgotten locations such as: under a cot, behind a sofa, in a toy bin, in a closet, kitchen, or toilet room.

##### 4. Injury Prevention

Whenever an injury occurs, a copy of a completed Incident/Accident Report form will be filed in an injury log. The injury log will be reviewed every three months by the Site Supervisor or Assistant Director to identify hazards in need of corrective action.

Staff and volunteers must be able to demonstrate safety procedures. Both staff and volunteers will review safety procedures with the Site Supervisor prior to working in the classroom. Emergency procedures, the Health and Safety Checklist, and playground safety shall be reviewed with each staff person and volunteer before any interaction with children may occur.

Child and parent activities must include safety awareness for the home and in the program. Videos, brochures, newsletter articles, and parent training will be used to foster safety awareness for the home and in the program.

#### T. First Aid Kits

All centers should have a first-aid kit and manual that is easily accessible (location should be marked by "First Aid Kit Here" signs available to staff and out of reach of children. The following items should be in the first-aid kit:

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- CPR Mask
- Disposable, nonporous gloves
- Scissors
- Tweezers
- Thermometer
- Bandage Tape
- Sterile gauze pads
- Flexible roller gauze
- Triangular Bandage
- Pins for triangular bandage
- Eye dressing (small cups)
- Pen/pencil and note pad
- Cold pack
- First aid guide
- Poison Control number

The Health and Safety Officer, using the Health and Safety Checklist, will inventory the First Aid Kit monthly. Orders for restocking the kits are placed with designated staff. The First Aid Kits are only to be used in an extreme emergency. Everyday health and safety supplies such as Band-Aids, cold packs and gloves are stocked separately and in abundance in designated locations within each center, inaccessible to children.

### U. Preparing For Emergencies

Each classroom has a disaster preparedness plan in case of fire, earthquake, or other emergency. Children and staff must be prepared to execute the plan in the event of such emergency.

#### 1. Operations Procedure

Staff receives training on the disaster preparedness plan during their initial work orientation, and at subsequent staff development training. Such training is filed and documented with training records.

Fire drills are held at least once per month.

Earthquake preparedness drills are held at least once per month.

Shelter-in-Place drills are held once a month on the first Wednesday of each month.

All CSB centers post evacuation plans, and have documentation of successfully completing monthly fire and earthquake drills.

Documentation of earthquake and fire drills should be entered in the "Fire/ Earthquake Drill Report" for and the "Fire and Earthquake Drill Log" (SB116-Disaster Drill Report and CSB117-Disaster Drill Report Log)

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Classroom teachers provide an orientation to children on how to respond to an emergency as part of the ongoing curriculum.

Fire drill and earthquake preparedness orientations must take place by the second week of program opening for children and monthly thereafter.

Contra Costa County maintains an Office of Emergency Services (OES) Plan, which is activated during major disasters. The functions performed at the OES include gathering and evaluating damage information, determining emergency response priorities, obtaining necessary resources (materials, supplies, equipment, and personnel) and providing information to the news media. Community Services Bureau staff will provide information to the County OES on the status of the department's staff, buildings and equipment, including vehicles.

A verbal report to Community Care Licensing must be made within 24 hours and written report must be submitted to the licensing agency within seven days of the occurrence of any of the following events:

- Death of any child from any cause
- Any injury to any child requiring medical attention
- Any unusual incident or child absence which threatens the physical or emotional health or safety of any child
- Any suspected physical or psychological abuse of any child
- Epidemic outbreaks
- Poisonings
- Catastrophes
- Fires or explosions occurring in/on the premises

Reports must be made in writing to the funding sources as soon as possible after any of the above.

### 2. Emergency Disaster / Earthquake Supplies

All sites have emergency/disaster supply containers that are easily accessible. The sealed containers hold the following items appropriate to the number of adults, children and infants at the site. The inventory with the expiration date of the contents is listed on the outside of the container.

First Aid Supplies	Food Bars	Formula	Formula Bottles	Bottle Bags	Bottle Nipples
<del>Pliers</del>	Crow bar	Water	Latex Free Gloves	Hand Sanitizer	Trash bags
Multi-purpose Tool	Shovel	Radio	Safety Goggles	Solar Blankets	Work Gloves
Gas Shut off Tool	Scissors	Dust Masks	Zip Lock bags	Masking Tape	Duct Tape
Fleece Blankets	Batteries	Whistles	Toilet Paper	Rope	Adult Vests
Germicidal Tablets	Wrench	Buckets	Flashlight	Soap	Cold Packs

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Antiseptic Wash	Hammer	Lanterns	<del>Shovel</del>	Eye Wash	Vinyl Tarp
Toilet Bags	<del>Toilet</del> Chemicals	<del>Bucket</del> Toilet Seats	Dust Masks	Hard Hat	

#### 3. Meal Delivery-Emergency

Each center should have the items listed below available when food cannot be transported to the centers due to unforeseen circumstances such as traffic, breakdown of van, or breakdown of equipment in kitchen. All of these food items should be stored and marked "Emergency Food". The requisite amount of milk (2½ gallons per classroom, per meal) and soymilk and lactaid (if needed for milk intolerances) are to be on hand at all times.

- Infant food:
  - meats, fruits and vegetables
  - dry cereal
  - formula
- Breakfast food:
  - dry cereal
  - canned fruit
  - milk
- Lunch food:
  - Sunbutter
  - string cheese ww crackers
  - 1 can of fruit and 1 can of vegetables
  - 2½ gallons milk
- Afternoon snack:
  - graham crackers
  - 2 gallons milk

#### V. Classroom Sanitation

##### 1. General Description

Each classroom is responsible for preparing the spray bottle of sanitizing solution on a daily basis. The proportions of bleach to water are: three quarters (¾) teaspoon of chlorine bleach to two (2) cups of water or one (1) tablespoon of chlorine bleach to one (1) quart of water. Classroom staff is instructed to spray each table lightly with the bleach solution, to wipe it with paper towels and air dry. This is to be done before and after each meal service. The bleach solution, as well as any other disinfectants, cleaning solutions, poisons and other items that could pose a danger to children, should be placed in a locked cabinet after each use to prevent children from reaching. Warning Signs and Mixture instruction posters should be posted on the cabinet door where the solution is stored (See CSB Forms for forms "Warning Sign Poster" and "Warning Mixture Instruction Poster" in English and Spanish).

Tabletops and eating surfaces must be cleaned/sanitized before and after each meal, counter tops are cleaned between preparation of different food items, and can openers are cleaned/sanitized after each use.

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Classroom staff is responsible for sanitizing toys weekly, as well as cleaning shelves and all areas of the classroom where toys are stored.

In classrooms that have kitchen equipment, the teaching staff will ensure that, on a weekly basis and as needed, the pantry is swept, and ovens and refrigerators are cleaned. The building service worker washes trashcans as needed.

#### 2. Classroom Sanitation in Infant Care Centers

Particular emphasis on classroom sanitation for infant centers is critically important in ensuring the health of the children and staff and in preventing the spread of communicable disease. Keep the classroom sanitized by adhering to these activities:

- All items used by pets and animals shall be kept out of the reach of infants.
- Before walking on surfaces that infants use specifically for play, adults and children shall remove, replace, or cover with clean foot coverings any shoes/socks they have worn outside of that play area.
- Each caregiver shall wash his/her hands with soap and water before each feeding and after each diaper change.
- Only dispenser soap, such as liquid or powder in an appropriate dispenser shall be used.
- Only disposable paper towels in an appropriate holder or dispenser shall be used for hand drying.
- Washing, cleaning and sanitizing requirements for areas used by staff with infants or for areas that infants have access to, are as follows:
- Floors, except those carpeted, shall be vacuumed or swept and mopped with a disinfecting solution at least daily, or more often if necessary.
- Carpeted floors and large throw rugs that cannot be washed shall be vacuumed at least daily and cleaned at least every six months, or more often if necessary.
- Small rugs that can be washed shall be shaken or vacuumed at least daily and washed at least weekly, or more often if necessary.
- Walls and portable partitions shall be washed with a disinfecting solution at least weekly, or more often if necessary.
- The diaper-changing area, where residue is splashed from soiled diapers and items and surfaces are touched by staff during the diaper-changing process, shall be washed and disinfected after each diaper change. Such areas, items and surfaces shall include but not be limited to:
- Walls and floors surrounding the immediate diaper-changing area.
- Dispensers for lotion, soap and paper towels.
- Countertops, sinks, drawers and cabinets.
- Sinks used to wash infants, or to rinse soiled clothing or ~~diapers~~ shall be disinfected after each use.

Objects used by infants that have been placed in the child's mouth or that are otherwise contaminated by body secretion or excretion are either to be (a) washed by hand using water and detergent, then rinsed, sanitized, and air dried, or (b) washed in a mechanical dishwasher before use by another child. A container will be placed in the infant room to collect these objects which shall be washed and disinfected at least daily, or more often if necessary. Such objects shall include, but not be limited to, toys and blankets.

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Linens laundered by the center shall be washed and sanitized at least daily, or more often if necessary. Such linens shall include, but not be limited to, bedding, towels and washcloths used on or by infants.

A disinfecting solution, which shall be used after surfaces and objects have been cleaned with a detergent or other cleaner, shall be freshly prepared each day using 1/4 cup of bleach per gallon of water. Commercial disinfecting solutions, including one-step cleaning/disinfecting solutions, may be used in accordance with label directions.

**All disinfectants**, cleaning solutions and other hazardous materials shall be placed in a locked storage area.

#### W. Kitchen Sanitation

Effective cleaning and storage of equipment and utensils used for food preparation must be enforced. Cleaning/sanitizing may be done by spraying, by immersion dish washing machine, or by any other type of machine or device (if demonstrated thoroughly to cleanse/sanitize equipment and utensils). The dishwashing machine must reach a temperature of 165 degrees F (74 degrees C) during washing and 180 degrees F during rinsing.

All dishes and utensils used for food preparation, eating and drinking must be cleaned and sanitized after each use.

Pesticides and other similar toxic materials must not be stored in food storerooms, kitchen areas, food preparation areas, or areas where kitchen equipment or utensils are stored.

Soaps, detergents, cleaning compounds or similar substances must be stored in areas separate from food supplies.

#### X. Food Safety and Sanitation

##### 1. Personal Hygiene, Food Service Staff and Classroom Staff

No person is allowed to work in a food service facility or a food serving area if he/she:

- Is infected with a communicable disease that can be transmitted by food
- Is a carrier of organisms that can cause disease
- Has a boil, infected wound, or acute respiratory infection.

Employees must thoroughly wash their hands and exposed portions of their arms with soap and warm water:

- Before starting work
- Before serving food
- During work
- After diapering
- After smoking
- After eating
- After drinking
- After using the toilet

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- As often as otherwise necessary

Employees must maintain a high degree of personal cleanliness, and conform to good hygienic practices.

Minor cuts or scrapes should be thoroughly cleaned, and covered with a clean bandage. If the affected area is on a hand, food service gloves should be worn until the area has healed.

Employees must not use tobacco in any form while engaged in food preparation or service, nor while in areas used for equipment washing, utensil washing, or food preparation. Employees may use tobacco only in designated areas.

Potentially hazardous food must be kept at an internal temperature below 40 degrees F or above 140 degrees F. For hot foods, the food is to be reheated to 165 degrees F.

Gloves are to be used when hand comes into contact with food such as when cutting food. Gloves do not need to be used when serving food with a utensil.

Each serving bowl on the table must have a separate spoon or other utensil.

Leftovers may not be sent home with children, staff, or adults - due to the hazards of bacterial growth.

Employees may not have snacks (coffee, soda, chips, candy, or other snack foods) in front of children.

To help maintain kitchen sanitation, all non-kitchen staff shall not enter the kitchen except as required for work duties.

### 2. Policies for Food Sanitation / Safety

#### i. Mealtime Sanitation Procedures

Tables should be cleaned with the registered disinfectant/cleaner approved for food prep surfaces before and after meal times. Teachers and children must wash hands before setting table or sitting down at table. The assigned staff must take temperatures of foods before serving, and food must be warmed up to 165°F if below 140°F. Serving temperature and time temperature was taken must be recorded on transport sheet.

#### ii. Food Utensils, Dishes and Food Containers

Each center must return serving bowls and other tableware items daily to the Child Nutrition Central Kitchen for proper sanitation. All dishes, utensils, and food containers are the property of Contra Costa County Community Services Bureau, and should not be taken off the premises. All containers are to be returned to the Kitchen daily. All food and utensils are to be kept in their proper storage cabinet. Non-perishable food and food-related products are to be stored at least six inches off the ground at all times.

#### iii. Refrigerators

Each classroom has a refrigerator except in large centers with a separate kitchen. The thermometers inside the freezer and refrigerator must be checked daily. It is the Site Supervisor's responsibility to:

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- Order a new thermometer when needed.
- Ensure that perishable food items are cleared from the refrigerator.
- Ensure that the refrigerator is cleaned and sanitized.
- Make certain that no personal food is stored in refrigerators that hold CACFP food.

#### iv. Food storage

Canned fruit, fresh fruit and bread should be stored in the refrigerator for later use. Leftover milk and cold foods are to be rotated so they do not become outdated. Once milk is poured into small containers, it should not be poured back into the milk carton. All foods will be marked with their date of delivery. Opened food that must be stored is to be labeled with name and date of opening. All containers are to be labeled with name of food and date when packed.

#### v. Disposal of Leftover Food

Dangerous health problems can be caused by leftover foods being held at **improper** temperature. Teaching staff is required to dispose of all un-served cooked foods. At the end of each meal they are thrown into the garbage can.

- Food may not be kept after it has been put on the table for children.
- Leftover un-served food can never be taken home.
- Leftover fresh fruits, vegetables, cereals, breads and milk should be stored properly and used for snacks or breakfast. Dispose of unsafe perishables daily.
- The central kitchen will create a sample lunch plate and hold it for seven days. This food would be used for analysis in case of a food borne illness outbreak.

#### Y. Procedures for Using Transport Units

Insulated food cambros are insulated to keep hot food hot or cold food cold. Cambros are to be sanitized daily.

- Cambros are not to be stacked more than four high.
- Always open containers just before serving food.
- All food containers are to be rinsed before being returned to central kitchen.
- **Food may not** sit at room temperature in an open insulated food container.
- Each classroom has a food safety corner with a poster showing thermometer guidelines for food safety, a sanitizer formula, recalibration instructions, and glove labels with holders.

#### Z. Food for Infants

##### 1. General Description

**Infants** from birth through 11 months participating in the program will be offered an infant meal. Under the infant meal pattern, infant formula is a required component and, as such, must always be offered unless the infant's mother provides breast milk. CSB encourages breast-feeding. Infants and mothers benefit when infants are breastfed. Facilities are available for mothers to comfortably and discreetly breastfeed infants. Alternatively, staff can feed infants expressed breast milk left by **their** mothers.

The decision regarding which infant formula to feed a baby is one for the baby's doctor and parents to make together. CSB provides one house formula Enfamil with Lipil. If a parent declines the formula which the program provides, the parent must document this request using the form "Parent's Form for

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Declining a Provider's Formula" (See Form CSB428) and a list of iron-fortified formulas that do not require a medical statement in the Child and Adult Care Food Program should also be provided to parents. Parent will furnish a formula which meets the CACFP requirements for iron fortification and nutritional content, unless the doctor has prescribed a special formula. If the doctor-prescribed formula does not meet the CACFP requirements, parent and MD will need to complete a medical statement in addition to the declination form (See Form CSB4).

Infants are to be held while being fed, and never laid down to sleep with a bottle.

A baby's developmental readiness determines which foods should be provided, what texture the foods should be, and which feeding styles to use. Please refer to your training manual for complete guidelines.

#### 2. Feeding Infants

The introduction of solid foods is usually started between four and seven months of age, depending upon each child's nutritional and developmental needs. The decision to introduce solid foods should always be made in consultation with the parents. New foods are introduced one at a time, at least one week apart to make it easier to identify food allergies or intolerances. Children will be offered single-ingredient commercial baby food when appropriate.

As children grow older, they may prefer to hold their own bottles, and may do so while in an adult's arms or lap.

Dental problems, such as tooth decay, may result from children using bottles as pacifiers. For this reason, children are not allowed to carry bottles.

Cereal or any other solid food may not be served from a bottle. A spoon is to be used instead. Baby food may not be served from jars. Before feeding, remove the approximate amount of food that infant might consume from the jar and place into small dish. Do not put the baby food in a bottle. Babies fed such food in a bottle can choke and may not learn to eat foods properly.

If parents have chosen to decline provider's offered food and will furnish one or more food items that meet Child Nutrition Program (CNP) nutritional content requirements, the parent must document this using the Parent's Form for Declining a Provider's Food, (See Form CSB427) unless their doctor has prescribed special food. Any food items provided by the parent must be in compliance with local health codes. If the doctor's prescribed food item(s) does not meet the CNP requirements, the doctor will need to complete the back of the Parent's Form for Declining a Provider's Food, return the original to the Nutrition Office, and retain a copy in the child's file.

#### 3. Food to Avoid with Infants

Babies are at risk of choking on food due to their poor chewing and swallowing abilities. For a complete list of foods to avoid for infants and toddlers, please refer to the training manual, "FEEDING INFANTS: A Guide for Use in Child Nutrition Programs."

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## Policies and Procedures Section 2: Child Development

### AA. Food for Toddlers

Toddlers will be served food from the regular Child Nutrition Toddler menu. Foods should be served family style and prepared so they are easy to eat (small pieces, or thin slices, no bones).

### BB. Potlucks

Potlucks have historically been an integral part of CSB. They have provided parents with an opportunity to share part of their family traditions, culture, personal hobbies, and strengths with other parents and staff in an economic and enriching manner. As the program has grown, concerns have been raised in relation to sanitation and safety. There is no regulation from either the state or county barring potlucks.

This is partly due to the common practice in our community of celebrations being built around a shared food experience, often with participants bringing their choice of food (at school, church, temple, family, community organization, etc). The food may be either homemade or purchased.

A potluck can be held during classroom events, as long as it does not interfere with children being served the food provided by Child Nutrition Services. Parents who choose to contribute food should be encouraged to bring foods that are economical, healthy and prepared in sanitary conditions. Cultural foods are encouraged. Parents may prepare a plate of potluck food for their own children only, but the child may not be served the food in lieu of the food provided by the program.

### CC. Food for Children, Parent, Staff Meetings and Events

In March 1993, in an effort to reduce chronic disease, the Board of Supervisors adopted the Contra Costa County Food Policy developed by the Contra Costa County Food and Nutrition Policy Consortium, of which CSB is a member. The policy states that food provided at staff meetings, parties and other types of County social events should include choices that meet U.S. Dietary Guidelines. All foods served to people or provided through food assistance programs should reflect current standards of good nutrition.

In 2012, the Board of Supervisors and the Policy Council approved a Healthy Food & Beverage Policy. This policy states that Community Services Bureau recognizes frequent consumption of non-nutritious foods and beverages as a significant risk to the health of the children being served, and is taking a preventive approach. The role of CSB in serving families includes consistently modeling the behavior we wish to encourage. Therefore, at all CSB meetings, events, activities, or celebrations which include children:

- Sugar (or corn syrup) sweetened beverages and 100% fruit juice will not be served
- Foods containing large amounts of sugar and/or solid fats (candy, donuts, cakes, cookies, chips, etc.) will not be served

Instead, CSB will provide or require healthy alternatives such as:

- Unsweetened carbonated water (flavored or unflavored)
- Water, perhaps flavored with a slice of lemon or other fresh fruit (and preferably served in non-plastic containers)
- Non-fat or 1% milk (plain)
- Coffee and/or tea (for adults)
- Fresh fruit

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## Policies and Procedures

### Section 2: Child Development

- Whole-grain snacks (crackers, etc.)
- Raw vegetables and dipping sauce

At all facilities directly operated by CSB, the CSB Healthy Food and Beverage policy will be implemented for any meal or special event that includes children.

#### DD. Nutrition Services

The Nutrition Office works with staff, professionals and parents to meet the nutritional needs of children with disabilities, and to help prevent disabilities that have a nutrition-related basis.

The Comprehensive Services Health, Disabilities and Mental Health Managers work with the Nutritionist to ensure that provisions to meet special needs are incorporated into the nutrition program.

Appropriate professionals are consulted on ways to assist Head Start staff and parents with regard to children having severe disabilities and/or problems with eating.

The Nutritionist will plan and implements activities to help children with disabilities participate at mealtime, and to help prevent nutrition-related disabilities.

#### EE. Food Defense

Security measures in the central kitchen area will be followed by limiting access to the food production area and storage area to authorized personnel only.

##### When not in use:

- Freezers will be kept locked at all times.
- Walk in refrigerators will be locked at all times.
- Storage room will be kept locked at all times.
- Food shipments will be accepted only if products are secured and sealed.
- Access to ice making equipment is controlled.
- Incoming food shipments are examined for potential tampering.

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# POLICIES AND PROCEDURES

## SECTION 3- FAMILY AND COMMUNITY PARTNERSHIPS

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Section 3: Family and Community Partnerships

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## Policies and Procedures

### Section 3: Family and Community Partnerships

#### I. Family Partnership Building

##### A. Purpose and Methodology

The family partnership building process begins at the first point of contact that the families have with CSB staff. This may occur through a phone call to the enrollment line, an intake appointment, or a walk-in at one of our centers. Staff members support families as co-partners by identifying the ~~parents'~~ strengths and providing resources to meet the family's needs. CSB support the program parents and acknowledges them as being their child's advocate and primary teacher. CSB provides opportunities for interactions to occur among parents and staff throughout the year to address their child's education and development. Staff meets with families to identify what their strengths and needs are and how our program can best support their families' situation. Through the availability of bilingual staff and Language Line Services for translation support, staff communicates with families in their primary language. They are informed upon enrollment that comprehensive services staff along with their child's teacher are available to provide support that is appropriate for their level of need and interest.

Family partnership building is further developed upon enrollment through the Family Partnership Agreement Process which includes: the Parent Volunteer Survey, Parent Interest Survey, the Family Partnership Agreement Assessments and the Family Goal Setting Process.

##### B. Family Partnership Agreement

###### 1. Family Assessment

Comprehensive Services staff undertakes collaborative partnerships with individual families to develop a Family Partnership Agreement based on the family's readiness/willingness to participate. The process includes:

i. Completion of an initial Family Partnership Assessment of the family's strengths and needs identification takes place.

Identification of the family goals and steps to achieve the goal are identified, in order to support and strengthen the Family Assessment.

ii. If a family has a pre-existing plans/goal with another community agency, our comprehensive services staff or designated staff will work collaboratively with the family to support that pre-existing goal or identify a new one if needed. Our goal is to assist parents in achieving their goals and support them by providing resources that best meet their needs and circumstance.

Depending on the nature of the goal, CSB staff will work in conjunction with the other agency to identify and reduce barriers to achieving the set goal. Regular communication will be established through case management meetings if necessary to monitor progress. Staff will support the family in navigating through systems identified by the other agency to make sure that the family has proper supports in place.

The Family Partnership Agreement - Family Assessment is completed twice each program year. ~~The first Family Partnership Agreement is completed within 90 days of enrollment (individually per family) and the second one (follow-up) is due by April 30<sup>th</sup>.~~Comprehensive Services staff and parents will work

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### Section 3: Family and Community Partnerships

together and discuss various dimensions of the family's life (Income and Budget, Shelter, and other aspects), identify and respond to any immediate crisis. The key points of this conversation are objectively documented in CLOUDS. Using the Family Partnership Indicators, Comprehensive Services staff will assign one of five indicators to the dimension (thriving, safe, stable, vulnerable, or in-crisis).

#### 2. Goal Setting

Using the information gathered in the Family Partnership Assessment, Comprehensive Services staff assists parents in identifying and setting a goal in an area in which the indicator was less than stable. Using the family's own words in documenting goals and activities the goal is recorded in CLOUDS, Family Partnership Assessment Goal section, clearly stating the following:

- Areas of Strength
- Goal Category
- Goal Description
- Action Steps for what is needed to achieve goal(s) (The parent's responsibility for the action(s))
- Support Needed (Staff commitment to the action(s))
- When the goal will be completed (within the program year)
- Plan B (if something unexpected happens)

#### 3. Family Partnership Agreement Process:

##### i. Within 90 days of Enrollment

Comprehensive Services Clerks are responsible for the following:

- Complete 1st FPA with parents **and enter all information accurately on CLOUDS**. Staff document key words based on the indicators (strengths or concerns) for each area to validate reason for the selected indicator.
- Support and encourage parents to develop at least one goal that supports an area in which their indicator resulted below the "stable" rating. (All areas marked "in-crises" are given immediate support and follow-up. Comprehensive Services Manager for Parent, Family and Community Engagement is to be notified. All actions, resources, referrals and results of follow-up are documented in the assessment.)
- Provide resources/referrals within two weeks.
- Schedule a follow-up **appointment within one month with the parent/s** appropriate to the resource given by contacting the family to determine if resources or referrals were appropriate and adequate for the family. (contact can be over the phone or in person)
- Document contact on Family Referrals and Services-Notifications **in CLOUDS** (enter dates and CS staff initials) indicating if the resource(s) met the family's needs and if the family was satisfied with the referral.
- If a family has no areas that indicate below "stable", assist the family to develop a goal that supports their child's educational goal or development. (Staff can refer families to their parent-teacher conference goals if needed)

##### ii. By April 30th

- Comprehensive Services Clerks are responsible for the following:
- Complete **the second FPA**, follow-up of the **initial FPA** with parents - Staff communicates with families to discuss and document any changes to the previous family assessment **on CLOUDS**

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## Policies and Procedures

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- Follow-up on goal progress, Staff document on CLOUDS, the status of goal completion, if the goal changed, or if there were any barriers to completing the goal.
- Provide resources/referrals immediately for emergency, in- crisis or within two weeks for vulnerable needs.
- Schedule one month follow-up contact with families to determine if resources or referrals were appropriate and adequate for the family (contact can be over the phone or in person) and document as discussed above.
- Follow same procedures for Referrals and Services as the First Family Partnership Assessment if any indicator falls below "stable."

#### iii. On an Ongoing Basis

Site Supervisors are responsible for the following:

- Review FPA's and goals of parents at the site
- Review CLOUDS custom report for Family Performance and Outcome by Measure by selecting your site.
- Review the family information by clicking on the number above the percentage for a particular ranking such as: "in-crisis", etc. This will populate the family id, if needed click on the family ID and it brings up the Family data sheet with more information.
- Ensure families entered as "in-crisis" and "vulnerable" have received support. (either by site or Comprehensive Services staff).
- Should the family situation change and site staff are aware, notify comprehensive services staff to update Family Partnership Assessment if needed, and provide support or resources as needed to teaching staff to give to the parent or given to the parent directly.
- Provide Comprehensive Services staff with updates to Referrals and Services as parents inform so that CLOUDS is maintained accurate and support is provided as needed.

Comprehensive Services Assistant Managers are responsible for the following:

- Use CLOUDS to track Family Referrals.
- Ensure that adequate follow-up and resources were provided in a timely manner.
- Provide support and assistance to CS Clerk in obtaining resources if requested.
- Provide support and assistance to family when needed.
- Hold case management meetings for referrals that require multiple steps and planning.
- Hold case management meetings for families with two (2) or more areas indicated to be below "stable" or any one (1) area indicated to be "in-crisis".
- Work with Comprehensive Services Clerks to ensure FPA tasks are completed within the timelines assigned.
- For Returning Children (unless family assessment updates are made sooner due to reported changes, follow the same steps above)

Comprehensive Services Clerks are responsible for the following:

- Complete the returning family's Family Partnership Agreement Assessment within 90 days (September 30th) of the second school year.
- Follow the same steps for completing the assessment and protocol for documentation, follow-up by April 30th as you would for newly enrolled families.

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## Policies and Procedures

### Section 3: Family and Community Partnerships

- Follow the same steps for completing the returning family's Family Partnership Agreement Assessment and follow-up by May 31st as newly enrolled families.
- Follow the same steps for documenting Family Goal progress. Provide resource/referrals ~~immediately~~ for emergency, in-crisis or ~~within two weeks~~ for vulnerable needs.
- If the family has not completed their goal from the previous year and would like to continue working towards the same goal, staff is to document in the existing CLOUDS goal and change the "by when" date.

#### 4. Desired Outcomes of Family Partnership Process

- Families achieve an enhanced quality of life by engaging in a family partnership assessment process. Parents are provided community resources such as adult education classes, financial literacy assistance programs, employment counseling, school lunch programs, health resources, and other community services. Such efforts are coordinated with the Comprehensive Services staff via the Family Partnership Agreement ~~process~~ and through daily interaction with site or comprehensive services staff at the parent's discretion and need. By assisting families to identify their own supports and strengths, development of skills, tools, and resources, families are able to use this process in developing goals for their families after they leave the program.
- Families feel empowered and have gained life skills to be self sufficient by learning about and accessing ~~community~~ resources to support their family.
- Families' attainment of goals will be identified
- Families attain and accomplish pre-existing goals if identified

The Comprehensive Services staff provides guidance, support, and resources to the family, moving them toward successful completion of the family goal(s) and aspirations. Documentation of support can be found in CLOUDS, Family Referrals and Services, and the Family Case History.

When the family does not meet the timeline, the Comprehensive Services staff will provide additional support and guidance, by reviewing/discussing all obstacles which prevented the family from meeting the time line. Families have a choice to continue moving toward meeting their goal(s) or establishing a new goal. If a family chooses to set a new goal, Comprehensive Services staff will assist the family in identifying an area to set a goal, and follow the goal setting procedures as listed under Goal Setting. Comprehensive Services staff will provide support and resources for the family to work towards achieving the newly identified goal.

If after several attempts, a family refuses to participate in the assessment or goal development, staff document their attempts at explaining benefits of the process, and note that parent refused.

#### 5. Parent Volunteer Survey

During the placement appointment, Comprehensive Services staff asks parents to complete a Volunteer Survey (See Form CSB300). This survey includes ways for parents to be engaged at the site level such as: helping in the classroom, preparing materials, sharing talents. It also offers opportunities to volunteer

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## Policies and Procedures

### Section 3: Family and Community Partnerships

on a larger scale such as: Policy Council, Nutrition Advisory Committee, Health Services Advisory Committee, and Interview Panels.

The following is the protocol for implementation and completion of the Volunteer Surveys:

#### i. Upon Enrollment

- Comprehensive Services Clerks are responsible for:
- Completing Volunteer Survey with Parent
- Completing Parent Interest Survey with Parent
- Input names of parents indicating interest in an Advisory Committee (Policy Council, Health Services, Interview Panel, Nutrition etc) into the Volunteers for Advisory Committees folder on the Shared drive.

#### ii. By September 30th

- **Site Supervisors are responsible for:**
- Compiling a list of site volunteers from Volunteer Survey results and
- Utilizing the list of volunteers when needed for parent meetings.
- **Comprehensive Services Assistant Managers are responsible for:**
- Working with Comprehensive Services Clerks to ensure Parent Interest Survey distribution and Volunteer Survey tasks are completed within the timeline.

#### iii. Ongoing

- Should parents indicate interest in volunteering at a later date, they can inform site staff or CS staff for volunteer opportunities. (Volunteer Interest Survey is used upon enrollment as a means to discuss various engagement opportunities; however, families can participate in a volunteer activity at any point of enrollment).

#### 6. Parent Interest Survey

The Parent Interest Survey is completed by Parents upon enrollment. Results of this survey allow staff to identify the collective results the parents' interests for training at the parent committee meetings, or resources provided on a site level interest. The **list of the top ten results are kept in the Parent Meeting & Policy Council binder and** can also be shared via written materials, newsletter articles, speakers, and other forms of media. The categories for topics include:

- Health / safety
- Nutrition
- Mental health
- Child development
- Parenting
- Literacy / adult education
- Employment / job training
- Community resources
- The following is the protocol for implementation, timeline, distribution, and follow up for the Parent Interest Survey (See Form CSB-300).
- Upon enrollment
- Comprehensive Services Clerks are responsible for the following:
- Completing the surveys with Parent
- Tallying the completed surveys

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## Policies and Procedures

### Section 3: Family and Community Partnerships

- Providing site with top ten interests on Site Level Parent Training Form (See Form CSB-304).
- By October / November of each year
- Site Supervisors are responsible for the following:
- Present the top ten interest results at next parent meeting as scheduled.
- Work with parents to develop calendar/schedule for topic presentations.
- Request support from Comprehensive Services as needed in obtaining or identifying speakers
- Based on results of the Survey and Performance Standard requirements, parent education education, asset development programs, and domestic violence support programs. Connecting families to community agencies, including the Local Education Agencies, helps families to:

#### C. Accessing Community Services and Resources

CSB collaborates and works in close partnership with several child and family services community agencies in a wide number of service areas such as: mental health, health, nutrition support, education programs, disabilities support services agencies, social services, local Food Banks, financial literacy education, asset development programs, and domestic violence support programs. Connecting families to community agencies, including the Local Education Agencies, helps families to:

- Support and coordinate the successful transitions for enrolled children and families with other agencies.
- Support communication and coordination of services between Head Start/Early Head Start staff, school principals, and staff from other family services agencies involved with the family through transitions, including joint transition meetings.
- Support parent's role as the primary ~~teacher~~/advocate for their child's education and throughout life.
- Support families' interests and needs to encourage parent ~~family~~ and community engagement in the in the children's learning.

CSB provides many opportunities for staff interaction with families throughout the year. Encouraging parents to be actively engaged in their child's life is the foundation for parents to continue as advocates for their children beyond Head Start. Please refer to each service area for more on how staff can support parent opportunities for gaining access to community resources. Comprehensive Services and site staff also generate referrals as a response to a parent's request.

#### D. Supporting Families in Crisis-(Emergency and Crisis assistance)

When a family experiences a crisis, the stress disrupts the family's usual pattern of functioning, and family well-being. Families sometimes find that their usual ways of coping or problem solving do not work; as a result, they feel vulnerable, anxious, and overwhelmed. Sensitivity and care is taken to assess the nature and scope of the crisis in order to work with the family to discuss the level of support that is adequate yet comfortable for the family.

- Comprehensive services and site staff will conduct a comprehensive review of the immediate crisis that the family has.
- Comprehensive Services staff will contact the Mental Health unit for support. Report the situation and advise of potential need for crisis intervention or consultation.
- Consult the Service Area Manager(s) most connected to the crisis as needed for case review assessment and ensure comprehensive ~~services~~ support has been considered, and track crisis

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## Policies and Procedures

### Section 3: Family and Community Partnerships

until stabilized. The ~~Parent, Family~~ and Community Engagement Manager should also be notified regardless of the crisis area.

- Review the documentation of events in CLOUDS.

The role of Head Start staff is to recognize and assess the crisis situation, listen and provide assurance, and help the family use specialized resources in the broader community. Whether staff provide the needed assistance or intervention, or refer families to community resources, they are key sources of support to the family.

All situations defined as a family crisis by staff or parent will be assessed on a case by case basis. The Comprehensive Services Assistant Manager supporting the family's site will monitor the progress of events until the situation is stable. Document specialized services if applicable in CLOUDS.

E. Accessing Mental Health Services: Prevention Identification, Intervention, Program for Families  
CSB supports the social-emotional health and well being of both the child and the family. Opportunities for parents are provided to discuss concerns regarding their child or family, and assess support/treatment options with CSB mental health unit clinicians. Goals of the mental health prevention program are to:

- Improve self-concept
- Build positive relationships
- Develop coping skills for problem-solving
- Manage stress

Case management meetings are offered to families as needed to identify and address child or family issues, so that Comprehensive Services staff can provide information or additional resources to the family. Staff can assist families in obtaining appropriate referrals to address needs or concerns.

Child Abuse Prevention training for parents is scheduled annually at the site level during parent meetings. Additional resources are available to site and parents upon request. Please refer to the Family Handbook for more information.

#### F. Community Resources

##### 1. Resource Guides

Several community resource guides are used by Comprehensive Services staff, including: "Surviving Parenthood," published by the Child Abuse Prevention Council (925-798-0546) and "Regional Guides" published by Contra Costa Crisis Center (925-939-1916 or 211.org). The "Street Sheet," published by Shelter, Inc. (925-335-0698) is widely used and provides an "at-a-glance" perspective of what resources are available to assist with basic needs. The "Street Sheet" is easy to reproduce, is available in English and Spanish, and is published for East, Central, and West Contra Costa County.

Other community resources lists that are frequently distributed to CSB staff and parents include: one stop Career Center monthly calendars, First 5 Center monthly calendars, Local Library calendars, ~~Latina Center calendars~~, and Family Law workshops.

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### Section 3: Family and Community Partnerships

For individualized resources customized to fit particular needs, Comprehensive Services staff and other staff can access 211 Online Database (formerly known as CORD Contra Costa Online Resource Database) via the Internet at [www.crisis-center.org](http://www.crisis-center.org). This up-to-date system allows staff to search for resources by name, need, and geographical area. It has the capability of translating the resource information into 12 different languages and has a map feature allowing the user to create a map to and from the resource location. Parents are encouraged to use this resource from CSB computers, or if available, from their personal computer. ▽

#### 3. Other Methods of Access

Parents are also given access to information about community services by posted information on parent bulletin boards at sites, in the classrooms, from resource booklets, pamphlets, CSB Family newsletters, and flyers distributed to parents at orientation and/or other parent meetings/~~trainings~~.

#### 4. Site Based Resource and Referrals

Site Supervisors, site staff, and comprehensive services staff assigned to each site, should always be the first contact if a family has a crisis.

Each Site Supervisor is provided with Street Sheets and Resource Guides for the appropriate region of the county to assist families in accessing frequently used or needed resources. Copies of these Resource Guides should be posted on the Site Parent Board and also be distributed to each family so that it is easily accessible should they need it at a later time. Additional copies for photocopying and updated versions can be found at <http://www.shelterincofccc.org/resources.html> and <http://www.crisis-center.org/inforegional.html>. Resource boxes are also available at each site with additional resources and handouts that relate to topics from the Parent Interest Surveys. ~~Each site has a wellness center (self help) that will assist those families that don't ask for resources directly. The wellness centers contain information in the areas of: CSB's health, disabilities, nutrition, mental health, and parent, family and community engagement. The wellness centers are updated by the comprehensive services team on a quarterly basis.~~

#### G. Services to Pregnant Women Enrolled in the Program

The same methods of access to resources and services as noted above are to be used with pregnant women enrolled in the program. In particular, Family Partnership Agreements will address:

- Early and continuing risk assessments, which include assessment for nutritional status as well as nutrition counseling and food assistance, if necessary.
- Health promotion and treatment, including medical and dental exams, on a schedule deemed appropriate by attending health care providers as early in the pregnancy as possible.
- Mental health interventions and follow-up, including substance abuse prevention and treatment services as needed.
- Pre-natal education on fetal development, labor and delivery, and postpartum recovery
- Benefits of breastfeeding and accommodation of breastfeeding in the program.
- Health staff will visit the newborn within two weeks after birth to ensure the well being of both mother and child.

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## Policies and Procedures

### Section 3: Family and Community Partnerships

#### II. Parent Engagement

##### A. General Description

Parents are the first and best educators of their child. Parent Engagement in CSB is integrated in the classroom and in the administration. It is imperative that the parent becomes engaged with his/her child's educational program, and with all aspects of the program. Parents are encouraged to participate in policy-making groups at the center, agency, and grantee levels. Participation of parents is voluntary and is not required as a condition of the child's enrollment. Four ways have been designed to provide the parents and/or families of the program to actively participate in the following:

- Engage in decision-making process
- Engage as paid employees
- Engage as volunteers
- Engage as observers in their child's classroom.

Families can also expect to be offered the opportunity to be engaged in the program as equal partners in their child's education and learning in these ways and more:

- Attend an orientation to the program and the classroom to learn:
- Attend two Parent/Teacher conferences per year to learn:
- Attend Parent Meetings and parent trainings
- Participate as a Volunteer, staff, or observer
- Participate in the Male Involvement Program
- **Participate in Policy Council and other advisory bodies**
- **Participate in the Family Partnership Assessments**

##### B. Engagement in the Decision-Making Process

Participation in the process of making decisions about the nature and operation of the programs (as well as decision-making in the Contra Costa County Community Services Bureau Grantee-Operated Program and the Policy Council) occurs on two levels, which are:

1. Site Parent Committee Meetings: (comprised exclusively of the parents of children currently enrolled at each center or within a program option such as the Home-based option). This Committee deals with issues at the classroom, site or socialization level.

The Site Parent Committee carries out at minimum, the following responsibilities:

- Advise staff in developing and implementing local program policies, activities, and services (\*including but not limited to classroom curriculum and activities, and center-wide activities)
- Plan, conduct, and participate in informal as well as formal programs and activities for parents and staff (\*including but not limited to parent training, special events, and parent/child activities).
- Within the guidelines established by the governing body, Policy Council, or Policy Committee, participate in the recruitment and screening of Early Head Start and Head Start employees.

The following is the staff protocol for implementation of parent meetings as **family** engagement:

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- Comprehensive Services Clerks, Comprehensive Services Assistant Managers and CS Managers
    - Provide support at 1st parent meeting to establish Policy Council representative and Parent Committee officers
  - As needed:
    - Assist in providing resources for speakers at Parent Meeting upon request by Site Supervisor.
  - Monthly-week before meeting:
    - Site Parent Meeting Chair
    - Announce upcoming meeting
    - Prepare agenda, make copies, prepare minutes
    - Copy minutes from prior month
    - Post agenda on Parent Board
- Secure training/guest speakers (with Site Supervisor assistance).
- Monthly (Site Supervisor with the support of Comprehensive Services staff as needed):
    - Supports Site Parent Committee Meeting Chair with monthly duties assigned
    - Provides support for translation of minutes/agendas if needed.
    - Provides staff report for meeting.
    - Ensures parent meeting binder is current for school year with training tally, agendas, minutes, sign-in sheets and copies of handouts given to parents.
    - Attends Parent Meeting or provide staff support to parent officers.
    - Within school year
    - Site Supervisor with the support of Comprehensive Services staff as needed:
    - Ensures that required trainings such as Pedestrian Safety (By September 30th), Child Abuse Prevention (April) and Kindergarten Transition are provided at the site.

#### 2. Policy Council

The Policy Council operates in accordance with Internal Operational Procedures of the County Board of Supervisors, the Brown Act, Simplified Roberts Rules of Order, Head Start Revised Performance Standards, and Better Governance Ordinance. The Policy Council By Laws, which are reviewed and approved annually by the PC, contain detailed information including but not limited to the following:

- Purpose of the Policy Council and composition information
- Procedures for handling business
- Duties and Responsibilities of members
- Membership and Meeting information
- Standards of Conduct requirements
- For more information regarding the roles and responsibilities of the Policy Council, refer to the Program Governance section under Administration of the Policies and Procedures.

The following is the staff protocol for implementation of Policy Council as an opportunity for Parent Engagement:

i. Site Supervisors with the support of designated Comprehensive Services staff is responsible for the following:

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- o Attend 1st Parent Meeting at each site where there is Head Start or Early Head Start enrolled families as assigned.
- o Assist in establishing site officers and Policy Council Rep(s). (Refer to resources and handouts available in Parent Involvement section of CSB forms that outline general duties of policy council representatives.)
- o Provide newly elected Policy Council Rep(s) with Policy Council Representative Changes (See Form CSB-327) form to complete.

Forward to clerk of the Policy Council.

ii. Site Policy Council Representative with the support of site staff:

- Monthly
- Ensures posting of upcoming Policy Council Agenda on Parent Board 96 hours before the Policy Council meeting.
- File Policy Council Agendas in site Parent Meeting Binder.
- Prepare monthly Site Report to present to Policy Council.
- Share and distribute flyers and information received at the Policy Council Meeting to parents at the monthly site committee meeting.
- **Attend Policy Council meeting and take back information and resources to next Parent meeting at their site.**

iii. Site Supervisor:

- Monthly-week of PC
- Confirm representation for site. If rep(s) cannot attend, secure an alternate.
- West Co. sites only: Confirm if Policy Council rep(s) needs transportation and inform Site Supervisor **or** designated **staff** to transportation for the respective month.
- Facilitate election of new Policy Council representative if replacement is needed.
- As needed
- If the elected Policy Council Representative is unable to fulfill his/her duties, he or she submits a letter of resignation to site or comprehensive services staff to be forwarded to the clerk or manager of PC.
- Site conducts election for replacement Policy Council representative at the next Parent Committee meeting.
- Provide new Policy Council representative with Policy Council Representative Changes (See Form CSB-327) form to complete and forward to the clerk of the Policy Council.

iv. Comprehensive Services Manager Assigned to Policy Council

Monthly-after PC:

- Provide Policy Council Summary to site for Policy Council representative to report at next parent meeting.
- Post minutes and agenda on EHSD public website in both English and Spanish.

#### C. Engagement in the Classroom as Paid Employees, Volunteers, or Observers

##### 1. As Paid Employees

Contra Costa County CSB defines “paid employees” as currently-enrolled parents who have qualified for an employee position.

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Preference will be given to parents of children formerly or currently enrolled in CSB's programs. Parents who become paid employees of Contra Costa County (other than substitutes who work less than 10 hours in a month in the program) may not participate on the Policy Council.

#### 2. As Volunteers

To be considered for volunteering, a currently enrolled parent must take part in an orientation about the program and the specific aspects of being a volunteer. Parents and family members are encouraged to participate in the classroom as frequently as their schedule permits. Please refer to the Volunteer Policy under Human Resources of the Policies and Procedures for more information on CSB Volunteer Policy.

If parents are unable to volunteer at the center, the following home activities are suggested:

- Helping children extend their experience in the classroom
- Helping children to use materials in different ways, providing children with appropriate work and strategies to help them solve problems
- Encouraging children to communicate with one another so that they can help themselves work out problems and explore alternatives
- Organizing, fixing, making toys or sewing/repair of dramatic play clothes
- Participating in story-telling activities with children
- Making observations of their child
- Making flannel board stories
- Going to the library to check out books for the classroom
- Translating written materials.

#### 3. As Observers

Parents of currently enrolled children may observe in their child's classroom or during the Home-based socialization time at any point during program operations.

Other persons may observe after obtaining permission from the Site Supervisor/Early Childhood Home Educator by indicating the purpose of the visit, and how long they plan to visit.

Parents and other family members have a responsibility to treat staff and other program participants with courtesy. Aggressive or abusive actions towards any staff members, parent, or another child, by the child or the child's parent is unacceptable and may result in a child/family being withdrawn from the program. If this should occur, CSB will work with the parent to provide resources for alternative placement.

#### 4. Male Involvement Program

CSB supports the engagement of both parents in their children's educational experience that will ultimately help the children to reach their full potential. Regardless of living arrangements, it is our goal to include both parents to the maximum extent possible in the family partnership process and have ongoing communication with the child's teacher as co-partners in their child's education and development.

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CSB makes fathers feel welcome and supported at our sites and offer activities that will be meaningful to both father and mother. The goal of male involvement is to provide fathers and other significant males with opportunities to improve their lives so that they can improve the lives of their children. Activities and support for fathers and engaged men are determined locally through communication with site or comprehensive services staff in a variety of ways such as: ongoing communication as a result of a parent-teacher conference, home visit, other means with a teacher or site supervisor, and fatherhood support groups (24/7 Dad).

#### D. The Role of Staff in Family Engagement

Staff members have a major role in providing opportunities for parents/families to become engaged. Site staff and Comprehensive Services staff (line and management) have the responsibility of ensuring that parents of children currently enrolled and/or family members have the opportunity to be engaged in all aspects of the program. CSB defines opportunity as the staff's willingness to assist families in removing barriers to their involvement.

1. Orientation: CSB staff ensures that parents have the opportunity to be engaged in the program by providing a Parent orientation at time of placement. Once a child is ready to be placed at a site, comprehensive services, or site staff meets with the family to complete the placement process. This includes the Parent Interest Survey and a review of the Family Handbook which provides an overview of our CSB program, family parent engagement opportunities, and its service models & areas. The Family Handbook is updated annually in conjunction with the annual review of CSB Policies and Procedures. Contents of the Handbook are limited to appropriate content regarding program information, school readiness, staff professional development, parent, family, and community engagement, health and safety requirements, nutrition information, social services and more. Please refer to the current Family Handbook for more details.

Site staff and Early Childhood Home Educators work with parents to plan classroom activities, field trips, socializations and home-based activities. Planning with parents at the site level occurs at parent meetings and individually through parent conferences twice a year. Child care and transportation are planned and provided when needed to allow for maximum family engagement.

2. Family Engagement Task Force: Ensures agency-wide opportunities are communicated to all parents. Membership includes a staff representative from each area of the county, the Parent, Family and Community Engagement Manager, and at least one parent.

All centers are required to have a Parent Information Board, located in plain view of all parents visiting the facility. For centers with several buildings, a Parent Information Board should be included at each building. These boards are used to communicate with families and should contain current events, parent committee meeting agendas and minutes, Policy Council agendas and minutes, job announcements, special events, and parent engagement opportunities such as Male Involvement, Triple P (Positive Parenting Program), and community events. Materials should be posted in English and Spanish whenever possible.

CSB monitors both Delegate Agencies and subcontractors, and the directly operated program to determine the extent of parent engagement, giving technical assistance to programs as needed.

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#### E. Development of Activities for All Parents

Currently enrolled parents at the classroom and site levels will develop activities for families designed to meet the families' needs and interests.

Parent Interest surveys are distributed to enrolled families at enrollment and are tallied by Comprehensive Services staff by September 30th to determine interests and needs of parents at each site. Information from these surveys will be analyzed by staff, and will form the basis for development of activities and parent trainings that reflect the interests of the site. Parent Engagement requests found consistently across the program will be considered for agency-wide opportunities.

Parents should work in co-partnership with classroom staff, or with their Early Childhood Home Educators to design child development activities and special events. Parents and/or family members are encouraged to be in contact with classroom personnel on a regular basis.

Staff should assist parents define their own feelings about child rearing, as well as building partnerships with parents (to develop confidence and knowledge about their children's education). In turn, parents contribute their experiences and values to the program in a way that is comfortable for each parent. Various opportunities are made available throughout the year, and support is provided by both site and comprehensive services staff to assist each family to participate to the extent of their comfort, ability and availability.

#### F. Parent Education / Home Activities

Teachers provide parents with individualized home activities to reinforce their child's learning objectives. Home activities focus on the use of household items and emphasize a developmentally appropriate approach to working with preschoolers.

Home activities can be introduced to parents at site parent meetings, home visits/parent conferences, and daily conversations with parents. Home activity ideas offered to parents should be documented on the second Home Visit/Parent Conference form.

Each center has a Parent Lending Library/Wellness Center available to parents on a checkout basis. Books and pamphlets about Parenting, Health, Mental Health, Dental Care, Nutrition, Child Development, and Home Activities are all part of the library. For more information on Home Activities, refer to the Education section of the Policies and Procedures.

#### G. Parent Notification of Community Services Bureau Changes

Following is the Grantee's procedure for notification of parents of staff changes, new hires, substitutes, staff departures, and other applicable CSB staff movement:

- Classroom Substitute – the Site Supervisor, Teacher or Assistant Director will notify all parents in writing, of a change in or substitution of Site Supervisor or teaching staff at the site (or of any other change affecting their children's learning environment).

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- Hiring/Assignment/Departure of Staff – in writing and verbally, the Site Supervisor or Head Teacher notifies parents that a new employee is on-site.

#### H. Family Literacy

Family Literacy will be promoted on a group and individual family basis through information obtained in the Family Partnership Agreements, Parent Interest Surveys, parent/teacher home visits, parent conferences, center parent meetings, and from other parent contacts. Family Literacy is approached as a collaborative venture, wherein interagency agreements are established to streamline access to the services of a variety of community agencies. Examples of Family Literacy opportunities include:

- Reading Is Fundamental, where parents are trained in storytelling and then scheduled for story sessions in their child's classroom. At the end of each session, each child chooses a book to take home and keep as his/her own.
- Raising a Reader book bags
- Reading challenges
- Home activities

Comprehensive Services and site staff work consistently through the year to maintain effective working relationships with community agencies providing literacy support services. These may include, but are not limited to, United Way, Literacy Alliance, Libraries, ROP, RIF, Project Second Chance, CalWORKs, and Diablo Valley Literacy Council, or provide parents with resources for literacy services at their local library and more depending on the need and interest of families.

#### I. Parent and Family Engagement in Health, Nutrition, and Mental Health Education

The Family Partnership Agreement-Family Partnership Assessment utilizes a Family Development Matrix developed by the California Department of Community Services. This matrix specifically addresses health, nutrition and mental health education. By utilizing this matrix, staff gains the information they need to:

- Assist parents in establishing and utilizing a medical and dental home
- Encourage parents to be active participants in their child's health care
- Provide parents with the opportunity to learn the principles of preventive medical and dental health, health and safety education, and individualized health training specific to the child and/or family needs.

In addition to addressing education via the Family Partnership Agreement, there are two advisory groups that allow appropriate time/opportunity for maximum engagement in Health, and Nutrition:

- Health Services Advisory Committee: This committee is composed of staff, parents, and experts in the community on the topic of health, nutrition and mental health for pregnant women, children 0-5 years old, and their families. Members inform staff of current issues and practices so that the program can address them. Parents also have an opportunity to express their concerns regarding health-related issues affecting their family or their community by providing input to local community agencies regarding current health-related events, trends, service gaps. This group meets twice per year. Parents indicate interest on the Volunteer Survey that is completed at placement (See Form CSB-300)
- Nutrition Advisory Committee: This committee is composed of staff and parents. Members of this committee exchange information regarding the food service program. They may participate

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in cooking project demonstrations, and discuss and explore nutrition issues such as obesity, anemia, cancer, breastfeeding, and other topics of interest to the parent participants. This group meets twice a year. Parents indicate interest on the Volunteer Survey. (See Form CSB300)

#### J. Parent **and Family** Engagement in Community Advocacy

Through the encouragement of parent **and family** engagement at all levels, the program provides parents with important information that will empower them and serve as a practical resource to help them in their day-to-day lives.

One of the goals of parent **and family** engagement is to support and engage parents in their child's education and development. Information exchanged during the first and second parent-teacher conferences, through case management meetings, sharing of health screening results, and on-going communication with parents, staff are educating parents on the importance of seeking out support for the interest and well being of their child.

Through the Family Partnership Agreement Process, staff support and encourage families to develop goals, or support existing goals in order to support the growth and well being of their family.

Through the Policy Council, parents are provided an opportunity to extend their advocacy into the community as they are involved in the decision making process for their Head Start and Early Head Start Programs. They gain experience in a public meeting setting and will have knowledge of public meeting rules should they wish to advocate in their local public meetings. They are exposed to community resources and in turn become vital resources to other parents at their respective centers. The executive committee shares information about grass roots advocacy for the Head Start program and encourages parents to write letters to their elected officials supporting their Head Start program. This advocacy extends beyond supporting their own child which is what brought them to Head Start initially. It is vital that parents remain concerned and informed about issues that affect their lives and the lives of their children. Parents are encouraged to form their own opinions regarding issues and are provided with information on advocacy skills so that they can have a voice as well as leadership skills.

#### K. Parent **and Family** Engagement in Transition Activities

Helping each parent become an effective advocate is an important transitional strategy. One goal should be to help the parent learn about her/his rights, as stated in:

- Public Law 100476 - Individuals with Disabilities Act (IDEA)
- American With Disabilities Act (ADA)
- Public Law 93- 80 - The Family Educational Rights and Privacy Act (FERPA)
- Public Law 99-372 - Handicapped Children's Protection, Education Handicapped Act (EHA)

Parents should know their rights to ensure that they and their child(ren) are treated fairly. CSB staff may need to help parents develop some assertiveness skills. Parents need to know how to approach their child's teacher, and tactfully request that an arrangement is made to communicate regularly with the teacher. Modeling and role-playing are effective ways to help parents learn/practice discussions with teachers and administrators. This could be done individually or in small groups with other parents (some of whom may have had experience in working with teachers from other agencies). The focus

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should be positive assertion of the parent's rights. Staff should concentrate on the benefits that might result for the child if the parent continues an active role in the education of the child.

Parents are involved in transitions throughout the program to include: home to school, infant to toddler; toddler to preschool, preschool to kindergarten; routine transitions during class time; and transitions from the parking lot to the center. For more information on transitions, refer to the Education and Disabilities sections of the Policies and Procedures and the CSB Family Handbook.

#### L. Parent ~~and Family~~ Engagement in Home Visits

Head Start enrolled parents are encouraged to participate in two home visits during the program year. The first visit may occur at the time of placement and is intended to be an opportunity for the teacher to meet the child and family, and ensure that the child's entry into the program is successful. Comprehensive Services staff may accompany the teacher if necessary. This provides an opportunity for parents to share information about their child to the teacher.

Individual needs are also addressed at this time as well as completion of some required program documentation. The second visit occurs near the end of the program year and is intended to exchange information regarding progress the child has made, and to address any areas of concern before the child leaves the program or begins another year with the program.

Parents may decline the opportunity for a home visit at any time. While home visits are not required as a condition of the child's enrollment or participation in these program options, every effort must be made by program staff to explain the advantages of home visits. Home visits are, however, required for the Home-based option and in the Early Head Start program where staff must visit the newborn within two weeks of birth. For more information regarding these programs, refer to the Education section of the Policies and Procedures.

#### M. Parent Engagement in Recruiting and Interviewing Head Start and Early Head Start Employees

All parents are invited to participate in the recruiting and interviewing of EHS and HS employees. Parents are included as part of the interview panel for consideration of employment. Parents can be engaged by showing interest as a Policy Council member or by way of the Volunteer Survey that is done upon enrollment. A list of parents who are interested in being on interview panels is created at the beginning of each year. Training and orientation of the interview process is provided for all parents who wish to participate. For more information on staffing procedures, refer to the Human Resources section of the Policies and Procedures.

#### N. Parent's Appeal Rights

Parents have the right to receive a Notice of Action that informs them of their acceptance or denial of CSB services.

Parents have the right to appeal adverse actions.

The appeal process provides a written fourteen (14) day notice before the action becomes effective. Information regarding the appeal process is located on the back page of a Notice of Action.

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During the appeals process, CSB must not change the services to the family except for health or safety reasons. For more information, please refer to the Enrollment and Re-Enrollment section of the Policies and Procedures.

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## Policies and Procedures

### Section 3: Family and Community Partnerships

#### III. Community Partnerships

##### A. Description

CSB takes an active role in community partnership building and advocacy to enhance the delivery of services to children and families. Based on a variety of information sources, such as the Community Assessment, Family Partnership Agreements, regulatory requirements and current legislation, program staff actively seeks out and enters into partnerships with various community entities and individuals to coordinate the access to resources and services to children, families, and staff. These partnerships, and the manner in which they are conducted, are documented by virtue of interagency agreements and memoranda of understanding, which clearly delineate the responsibilities of both parties, are updated regularly, and are responsive to the needs of children and families.

##### B. Child Care Partnerships

CSB engages several Community-Based Organizations on a contractual basis to provide child-care and development services to eligible families. Comprehensive Services Managers are assigned to these programs operated by our child care partners to provide support and technical assistance and to ensure compliance with federal and state regulations. Collaborative partnerships with child care agencies enhance the educational, health care, and social services to children and families throughout the county.

Providers of child care services include: First Baptist Church, West Contra Costa State Preschool Program, We Care Services for Children, Antioch Partnership, YMCA of the East Bay, Martinez Early Childhood Center, Concord Childcare, Richmond College Prep, Crossroads High School, Cambridge Community Center, Brighter Beginnings, and Cameron School.

##### C. Partnerships with Agencies, Entities, and Individuals

CSB partners with over a hundred community-based organizations including but not limited to:

- Health Services: Family, Maternal, Child Health Program (FMCH), Child Health and Disability Prevention Program (CHDP), Gurnick Academy for Medical Arts, Elks Vision, CAIR, Integrated Pest Management- Bed Bug Task Force, John Muir Child Safety Coalition, Give Kids a Smile Day, Children's Oral Health Program, Lead Prevention program, Communicable Disease program, Community Wellness & Prevention program.
- Child Welfare: County Child & Family Services (CCC EHSD-CFS)
- Mental Health: County Mental Health Program / MediCal Reimbursement, C.O.P.E. Family Services program (Triple-P program).
- Nutrition: Women, Infants and Children Nutrition Program (WIC), CCFP Roundtable, Solano & Contra Costa Food Bank, Healthy Families, Cooking Matters, CalFresh, BANPAC, UC Cooperative Extension (EFNEP).
- Disabilities: Regional Center, California Children's Services, and SELPA, Child Health and Disability Prevention.
- Family Support: Department of Child Support Services (DCCS), SparkPoint Center, ~~County Probation.~~
- Child Abuse Prevention: Family Stress Center's Child Assault Prevention Program, ~~Families Thrive.~~

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- Professional Associations: California Child Development Administrator's Association (CCDAA), National Association for the Education of Young Children (NAEYC), California AEYC, Contra Costa AEYC, Local Planning Council (LPC), National Head Start Association (NHSA), California Head Start Association (CHSA), and Region IX Head Start Association (RHSA).
- Educational Institutions: Contra Costa College District, UC Davis, UC Berkeley, and Cal State University East Bay.
- Other Supportive Services: Reading Is Fundamental, Supporting Father Involvement, ~~Zero~~ Tolerance for Domestic Violence, **Raising A Reader** and First 5 Commission.

In addition to partnering with agencies and entities to provide services to our children, families, and staff, CSB also conducts outreach to organizations for the purpose of securing volunteers to participate in program activities. Examples of this type of outreach include our work with the Volunteer Center, CalWORKs (work experience clients), Teens Link with the Community (teens fulfilling community services requirements in High School), and the Telephone Pioneers (retired Pacific Bell employees). Visiting experts are also recruited from the community to enhance training for children, staff, and families.

Groups of parents and professionals, recruited to participate on Advisory Committees (Health Services Advisory, Community Colleges, Budget, Bylaws, Education and Family Services, Nutrition, and Personnel Committees) ensure quality planning for needs/interests of children and families. These committees contribute parent and professional input to the planning and program implementation process and are recognized for the important role they play in community partnership building.

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CONTRA COSTA COUNTY EMPLOYMENT & HUMAN SERVICES DEPARTMENT  
COMMUNITY SERVICES BUREAU

# POLICIES AND PROCEDURES

## SECTION 4-PROGRAM DESIGN

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#### J. Eligibility, Recruitment, Selection, and Attendance-ERSEA

##### A. State Child Development Program

The California Department of Education Child Development Division funds the state-funded portion of our program. The matrix, below, provides an overview of this program.

PY = Program Year

	CSPP		CCTR
Program type & hours of care	Part-day 3 – 3:59 hrs	Full-day  More than 4 hrs  Includes ¾ time and  Full-time	Full-day  Program  Includes ½, ¾  Time and full-time
Age of Child	3 or 4 by October 1 of PY *Continued summer enrollment allowable for K-eligible children until K start if requested and available		Zero – three (until eligible for CSPP)
% Preschoolers age 4 by October 1 of PY	50% of CSPP children at each site		N/A
Eligibility Requirement	2008 Eligibility regulations apply		
Maintaining Ongoing Eligibility	N/A Once initially Certified, child is “in” for the Remainder of the PY	All families must report changes to income & family size within 5 days for recertification of eligibility. Failure to meet ongoing eligibility results in termination of full-day services.	
		Family may choose to receive part-day services based on their initial eligibility or pay full fee for services.	N/A
Need Requirement	N/A	2008 Need regulations apply	
		Preschool children who attend only part of the week (e.g. M W F) or part of the day (11 – 5) can attend their class M-F during the “part-day preschool portion of the day” 8:30-12:00. All hours outside of this time must be supported by need.	

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Maintaining Ongoing Need	N/A	All families must report changes to need within 5 day for recertification of need. Failure to meet ongoing need results in termination of full-day services.		
		Family may choose to receive part-day services or pay full fee for services.	N/A	
Family Fees Assessed	Yes	Program	Hours of Certified Care	Type of Fee Assessed
		CCTR part-day	3:59 hours a day or less	Part-Time
		CCTR ¾ day	4 to 6:29 hours a day	Part-Time
		CCTR Full-Day	6:30 to 10:29 hours a day	Full-Time
		CCTR Full-Day Plus	10:30 or more hours a day	Full-Time
		CSPP Part-Day	3:59 hours a day or less	Part-Time
		CSPP ¾ Day	4 to 6:29 hours a day	Part-Time
		CSPP Full-Day	6:30 to 10:29 hours a day	Full-Time
		CSPP Full-Day Plus	10:30 or more hours a day	Full-Time
		If family of a 3-5 yr old child has need for less than 4 hrs a day, try to place them in a part-day slot (family fees apply).		
		If family of 0-3 Yr old child has need for less than 4 hrs a day, the part-time fee applies.		
Adjustment Factors	N/A	Time and special criteria adjustment factors apply. Time criteria are based on total number of hours in care (not just hours of need). CCTR toddler special criterion applies only until child is 36 months old regardless of type of class child is in. ¾ time – 4 to 6:29 hrs Full-time – 6:30 to 9:59 hrs		

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		Full-time Plus – 10 hrs or more
Enrollment Priorities	Transfers (i.e. families of children already certified for care including toddlers leaving CCTR) CPS - CSB622 At-Risk Referral Homeless returning 4 yr olds regardless of income eligible 4 yr olds* eligible 3 yr olds* over income 4 yr olds (part-day only) over income 3 yr olds (part-day only)  *Refer to 2009 Enrollment Priorities for State Preschool	Transfers CPS or “at risk” Homeless Eligible children Per income ranking
Over income waivers	15% of part-day slots allowed to be 10% over State income ceiling.	Not Allowed
Recertification for next PY	N/A Must do 2 <sup>nd</sup> “initial” application prior to next PY.	At least every 12 months When changes in income, family size or need. At the discretion of the site supervisor anytime during the program year.
Reporting	Revised 8501	9500

#### B. Definitions

As used in the Program Requirements:

- Adjusted monthly income-The total countable income as defined below, minus verified child support payments paid by the parent whose child is receiving child development services, excluding the non-countable income listed below:
  - Earnings of a child under age 18 years;
  - Loans;
  - Grants or scholarships to students for educational purposes other than any balance available for living costs;
  - Food stamps or other food assistance;
  - Earned Income Tax Credit or tax refund;
  - GI Bill entitlements, hardship duty pay, hazardous duty pay, hostile fire pay, or imminent danger pay;
  - Adoption assistance payments;
  - Non-cash assistance or gifts;
  - All income of any individual counted in the family size that is collecting federal Supplemental Security Income (SSI) or State Supplemental Program (SSP) benefits;

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 CSPP . CCTR¶  
 Program type¶  
 & hours of care Part-day¶  
 3 - 3:59 hrs . Full-day¶  
 More than 4 hrs¶  
 Includes ¼ time and full-time Full-day program ¶  
 Includes ¼, ½ time and full-time¶  
 Age of child . 3 or 4 by November 1 of PY¶  
 \*continued summer enrollment allowable for K-eligible children until K start if requested and available Zero – three (until eligible for CSPP)¶  
 % Preschoolers 4 by November 1 . 50% of CSPP children at each site N/A¶  
 Eligibility Requirement . 2008 Eligibility regulations apply¶  
 Maintaining Ongoing Eligibility ¶  
 N/A¶  
 Once initially certified, child is “in” for the remainder of the PY . All full-day families must report changes to income & family size within 5 days for recertification of eligibility. (5-day rule does not apply to part day CSPP)¶

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- Insurance or court settlements including pain and suffering and excluding lost wages and punitive damages;
  - Reimbursements for work-required expenses such as uniforms, mileage, or per diem expenses for food and lodging;
  - Business expenses for self-employed family members;
  - When there is no cash value to the employee, the portion of medical and/or dental insurance documented as paid by the employer and included in gross pay; and
  - Disaster relief grants or payments, except any portion for rental assistance or unemployment.
- **Certify eligibility**-The formal process the staff goes through to collect information and documentation to determine that the family and/or child meets the criteria for receipt of subsidized child development services. The signature of the Site Supervisor on an application for services attests that the criteria have been met.
- **Authorized representative**-The person designated by the agency to certify eligibility for subsidized services. For CSB's program, this means the Site Supervisor (SS) for center-based programs or Assistant Director (Assistant Director) or **designee** for centers not having a Site Supervisor.
- **Child Protective Services**-Children receiving protective services through the local county welfare department as well as children identified by a legal, medical, social service agency or emergency shelter such as abused, neglected or exploited or at risk of abuse, neglect or exploitation.
- **Children with disabilities**-Children who have been determined to be eligible for special education or early intervention services in accordance with Part B or C of the Individuals with Disabilities Education Act (IDEA). These children have a current Individualized Education Plan or Individualized Family Service Plan. These children may be developmentally disabled, hearing impaired, deaf, speech impaired, visually impaired, seriously emotionally disturbed, physically impaired, have other health impairments such as: deaf-blind, multi-handicapped or specific learning disabilities, requiring the special attention of adults in a child development setting. Children, birth to three years, may be "at-risk" or with disabilities as defined by IDEA.
- **Declaration**-A written statement signed by a parent under penalty of perjury attesting that the contents of the statement are true and correct to the best of his or her knowledge.
- **Displace families**-To de-enroll families in order to reduce service levels due to insufficient funding or inability of CSB to operate one or more sites because of reasons beyond control of the department, such as floods or fire.
- **Family**-The parents and the children for whom the parents are responsible; who comprise the household in which the child receiving services is living. For purposes of income eligibility and family fee determination, when a child and his or her siblings are living in a family that does not include their biological or adoptive parent, "family" shall be considered the child and related siblings.
- **Fee schedule**-The Family Fee Schedule, issued by the department pursuant to Education Code section 8447(e). The fee schedule is used by child development staff to assess fees for families utilizing **State** child care and development services.
- **Homeless**-A person or family that lacks a fixed, regular, and adequate night-time residence and has a primary night time residence that is:
  - A supervised publicly or privately operated shelter, transitional housing, or homeless support program designed to provide temporary living accommodations or

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- A public or private place not designed for, or ordinarily used as, a regular sleeping accommodation for human beings.
- **Income eligible**-For the purpose of child care and development services that a family's adjusted monthly income is at or below 75 percent of the state median income, adjusted for family size.
- **Income fluctuation**-Income that varies due to:
  - Migrant, agricultural, or seasonal work;
  - Intermittent earnings or income, bonuses, commissions, lottery winnings, inheritance, back child support payment, or net proceeds from the sale of real property or stock;
  - Unpredictable days and hours of employment, overtime, or self-employment.
- **Legally qualified professional**-A person licensed under applicable laws and regulations of the State of California to perform legal, medical, health or social services for the general public.
- **Parent**-A biological parent, adoptive parent, stepparent, foster parent, caretaker relative, legal guardian, domestic partner of the parent, or any other adult living with a child who has responsibility for the care and welfare of the child.
- **Parental Incapacity**-The temporary or permanent inability of the child's parent(s) to provide care and supervision of the child(ren) for part of the day due to a physical or mental health condition.
- **Recipients of Service**-Families and/or children enrolled in a child care and development program subsidized by the California Department of Education.
- **Self-Certification of Income**-A declaration signed by the parent under penalty of perjury identifying:
  - To the extent known, the employer and date of hire and stating the rate and frequency of pay, total amount of income received for the preceding month(s), the type of work performed, and the hours and days worked, when an employer refuses or fails to provide requested employment information or when a request for documentation would adversely affect the parent's employment; or the amount and frequency of sources of income for which no documentation is possible.
- **State median income**-The most recent median income for California families as determined by the State Department of Finance.
- **Total countable income**-All income of the individuals counted in the family size that includes, but is not limited to, the following:
  - Gross wages or salary, advances, commissions, overtime, tips, bonuses, gambling or lottery winnings;
  - Wages for migrant, agricultural, or seasonal work;
  - Public cash assistance;
  - Gross income from self-employment less business expenses with the exception of wage draws;
  - Disability or unemployment compensation;
  - Workers compensation;
  - Spousal support, child support received from the former spouse or absent parent, or financial assistance for housing costs or car payments paid as part of or in addition to spousal or child support;
  - Survivor and retirement benefits;
  - Dividends, interest on bonds, income from estates or trusts, net rental income or royalties;
  - Rent for room within the family's residence;

- Foster care grants, payments or clothing allowance for children placed through child welfare services;
- Financial assistance received for the care of a child living with an adult who is not the child's biological or adoptive parent;
- Veterans' pensions;
- Pensions or annuities;
- Inheritance;
- Allowances for housing or automobiles provided as part of compensation;
- Portion of student grants or scholarships not identified for educational purposes as tuition, books, or supplies;
- Insurance or court settlements for lost wages or punitive damages;
- Net proceeds from the sale of real property, stocks, or inherited property; or
- Other enterprise for gain.
- Update the application-The process of revising the application for services between recertification. The application shall be revised by completing a 9600S form with the latest family information that documents the continued need and eligibility for child care and development services.

#### C. Child Age and Family Income Eligibility

The Community Services Bureau's program enrolls children according to Federal and State eligibility criteria. For the Head Start program, children are selected for service based primarily on the family income adjusted for family size, with lowest income families selected first. Children at risk of abuse or neglect are considered high priority. Within age groups, priority in the pre-school program is given to four-year-old children from the neediest families. Please refer to CSB's Selection Criteria found in the ERSEA folder on the Shared Drive for more information.

The Community Assessment is used to determine location of centers and program options to accommodate the areas of greatest need in the county.

Every year, parents/staff review and update placement of centers and program options, restructuring enrollment to best meet community needs as county demographics change.

#### D. Recruitment

##### 1. Strategies

CSB employs a variety of recruitment strategies to ensure that the neediest children from low-income families have access to services. Each year, a recruitment plan responsive to changes in communities served by CSB is developed and implemented. Various recruitment materials are developed and disseminated throughout the community. There are a variety of ways to access the program by referral or personal contact. Walk-ins are always welcome. Word of mouth, via CSB parents is the best method of recruitment. Staff from all content areas of the program conducts presentations to community-based entities wherein detailed information is provided to expedite access to our program by their clients. Articles and ads are published in local publications such as agency newsletters, websites, and social networking sites. For detailed strategies, see the Recruitment Plan in the ERSEA folder on the Shared Drive.

##### 2. Recruitment Policy

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All staff, parents, Policy Council members and partners are responsible for giving out information in accordance with the annual Recruitment Plan.

All CSB Staff are responsible for:

- Phone calls: Hotlines are answered at regularly schedule intervals throughout the day by designated staff that log the entries and follow up on the Shared Drive. Staff that answers pre-registration hotlines is responsible for taking basic pre-registration information over the phone and entering it into CLOUDS.
- Walk-ins: All staff assist client in filling out CSB690-Waiting List Pre-Registration Form (See CSB Forms)
  - If client has brought in any documentation, such as pay stubs and/or birth certificate make copies and staple to the waitlist form.
  - Fill in all sections of the form.
  - Put documents in a sealed envelope, with name and location of Comprehensive Services Clerk who supports the PRIMARY desired location of child care, as requested by the client. Mark CONFIDENTIAL on envelope.
  - Place in Comprehensive Services box at site.
- Mail Received:
  - Route to appropriate person if mail came in self-addressed envelope.
  - If not, send to Comprehensive Services Clerk who supports that center or program.
- Faxes: All referral forms are sent to the ERSEA analyst, logged, and then forwarded to the appropriate office for follow up.

#### E. Selection Process

Children are selected from waiting lists that are maintained in CLOUDS for each Head Start classroom and Home-based program. After the agency receives the application material, children are ranked based on CSB's admission priorities. Ten percent of our placement slots are designated for children with disabilities and every effort is made to accommodate children with disabilities.

##### 1. Selection Criteria

To ensure that the neediest children from low-income families are selected for CSB's services, CSB implements its Selection Criteria/Admissions Priorities to prioritize neediest families, which is aligned with the state's priorities by a strong community need for child care for working families.

At least 10% of the total number of enrollment opportunities at CSB is designated for children with certified disabilities. Families of children with disabilities are asked to provide documentation from the doctor or a copy of the child's IFSP or IEP.

The Site Supervisor and other department managers insure that the selection criteria meet the state and federal regulations regarding selection of families and children to the program. The Selection Criteria/Admissions Priorities is updated and approved by the Director, Policy Council, and Board of Supervisors annually.

#### F. CLOUDS Waitlist

##### 1. Procedures for maintaining Eligible / Accepted Families on Waitlist

In Maintaining Eligible / Accepted Families, Comprehensive Service Clerks are responsible for:

- Taking basic pre-registration information over the phone or in person and enter into CLOUDS

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- Conducting interviews
- Determining income eligibility based on family size
- Making copies of client documents e.g., pay stubs, birth certificate, immunization papers for the temporary file
- Creating, signing and dating income calculation sheet
- Establishing a temporary file for the child (CSB Eligibility/Enrollment checklist)
- Noting on child data sheet in CLOUDS as to the location of the temporary file

Temporary file should remain with the Comprehensive Services Clerk, who supports the PRIMARY desired location requested by the family, until file is ready to be reviewed by the Comprehensive Services Assistant Managers.

Note: Eligible/Accepted temporary files are retained by the Comprehensive Services Assistant Manager. Keep the files in a locked drawer or cabinet.

Collect the following information in the temporary file:

- Copy of the child's birth certificate or other age verification: **for state funding programs collect birth certificates for all children in the family size; for Head Start/Early Head Start collect only the birth certificate(s) of the child(ren) to be enrolled.**
- Documentation of Family Size (**unborn can only be counted in family size for Early Head Start**)
- Parents' income verification (e.g., pay stubs) or self-certification form, if applicable (signed & dated).
- Income calculation worksheet (signed & dated)
- Copies of the child's immunization records (not necessary to determine eligibility)
- Health history from CLOUDS (signed and dated)
- Child Care Data Collection Privacy Notice and Consent Form
- Documentation of Disabilities, if applicable
- Documentation of Homelessness, if applicable

Once file has been determined eligible by Comprehensive Services Assistant Manager:

- Review and update information on file. Review and update Child and Family Data sheets.
- Review Health History
- Update Emergency Information (See Form CSB214)
- Flag file in the top right front corner of the file using the following sticker dot system:
- Blue Dot: Child with Disabilities
- Red Dot: Child with Health/Nutrition/Mental Health Concerns
- Yellow Dot: Child that transitioned from I/T to Preschool
- **White Dot: Used to cover up any colored dot that is no longer applicable to the child.**

Comprehensive Services Assistant Manager is Responsible for:

- Review temp file from Comprehensive Services Clerk.
- Verify family eligibility
- Move child from Eligibility Waiting List to Eligible/Accepted Wait List in COPA once eligibility has been established
- Retain possession of temporary file until requested by a Site Supervisor or other Comprehensive Services team member.
- Update Child Data sheet in CLOUDS to reflect location of temporary file.

- Assign task of transferring documents from temporary file to permanent child's file when Site Supervisor requests the file for potential enrollment/placement. Check files for flags and ensure proper dots are applied to file.
- Ensure flagged items are properly noted in CLOUDS.
- Keep file in a locked drawer or cabinet.
- Eligible/Accepted list in CLOUDS.
- Purge Eligible/Accepted list on CLOUDS record of over-age children
- Send purged list into CLOUDS archive as per the purge protocol.

## 2. Procedures for Purging Waitlist

The Comprehensive Services Clerks assigned to each site will maintain a current waiting list for those sites by following these steps:

- Document all contacts with families on the Family Data Sheet in CLOUDS.
- Make extra special effort via multiple methods to contact Head Start eligible families as some these families require extra outreach efforts. Document all steps taken.
- Send out no contact letters (See Form CSB613) to non-responsive families on or before the 15th of each month; send only one letter to each family; give the family ten working days to respond from date letter is sent.
- Document response/lack of response to the CSB613 on the Family Data Sheet.
- Prepare the "Waitlist Purge Request Form" (See Form CSB603) by the 5th of each month for the previous month's activities (ex. requests from May will be due on June 5); include all families on purge form that have not responded to letters sent out as described in #2 of this protocol.
- Submit the "Waitlist Purge Request Form" (CSB603) to the Comprehensive Services Assistant Manager assigned to them.

The Comprehensive Services Assistant Manager will conduct the purge by following these steps:

- Review the "Waitlist Purge Request Form" (CSB603) prepared by the clerk.
- Review the Family Data Sheet for each child listed on the "Waitlist Purge Request Form" (CSB603).
- Purge the records that are appropriate by the 10th of each month.
- Shred any temporary files created for purged record.
- Communicate with the clerk regarding any purge that is not appropriate.
- Check to see if Family Services have been started and, if so, discontinuing services for those families scheduled to be purged.

## G. Enrollment and Re-Enrollment

### 1. General Enrollment Policy

Families find themselves in many situations and at times terminate their children's enrollment, but then, later on, want to re-enroll their child. CSB encourage families to return to the program should their situation allow. When families wish to re-enroll they are placed back on the waiting list and ranked accordingly.

When children are enrolled in the Federal Head Start program, they remain eligible for services for the year they are enrolled and the following year regardless of changes in income. If children are enrolled for a third year in Head Start, the family income must be re-determined. When children are enrolled in

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the State Child Development program, they are recertified in accordance with the regulations to insure they remain eligible.

When children are enrolled in the Early Head Start program, they remain eligible for services until they are three years old regardless of income.

However, when EHS children reach their third birthday, they must re-apply to determine eligibility for Head Start preschool services.

When children are enrolled in part-day State Preschool, they remain eligible for continued services until the beginning of the next fiscal year regardless of income changes.

Part-day State Preschool children seeking a second year of services must demonstrate income and age eligibility for continued services but have priority in placement without regard to income ranking in accordance with the 2009 Enrollment Priorities guidance.

Once an infant or toddler is enrolled in a General Child Care program they remain income eligible for subsidized services only as long as the family income remains at or below 75% of the California median income.

When family income rises above 50% of the California median income, the General Child Care and State Preschool enrollees are assessed a Family Fee based on the California Family Fee Schedule.

## 2. Enrollment Placement

In placing a child at a center, Site Supervisors are responsible for the following:

- Review Eligible/Accepted List in /CLOUDS.
- Select the child with the highest priority ensuring that all Head Start eligible children have been placed as vacancies occur, before enrolling any child above the federal poverty guidelines.
- Secure file from the Comprehensive Services Assistant Manager via e-mail or phone call request using child's CLOUDS ID#.
- Review all sections of child's file for special needs or concerns and proper placement of dots and accuracy.
- Check for any flagged items that may need follow up or a parent signature.
- Coordinate/schedule Case Management Meeting with parent, Comprehensive Services Assistant Manager, and other staff as needed.
- Contact parent for enrollment (placement) appointment.
- Advise family to bring any documents that are needed to update file.
- When meeting with family:
  - Complete, date and sign new income information as needed and enter updated information on CLOUDS.
  - Print the 9600 form from CLOUDS to be signed and dated by Site Supervisor and parent.
  - Issue Notice of Action.
  - Update Emergency Information (See CSB Forms > 0600-Enrollment > Licensing Emergency ID/Information form).
  - Complete Admission Agreement and hours of service contract. Complete Parent Handbook with parent.

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- o Verify that the child's immunizations are up-to-date (Do not admit until record is up to date).
- o Review health history and ensure appropriate referrals have been made.
- o Move child from Eligible/Accepted List and place into appropriate classroom and Program Model.
- o Double check CLOUDS record to ensure match between paper file and CLOUDS file.
- o Conduct final review of file for accuracy.

#### H. Eligibility and Need Criteria and Documentation

##### 1. Residency Requirements

To be eligible for child care and development services, the child must live in the State of California while services are being received.

Any evidence of a street address or post office address in California will be sufficient to establish residency. A person identified as homeless is exempted from this requirement and shall submit a declaration of intent to reside in California.

The determination of eligibility for child care and development services shall be without regard to the immigration status of the child or the child's parent(s), unless the child or the child's parent(s) are under a final order of deportation from the United States Department of Justice.

For the Head Start and Early Head Start, children/pregnant women must be residents of Contra Costa County, and reside in the CSB service area. CSB does not serve a portion of Concord that is commonly referred to as the Monument Corridor. The area falls within the 94520 zip code in Concord and is bounded by Clayton Road to the North, Galindo Street to the Northeast, South along Monument Boulevard to Cleopatra Drive, southeast to Interstate 680 and west to State Route 242. This area is operated by the Unity Council of Alameda County. All other portions of the county are served by CSB. If a family resides outside of Contra Costa County or in the Unity Council's service area, an authorized "Out of Service Area Enrollment Notification Form (CSB608) must be on file at CSB, with the agency with whom the family would ordinarily be served, and with the regional office.

##### 2. Documentation of Need Based on Employment, Seeking Employment, Training Toward a Vocational Goal, Seeking Housing, and Incapacity

Families who are eligible for subsidized child care and development services based on income, public assistance, or homelessness must document that each parent in the family meets a need criterion. The need criteria are: vocational training leading directly to a recognized trade, para profession, or profession; employment or seeking employment; seeking permanent housing for family stability; and incapacitation.

Subsidized child care and development services shall only be available to the extent to which:

- The parent meets a need criterion that precludes the provision of care and supervision of the family's child for some of the day.
- There is no parent in the family capable of providing care for the family's child during the time care is requested; and Supervision of the family's child is not otherwise being provided by school or another person or entity.

##### 3. Documentation of Employment

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If the basis of need as stated on the application for services is employment of the parent, the documentation of the parent's employment shall include the days and hours of employment.

If the parent has an employer, the documentation of need based on employment shall consist of one of the following:

- The pay stubs provided to determine income eligibility that indicates the days and hours of employment;
- When the provided pay stubs do not indicate the days and hours of employment, staff shall verify the days and hours of employment by doing one of the following;
- Secure an independent written statement from the employer;
- Telephone the employer and maintain a record;
- If the provided pay stubs indicate the total hours of employment per pay period and if staff is satisfied that the pay stubs have been issued by the employer, specify on the application for services the days and hours of employment to correlate with the total hours of employment and the parent's need;
- If the variability of the parent's employment is unpredictable and precludes staff from verifying specific days and hours of employment or work week cycles, specify on the application for services that the parent is authorized for a variable schedule for the actual hours worked, identifying the maximum number of hours of need based on the week with the greatest number of hours within the preceding four weeks and the verification as noted above. Until such time as the employment pattern becomes predictable, need for services shall be updated at least every four months;
- If the employer refuses or is non-responsive in providing the requested information, record attempts to contact the employer, and specify and attest on the application for services to the reasonableness of the days and hours of employment based on the description of the employment and community practice; or
- If the parent asserts in a declaration signed under penalty of perjury that a request for employer documentation would adversely affect the parent's employment, on the application for services:
  - Attest to the reasonableness of the parent's assertion; and
  - Specify and attest to the reasonableness of the days and hours of employment based on the description of the employment and community practice.

When the employed parent does not have pay stubs or other record of wages from the employer and has provided a self-certification of income, staff shall assess the reasonableness of the days and hours of employment, based on the description of the employment and the documentation provided, and authorizes only the time determined to be reasonable.

If the parent is self-employed, the documentation of need based on employment shall consist of the following:

Parent provided information that includes:

- A declaration of need under penalty of perjury that includes a description of the employment and an estimate of the days and hours worked per week;
- To demonstrate the days and hours worked, a copy of one or more of the following: appointment logs, client receipts, job logs, mileage logs, a list of clients with contact information, or similar records; and
- As applicable, a copy of a business license, a workspace lease, or a workspace rental agreement.

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- A statement by staff assessing the reasonableness of the total number of days and hours requested per week based on the description of the employment and the documentation provided. If the parent has unpredictable hours of employment, staff shall authorize the parent for a variable schedule not to exceed the number of hours determined to be needed per week. Need for services for unpredictable hours shall be updated at least every four months. If staff has been unable to verify need based on the documentation provided, staff shall take additional action to verify self-employment that includes any one or more of the following:
  - If the self-employment occurs in a rented space, contacting the parent's lessor or other person holding the right of possession to verify the parent's renting of the space;
  - If the self-employment occurs in variable locations, independently verifying this information by contacting one or more clients whose names and contact information have been voluntarily provided by the parent; or
  - Making other reasonable contacts or requests to determine the amount of time for self-employment;
  - If staff is unable to make a reasonable assessment of the hours needed for self-employment after attempting to verify such hours and documenting the attempts, staff may divide the parent's self-employment income by the applicable minimum wage. The resulting quotient shall be the maximum hours needed for employment per month.

The parent shall provide a release to enable the staff to obtain the information it deems necessary to support the parent's asserted days and hours worked per week.

If additional services are requested for travel time or sleep time to support employment, staff shall determine, as applicable, the time authorized for:

- Travel to and from the location at which services are provided and the place of employment, not to exceed half of the daily hours authorized for employment to a maximum of four hours per day; or
- Sleep, if the parent is employed anytime between 10:00 p.m. and 6:00 a.m., not to exceed the number of hours authorized for employment and travel between those hours.

#### 4. Documentation of Employment in the Home or a Licensed Family Day Care Home

If the parent's employment is in the family's home or on property that includes the family's home, the parent must provide justification for requesting subsidized child care and development services based on the type of work being done and its requirements, the age of the family's child for whom services are sought, and, if the child is more than five years old, the specific child care needs. Staff shall determine and document whether the parent's employment and the identified child care needs preclude the supervision of the family's child.

If the parent is a licensed family day care home provider or an individual license-exempt, the parent is not eligible for subsidized services during the parent's business hours because the parent's employment does not preclude the supervision of the family's child.

If the parent is employed as an assistant in a licensed large family day care home, and is requesting services for the family's child in the same family day care home, the parent shall provide documentation that substantiates all of the following:

- A copy of the family day care home license indicating it is licensed as a large family day care home;

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- A signed statement from the licensee stating that the parent is the assistant, pursuant to the staffing ratio requirement of California Code of Regulations, title 22, section 102416.5(c);
- Proof that the parent's fingerprints are associated with that licensed family day care home as its assistant, which staff may verify with the local community care licensing office; and
- Payroll deductions withheld for the assistant by the licensee, which may be a pay stub.

#### 5. Documentation of Seeking Employment

If the basis of need as stated on the application for services is seeking employment, the parent's period of eligibility for child care and development services is limited to 60 working days during the contract period. Services shall occur on no more than five days per week and for less than 30 hours per week. The period of eligibility shall start on the day authorized by staff and extend for consecutive working days.

Documentation of seeking employment shall include a written parental declaration signed under penalty of perjury stating that the parent is seeking employment. The declaration shall include the parent's plan to secure, change, or increase employment and shall identify a general description of when services will be necessary.

Staff shall determine the number of working days available for seeking employment and the child care schedule, which may be a variable schedule, based on the documentation. During the period of authorization and if necessary to verify need, staff may request that the parent provide, no more than once a week, a description of the activities he or she has undertaken during the previous week to seek employment and, as appropriate, may require additional documentation.

If the Governor declares a state of emergency and if the factual basis for the Governor's declaration indicate that opportunities for employment have temporarily diminished to such a degree that parents cannot be reasonably expected to find employment within 60 working days of diligent searching, the State Superintendent of Public Instruction (SSPI) may investigate to determine whether the 60-working-days limitation should be suspended. If the SSPI determines that it is in the public interest to do so, he or she may, by order, suspend the 60-working-days limitation on eligibility during the period of the emergency or for a lesser time. The scope of the suspension, including the geographic areas and the persons affected, and its duration, shall be no more than necessary to respond to the emergency as determined in the SSPI's investigation, and shall be specifically described in the SSPI's order. If a parent's services for seeking employment were exhausted after an emergency was declared and before the SSPI suspends the eligibility limitation, staff may re-authorize services for seeking employment in accordance with the conditions specified in the SSPI's order.

If the parent has concurrently received services based on employment or vocational training for at least 20 working days while receiving services for seeking employment, eligibility for seeking employment may be extended for an additional 20 working days. For such a parent, services for this purpose shall not exceed 80 working days during the contract period.

If services for this purpose are discontinued, the number of working days remaining in the period of eligibility shall be available for a subsequent period of eligibility during the contract period. The working days used to determine the period of eligibility shall include the consecutive Mondays through Fridays, excluding any federal holidays.

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## 6. Documentation of Training toward Vocation Goals

### i. General Procedures

If the basis of need as stated on the application for services is vocational training leading directly to a recognized trade, para-profession, or profession, child care and development services shall be limited to whichever expires first:

- Six years from the initiation of services; or
- Twenty four semester units, or its equivalent, after the attainment of a Bachelor's Degree.

The parent shall provide documentation of the days and hours of vocational training to include:

- A statement of the parent's vocational goal;
- The name of the training institution that is providing the vocational training;
- The dates that current quarter, semester, or training period, as applicable, will begin and end;
- A current class schedule that is either an electronic print-out from the training institution of the parent's current class schedule or, if unavailable, a document that includes all of the following:
  - The classes in which the parent is currently enrolled;
  - The days of the week and times of day of the classes; and
  - The signature or stamp of the training institution's registrar.
  - The anticipated completion date of all required training activities to meet the vocational goal; and
  - Upon completion of a quarter, semester, or training period, as applicable, a report card, a transcript, or, if the training institution does not use formal letter grades, other records to document that the parent is making progress toward the attainment of the vocational goal.

A parent shall report any change in his or her class schedule related to the days and times of any class, including a withdrawal from a class, within five calendar days of requesting the change from the institution.

Services may be provided for classes related to the General Education Development (GED) test or English language acquisition if such courses support the attainment of the parent's vocational goal. On-line or televised instructional classes that are unit bearing classes from an accredited training institution shall be counted as class time at one hour a week for each unit. The parent shall provide a copy of the syllabus or other class documentation and, as applicable, the Web address of the on-line program. The accrediting body of the training institution shall be among those recognized by the United States Department of Education.

Continuation of services based on training is contingent upon making adequate progress. To make progress each quarter, semester, or training period, as applicable, the parent shall, in the college classes, technical school, or apprenticeship for which subsidized care is provided:

- In a graded program, earn a 2.0 grade point average; or
- In a non-graded program, pass the program's requirements in at least 50 percent of the classes or meet the training institution's standard for making adequate progress.

The first time the parent does not meet the condition of making adequate progress, the parent may continue to receive services for one additional quarter, semester, or training period, as applicable, to improve the parent's progress. At the conclusion of that session, the parent shall, in the classes for

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which subsidized care was provided, have made adequate progress. If the parent has not made adequate progress, services for this purpose shall be:

- Terminated; and
- Available to the parent, to the extent provided by subdivision (a), after six months from the date of termination.

No later than ten calendar days after the training institution's release of progress reports for the quarter, semester, or vocational training period, as applicable, the parent shall provide staff with a copy of the parent's official progress report. As deemed appropriate, staff may require the parent to:

- Have an official copy of a progress report sent directly from the training institution to staff; or
- Provide a release, as may be required by the training institution, to enable staff to verify the parent's progress with the institution.

A parent may change his or her vocational goal, but services shall be limited to the time or units remaining from the initiation of the provision of services for vocational training.

Staff shall determine the days and hours needed per week, and whether the parent is making progress, based on the documentation. Staff may request that the parent provide a publication from the training institution describing the classes required to complete the parent's vocational goal.

If additional services are requested for study time or travel time to support the vocational training, staff shall determine, as appropriate, the amount of services needed for:

- Travel to and from the location at which services are provided and the training location, not to exceed half of the weekly hours authorized for training to a maximum of four hours per day; or
- Study time, including study time for on-line and televised instructional classes, according to the following:
  - Two hours per week per academic unit in which the parent is enrolled;
  - On a case-by-case basis and as may be confirmed with the class instructor, additional time not to exceed one hour per week per academic unit in which the parent is enrolled; and
  - On a case-by-case basis, no more than the number of class hours per week for non-academic or non-unit bearing training.

The service limitations specified above shall not apply to a parent who demonstrates he or she is:

- As of June 27, 2008, receiving services for vocational training and has attained a Bachelor's Degree;
- Receiving services from a program operating pursuant to Education Code section 66060;
- Attending vocational training when the parent has been deemed eligible for rehabilitation services by the California Department of Rehabilitation; or
- Attending retraining services available through the Employment Development Department of the State or its staffs due to a business closure or mass layoff.

ii. School Breaks for Parents Training Toward a Vocational Goal

Caregivers whose certified need is Training Toward a Vocational Goal, do not have a certified need for full-day State Child Development Services during their school/training breaks (winter, spring, summer or fall.) and days school is not in session (teacher in-service and other holidays). These days are non-contract days and the child is not allowed to attend full-day State Child Development Services or use

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Best Interest Days on these days. To promote continuity of care, the caregiver and site supervisor may determine that the child should remain in services during these days if possible **and would therefore either assess a full fee or select program model for which the child is eligible**. CCTR only toddlers cannot take advantage of this **second** option and may not attend during these days as they are not age eligible for any other program model. For all other children the following protocols should be followed:

- FP/HS and FPL/HS preschool children may attend full-day under PP/HS or PPL/HS with approval of Request for Change from FP to PP/TB form (**See Forms CSB607**).
- FP and FPL preschool children may attend ½ day during the preschool portion of the day under PP or PPL only with approval of Request for Change from FP to PP/TB form (See Form CSB607).

If any of the above actions are taken, the program model in CLOUDS must be changed by wait listing the child and re-enrolling under the new program model for the duration of the school/training break days. Sign-in sheets, monthly 9400s, and other required documents described in the Request to Change from FP to PP Protocol must also reflect this program model change. If/when the child is moved back to their original funding model; these same changes must be made and reflected on the appropriate documentation.

#### 7. Documentation of Parental Incapacity

If the basis of need as stated on the application for services is parental incapacity, child care and development services shall not exceed 50 hours per week.

Documentation shall include a release signed by the incapacitated parent authorizing a legally qualified health professional to disclose information necessary to establish that the parent meets the definition of incapacity, and needs services.

The documentation of incapacitation provided by the legally qualified health professional shall include:

- A statement that the parent is incapacitated, that the parent is incapable of providing care and supervision for the child for part of the day, and, if the parent is physically incapacitated, that identifies the extent to which the parent is incapable of providing care and supervision;
- The days and hours per week that services are recommended to accommodate the incapacitation, taking into account the age of the child and the care needs. This may include time for the parent's regularly scheduled medical or mental health appointments;
- The probable duration of the incapacitation; and
- The name, business address, telephone number, professional license number, and signature of the legally qualified health professional who is rendering the opinion of incapacitation and, if applicable, the name of the health organization with which the professional is associated.

Staff may contact the legally qualified health professional for verification, clarification, or completion of the provided statement.

Staff shall determine the days and hours of service based on the recommendation of the health professional and consistent with the provisions of this article.

#### 8. Documentation of Seeking Permanent Housing

If the basis of need as stated on the application for services is seeking permanent housing for family stability, the parent's period of eligibility for child care and development services is limited to 60-

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working-days during the contract period. Services shall occur on no more than five days per week and for less than 30 hours per week. The period of eligibility shall start on the day authorized by staff and extend for consecutive working days.

Documentation of seeking permanent housing shall include a written parental declaration signed under penalty of perjury that the family is seeking permanent housing. The declaration shall include the parent's search plan to secure a fixed, regular, and adequate residence and shall identify a general description of when services will be necessary. If the family is residing in a shelter, services may also be provided while the parent attends appointments or activities necessary to comply with the shelter participation requirements.

Staff shall determine the number of weeks available for seeking permanent housing and the child care schedule, which may be a variable schedule, based on the documentation. During the period of authorization and if necessary to verify need, staff may request that the parent provide, no more than once a week, either a declaration signed under penalty of perjury describing the activities the parent has undertaken during the previous week to seek permanent housing or a signed statement from the shelter, transitional housing agency, or homeless support program regarding the parent's search progress to date.

If the parent does not expect to secure housing prior to the end of the eligibility period:

- The parent may request an extension in a declaration of need signed under penalty of perjury that includes an update of the parent's search plan and either a description of the activities undertaken during the previous week to seek permanent housing or a signed statement from the shelter, transitional housing agency, or homeless support program indicating the parent's continued need for services; and
- The staff may authorize an extension of search eligibility for up to 20 additional working days.

If services for this purpose are discontinued, the number of working days remaining in the period of eligibility shall be available for a subsequent period of eligibility during the contract period.

The working days used to determine the period of eligibility shall include the consecutive Mondays through Fridays, excluding any federal holidays.

## 9. Documentation of Child Protective Services

### i. General Procedures

CSB Head Start is committed to providing child development services for all eligible and pregnant women who are currently involved in the child welfare system and Children and Family Services (CFS) for the purpose of improving young children's access to and continuity of comprehensive, high quality early care and education services. The partnership between CSB and CFS ensures that staff understands the complex (social, emotional, developmental and physical) needs of this vulnerable population. This partnership is in compliance with the administration for children and families' information memorandum acyf-cb-im-11-01 issued January 31, 2011.

If eligibility and need is based on a child/family's involvement in the child welfare system/child protective services (CPS/CFS), the basic data file must contain a written referral-Form CSB622, dated within the six (6) months immediately preceding the date of application for services, from a legal, medical, social service agency or emergency shelter. The written referral must include either:

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- A statement from the local county welfare department, child protective services (CPS/CFS) unit certifying that the child is receiving child protective services and that the child care and development services are a necessary component of the child protective services plan, or
- A statement by a legally qualified professional that the child is at risk of abuse or neglect and the child care and development services are needed to reduce or eliminate risk, and
- The probable duration of the child protective service plan or the at-risk situation, and
- The name, address, telephone number and signature of the legally qualified professional who is making the referral.

#### ii. Children and Family Service Referrals

Families may be referred to CSB for enrollment from Children and Family Services (CFS), if child care is deemed a necessary piece of the service plan. CSB will review the referral to determine a family's eligibility for Head Start, Early Head Start, Center Based, Stage II and CAPP programs. Based on eligibility and need requirements the referral will be forwarded to the appropriate program, taking into consideration parental choice. Once the referral is received by the appropriate unit, the family will be contacted to determine eligibility. If the family is eligible and meets all necessary requirements, they may be enrolled in the program provided there is space. If there is no space or funding available in any of CSB's programs, the **FRSEA** Manager will forward the referral to an outside agency for potential enrollment. At this time staff will notify the referring individual whether or not the family was enrolled or referred to an outside agency.

#### I. Certification of Eligibility

The Site Supervisor or the Assistant Director is authorized to certify eligibility prior to initial enrollment and at the time of re-certification. The authorized representatives must certify each family's/child's eligibility for childcare and development services after reviewing the completed application and documentation contained in a basic data file that is established and maintained at the site.

All data is uploaded to a central computerized database by Site Supervisors or Comprehensive Services team members.

Prior to enrollment, Site Supervisor/Assistant Director certifies eligibility by completion of the following forms:

- **Application for Childcare and Development Services**  
Prior to enrollment, parents may contact Site Supervisors, Assistant Directors, Comprehensive Services team members, and teachers at any sites in Contra Costa County to obtain an application for services. Or they may call one of the enrollment hotline numbers to place themselves on a waiting list.
- **Notice of Action, Application for Services**  
At the time the Site Supervisor certifies or recertifies eligibility of a family/child for child care and development services, he/she shall inform the family of the family's responsibility to notify the staff within five calendar days of any changes in family income, family size, or the need for services.

This information is noted on the application of service and Site Supervisor/Comprehensive Services Manager must review the contents and, if needed, provide an explanation of what the "Declaration" means.

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When a child's residence alternates between the homes of separated or divorced parents, eligibility, need and fees should be determined separately for each household in which the child is residing during the time child development services are needed (i.e., separate certifications and service agreements). For example, a child may be subsidized during part of the week and full cost the rest of the week.

#### J. Re-certification for General Child Care Services and Full Day State preschool

After initial certification and enrollment, the Site Supervisor must verify need and eligibility and re-certify each family/child as follows:

- Families receiving services because the child is at risk of abuse, neglect or exploitation must be re-certified at least once every three (3) months.
- Families receiving services because of actual abuse, neglect or exploitation must be re-certified at least every twelve (12) months.
  - The time of re-certification, the Site Supervisor must document that the family is participating in a protective services plan in accordance with the requirements of their local county welfare department, child protective services unit to alleviate the circumstances causing the abuse, neglect or exploitation.

All other families must be re-certified at least once each contract period and at intervals not to exceed twelve (12) months.

#### K. Re-Certification for Part-Day State Preschool Children

Part-day State Preschool families must be certified at the beginning of service using the most recent income documentation and may be certified up to 120 days old before the services' start date.

After a first year of service, a family must reapply to determine income and age eligibility before a child can be considered for enrollment for a second year. These returning children have placement priority without regard to income ranking as described in the 2009 Enrollment Priorities guidance.

#### L. Re-Certification for Head Start and Early Head Start Children

CSB certifies Head Start children into the program based on family income eligibility at the time of enrollment using the federal income guidelines.

Once a child is enrolled, that child does not need to be re-certified even if the family income rises above the federal poverty level for the first year of enrollment and the following year. Re-certification is only required for a child entering a third year of Head Start.

Early Head Start children must be re-certified for eligibility when they transition to a Head Start program for preschool age children.

#### M. General Recertification / Re-Enrollment Procedures

##### 1. Recertification Procedures

During the recertification process, Site Supervisors are responsible for the following:

- Track families needing to be recertified using Recertification Tracking Calendar.
- Notify families 30 days prior to enrollment expiration to bring updated eligibility documentation.
- Collect recertification or re-enrollment documentation.

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- Complete new 9600 on CLOUDS at face-to-face interview with parent.
- Complete new income calculation sheet (signed and dated).
- Update reason for needing child care and application type on the child data sheet (See “eligibility information” on the child data sheet).
- Proceed with certification procedures as listed above if family is still income eligible.
- Issue Notice of Action, certifying continuation, changes or termination of services. (Note: adverse action requires a 14-day written notification, 19-days if mailed).
- Drop file on CLOUDS on the last day of service and prepare paper file for storage. The Children’s file folders are to be re-used.
- Update CLOUDS record as needed.
- Maintain files of terminated children in locked location at site for one year until after program audit in October or November.
- Send dropped and files of terminated clients to central location after completion of program audit.

## 2. Re-Enrollment Process

During the re-enrollment process, Site Supervisors in collaboration with Comprehensive Services are responsible for the following:

- In June, identify children for roll-over.
- In July, place roll-over children into appropriate classrooms and Program Model, from Eligible/Accepted list in CLOUDS.
- For previously enrolled Part-day State Preschool child requesting re-enrollment, follow guidelines for completely new 9600 application with all new documentation.
- If a child’s CLOUDS record was archived within the program year, request Comprehensive Services Manager to reactivate child’s CLOUDS record and place child back on to Eligibility Wait List.
- Follow approved guidelines for selecting children.

## N. Updating the Application

The Site Supervisor must update the family’s application for General Child Care and Full-day State Preschool to document continued need and eligibility and determine any change to fee assessment, if applicable, within thirty (30) days whenever there is a change in family size, income, public assistance status or need.

Form 9600S will be used for application updates between re-certifications.

## O. Contents of Basic Data File

Site Supervisors / Comprehensive Services staff must establish and maintain a basic data file for each family receiving childcare and development services. The basic data file must contain a signed application for services with:

- The parent’s(s) full name(s), address(es) and telephone number(s).
- The names, gender and birth dates of all children under the age of eighteen (18) counted in the family size whether or not they are served by the program.
- The number of hours of service each day for each child.
- The names of other family members in the household related by blood, marriage or adoption.
- The reason for needing childcare and development services, if applicable.

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- Employment or training information for parent(s) including name and address of employer(s) or training institution(s) and days and hours of employment or training, if applicable.
- Eligibility status.
- Family size income, if applicable.
- The parent's signature and date.
- The signature of the Site Supervisor/Assistant Director certifying the eligibility and date of signature.
- A notation on when the first services begin.
- A notation of the last day services were received.

The data file must also contain, as applicable:

- Documentation of income eligibility, including an income calculation worksheet.
- Documentation of employment.
- Documentation of seeking employment.
- Documentation of training.
- Documentation of parental incapacity.
- Documentation of child's disabilities.
- Documentation of homelessness.
- Documentation of seeking permanent housing for family stability.
- Written referral from a legally qualified professional from a legal, medical, or social services agency, or emergency shelter for children at risk of abuse, neglect, or exploitation.
- Written referral from a county welfare department, child welfare services worker, certifying that the child is receiving protective services and the family requires child care and development services as part of the case plan.
- If the parent of the child was on cash assistance, the date the parental cash aid was terminated.
- A signed Child Care Data Collection Privacy Notice and Consent Form CD 9600A shall be included.
- Notice of Action (as stated above in detail) and/or Recipient of Services.
- All child health and current emergency information required by California Code of Regulations, title 22, Social Security, Division 12, Community Care Facilities Licensing Regulations.

#### 1. Documentation and Determination of Family Size

A parent shall provide the names of the parents and the names, gender and birthdates of the children identified in the family. This information shall be documented on a confidential application for child care and development services and used to determine family size. The parent shall provide supporting documentation regarding the number of children and parents in the family.

The number of children shall be documented by providing at least one of the following documents, as applicable for the state funded program\*:

- Birth certificates.
- Court orders regarding child custody.
- Adoption documents.
- Records of Foster Care placements.
- School or medical records.
- County welfare department records; or
- Other reliable documentation indicating the relationship of the child to the parent.

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\*Federally funded programs require documentation for the child to be enrolled, only. In state funded programs, when only one parent has signed the application and the information provided pursuant to subdivision (a)(1) indicates the child(ren) in the family has another parent whose name does not appear on the application, then the presence or absence of that parent shall be documented by providing any one of the following documents, as applicable:

- Records of marriage, divorce, domestic partnership or legal separation.
- Court-ordered child custody arrangements.
- Evidence that the parent signing the application is receiving child support payments from that person, has filed for child support with the appropriate local agency, or has executed documents with that agency declining to file for child support.
- Rental receipts or agreements, contracts, utility bills or other documents for the residence of the absent parent: or.
- Any other documentation, excluding a self-declaration, to confirm the presence or absence of a parent of a child in the family.

If, due to the recent departure of a parent from the family, the remaining applicant parent cannot provide any documentation, the applicant parent may submit a self-declaration signed under penalty of perjury explaining the absence of that parent from the family.

Within six months of applying or reporting this change in family size, the parent must provide documentation as noted above.

If the information provided by the parent is insufficient, staff shall request any additional documentation necessary to verify the family composition and family size.

For income eligibility and family fee purposes, when a child and his or her siblings are living in a family that does not include their biological or adoptive parent, only the child and related siblings shall be counted to determine family size. In these cases, the adult(s) must meet a need criterion.

## 2. Documentation of Income Eligibility

The parent is responsible for providing documentation of the family's total countable income and the staff is required to verify the information, as described below.

The parent(s) shall document total countable income for all the individuals counted in the family size as follows:

### i. If the parent is employed, provide:

- A release authorizing the staff to contact the employer(s), to the extent known, that includes the employer's name, address, telephone number, and usual business hours, and.
- All payroll check stubs, a letter from the employer delivered to CSB independent of the employee, or other record of wages issued by the employer for the month preceding the initial certification, an update of the application, or the recertification that establishes eligibility for services.

When the employer refuses or fails to provide requested documentation or when a request for documentation would adversely affect the parent's employment, provide other means of verification that may include a list of clients and amounts paid, the most recently signed and completed tax returns,

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quarterly estimated tax statements, or other records of income to support the reported income, along with a self-certification of income.

ii. If the parent is self-employed, provide a combination of documentation necessary to establish current income eligibility for at least the month preceding the initial certification, an update of the application, or the recertification that establishes eligibility for services. Documentation shall consist of as many of the following types of documentation as necessary to determine income:

- A letter from the source of the income,
- A copy of the most recently signed and completed tax return with a statement of current estimated income for tax purposes, or
- Other business records, such as ledgers, receipts, or business logs.

Parents shall provide copies of the documentation of all non-wage income, self-certification of any income for which no documentation is possible, and any verified child support payments.

Staff:

Staff shall retain copies of the documentation of total countable income and adjusted monthly income in the family data file.

When the parent is employed, staff shall, as applicable, verify the parent's salary/wage; rate(s) of pay; potential for overtime, tips or additional compensation; hours and days of work; variability of hours and days of work; pay periods and frequency of pay, start date for the employee. If the employer refuses or is non-responsive in providing requested information or a request for employer documentation would adversely affect the parent's employment, and if the information provided by a self-employed parent is inconsistent with the staff's knowledge or community practice, shall request clarification in the self-certification of income, additional income information or a reasonable basis for concluding that the employer exists.

When the parent is self-employed, staff shall obtain and make a record of independent verification regarding the cost for services provided by the parent that may be obtained by contacting clients, reviewing bank statements, or confirming the information in the parent's advertisements or website.

If the income cannot be independently verified, the staff shall assess whether the reported income is reasonable or consistent with the community practice for this employment.

Staff may request additional documentation to verify total countable income to the extent that the information provided by the parent or the employer is insufficient to make a reasonable assessment of income eligibility.

To establish eligibility, staff shall, by signing the application for services, certify to the staff's reasonable belief that the income documentation obtained and, if applicable, the self-certification, support the reported income, are reliable and are consistent with all other family information and the staff's knowledge, if applicable, of this type of employment or employer.

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If the family is receiving child care and development services because the child(ren) is/are at risk of abuse, neglect, or exploitation or receiving child protective services and the written referral specifies that it is necessary to exempt the family from paying a fee, then the parent will not be required to provide documentation of total countable income.

If the basis of eligibility is a current aid recipient, the staff shall obtain verification from CalWIN.

### 3. Calculation of Income

#### i. General Procedures for calculating income

Staff calculates total countable income based on income information reflecting the family's current and on-going income, using an income calculation worksheet that specifies the frequency and amount of the payroll check stubs provided by the parent and all other sources of countable income.

When income fluctuates because of:

- Agricultural work, by averaging income from the 12 months preceding the initial certification, an update of the application, or the recertification that establishes eligibility for services.
- Intermittent income, by averaging the intermittent income from the preceding 12 months by dividing by 12 and add this amount to the other countable income.
- Unpredictable income, by averaging the income from at least three consecutive months and no more than 12 months preceding the initial certification, an update of the application, or the recertification that establishes eligibility for services.

#### ii. Over-Income Families-General Description

Both the State and Federal program allow over-income families meeting strict criteria. NO CHILD SHALL BE CONSIDERED FOR ENROLLMENT WITH AN INCOME ABOVE THE FEDERAL POVERTY GUIDELINE UNTIL ALL FAMILIES AT OR BELOW THE FEDERAL POVERTY GUIDELINES HAVE BEEN ENROLLED. To this end, it is critical that the recruitment plan be fully implemented and that extra efforts are made to assist income eligible families in completing the application to establish eligibility and be placed in the program expeditiously. After these efforts have been conducted, documented and certified, a request to waive the income guidelines may be made. The waiver form (See Forms > CSB606) includes a certification statement on the back of the form where the outreach efforts are documented. A simple statement that "the waitlist has been exhausted" is never acceptable.

#### iii. Over-Income Protocols

When enrolling over-income families, the Site Supervisor or Manager is responsible for:

- Completing the over income waiver (CSB606).
- Submitting completed waiver to Assistant Director/Partner Analyst for approval.
- Placing original Assistant Director approved waiver in child's file

The Assistant Director/Partner Analyst is responsible for:

- Receiving form and ensuring that all possible outreach has been conducted to ensure that there are no income eligible children to enroll.
- Reviewing the aggregate waiver list on Shared Drive to ensure that their cluster has not exceeded the 10% unlimited over income designated primarily for children with an IEP or IFSP but for other cases as determined appropriate by the AS or 35% limited over income enrollment

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for the Head Start and Early Head Start program, or the 15% limited over income for the part day preschool (PP) or the part day family literacy program (PPL).

- Signing form
- Forwarding the original to Site Supervisor/Mgr. for placement in file
- Forwarding a copy of approved waiver to Division Manager (ERSEA).

The Division Manager (ERSEA) is responsible for:

- Receiving copies of approved over income waivers from Assistant Directors/Partner Analyst
- Logging each waiver on database on shared drive
- Providing alerts to each Assistant Director/Partner Analyst that are nearing their over income allowance
- Analyzing placement of over income slots to inform recruitment and slot planning processes
- Periodically purging the list as children transition out of the program.

#### 4. Documentation of the Child's Exceptional Needs (known as Children with Disabilities at CSB).

The family data file shall contain documentation of the child's exceptional needs if the staff is claiming adjustment factors. The documentation of exceptional needs shall include:

- A copy of the portion of the active individual family service plan (IFSP) or the individualized education program (IEP) that includes the information as specified in Education Code section 56026 and California Code of Regulations, title 5, sections 3030 and 3031; and
- A statement signed by a legally qualified professional that:
  - The child requires the special attention of adults in a child care setting; and
  - Includes the name, address, license number, and telephone number of the legally qualified professional who is rendering the opinion.

#### P. Admission Policies and Procedures

Children are admitted into the program based on need and family income adjusted for family size. Highest priority goes to children with need for protective services and/or having lowest income.

When a parent seeks services, the Site Supervisor/Assistant Director or Comprehensive Services Team member collects family information from the Waiting List Pre-Registration form (CSB690). The child is placed on CLOUDS upon applying for child care services.

As openings become available, names are drawn by rank from the CLOUDS waitlist for the various program options in accordance with the approved selection criteria/admission priorities.

If multiple families have the same rank, the family waiting the longest period of time is selected first. CSB makes available 10% of its federally funded spaces for children with disabilities and gives priority for its unlimited over income allotment to these children (also 10% of its funded slots).

Children will not be denied when a family needs less than full-time services.

Families who have been recruited for admissions to the program will be required to complete an application and provide supporting documentation. These documents must be of the current year, verification of income, shots, and birth certification of the child applying for enrollment.

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Letters informing the family of acceptance or denial for services must be sent once certification is complete. The family has the right to dispute the denial of services by providing additional information to prove eligibility to receive services. Re-Certification may happen anytime the family's situation changes and requests that new documentation be reviewed. Any changes must be reported by the family within 5 days.

#### Q. General Admission Procedure

When an opening occurs in the center, the Site Supervisor will call the parent with the highest rank on the CLOUDS eligible list for an appointment for processing eligibility documents, noting any change of income and need for service. At this time, the parent receives an official Notice of Action (NOA) approving or disapproving state funded services. The NOA provides information outlining the parent's due process rights in a statement on the back of the NOA. Parents wishing to appeal an agency decision must follow the procedure carefully or void the right to appeal. Following the timelines is essential. Parents applying for a Head Start only slot sign the Admissions Agreement and Application but do not receive an NOA.

#### R. Children's Enrollment File

The Federal Regulations and the State of California require children's centers to maintain a file on each enrolled child including the following information:

- Birth Certificate to verify birth, age of child, gender and parents names. Information on date of admission, termination and re-enrollment.
- Names, addresses and phone numbers of parents and other relatives and/or friend that may be contacted in case of emergency.
- A Health History is completed by the parent to collect information on child's general health.

This and much more information is collected during one-on-one parent meetings, while assisting the parent to complete the enrollment packet and assisting the parent with health needs of the child or issues of the parent and household. Information must be updated and data entered into CLOUDS as it is received.

#### S. Due Process Requirements

##### 1. Notice of Action, Application for Services

The Site Supervisor's decision to approve or deny services shall be communicated to the applicant through a written statement referred to as a Notice of Action, Application for Services. The Site Supervisor shall maintain copies of the Notice of Action, Application for Services in the basic data file. The Notice of Action, Application for Services shall include: (1) the applicant's name and address; (2) the Site Supervisor's name and address or the name and telephone number of the CSB authorized representative who made the decision; (3) the date of the notice; (4) the method of distribution of the notice.

If services are approved, the notice shall also contain: (1) basis of eligibility; (2) daily fee, if applicable; (3) duration of the eligibility; (4) names of children approved to receive services; and (5) the hours of service approved for each day.

If the services are denied, the notice shall contain: (1) the basis of denial and (2) instructions for the parent(s) on how to request a hearing if they do not agree with the Site Supervisor's decision in accordance with procedures specified below.

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## 2. Notice of Action, Recipient of Services

If, upon re-certification or update of the application, CSB determines that the need or eligibility requirements are no longer being met, or the fee amount of service needs to be modified, the Site Supervisor will notify the family through a written Notice of Action, Recipient of Services. The Site Supervisor will maintain copies of all Notice of Action, Recipient of Services in the family's basic file. The Notice of Action, Recipient of Services will include: (1) the type of action being taken; (2) The effective date of action; (3) the name and address of recipient; (4) the name and address of CSB; (5) the name and telephone number of the CSB authorized representative who is taking the action; (6) the date of notice is mailed or given to the recipient; (7) the method of distribution to the recipient; (8) a description of the action; (9) a statement of the reason(s) for the changes; (10) a statement of the reason(s) for termination, if applicable; and (11) instructions for the parent(s) on how to request a hearing if they do not agree with the Site Supervisor decisions.

## 3. Approval or Denial of Child Care and Development Services

The Site Supervisor will mail or deliver a completed Notice of Action, Application for Services to the parents within thirty (30) calendar days from the date the application is signed by the parent(s).

## 4. Changes Affecting Service

The Site Supervisor will complete a Notice of Action, Recipient of Services when changes are made to the service agreement. Such changes may include, but are not limited to, an increase in parent fees, an increase or decrease in the amount of services, or termination of service.

The Site Supervisor will mail or deliver the Notice of Action to the parents at least fourteen (14) calendar days before the effective date of the intended action.

To promote the continuity of child care and development services, a family that no longer meets a particular program's income, eligibility or need criteria may have their services continued if the Site Supervisor is able to transfer that family's enrollment to another program for which the family continues to be eligible prior to the date of termination of services. The transfer of enrollment may be to another program within the same administrative agency or to another agency that administers state or federally funded childcare and development programs within that county.

## T. Alternative Placement for Children

When terminating children from the state funded portion of the program, Site Supervisors are responsible for the following:

- Issue Notice of Action 14 days prior to termination date.
- Explain to parents their appeal rights.
- If parent does not appeal termination.
- Enter information regarding reason for ending services in CLOUDS Child Data Sheet. Date and initial comments.
- Change enrollment status in CLOUDS.
- Discontinue services on Family Data Sheet.
- Determine if child may return within the program year. If so, place child back on Eligible/Accepted List. If not, archive the CLOUDS record.
- Assist the family in finding an alternate placement for the child.

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- If parent appeals termination, send appeal notice to Assistant Director and continue to serve child until informed to move forward with termination.

Head Start children that are deemed inappropriate for their current setting are always afforded an opportunity in another program option as space is available. If the parent is ineligible for Head Start or our state funded programs, they are to be referred to a partner site and/or to the county's resource and referral agency, Contra Costa Child Care Council (925-676-KIDS).

#### U. Client's Request for a Hearing and Procedures

If a parent in the state funded program disagrees with an action, the parent(s) may file a written request for a hearing with the Site Supervisor within fourteen (14) calendar days of the date the Notice of Action was received.

Upon the filing of a request for hearing, the intended action shall be suspended until the review process has been completed. The review process is complete when the appeal process has been exhausted or when the parent(s) abandons the appeal process.

Within ten (10) calendar days following the receipt of the request for a hearing, the Site Supervisor will notify the parent(s) of the time and place of the hearing. The time and place of the hearing will, to the extent possible, be convenient for the parent(s).

An Assistant Director, who will be referred to as "the hearing officer" will conduct the hearing. The hearing officer will be at a staff level higher in authority than the staff person who made the contested decision.

The parent(s) or parent's authorized representative is required to attend the hearing. If the parent or the parent's authorized representative fails to appear at the hearing, the parent will be deemed to have abandoned his or her appeal. Only persons directly affected by the hearing will be allowed to attend the hearing.

The Assistant Director will arrange for the presence of an interpreter at the hearing, if one is requested by the parent(s).

The Assistant Director will explain to the parent(s) the legal, regulatory, or policy basis for the intended action.

During the hearing, the parent(s) will have an opportunity to explain the reason(s) they believe the Site Supervisor's decision was incorrect. The Site Supervisor will present any material facts omitted by the parent(s).

The Assistant Director will mail or deliver to the parent(s) a written decision within ten (10) days after the hearing.

#### V. Appeal Procedure for CDD Review

If the parent disagrees with the written decision from the Site Supervisor, the parent has fourteen (14) calendar days in which to appeal to the CDD. If the parent(s) do(es) not submit an appeal request to the

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CDD within fourteen (14) calendar days, the parents' appeal process will be deemed abandoned and the Site Supervisor may implement the intended action.

The parent(s) will specify in the appeal request the reason(s) why he/she believes the Site Supervisor's decision was incorrect.

The parents must submit a copy of CSB's Notice of Action with the appeal request. Upon receipt of the appeal request, the CDD may request copies of the basic data file and other relevant materials from CSB. The CDD may also conduct any investigations, interviews or mediation necessary to resolve the appeal.

The decision of the CDD will be mailed or delivered to the parent(s) and the Site Supervisor within thirty (30) calendar days after receipt of the appeal request.

W. CSB Compliance with CDD Decision  
CSB will comply with the decision of the CDD immediately upon receipt thereof.

CSB will be reimbursed for childcare and development services delivered to the family during the appeal process.

If the Site Supervisor's determination that a family is ineligible is upheld by the State, services to the family will cease upon receipt by the Site Supervisor of the State's decision.

X. Retention of Enrollment Records  
Delegate Agencies, the Grantee-Operated Program, and sub-contractor retain copies of official enrollment application forms, which contain certification data for each child enrolled during the program year for 5 years.

Copies of enrollment records serve as a primary source document for audit purposes.

Cooperation with local Contra Costa County welfare offices is encouraged for recruiting eligible children into the program.

Y. Enrolled But Waiting For Transfer Protocol  
When staff has a child/family that wants to transfer sites:

- Comprehensive Services staff and site staff who learn about a family wanting to transfer communicate via email to all applicable SSs, CSAMs & Partners (as known or Partner CSAM) the need for a transfer. Make additional calls as necessary.
- Clearly and fully document the transfer in the case file on CLOUDS.
- Clearly and fully explain to the family about any changes they may experience as a result of a possible program model change at time of transfer to other center (ex: part-day to full-day - family must now show need)

When staff are searching to fill an open slot:

- Notify CSAM immediately upon determination that a slot will become available.
- CSAM check notes for any children that are enrolled but waiting for a slot.

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- Comprehensive Services staff and site staff who learn about a family wanting to transfer communicate. Email to all applicable SSs, CSAMs & Partners (as known or Partner CSAM) the need for a transfer. Make additional calls as necessary. ¶
- After AD approval, Site Supervisor of current center or for Partner sites Partner CSAM marks child as E/W on CLOUDS (check box in "Additional Needs & Services" section at bottom of Child Data Sheet), and update site preferences in CLOUDS for child. ¶

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- CSAM of current center reviews files for pending issues prior to transfer and communicates any issues to receiving CSAM. Transfer file to new center's Site Supervisor or designee.
- Site Supervisor completes 9600S and NOA. Also, collect any additional documentation required for program model change (see Eligibility and Need Criteria Documentation Checklists).
- Site Supervisor enrolls the child from CLOUDS.

#### Z. Transfer of Child with Disabilities or of Child Receiving Mental Health Services

When a child with disabilities or receiving mental health services transfers to another CSB site, communication is vital. The Comprehensive Services team member is responsible for notifying the Site Supervisor/Head Teacher and CS/Disabilities/Mental Health Manager in writing. Notification is to be sent before the child begins at another site so that necessary arrangements or accommodations can be made.

The Site Supervisor/Head Teacher will inform the appropriate teacher of the transfer. The Comprehensive Services team member and the CS/Mental Health Manager will complete this process within two weeks of notification of an opening.

#### AA. CSPP Full-day to Part-Day or Tuition Based Approval Process

##### 1. General Description

In the event that a family loses eligibility or need for services during the program year, CSB has the discretion to offer families the option to receive services part-day (less than 4 hours per day) or pay a fee for full-day services (Tuition Based) rather than terminate services. Part-day services could be offered in the child's same class or in another class during the "pre-school portion of the day" (8:30 – 12:00) as available. Whenever possible, the child will be allowed to stay in their current classroom.

CSB fiscal unit tracks CDE earnings monthly, and notifies program staff if the risk of under earning develops. If under earning is a risk, ADs cease to approve all moves to part-day until risk subsides according to reports from fiscal unit.

##### 2. Action Guidance for Staff

###### i. Full-day or ¾ time to Part-day

- Site Supervisor determines family no longer meets eligibility or need criteria (for more than 4 hours of care) and issues NOA for termination of full-day (or ¾ time) services effective 14 or 19 days as appropriate.
- The below process must be complete no later than the effective date of action noted on the NOA.
- Site Supervisor ensures that each class is fully enrolled morning and afternoon through enrollment and certified hours of care.
- Site Supervisor determines if part-day services are available during the preschool portion of the day (8:30 – 12:00).
- If available, the Site Supervisor and family determine if part-day services are desirable and appropriate.
- If desired by the family and appropriate, Site Supervisor completes approval form CSB607 (See CSB Forms).
- If part-day services are unavailable, not desired by the family or inappropriate, Site Supervisor terminates the child and closes the file.

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<#>• Site Supervisor ensures that each class is fully enrolled morning and afternoon through enrollment and certified hours of care. ¶  
<#>• Site Supervisor completes Approval Form CSB607 (See CSB Forms).¶  
<#>• AD approves or denies request, maintains original for her records and returns a copy to the site.¶  
• Site Supervisor files copy in student file, updates CLOUDS (waitlist & re-enroll with new program model or terminate), and updates student file including NOA, 9600S, and any other appropriate documents, and moves child to part-day services.

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- AD approves or denies CSB607 request, maintains original for her records and returns a copy to the site.
- If approved, Site Supervisor files copy in student file, updates CLOUDS (waitlist & re-enroll with new program model), and updates student file including the following and moves the child to part-day services on date on or after AD approval date and no later than effective date of NOA terminating full-day (or ¾ time) services.
  - Completed 9600S – update program model at least and hours of care, and other information as applicable.
  - Income and family size remain as they were at original enrollment unless documentation of current income or family size benefits the family.
  - NOA stating change to part-day services - effective date is same as effective date for termination of full-day services (or before if desired by the parent).
  - Update CLOUDS hours of care.
  - Update CLOUDS program model (while retaining previous enrollment history), reason for needing care (if applicable), program option (if applicable) to “part-day center-based”, and any other appropriate updates.
  - Site Supervisor ensures child is reflected on appropriate 9400s for appropriate number of days during the month of the move.

ii. Full-day or ¾ time to Tuition Based (TB)

- Site Supervisor determines family no longer meets eligibility or need criteria (for more than 4 hours of care) and issues NOA for termination of full-day (or ¾ time) services effective 14 or 19 days as appropriate.
- Site Supervisor ensures that each class is fully enrolled morning and afternoon through enrollment and hours of care.
- Site Supervisor determines if TB services are available.
- If available, Site Supervisor and family determine if TB services are desirable and appropriate.
- If desired by the family and appropriate, Site Supervisor completes approval form CSB607 (See CSB Forms).
- AD approves or denies request, maintains original for her records and returns a copy to the site.
- If approved, Site Supervisor closes file and CLOUDS, completes all applicable paperwork and required forms, including an NOA stating termination of services and moves the child to TB services on first day after the end of the 14 to 19 day NOA waiting period.
- Site Supervisor ensures child is reflected on 9400 for only the appropriate number of days during the month until the date the move to TB services was effective.
- See section at end of this manual for Tuition Based services policies and procedures.

BB. Withdrawal of Child from the Program

When the teaching staff learns that a child has terminated services, they should note the “last day attended” on the child’s application (9600) and the sign in/out sheet. They must also notify the CSAM immediately upon knowledge of a pending vacancy. Whenever possible, the reason for the withdrawal should be ascertained and recorded. The child’s termination date in CLOUDS is the first date the child does not attend so that attendance data can be captured for the last day of attendance.

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Parents who wish to reinstate must meet Title V Regulations. If the parents are successful in meeting the Title V Regulations, the parent must complete all required paperwork and provide income documentation.

The following are some reasons that a child might be placed back on the waiting list (please see Parent Handbook for a complete listing):

- A pattern of unexcused absences - Poor attendance / sporadic attendance is defined as three or more unexcused absences. When this occurs, the teacher calls the Site Supervisor, who makes personal contact with the parent as soon as they realized a child has not attended and the parent has not called. If multiple service needs are disclosed by a parent, he/she should be offered Case Management services in order to create a plan to correct the absenteeism. Every effort is made to assist parents in removing barriers to attendance.
- Parent's failure to comply with rules/regulations, resulting in danger to the health / safety of children / staff – (Must be approved by the Assistant Director)
- Parent's failure to comply with health requirements as mandated by Community Care Licensing.
- Extreme behavior problems in a child that may be harmful to the child or others (This must be based on a joint assessment by the CS / Disabilities / Mental Health Manager, and the Site Supervisor.)
- For General Childcare, a change in income or need eligibility status such that the family is no longer eligible for care.

When a child has been terminated from the program, the Site Supervisor will then call the Assistant Director, CSAM and teacher, notifying them of a new child replacing the terminated child. The Site Supervisor will call the parent of the terminated child, informing him/her that the child has been put back on the waiting list. If a terminated child is brought to school, the parent should be told to speak to the Site Supervisor.

#### CC. Attendance Expectations

##### 1. General Description

CSB children are expected to attend classes daily. Regular attendance is strictly enforced, and each center maintains documentation of all attendance/absenteeism activities. Upon registration, parents are oriented about enrollment/attendance policies.

Each parent receives a copy of the attendance policies, and the importance of regular attendance is stressed to them. Re-orientation of the enrollment/attendance policies occurs at the beginning of classes, and ongoing reminders are communicated as needed.

##### 2. Unexcused Absences

After a child has been absent for two consecutive days, the center staff must contact the child's parents to determine the cause of the absence **and to clarify the attendance policy.**

After two days of unexcused absences from the center, the parent is contacted inquiring about the absences and clarifying the attendance policy.

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After four consecutive unexcused absences, a conference with parents is called. Parents are informed that failure to attend the conference may result in their child being terminated from the program and placed onto the waiting list.

After ten consecutive or intermittent days of unexcused absences, the child is dropped from the active program and is put back onto the waiting list. (Children absent due to illness are counted in the Average Daily Attendance criteria.)

Site supervisor will check attendance sheets daily or at least three times a week to ensure attendance policies are implemented.

#### DD. Attendance Accounting

##### 1. General Description

Accounting for attendance is completed daily by the classroom teacher. Attendance is entered into CLOUDS weekly, and reports are utilized to ensure that each center maintains 85% monthly attendance for all federally funded slots. If the monthly attendance rate falls below 85%, the Site Supervisor will be notified by the ERSEA analyst and will utilize the CLOUDS absence reports to analyze the reasons and develop a corrective action plan that they submit to the Assistant Director and the ERSEA Analyst.

##### 2. Procedure

Centers maintain attendance binders for each class as the primary source document for billing the funding source, for licensing and for audit purposes. **This will be phased out when CLOUDS has approval by the California Department of Education.**

Parents or their designee must sign children in and out of the centers **daily** and note the time of drop off and pick up.

A code is used consistently throughout the entire program to mark Present, Excused Absence, and Unexcused Absence. Absences are marked with an "A" and given the excuse provided by the parent in the comment section of the sign-in sheet. The teacher determines if the absence is excused **in accordance with the excused and unexcused absence policies included herein**. When absences are excused, the "A" is enclosed in a circle.

At the end of the month, the teacher reviews each attendance record and totals the days of attendance, excused and unexcused absences, and signs and dates the sheet before sending it to the Site Supervisor.

Parents are required to give the reason for a child's absence when the child returns to school and to sign the comment to authenticate it. On occasions where the child has not returned to school, the Site Supervisor fills in and signs the reason for absence after contacting the parent.

Attendance records are reviewed by the Site Supervisor and coded by program type and special need of the child where applicable.

Attendance sheets are alphabetized and collated according to special categories.

The Site Supervisor in programs funded by the State produces computerized reports for the various programs at the center. The report is entitled the CD 9400.



- The Site Supervisor completes and signs each page of the CD 9400s signifying that the entries match the children's attendance sheets.
- The Site Supervisor forwards the signed CD 9400s and attendance sheets to the Assistant Director for review.
- The Assistant Director reviews and signs off on the CD 9400s then submits the CD 9400s with attached attendance sheets to the Enrollment/Attendance Cluster Clerk by the 4<sup>th</sup> work day of each month for the preceding month.
- The Enrollment/Attendance Cluster Clerk reviews and signs off on the CD 9400s then submits the finalized CD 9400s to the Administration Office (Business Systems Clerk) by the 6<sup>th</sup> work day of each month.
- The Business Systems Clerk collects all the CD 9400s then reviews, signs and submits the CDFS 9500s and the CDFS8501 to the Fiscal Department by the 10<sup>th</sup> working day of each month.
- The Business Systems Assistant Manager prepares the CD 801A report and submits it electronically to the State CDMIS website by the 20<sup>th</sup> of every month for the preceding month.
- The Fiscal Department reviews the submitted CDFS 9500s and the CDFS 8501 then submits finalized report to the California Department of Education by the 20<sup>th</sup> of the month for each quarter.

### 3. Excused Absences

- Illness: Absences may be excused for illness of the child, parent, or any sibling. Illness absences lasting 3 or more consecutive days may require appropriate medical professional documentation.
- Family Emergency: Absences due to family emergencies may be considered excused absences. The reason for the family emergency must be specified in the sign in and out sheets. Any of the following reasons can be considered family emergencies:
  - Death of a family member.
  - Immediate need for medical health treatment of anyone in the family unit.
  - Any incident caused by a situation which results in the family having their normal schedule disrupted to the extent that the parent cannot safely accompany their child to the site (i.e., theft, fire, flood, arrest and/or incarceration of a parent, or any other similar situations).
  - If regular means of transportation to school is disrupted, and no alternative, i.e. public transportation is available.
  - Any other situation at the discretion of the site supervisor.
- Best Interest Days (BID): Absences may be excused for the "best interest of the child" which would include time for a child to be with a parent or relative (i.e. vacation or visitation with non-custodial parent, a court-mandated visit, or participating in cultural or religious holidays). Other requests for BID are at the discretion of the Site Supervisor. BID absences are limited to ten (10) days per program year per child, with the exception of children who are recipients of protective services or are at risk of abuse or neglect. Proof of such services must be documented in the child's data file. The reason for the "Best Interest Day" must be specified in the sign in and out sheets.
- Exclusion due to unmet health requirements: Children must be excused for immunizations that are not up-to-date or a physical or TB clearance that is not received within 30 days of enrollment. Parents are allowed one extension beyond the 30 day requirement with proof of an appointment on file. Children are permitted up to three days of excused absences. After that, a Notice of Action (as applicable) will be issued for termination from the program.

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#### EE. Title XXII Requirements for All Children

Record of “up to date” immunizations must be on file before children can attend. A complete physical examination by the child’s physician is required within 30 days of admission. A form is provided at the intake interview for use by the family physician. An immunization record authorized by a Medical Doctor or a Registered Nurse must be shown. The Site Supervisor or Comprehensive Services staff will review and file a copy at the time of enrollment. Immunizations must be kept current while the child is attending the centers. The Site Supervisor or Comprehensive Services staff member notifies parents when immunizations are due. Children whose immunizations are not kept up to date will be excluded from the center until they are brought up-to-date, unless there is a medical waiver on file.

Although TB clearance must be obtained within thirty days of admission, the physical must also have indicated the result of the TB screening on the child’s record.

Children may be eligible for a free physical through the Child Health Disability Prevention Program. Parents should be encouraged to discuss this option with the Site Supervisor or Comprehensive Services staff member.

Enrollment information is kept confidential from all but: (1) authorized program staff, (2) California Department of Education program evaluators (3) authorized public officials. Information will not be released without parental permission, except as mentioned above.

Children with disabilities are accepted by the centers when CSB is able to obtain appropriate documentation to determine the child’s needs. CSB will work with the family to make all reasonable accommodations for the child. CSB complies with ADA and IDEA.

#### FF. Fees for Non-Head Start and Early Head Start Funded Programs

##### 1. Purpose

The purpose of these procedures is to document the process of billing, collecting, and depositing of childcare fees in accordance with County policies and the State’s Funding Terms and Conditions related to child development programs.

##### 2. County Administrative Bulletins

Community Services Bureau shall comply with the requirements set forth in Administrative Bulletin Number 205 regarding cash collections procedures.

##### 3. Fee Assessment

i. CSB shall use the current fee schedule prepared and issued by California Department of Education for child care programs funded by the State. If more than one child in a family is participating in the state funded program the family’s fee shall be assessed and collected based on the child who is enrolled for the longest period in a day. If the children are located at different child care centers, the fee shall be collected by the center in which the child who is enrolled the longest period **in the day** is enrolled.

For Fee for Service Program (**Tuition Based**), CSB shall use the monthly rate approved by the County Board of Supervisors.

##### ii. Exclusions from Fee Assessment

- The exclusions shall apply only to State-funded child care programs.

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- No fees shall be collected from families with an income level that, in relation to family size, is less than the first entry in the fee schedule.
- Families receiving services because the child is at risk of abuse, neglect, or exploitation, may be exempt from paying fees for up to three months if the referral prepared by a legally qualified professional from a legal, medical, or social services agency, or emergency shelter specifies that it is necessary to exempt the family from paying a fee. The cumulative period of time that a family may be exempt from paying a fee for this reason shall not exceed 12 months.
- Families receiving services because the child is receiving protective services may be exempt from paying fees for up to 12 months if the referral prepared by the county welfare department, child welfare services worker specifies that it is necessary to exempt the family from paying a fee. The cumulative period of time that a family may be exempt from paying a fee for this reason shall not exceed 12 months.
- In accordance with the State's Management Bulletin 09-18, all families that currently receive a CalWORKS grant on behalf of the children will not be assessed a fee. Former CalWORKS grant recipients are not included in this exemption.

iii. Credit for Fees Paid to Other Service Providers

This section shall apply only to State-funded child care programs.

- When CSB cannot meet all of the family's needs for child care for which eligibility and need have been established, CSB shall grant a fee credit equal to the amount paid to the other provider(s) of these childcare and development services. CSB shall apply the fee credit to the family's subsequent fee billing period. The family shall not be allowed to carry over the fee credit beyond the family's subsequent fee billing period.
- CSB shall obtain copies of receipts or cancelled checks for the other child care and development services from the parent. The copies of the receipts or cancelled checks and a complete and signed CSB Fees Rendered Form shall be maintained in the parent's fee assessment records.
- The copies of the receipts or cancelled checks and a complete and signed CSB Fees Rendered Form are due by the first day of the month. Fees due shall be considered delinquent if this documentation and any remaining fees owed are not collected within seven (7) calendar days.
- Copies of the receipt or cancelled check shall include the following: name of the other service provider, amount of payment, date of receipt or payment, the period of child care services covered by the payment, name of the parent, and name of the child who received childcare from the other service provider.

GG. Billing Procedures

Child care fees are paid in advance. One week before the end of each month, each Center shall submit to the Fiscal Unit a Billing Worksheet that contains following information:

- Name of the parent or guardian
- Name of the child enrolled
- Funding category of the program where the child is enrolled in
- Total number of school days in the billing month
- Daily rate determined by the Site Supervisor based on State's fee schedule (for child development contracts) or county approved rate (for fee for service program)
- Total amount assessed
- Collections made in prior month

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- Comment section for effective date of the daily rate, last date the child will attend the day care, and other pertinent information that affects the calculation of monthly billing.

No adjustments shall be made for excused or unexcused absences. The parent or guardian shall pay the total amount billed if the child is absent regardless of the reason during the billing month.

Periodic review of billing information – Assistant Directors shall reconcile or perform independent review from the participant's files to the billing report to ensure all parent fees are billed correctly.

Fiscal staff shall input the information from the Billing Worksheet to QuickBooks in order to generate the Monthly Invoice and Statement for the following month. The Invoice and Account Statement shall be sent to the Site Supervisor for distribution to fee paying parents by the first of the following month.

Child care fees are due by the first of the month. They shall be considered delinquent if not paid within seven (7) calendar days.

If account is delinquent at the close of business on the seventh calendar day, a Notice of Action shall be issued to inform the family of the following:

- The total amount of unpaid fees.
  - The fee rate.
  - The period of delinquency.
- That services shall be terminated fourteen (14) to nineteen (19) calendar days (depending on method of issuance) from the date of the Notice of Action unless all delinquent fees are paid and/or documentation of credit for fees paid to other service providers is collected before the end of the 14-19 day waiting period. The 14 day period pertains to NOAs that are hand delivered to the parent; the 19 day period pertains to NOAs that are delivered to the parent via the US Postal Service.

If the family is unable to pay their fee the program shall accept a reasonable plan from the parents for payment of delinquent fees. The plan must be developed before the end of the 14-19 day waiting period and shall not exceed 4 months to repay the full amount of delinquent fees. The center shall continue to provide services to the child provided the parents make a minimum "good faith" payment of at least 10% of the total delinquent fees at the time the plan is developed, pay their full assessed monthly fees when due and comply with the provisions of the repayment plan. The Delinquent Child Care Fee Repayment Plan Form can be printed from MyCSD under 0600 Enrollment of Electronic Forms.

- Agency staff shall submit the repayment plan to their Assistant Director or Partner Agency Director for approval before finalizing the plan. Once approved, the originals of the termination NOA and repayment plan shall be filed in the family file and copies shall immediately be provided to CSB Fiscal and the center's Assistant Director or Partner Agency Director.
- Upon termination of services from non-payment of delinquent fees, staff shall make this indication in CLOUDS, and the family shall be ineligible for childcare services until all delinquent fees are paid.

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Center staff shall make reasonable attempts to collect unpaid fees from terminated families through letters and phone calls.

- Attempts shall be documented and copies of letters shall be maintained in the family's file
- If unpaid fees are collected, staff shall send the collected fees, the pre-numbered receipt and a copy of the termination NOA to CSB Fiscal.
- If unpaid fees have not successfully been collected after making several attempts to do so staff shall send to CSB Fiscal copies of the termination NOA and letters and case notes regarding attempts to collect.
- All attempts to collect unpaid fees must be made within 45 days of termination.
- Documentation of attempts and the termination NOA are due to CSB Fiscal not more than 45 days after termination.

#### HH. Fee Collection Procedures

- Each center shall collect checks, money order or cashier check from the parents. Cash is not acceptable mode of payment. A designated center staff shall issue signed receipt to the parent for the amount collected. At CSB centers this person must be a county employee, and may not be temporary staff. The designated staff shall be accountable for the money received and such money shall be stored in a locked cash box placed in a secured area of the center.
- Center staff shall process all collected fees immediately. At least once weekly, or if fee collections exceed \$50, the designated staff shall deposit the money to the County Wells Fargo Bank account. Immediately following the deposit designated staff shall submit a copy of the receipt(s) issued to the parent(s), a copy of the Deposit Slip and Original Bank Receipt to the Fiscal Unit.
- Fiscal staff shall check copies of Receipts to make sure that total amount agrees to Deposit Slip and Bank Receipt amounts.
- Fiscal staff shall enter the payment information to QuickBooks in order to update parent accounts. Receipts shall be stamped "Posted" and filed in numeric order by Center.
- Fiscal staff shall code the collected family fees accordingly and input the data in the county's Electronic Deposit Permit system.
- Fiscal staff shall file the Deposit Slip, Bank Receipt and print out of Validated Deposit Permit in the Deposit binder.

#### II. Receipts/Banking Procedures

The S-Receipts issued to parents shall be in quadruplicate (4 copies).

- Take the hard cardboard piece from inside the back cover of the book to use between the series of S-receipts.
- Give the original S-receipt (yellow copy) to the parent and send the duplicate (white) copy of the S-receipt to the Fiscal Unit with the duplicate (pink) deposit slip and original (white) bank receipt (the transaction record).
- The golden copy of the S-receipt shall be put in the parent's file at the site.
- The pink copy of the S-receipt shall stay in the S-receipt book and the entire book shall be sent to the Fiscal Unit when a new S-receipt booklet is needed.
- The original (yellow), white and golden copies shall be sent to the Fiscal Unit even if an error is made that resulted in the voiding of the S-receipt. Write "VOID" across it. The voided S-receipt must be signed and dated by the Site Supervisor. The reason for the void must also be written on the S-receipt.

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- For credit for fees paid to other service providers, the center staff shall send to CSB Fiscal a copy of the receipt or cancelled check paid by the parent to the other child care service provider. The Site Supervisor shall attach these receipts or cancelled checks to the signed Fees Rendered Form and submit to CSB Fiscal Unit. The Fees Rendered Form can be printed from MyCSD under 0600 Enrollment of Electronic Forms. The form should be properly filled out and the credit amount should be equal to and no more than the amount paid to the other provider and shall not exceed the parent fees billed during the month.

#### JJ. Confidentiality of Records

The use or disclosure of all information pertaining to the child and his/her family will be restricted to purposes directly connected with the administration of the program. The Site Supervisor will permit the review of the basic data file by the child's parent(s) or parent's authorized representative, upon request and at a reasonable times and places. ▼

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## II. Staffing Requirements

### A. Program Director

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Community Services Bureau operates at two (2) or more sites; therefore CSB will employ Program Directors that have administrative and programmatic responsibility for the program. The Program Directors will meet the California Department of Education requirements.

The California Child Development Division (CDD) may waive the qualifications for program Director upon a finding of one of the following:

- The applicant is making satisfactory progress toward securing a permit issued by the Commission on Teacher Credentialing authorizing supervision of a childcare and development program operating in two (2) or more sites or fulfilling the qualifications for program Directors in severely handicapped programs.
- The place of employment is so remote from institutions offering the necessary course work as to make continuing education impracticable, and the contracting agency Director has made a diligent search but has been unable to hire a more qualified applicant.
- Any other reason established by the rules of the Superintendent of Public Instruction.

#### B. Site Supervisor

At each site, there will be a person designated as the Site Supervisor who has operational program responsibility for the program. A Site Supervisor will meet the requirements established by the California Title V Regulations and the California Commission on Teacher Credentialing.

The CDD will grant a waiver of this requirement upon the program's demonstration of the existence of compelling need. Factors the CDD will consider in determining compelling need are as follows: (1) evidence that the program's recruitment efforts have been successful in obtaining qualified applicants; (2) evidence of the program's inability to offer competitive salaries; and/or (3) evidence of potential or current staff's lack of reasonable access to training resources which offer required course work.

#### C. Teacher

Master Teachers, Teachers and Associate Teachers will meet California Title V Regulations as listed on the California Teacher Credentialing Permit Matrix and the Early Head Start and Head Start degree requirements as specified by the Head Start Act of 2007.

#### D. Applicability of Staffing Requirements

CSB is not subject to regulations under CCR, Title V, and the laws upon which those regulations are enforced if subsidized children comprise less than a majority of the enrollment at a given center. If there are no facilities in the area to meet the special needs of particular children, then the CDD may, upon request, waive its regulations in the area for staffing and ratios for programs in which subsidized children comprise a majority of the enrollment.

#### E. Staffing Ratios for Site Supervisors or Teachers

CSB Site Supervisors shall maintain at least the following minimum ratios in all centers:

- Infants (birth to 18 months old) – 1:3 Adult to Children; 1:18 Teacher to Children (with no more than eight infants in a group).
- Toddlers (18 months to 36 months old) – 1:4 Adults to Children; 1:16 Teachers to Children (with no more than eight toddlers in a group).
- Preschool (36 months to kindergarten enrollment) – 1:8 Adults to Children; 1:24 Teacher to Children

Compliance with these ratios shall be determined based on actual attendance.

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Whenever groups of children of two age categories are co-mingled and the younger age group exceeds 50% of the number of children present, the ratios for the entire group must meet the ratios required for the younger age group. If the younger age group does not exceed 50% of the total number of the children present, the teacher-child and adult-child ratios shall be computed separately from each group. Except as otherwise provided in Title 22 California Code of Regulations, Community Care Licensing Standards, the program may exceed teacher-child and adult-child ratios by 15% for a period of time not to exceed 120 minutes in any one day.

#### F. Comprehensive Services

The program is supported at all times by the following personnel:

- A health services content area expert who is trained and experienced in public health, nursing, health education, maternal and child health, or health administration. Additionally, when a health procedure must only be by a licensed / certified health professional, the agency will ensure that this requirement is met.
- A nutrition services content area expert who is a registered dietician or nutritionist.
- A mental health services content area expert who is a licensed or certified mental health professional with experience and expertise in serving young children and their families.
- A parent, family and community engagement content expert who is trained and experienced in field(s) related to social, human, or family services and who is skilled in assisting parents of young children in advocating and decision making for their families.
- A disabilities services content area expert who is trained and experienced in securing and individualizing needed services for children with disabilities.

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### III. Business Systems

#### A. Overview

The Business Systems Unit supports the operation of CSB programs by ensuring that CSB has:

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- Safe, secure facilities.
- Technology and related services to effectively manage work.
- Safe transportation for travel as necessary and available.
- Grant writing leadership and support.
- Ongoing monitoring, planning, and communication systems.
- Equipment and supplies necessary to operate a quality program; and
- Forums for sharing ideas and implementing continuous improvement.

#### B. Facilities

##### 1. Physical Environment and Facilities

Both the CSB and their designated contractors shall endeavor to operate offices and childcare centers that are free of exposure from toxins such as cigarette smoke, pesticides, herbicides, lead, and other air pollutants as well as contaminants from the soil and the water.

Smoking is not permitted under any circumstances on the premises of the centers and is posted as such. Anyone found bringing in a lighted cigarette or cigar shall be directed to immediately leave the office/center until the item has been safely extinguished outside of the building.

No center or office shall be sprayed with herbicides or pesticides when children or staff is present. Each center has a thermostat that must maintain a minimum of 68 degrees F. and a maximum of 85 degrees F.

All plumbing fixtures must be sanitary, safe and in working condition at all times, including hot and cold water availability (a minimum of 105 degrees F. and not to exceed 120 degrees F) and may not serve more than 15 children.

##### i. Children's Centers-Outdoor Environment

The outdoor space must be safe and free from hazards at all times. Each morning, before the children go outside, the Site Supervisor or designee must assess the entire outside area including the sandbox, climbing area, playground surfacing, fences and any other area in use by the children to ensure compliance with state and federal health and safety requirements. This is done by using the "Outdoor Health and Safety Checklist".

If there are hazards on the playground, the Site Supervisor must:

- Assess what needs to be done immediately to fix the hazard. If he/she is unable to fix the situation immediately, he/she must make alternate space for the children until the situation is fixed.
- Report the hazard to his/her immediate supervisor.
- Complete a Facility Work Request after receiving approval from the Site Supervisor.
- In centers with infants, toddlers and preschoolers, the age groups must be kept separated at all times.

##### ii. Children's Centers-Indoor Environment

The indoor space must meet applicable state and federal regulations at all times. Each morning, the opening staff member(s) must conduct an indoor health and safety check to ensure the facility is ready for children.

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### iii. Infants Environment

The indoor and outdoor spaces for infants must be separate from areas for children of differing ages. Inside it can be a separate room or separated by moveable walls or partitions that have correct square footage in each area. The moveable walls or partitions must be at least four feet high, made of sound absorbing material and designed to minimize injury to infants.

The calculation of the indoor space does not include the space used by cribs. The sleeping area must be physically separate from the activity area. This can be accomplished by having a separate room or with the partitions described above.

## 2. Building Security/Alarms and Maintenance

### i. Building Closure

Procedures are established at each site based on the whether they have an Electronic Access System and/or Building Security Alarm. Each site is responsible for developing and enforcing a building opening and closing procedure. The Site Supervisor or senior staff member is responsible to see that all appropriate staff are informed and trained on the procedure to lock the building and arm the alarm (if applicable). Information on how to contact the alarm company and who to contact for after hour emergencies is posted at the alarm panel.

### ii. Building Security Alarms

Building security alarms are turned on by assigned staff when leaving the site at the end of the day and turned off at the beginning of the day. If there are problems with arming or disarming the system, staff call the alarm monitoring company at the phone number shown at the arming station. If assistance cannot be provided over the phone, an alarm technician will be sent to the site. If error codes are present but the system is functioning, staff submits an electronic work order to Facilities stating the error code.

The Security system performs a self test and displays a trouble code for any required maintenance on a daily basis. An emergency contact list is provided to the alarm monitoring company of staff to contact in case of an alarm being triggered after hours.

### iii. Fire and carbon monoxide monitoring systems

Fire and carbon monoxide monitoring systems are tested annually by the local fire authority and inspection reports are kept on site. Any identified deficiencies must be repaired and pass re-inspection. Repair work orders are submitted electronically to Facilities by the Site Supervisor along with a copy of the Fire Inspection Report on the day of the inspection.

Trouble codes are sent from the alarm system to the monitoring company which alerts the fire department. When an alarm sounds staff evacuates the building to the designated evacuation area and wait for emergency personnel.

### iv. Exterior door alarms

Exterior door alarms are located at the top of the door and are to remain active in the "On" position at all times. Alarms can be over-riden by use of a key to turn the alarm to the "Off" position to open the door for transition to and from a classroom.

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The Site Supervisor will submit a work order to Facilities the same day as problems occur, for example the alarm not sounding when the door is opened without turning the key to the "Off" position. The exterior doors alarms are battery operated and beep when a battery becomes weak. Facilities Building Services Workers will replace batteries within 24-hours of receiving a work order request notifying them of a low battery alert.

The Safety Officer performs a test of exterior door alarms as part of the monthly health and safety checklist and all problems are reported to Facilities immediately through submission of an electronic work order request.

v. Alarmed Push Bars on Half-doors

Alarmed push bars on half-doors are located in building entrances and must be armed at all times. The Safety Officer tests all half-doors in the facility as part of the monthly health and safety checklist and all problems are reported to Facilities immediately through submission of an electronic work order request. The Site Supervisor will submit a work order the same day as problems occur, for example by the alarm not sounding when a door is opened when pressing on the bar, or if the alarm does not reset after the door is closed. A half door that is armed will show a red light on the alarm panel. No light or a green light indicates the alarm is not set. To activate the alarm: the key is turned to the off/green light position, staff waits 30 seconds, and then turns to the on/red light position. Keys to the doors are to be kept out of the reach of children at all times and in a discrete location from visitors. Staff is to demonstrate proficiency in arming the system. Facilities staff will review and provide training on arming the doors upon request.

Centers with alarmed push bars on playground gates are to include the testing of the gates in the monthly Health and Safety checklist. Playground gates do not have alarm panels with lights and are armed at all times.

vi. Electronic Access Card Systems

Electronic access card systems on exterior entry doors maintain the security of the facilities by limiting access. Staff is issued electronic access cards to sites that work like electronic keys. Exterior doors remain locked from the outside while allowing staff access with their electronic card. The cards are also printed with staff names and photos to be used as identification cards. If an electronic access card is lost or stolen it will be promptly deactivated to maintain the security of the facility. Repairs to access card systems are rarely needed and are made when issues are reported by the Site Supervisor to the Facilities unit through an electronic work order request.

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vii. Keys

Keys for entry to Community Services Bureau buildings will be furnished by Business Systems per request of Site Supervisor or employee's supervisor.

At time of issuance of keys, the employee will be requested to sign in copy of the Portable Media/Access Policy and key sign out sheet.

Upon receiving access to any of the site keys, the staff member is responsible for safe keeping the key and its use as well as to ensure that all building doors are secured prior to leaving the building. Keys are not to be loaned or made available to others and any lost or stolen keys should be reported to Business Systems immediately.

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For more information, refer to Portable Media/Access Device Policy.

viii. AiPhone (Video/intercom) Systems

AiPhone systems are used at some sites to allow staff to easily allow access to families while keeping the facility secure. Visitors to a center press the buzzer outside the entrance and are greeted over the intercom. When they are visually identified the door is unlocked.

ix. Video Surveillance Systems

Video surveillance systems operate 24 hours a day 7 days a week. The Site Supervisor monitors the surveillance cameras daily and confirms cameras are directed to show a clear unobstructed view of the classrooms, entrances, and playgrounds. Any obstructions to the view or misdirected cameras are reported to Facilities through an electronic work order request by the site supervisor the same day as they occur. The Facilities staff will check the video feed from their location and report the problem immediately to General Services. The facilities unit will work with General Services to make any necessary repairs within 24 hours of the reported problem.

Requests for video footage are made to Facilities by the Site Supervisor or senior management staff through an electronic work order request. Requests must be made as soon as possible as the system retains footage for only a few days to a week.

3. Acquiring Space

The Policy Council must be consulted on the location of space acquired for the program's use. Space acquired must meet all applicable local ordinances for both classroom and office use. Additionally, all space acquired for classroom use must meet all state and federal regulations. Negotiation of leases is delegated to Contra Costa County Lease Management, and lease costs must be within budgeted amounts designated for such expenditures. Lease Management prepares/finalizes all leases for the Assistant Director's signature. Also, the Business Systems Manager or Division Manager must approve/sign all leases negotiated for CSB.

4. Use of County Facilities

The use of county facilities is covered by the following regulations:

- Use of County building space by private organizations is regulated by inter-agency agreement.
- Departmental officials may make arrangements for posting official announcements on County bulletin boards through the General Services Department. Use of County bulletin boards by private organizations for advertising, except as provided by ordinance for employee organizations, is prohibited.
- CSB program managers are responsible for County facilities and property used by employees under their jurisdiction. While controlling and administering use of space/facilities, managers must see that employees do not introduce material which others would find objectionable / offensive for reasons such as different social, political, religious, or moral beliefs.
- Solicitation of contributions and sale of merchandise within County buildings except for purposes authorized by the Board of Supervisors is prohibited.
- Restrooms and lounge facilities are provided for employee use.
- CSB classrooms and offices are not to be used as lunch or coffee rooms.

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- All facilities serving children must meet applicable state and federal regulations pertaining to health, safety, and developmentally appropriate practice.

#### 5. Document Posting

Before classes begin each program year, the Site Supervisor obtains and assures the proper posting or filing of the following documents at each facility and/or classroom:

- Evacuation Plan
- Fire / Earthquake Drill Schedule
- Emergency Guidelines for Illness and Accident First Aid Manual
- Emergency phone numbers for fire, police, paramedics, nearest emergency hospital, poison control center, physician, and administrative office
- Parents' Rights Form
- Children's Rights Form
- No Smoking signs
- Employee Safety Policy Statement
- Current license
- Any other document mandated by the state or federal government
- Note: Children's contact numbers are never to be posted.

#### 6. Safety Officer

For each building which houses CSB personnel, a safety officer has been designated. General responsibilities of safety officers are to:

- Complete monthly health and safety checklist
- Instruct co-workers in emergency procedures
- Assume control during an emergency
- Keep track of persons assigned to each building
- Know the conditions under which a building should be evacuated
- Know what procedures/equipment is available for the evacuation of handicapped persons
- Know the location of all primary and alternate building exits and know direct routes to each exit
- After evacuating a building, search to make certain all individuals have left
- When emergency responders arrive, report to them any injured person requiring special attention
- Call roll at the evacuation assembly area and report missing persons to emergency responders
- Know the location of all fire alarms and fire extinguishers
- Know how to operate fire extinguishers
- Know the location of all first aid and emergency kits
- Know first aid and CPR.

#### C. Use of Technology

CSB utilizes a variety of technology throughout the bureau and is supported by the Contra Costa County Department of Information Technology.

##### 1. Business Systems Re-engineering Committee (BARC)

BARC is comprised of a cross-section of staff with the following charter: to create business systems that maximize automation and efficiency by using streamlined processes that eliminate duplication,

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maximize output, and lend themselves to order resulting in easily and readily accessible information that drives quality programming.

## 2. Child Location Observation Utilization Data System (CLOUDS)

CSB uses CLOUDS as its management information system. Staff are required to keep the system up-to-date in accordance with their respective roles in the organization. These roles are detailed in these policies and procedures in each service area. In addition, teachers are responsible for ensuring that parents sign their child in and out electronically. Manual systems are in place for back-up purposes.

### i. User Support

CLOUDS user manuals are posed on the CSB intranet and in the Shared Drive (S:\CLOUDS) that detail how to use the system. In addition, training is provided in an ongoing fashion via user groups. New staff are assigned a mentor user to orient them to the system.

### ii. Ongoing System Enhancements

All system enhancements must be requested via the content area expert for the respective portion of the system. Content area experts formally request the enhancement to be placed in the project queue via the CSB Resource Center on the CSB intranet. Enhancement requests must include attachments with screen shots and indicate the level of priority with a justification for the priority level. The Business Systems Manager will evaluate all requests and notify requestor of final decision regarding placement in the project queue. As enhancements are developed, content area experts are required to test them and then to inform staff regarding proper usage of enhancement. User manuals will be updated with finalized enhancements by the vendor.

## D. Equipment and Supplies

### 1. Procedures for Ordering Materials - Employees and Supervisors

#### i. General Description

An employee or supervisor has alternatives for obtaining non-emergency material or services. These are:

- Office Supplies - Approved ordering staff at each location prepare an on-line order form. CSB has an approved shopping list of discounted items that should be utilized whenever possible. Items can be added from the general catalog if they are not on the approved list. The completed order is sent electronically to the Assistant Director for approval and submission to the office supply company. Ordering staff can track their order progress on-line.
- Classroom Supplies – Requests for classroom supplies are sent from the Site Supervisor to their Assistant Director for approval. The designated Assistant Director orders classroom supplies for all sites.
- Health / Janitorial Supplies – All health and janitorial supplies may be ordered on an on-line Supply Order Form. Supply orders should be completed on a monthly basis by the Site Supervisor and are approved by the Assistant Director. The order is then sent electronically to the Purchasing Unit for processing.
- Open Purchase Order - The County has established a number of Open Purchase Orders (POs) with vendors in the area authorizing certain persons to pick up material and charge it to the CSB account.

If you wish to order materials from these vendors, submit a purchase requisition to your supervisor for approval of the Assistant Director. If approved, it will be forwarded to a person authorized to purchase

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material under the Open PO by credit card or other arrangement. If an order is over \$5,000 it must be signed by the Division Manager.

After the purchase is made, the requisition and the vendor's receipt will be forwarded to the CSB Accounts Payable Unit. When the bill is received, the Accounts Payable Clerk will match it to the approved requisition and receipt prior to payment. CSB has established Open Purchase Orders with many vendors. A current list can be obtained from Fiscal. If you are making a large number of purchases from a vendor that does not have an Open PO you may request that one be established by contacting the purchasing clerk.

CSB Requisition - If there is no Open PO available for the material required, you must submit an approved CSB purchase requisition to your division's purchasing clerk. After a purchase is made, the requisition and packing receipt must be forwarded as soon as possible to CSB Accounts Payable Unit. When the bill is received the Accounts Payable Clerk will match it to the approved requisition and receipt for payment.

#### ii. Purchasing Procedures - Purchasing Clerks

Purchasing clerks are located in the CSB Administrative Office and are responsible for processing all department requisitions. Once the purchasing clerk receives a CSB requisition he/she has several options of procurement methods depending on the situation. Below is a description of the methods available to the purchasing clerk.

- Warrant Request - CSB can normally use a Warrant Request to purchase items with a total cost under \$500. This form needs to be signed by the requester and an authorized manager. This procedure is faster than a purchase order as it does not need to be processed by County Purchasing.
- CSB cannot use a Warrant Request to purchase any item that can be purchased using an open purchase agreement. In addition, the following items cannot be purchased using a warrant request:
  - Furniture
  - Printing Services
  - Appliances
  - Professional Services
  - Cellular Telephones
  - Building Related Charges
- County Requisition (Form REQ) - For vendors not having an Open PO, or not qualifying for a Warrant Request, items are purchased using an approved Purchase Order. The purchasing clerk completes a County Requisition form based on the submitted requisition form and forwards it to the General Services Purchasing Division for preparation of a Purchase Order.

There is no dollar limit for a Purchase Order however it can be an extensive process as it may have to go through the County's procurement process and involve soliciting competitive bids and awarding of the contract to the lowest qualified bidder depending on the dollar amount of the proposed contract. It should be noted that, when time is critical, CSB might ask the Purchasing Division for a PO number. If they agree, CSB is allowed to make the purchase without the normal process.

- Equipment Definition / purchase of equipment must adhere to both Grantee policies and guidelines outline in the Contra Costa County Head Start Administrative Manual. (For local purposes, "equipment" is defined as any purchase costing \$5,000 or more.) Any

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equipment/equipment purchase not identified in the annual grant (or subsequent applications) must receive Policy Council, Regional, and Executive Director's approval. Such requests must be made prior to the end of the Head Start fiscal year (by December 31<sup>st</sup> of each year). Equipment funded in part or wholly through CA Department of Education must have prior approval on any single item of \$5,000.

- Supplies

Supplies purchased for CSB programs must be deemed necessary and appropriate by the Bureau Director. (The process for expenditures of funds for supplies is outlined in the procurement procedure on file in the fiscal office. It must be followed.) All expenditures of funds must be approved by the Program Director.

- 2. CSB Equipment, Toys, Materials, and Furniture
  - i. General Description

CSB sites must provide clean sheets and blankets for children's use at naptime to be washed each week or as needed. If there are not sufficient sheets and blankets, the Site Supervisor must notify the Assistant Director immediately.

All play structures and equipment used by the children must meet the following requirements:

- Age and developmentally appropriate.
- Maintained in good condition.
- In sufficient quantity to allow full participation.
- Free of health and safety hazards.
- Free of toxic substances.
- If any material in the environment does not meet the above standards, it must be removed immediately or deemed off limits to the children until it can be safely removed.

- ii. Infant Furniture

The infant equipment and furniture, inside and outside, must be developmentally appropriate and include cribs, cots or mats, changing tables and other necessary equipment. The type, height, and size of all furniture and equipment must be age appropriate. There must be a variety of age appropriate washable toys and equipment.

CSB does not use swings, playpens, walkers or high chairs. Walkers may not be kept on the premises.

Equipment that is assembled when purchased must not be modified, and if assembly is needed, it must be assembled according to the manufacturer's instructions.

Supplies containing toxic materials or substances shall not be purchased and used on the centers. All equipment and furniture must be maintained in good repair and safe condition and disinfected after each use. Equipment must be safe and must not have sharp points or edges or splinters, or be made of small parts that can be swallowed.

Toilets and hand washing sinks must be in close proximity to the activity areas.

- Infant changing tables must:

- Have a padded surface no less than one-inch thick and be covered with washable vinyl or plastic.
- Have raised sides at least three inches high.

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<#> Equipment¶

Definition / purchase of equipment must adhere to both Grantee policies and guidelines outlined in the Contra Costa County Head Start Administrative Manual. (For local purposes, "equipment" is defined as any purchase costing \$5,000 or more.) Any equipment/equipment purchase not identified in the annual grant (or subsequent applications) must receive Policy Council, Regional, and Executive Director's approval. Such requests must be made prior to the end of the Head Start fiscal year (by December 31st of each year). Equipment funded in part or wholly through CA Department of Education must have prior approval on any single item over \$5,000.¶

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- Be maintained in good repair and safe condition.
- While in use, be placed within arm's reach of a sink.
- Not be located in the kitchen/food-preparation area

Toy storage containers must meet the following requirements:

- Lids and the hardware used to hinge lids on boxes or chests must be removed.
- All edges and corners must be rounded and padded.
- The container must be well ventilated.
- The container must be lockable.
- The container must be maintained in good repair and safe condition.
- Metal and wood boxes must not have sharp or splintery surfaces

Pacifiers must have a shield or guard large enough that the child cannot choke. Rattles must be large enough that they cannot become lodged in the infant's throat and constructed so that they will not separate into small pieces.

It is recommended that all infant sites comply with the US Consumer Product Safety Commission advice for the selection and safe use of children's toys. Avoid toys with small parts. Look for the age recommendation on labels. Toys should be suited to the skills, abilities and interests of children.

### iii. Infant Napping Equipment

Each crib, mat or cot must be occupied by no more than one infant at a time.

For each infant who is unable to climb out of a crib, a standard size crib meeting the following requirements is provided:

- Slats must be no more than 2 and 3/8 inches apart.
- Tiered cribs are not allowed.
- Cribs must not limit the ability of the staff to see the infant.
- Cribs must not limit the infant's ability to stand upright.
- The mattress must be at its lowest position.
- Cribs will have stationary sides.

Crib mattresses must be:

- Covered with vinyl or similar moisture resistant material.
- Wiped with disinfectant daily when soiled or wet.
- Maintained in a safe condition with no exposed foam, batting or coils.
- Bumper pads must not be used at CSB facilities.

Each infant must have his/her own bedding used solely for him/her. It must be replaced when wet or soiled or when it is to be occupied by another infant.

Bedding must be changed daily or more often if required, and placed in a container that is inaccessible to children.

Floor mats or cots must be provided for all infants who have the ability to climb out of a crib.

Cribs, mats or cots must be arranged so that the staff can reach each infant without having to step over or reach over any other infant. Placement must not hinder going in and out of the nap area.

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### 3. Use of County Communication Services

#### i. General Description

Communication services are provided for the use of County employees for work-related communications. For example:

- The telephone system is provided for the use of Contra Costa County employees in the conduct of their assigned duties. (See [EHSD & CSB Internet/Email/IT Standard Usage Policies](#)).
- Contra Costa County provides a message service (to forward written material and small packages among various County facilities on a regular route and time schedule). Each work site served posts the time of pickup and delivery; this service is to be used where available. (Supervisors have further information regarding this program.)
- The Contra Costa County General Services Department provides a centralized United States Postal Service operation. All mail must be processed through this Center- except for emergency situations. Materials to be mailed may be submitted through Messenger Service.
- The department pays for all postage charges, but receives reduced costs for bulk and ZIP code mailings. Contra Costa County's Postal Service is provided for office use of County staff. It is not to be used for personal benefit of employees or the public. (Supervisors may be contacted for rules and Regulations regarding United States Postal Services.)
- Fax machines are available for Contra Costa County use. Telephone numbers for fax machines are listed in the Inter-Office Telephone Directory. CSB implemented the use of E-fax, faxes received and sent by email, and paperless faxing through copiers to switch to paperless faxing.

#### ii. Portable Communication Devices

Smart phones, tablets, laptops and wireless modems (collectively referred to as portable communication devices) are utilized by CSB to allow management personnel to stay in communication when away from their primary office, when traveling on business, and in emergency situations. Portable communication devices are county property and are covered under the same requirements as other county property. This includes:

- Employees are responsible for the security of communication devices and are to report lost, damaged or malfunctioning devices to their supervisor as soon as possible after discovery.
- Employees are responsible to ensure the confidentiality and security of information contained on or obtained through communication devices.
- All communication on the device is considered county business and as such is not considered personal or private.
- Voice messages, text messages, e-mails, photos and other methods of communication or storage of information can be reviewed at any time by appropriate county personnel. This includes call, data and text logs.
- Communication devices are to be used for county business only. Inappropriate use of county property, including the personal use of communication devices that cause excess use charges to be incurred whether reimbursed or not, can result in loss of privileges to use county property.
- Communication devices are to be used only by the county employee they are assigned to. If devices are to be used by more than one authorized employee they will be assigned to specified employees for a defined time period before reassignment to other employees. (Sites make assignments on the Equipment Check-out Log).

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- Use of a device for texting while driving, whether in a county vehicle or personal vehicle on county business, is prohibited by state law. Phone calls made or received while driving are strongly discouraged, but are allowed only if possible with the safe use of hands-free devices.
- CSB is required to submit reports on the use of the devices to DoIT and the CAO. The reports will contain information specific to each device, including any use of a device that caused additional charges to be incurred, and confirmation of reimbursement of those charges.
- As with all county property, each communication device (including accessories) is to be returned upon change of position or separation of employment.

#### E. Vehicle Usage Policy

##### 1. General Procedures

CSB maintains vehicles for use by authorized personnel in order to conduct official County business. Policies on the use and operation of vehicles on County business also apply to driving personal vehicles while on County business. Vehicles are reserved through designated clerical staff or vehicle reservation calendars. In an effort to ensure that CSB vehicles are kept in top condition, the following procedures must be followed.

- County vehicles can only be used by authorized employees.
- Authorized drivers must have a valid California Drivers license.
- Authorized drivers are to immediately notify their supervisor of any change in the status of their California Drivers license.
- County vehicles are to be used only for authorized county business.
- Drivers are responsible for safe driving, including parking in a well-lit area, and locking the vehicle at all times.
- Drivers are to be courteous and practice defensive driving and fuel conserving practices.
- Authorized drivers are to observe all traffic rules and regulations.
- Car pooling in county vehicles is strongly encouraged when multiple employees are attending the same business function.
- Employees are prohibited from carrying unauthorized riders while on county business.
- Moving, parking and toll violations are the personal responsibility of the driver.
- No smoking is allowed in county vehicles.
- While the vehicle is in operation no eating or drinking is allowed.
- Cell phones and other hand held devices are not to be used while operating a vehicle.
- All persons driving or riding in a vehicle are to be properly secured with the use of seat belts or other approved restraint systems.
- Vehicles are to be returned free of trash or other debris.
- Car seats and other cargo should be secured in the cargo area of the vehicle so that they will not become projectiles in case of a sudden stop or accident.
- Drivers are to wear appropriate footwear, no backless or loose sandals.
- Vehicles are to be returned with a minimum of a half tank of fuel.
- County vehicles are to be fueled regularly at the County Fleet station or other approved facilities.
- The County credit card is to be used exclusively for purchasing gasoline at authorized fueling centers. (See list of centers and addresses in the vehicle binder fuel tab.)
- If the credit card is lost it must be reported immediately to avoid fraudulent use.
- County vehicles will be serviced at the Waterbird Fleet station except in after-hour emergencies.

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- CSB does not use Fleet loaner vehicles. Contact the Facilities clerk for possible temporary use of another CSB vehicle if necessary.
- County vehicles are not to be taken to a personal residence without Sr. Management approval.
- Vehicle binders and keys are to be returned punctually after vehicle use.

It is CSB policy to use a county vehicle when one is available in lieu of using a personal vehicle. If a county vehicle is available it must be utilized unless a supervisor determines that the use of a personal vehicle is justified. Justification for the use of a personal vehicle is documented by the supervisor's signature on the request for reimbursement of travel expenses.

## 2. Accident and Maintenance/Repair Reporting

Drivers are to report any accident or service need the same day as occurred. All accidents MUST be reported and the proper paperwork completed and submitted to Risk Management within 24 hours of the accident. Any unusual sound, odor, low fuel, maintenance light or other indication that the vehicle is malfunctioning or may need service is to be reported to the clerk when returning the vehicle binder.

## 3. Child Passenger Safety Procedures

A child will be transported in county vehicles only if the child is fastened in an approved developmentally appropriate safety seat, seat belt, or harness appropriate to the child's weight, and the restraint is installed and used in accordance with the manufacturers' instructions for the car seat and the motor vehicle. Each child must have an individual seat belt and be positioned in the vehicle in accordance with the requirements for the safe use of air bags.

Age and size appropriate vehicle child restraint systems shall be used for children 8 years, 80 pounds. Vehicle restraint systems should be secured in the back seats only. Infants shall ride facing the back of the car until they have reached one year of age or weigh over 20 pounds. A booster child safety seat shall be used when the child has outgrown the convertible child safety seat. A vehicle seat belt can only be used when the child is over 8 years, 80 pounds. The seat belt only fits properly when the lap belt lies low and tight across the child's hips (not the abdomen) and the shoulder belt lies flat across the shoulder, away from the neck and face. Never tuck the shoulder belt under the child's arm or behind the child's back. The child's knees should bend easily over the edge of the vehicle seat.

Staff transporting children must be aware of the following:

- The rear of vehicle is the only place for a child to ride.
- Staff should use the diagram of seating plan when placing children in vehicle.
- Lap-belt only positions can only use the 5-point harness car seats.
- Shoulder and lap belt position close to sliding door should be last position to seat child.
- The car seat and seat belts should be checked before each use to make sure they are in correctly and that the belt straps are not twisted.
- Empty car or booster seats should be strapped in with the seat belt system or stowed in the cargo area away from passengers.
- No loose items should be on floor.

The following are child passenger safety basics for each type of car seat:

- Rear-Facing
  - Must ride rear facing until at-least 1 year AND at-least 20 pounds.
  - Do not bundle or swaddle; no heavy clothing.
  - Harnesses at or BELOW shoulder level.

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- Harnesses snug and flat across infant
- Retainer clip at armpit level
- Must ride at 45° angle of recline
- Seat secured tightly to vehicle with less than 1 inch of movement side-to-side and forward
- Forward-Facing
  - Toddlers over 1 year and 20 pounds but generally weighing less than 40 pounds ride either in convertible or forward facing seat in the forward facing position
  - No heavy clothing
  - Harnesses ABOVE shoulder level AND in reinforced slots
  - Harnesses snug and flat across infant
  - Retainer clip at armpit level
  - Generally ride fully upright
  - Seat secured tightly to vehicle with less than 1" of movement side-to-side and forward
  - Top tether in use when available and appropriate
- Belt Positioning Boosters
  - For children who have outgrown the car seat but do not yet fit the adult lap/shoulder belt
  - Lap belt crosses pelvis or top of thighs
  - Shoulder belt crosses chest
  - Middle of child's head is below the top of the vehicle seat or booster

#### F. Transportation

While CSB does not provide direct transportation services to and from the centers each day, the Site Supervisor or Comprehensive Services team member must assess the needs of each family upon enrollment and attempt to make reasonable effort to assist if the family is in need of transportation services to the center.

Transportation services are offered for the following:

- To / from socialization activities
- To / from Policy Council Meetings
- To / from field trip locations

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- **Lap Belts – use only 5-point Harness Seats. No Boosters**
- **Shoulder Lap with Star (\*) is the last Shoulder Harness to fill**
- **No loose items in the vehicle**
- **Unused car or booster seats are strapped in or removed from the passenger area of the vehicle.**

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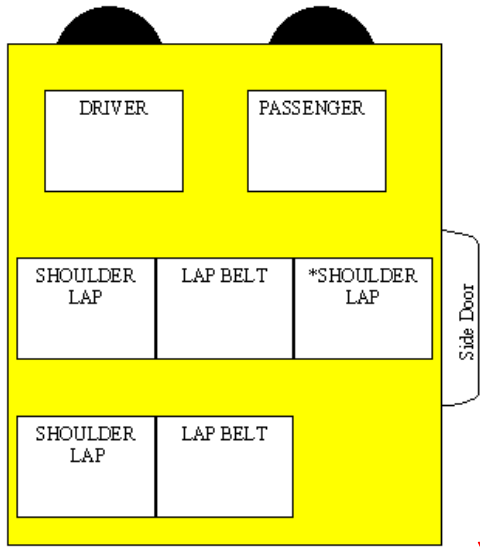
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CONTRA COSTA COUNTY EMPLOYMENT & HUMAN SERVICES DEPARTMENT COMMUNITY  
SERVICES BUREAU

# POLICIES AND PROCEDURES

## SECTION 5-ALTERNATIVE PAYMENT PROGRAM

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Policies and Procedures

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## Policies and Procedures

### Section 5: Alternative Payment Program

#### J. Program Overview

The purpose of this program is to provide subsidized child care for eligible children and families living in Contra Costa County and to provide a wide range of child care choices for parents. The ~~CalWORKS~~ Stage II Child Care program is limited to those parents who are in receipt of or have received ~~CalWORKS~~ cash assistance within the last twenty four (24) months. Our California Alternative Payment Program (CAPP) assists families referred by Children and Family Services and low-income families. Both of these programs support families in their child care decisions and make timely payments to their chosen child care providers.

Children can be served from birth up to age 13, or up to age 21 if special needs are proven with appropriate documentation.

The CSB Stage II/CAPP program administers subsidized child care through a vendor approach, providing full or partial payments for child care of eligible families. These programs are designed to maximize parental choice in selecting child care. Parents may select child care services from licensed centers and preschools, licensed family child care homes, licensed-exempt out of home providers, or licensed-exempt in-home providers. Subsidized child care does NOT pay for private schooling.

CSB operates in accordance with all applicable state and federal laws governing human service agencies. These policies may change periodically as directed by the California Department of Education (CDE). Addendums will be issued to parents and providers as regulations change.

#### A. How to Qualify for Services

##### 1. General Description

There are various ways that families can qualify for our programs. The two distinctly funded programs administered are Stage II and CAPP.

- Stage II – Parents in receipt of CalWORKS assistance payments and former CalWORKS parents (those having received CalWORKS within twenty four (24) months from the date of application for child care supportive services) may be eligible for subsidized child care services. There are various stages of funding in this program and each has its own priorities and limitations. It will be the responsibility of the Child Care Assistant Manager to work with the parent to determine the appropriate stage for child care services.
- CAPP (California Alternative Payment Program) – Families may be eligible for CAPP funding based on need and eligibility criteria (such as low income working families), with 1st priority for those children currently receiving child protective services, or those children who are considered at risk of abuse, neglect or exploitation by a legally qualified professional.

##### 2. Application

Applications for the Stage II/CAPP Child Care Unit require the completed application forms found in the Child Care Application packet. Parents must provide all requested information and documentation to determine initial eligibility.

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## Policies and Procedures

### Section 5: Alternative Payment Program

#### 3. Eligibility and Need

i. Eligibility is determined at the time of enrollment, or within six (6) months of the date of transfer from CalWORKS Stage I to Stage II. Families are required to provide their Child Care Assistant Manager the appropriate documentation to prove their eligibility for child care for at least one of the following criteria:

- Gross wages/salaries from employment
- Tips
- Overtime pay
- Cash assistance (TANF/Cash Aid)
- Student loans
- Disability compensation
- Unemployment compensation
- Spousal and/or child support received
- Foster/Guardianship assistance

Parents will be required to provide supporting documentation for all total countable income. For example:

- Payroll check stubs
- Letter from employer
- Most recent tax returns
- Bank statements
- Cash aid documents

ii. The family is homeless and provides a written referral from a local shelter, or legally qualified professional from a medical or social service agency, or submits a written parental declaration that the family is homeless and a statement describing the family's current living situation.

iii. Child is referred by Child Protective Services (CPS) with a written referral by the county welfare department indicating the child is currently receiving CPS services and child care is a necessary piece of the service plan. The referral must include the contact information for the social worker and the duration of the CPS service plan. These referrals must be dated within 6 months of receiving the child care application.

iv. Child is deemed At-Risk of abuse/neglect and provides a written statement by a legally qualified professional indicating child care is needed to reduce the risk. The statement must include the professionals contact information and probable duration of the situation.

v. Family is transferred from Stage I to Stage II by the county welfare department. Parent will be asked to provide documents for recertification within 6 months of the transfer effective date.

4. Family Size - Upon completion of your initial application for services, you will need to provide supporting documentation for all children and adults listed in the family. The family members may be documented by the following:

- Birth certificates
- Court ordered child custody agreements

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## Policies and Procedures

### Section 5: Alternative Payment Program

- Adoption records
- Foster care placement records
- School or medical records
- County welfare department records
- Any other document proving relationship between the parent and the child
- In the absence of a second parent, documentation must be provided to support the absence. This documentation may be any one of the following:
  - Records of marriage, divorce, separation
  - Court ordered child custody documents
  - Evidence of child support
  - Rental agreements
  - Any other documentation to verify the presence or absence of the 2nd parent
  - The Child Care Assistant Manager may require further documentation at any time to prove the absence of the 2nd parent.
  - Only in the instance when the absence of a parent is a recent departure from the family, may the remaining applicant submit a self-declaration under penalty of perjury explaining the absence. The remaining applicant has from six (6) months of applying, or reporting the change in family size, to provide one of the previously listed documents to support the absence of the 2nd parent.

5. Service Need - Families who are income eligible to receive subsidized child care must also have, at minimum, one of the following services needs to become enrolled or continue with current service. All parents/guardians listed in the family size must have a service need. (Hours of care provided to the family will be determined by the family's need for services.)

i. Child Protective Services (CPS) – Families may be eligible for child care services if the child is referred by CPS and parent provides a written referral by the county welfare department indicating the child is currently receiving CPS services and child care is a necessary piece of the service plan. The referral must include the contact information for the social worker and the duration of the CPS service plan. These referrals must be dated within 6 months of receiving the child care application.

ii. At-Risk – Families may be eligible for child care services if the child is deemed at-risk of abuse/neglect and parent provides a written statement by a legally qualified professional indicating child care is needed to reduce the risk. The statement must include the professionals contact information and probable duration of the situation.

iii. Parental Incapacity – Families may be eligible for child care services if the parent(s) are physically or mentally unable to provide care for their children. To qualify for child care services under this need, the parent would have to submit documentation from legally qualified health professional releasing information to verify the parent meets the definition of incapacity, as defined in the California Title 5 Regulations. The documentation must include the extent of which the parent is unable to provide care, the days and hours care is recommended and the health professionals contact information.

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## Policies and Procedures

### Section 5: Alternative Payment Program

iv. Employment – Families may receive child care services during the time they are working and traveling to and from work. To qualify for child care services under this need parents would need to submit the following documentation:

- An employment verification form – signed by the parents employer stating the days and hours worked by the parent
- One month's worth of current and consecutive pay stubs
- If parent is paid in cash by their employer, parent will provide a letter from the employer verifying the following:
  - Employers contact information, including the employer tax identification number
  - Date of hire
  - Days and hours of employment
  - Pay rate or gross monthly income
  - Other potential income (i.e. tips, overtime)
  - Statement declaring employee is paid in cash only
- If the parent is self-employed, the parent will provide the following:
  - A declaration under penalty of perjury that includes a description of the nature of their employment and an estimated number of days and hours worked per week
  - Copies of appointment logs, client receipts and/or mileage logs
  - Copy of their business license if available, or workspace rental agreement
  - List of clients with contact information

**\*\* Note:** Parents employed by child care centers, or assisting family care home providers may receive services, but those parents who are licensed providers registered with Community Care licensing are not eligible to receive child care services for their child(ren).

v. Training Towards Vocational Goal – Families may be eligible for child care services if the parent(s) are enrolled in a program that will directly lead to a recognized trade or profession. There is a six (6) year limitation for services under this need and the parent must continually make adequate progress towards their goal. Regardless of the length of time a parent needs to complete their training, child care services must not exceed the six (6) year time limit. To qualify for child care under this need, parents must submit the following documentation:

- Training Verification Form to be signed by registrar (or designee of program). This form includes such information as name and location of school/training institute, days and hours of class/training schedule, vocational goal of parent, etc.
- A copy of the current class schedule if available in electronic print, if not this information may be indicated on the verification form listed above.
- The anticipated completion date of all required courses/trainings to meet the vocational goal of the parent.

vi. Actively seeking employment – Each parent in the home may qualify for child care services during the time they are actively seeking employment. Services must not exceed sixty (60) working days within a fiscal year (July 1st through June 30th) and are limited to less than thirty (30) hours of child care per week. Parents seeking employment will be required to submit a self declaration under penalty of perjury that they are looking for employment. This declaration will include their plan to secure/change

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employment and a general description of the child care hours necessary during this time. The Child Care Assistant Manager may request verification of the job search and/or interviews at any time.

vii. Seeking permanent housing – Families receiving services through the CAPP program may be eligible for child care if they are trying to secure permanent housing to stabilize the family. Services must not exceed sixty (60) working days within a fiscal year (July 1st through June 30th) and are limited to less than thirty (30) hours of child care per week. The parents will be required to submit a self declaration under penalty of perjury that describes their plan to secure adequate housing for the family and a general description of the child care hours necessary during this time.

\*\* Child Care Assistant Managers may require further documentation to prove a families need for services at any time.

#### B. Share of Costs

##### 1. Family fees

Some families may be required to pay a portion of their child care costs, this is called the “family fee”. These fees are paid by the parent directly to their child care provider. Family fees are determined using the “Family Fee Schedule” provided by the California Department of Education (CDE). The following determines a parent’s family fee:

- Family’s gross monthly income
- Family size
- The child who uses the most hours of care
- Whether child care services are part-time (less than 6 hours a day) or full-time (greater than 6 hours per day)

Based on the above criteria the Child Care Assistant Manager will issue a notice of action to the parent informing them of the changes to their Child Care Agreement. An informational copy will be sent to the provider.

The parent and provider work out a payment schedule and declare on the monthly attendance sheet that the fees have been paid for the month of services rendered. The provider shall issue a receipt of family fees paid to the parent.

##### 2. Co-Payments

If the parent chooses a provider who charges more than the maximum amount CSB can reimburse, the parent will be responsible to pay the difference directly to the provider. This difference is referred to as a “co-payment”. The maximum amount CSB can reimburse is determined by the California Department of Education (CDE) income ceiling guidelines and it will be the provider’s responsibility to collect payment from the parent if desired.

#### C. Selection Process

There are various ways that families may be selected to participate in one of our programs. Families are enrolled based on the following (all enrollments are subject to availability of funding):

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#### 1. Children and Family Service Referrals

Families may be referred to CSB for enrollment from Children and Family Services (CFS), if child care is deemed a necessary piece of the service plan. CSB will review the referral to determine a family's eligibility for Head Start, Early Head Start, Center Based, Stage II and CAPP programs. Based on eligibility and need requirements the referral will be forwarded to the appropriate program, taking into consideration parental choice. Once the referral is received by the Stage II/CAPP Unit the family will be contacted to determine eligibility. If the family is Stage II eligible and meets all necessary requirements, they may be enrolled under Stage II funding. If the family is not Stage II eligible, but staff verifies the availability of CAPP funding and the family meets all necessary requirements, they may be enrolled under CAPP funding. If the family does not meet the necessary requirements for either program, or there is no program funding available at the time of referral, the Unit Manager will forward the referral to an outside agency for potential enrollment. At this time staff will notify the referring individual whether or not the family was enrolled or referred to an outside agency.

#### 2. Eligibility Lists

Families may be enrolled through a countywide eligibility list if available, or through an eligibility list maintained by CSB for families wanting to participate in subsidized child care. These lists rank families on their income and family size to ensure the most eligible family is being served at the time of enrollment. (All families with CPS, or at-risk referrals, will be enrolled as 1st priority.)

#### 3. Stage I transfers

Families may be transferred to Stage II child care services from the Stage I child care unit upon discontinuance of cash assistance or when families have been considered stable by their previous child care worker (Families may be enrolled directly into Stage II funding if the family is deemed Stage II eligible).

#### D. Enrollment process

For those families transferred from CalWORKS Stage I to our Stage II child care unit, a Welcome Packet will be mailed to the parent explaining that the transfer has occurred. The packet will contain information regarding contact information for the family's new Child Care Assistant Manager, their Child Care Agreement(s), the Participation Handbook, attendance forms, etc. An additional copy will be sent to the child care provider on file for that family as well.

Based on the availability of funding, all other families will be notified by phone if they are selected to participate in our program. For those families referred by Children and Family Services or for those deemed At-Risk, we will contact the referring individual to verify the child's need and begin communication regarding enrollment to better support the needs of the family.

The family will be offered an appointment to begin the enrollment process. At the time of appointment, the parent will be required to bring documentation that may include, but is not limited to, the following:

- Birth Certificates for all children counted in the family size
- One month current/consecutive paycheck stubs
- Verification of employment, vocational training, or parental incapacity
- Child Support documentation

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- Immunization records for non-school age children
- If applicable, IEP/IFSP for children with special needs
- Any other income or verification documentation as requested by the Child Care Assistant Manager to determine the families need and eligibility for services.

During the enrollment appointment, the parent will be asked to complete an application for child care services. The information must be completed by the parent(s), signed, dated and then verified and signed off by the Child Care Assistant Manager.

Once services are approved the Child Care Assistant Manager will issue the parent and provider a Notice of Action (NOA) indicating the certification is completed. The parent and provider will receive the Child Care Agreement(s) and be asked to sign and return to the Child Care Assistant Manager for services to begin. These agreements will outline the days and times that child care has been approved and whether or not there is a family fee/co-payment due to the provider. Each time there is a change to the schedule, increase in provider rates, change in family information, or at time of recertification, a NOA and updated Child Care Agreement will be issued to both the parent and provider.

#### E. Maintaining Enrollment

##### 1. Recertification

Parents are required to recertify their services once every six (6) to twelve (12) months, or more frequent depending on their need for services. The Child Care Assistant Manager will issue the parent(s) a Recertification Packet to be completed within a specified amount of time. Failure to complete the recertification packet by the due date indicated may result in termination of services.

##### 2. Reporting Changes

It is the parent's responsibility to report any changes to their family size, income, need for services, address, contact phone numbers, or any other information with regards to their need and eligibility within five (5) days of the change. Failure to notify the Child Care Assistant Manager of any change within the five (5) days following the change may result in termination of services.

##### 3. Fee Payment/Repayment Plans

All family fees are to be collected by the child care provider. Due dates for these fees will be agreed upon by the parent and provider, and payment will be acknowledged on the monthly attendance form. It is the provider's responsibility to collect all fees from the parent and notify the Child Care Assistant Manager if fees have not been paid. Upon receipt of notification that the parent has outstanding fees due to the provider, the Child Care Assistant Manager will issue a NOA for Delinquent Family Fees and the parent will have nineteen (19) days to pay the debt owed to the provider, or agree to a reasonable repayment plan signed off by both the parent and provider. If the provider notifies the Child Care Assistant Manager that the parent is failing to comply with the repayment plan, the family will be terminated from the program.

#### F. Alternative Payment Program Policies and Procedures

By abiding to the policies and procedures outlined in the Participation Handbook, parents may retain their child care services as long as they are eligible to participate. Any violation of the program regulations may result in termination from the program.

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#### **II. Alternative Payment Program Parent Policies and Procedures**

##### A. Attendance Policies

###### 1. General Description

Payment for services is based upon the attendance of children enrolled in the Child Care Program. The Child Care Program pays for “excused” absences, which include, but are not limited to child’s illness, parent illness, doctor’s appointments, or a family emergency. In order to be reimbursed for excused absences, parent must specify the type of illness, or reason for absence and then sign his/her full signature after the reason. This does not apply to child care in which the provider charges an hourly rate or has a drop-in rate.

###### 2. Excused Absences

Providers must be sure that parents state the specific reason for absence of the child(ren) on the attendance sheet and sign with a full signature. (This does not apply to child care in which the provider charges and hourly rate or has a drop-in daily rate.) The parent will be required to submit written documentation, with the monthly attendance sheet, justifying a child’s absence exceeding 3 or more consecutive days. The following are excused absences:

- Illness:
  - Child Illness: parent must note specific illness for the child
  - Parent Illness
  - Quarantine of child or parent
  - Dental, doctor, or therapy appointment (for child, parent, or sibling)
- Family Emergency:
  - Parent must note explanation of family emergency. May include, but is not limited to, death, funeral, sibling illness, close of work or training facility due to natural disaster, etc.
- Parental Jury Duty:
  - Parent must provide legal documentation
- Court Ordered Visitations:
  - Parent must provide legal documentation
- Best Interest Days:
  - Children are allowed up to ten (10) Best Interest Days per fiscal year for other excused absences. These would include time for a child to be with a parent or relative (i.e. vacation, visitation from a non-custodial parent/family member or participation in cultural or religious holidays). The reason for the Best Interest Day must be specified on the attendance sheet. CSB will not pay for unexcused absences or more than ten (10) Best Interest Days. The provider may charge and obtain payment directly from the parent for these absences.

###### 3. Unexcused Absences

CSB will not pay for unexcused absences. The provider must notify the Child Care Assistant Manager if a child is absent for more than three (3) consecutive days and the parent has not contacted the provider with the reason for the absence. Failure to report the unexcused absences will result in non-reimbursement for those absences after the child’s last day of attendance, including any payment for two (2) week notice to terminate.

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The provider may charge the parent and obtain payment directly from the parent for these absences. It is the parent's responsibility to pay any charges for unexcused absences to the provider. The following are possible examples of absences that would not be considered excused and for which the provider will not be paid by CSB:

- Absences without documentation
- Provider was NOT available to provide child care (includes when the provider is sick, etc.)
- Any Best Interest Days over ten (10) per fiscal year

The provider must notify CSB if a parent withdraws from care without advance notice or if provider has knowledge of a change of parental or family status including change of address, income, employment and/or marital status.

#### B. Limited Term Service Leave (LTSL)

**\*\*Only applies to non-CalWORKS subsidized families.**

If the family temporarily does not have a need for subsidized child care, they may submit a written request for a temporary leave from services. CSB may grant the family a limited term service leave for no more than twelve (12) consecutive weeks, except when the parent is on a maternity or medical related leave of absence from his/her employment or vocational training.

Maternity leave, or medical limited term service leave, shall not exceed sixteen (16) consecutive weeks in duration. During this time no child care services shall be provided nor be claimed for reimbursement. Parents will be required to provide documentation from their physician prior to going on leave and again when released.

At the time of authorized reinstatement, when the service leave ends, CSB cannot pay another registration or other new provider charges.

**\*\*It is important to remember that providers do not have to hold child care spaces throughout the leave and parents may need to seek a new child care provider(s) upon their return from leave. Also, parental reinstatement on to CSB's program will depend on funding availability.**

#### C. Confidentiality

The use or disclosure of information about the child and his/her family is limited to purposes directly connected with administering the program. When helping parents/families move to another subsidized program, information about the parent/family may be exchanged and the other program or provider is then bound by these same confidentiality guidelines. Parents or their authorized representatives may review the case file upon request and at the time and place considered reasonable by CSB. (Parents may only review the forms or other documentation/information that they have provided CSB and are in their own case file.)

CSB will provide child care services to help support families and children in need. In providing these child care services, CSB is promoting independence, personal responsibility and self-sufficiency on the part of the parent(s).

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All parents will be treated with dignity and respect. The Child Care Assistant Manager will work with the parent to develop the best plan for the family.

#### D. Grievance Procedures

All parents and providers are encouraged to first speak with the Child Care Assistant Managers to attempt to resolve any issues that may arise. If the issue is not resolved to the parents/providers satisfaction the parent/provider may file a written request to be submitted to the supervisor of the staff in question.

The supervisor will review the complaint and meet with the parent/provider by phone, or by appointment, to discuss the issue within ten (10) calendar days of receiving the complaint. If the parent/provider still feels dissatisfied, they may submit a written request for the issue to be elevated to staff at least one level higher than the staff person who made the contested decision. The parent/provider will be contacted within ten (10) calendar days of receiving the complaint and given an opportunity to present their concerns. The decision at this level will be final.

#### E. Uniform Complaint Policy

It is the intent of the Community Services Bureau to fully comply with all applicable state and federal laws and regulations.

Individuals, agencies, organizations, students and interested third parties have the right to file a complaint regarding Community Services alleged violations of federal and/or state laws. This includes allegations of unlawful discrimination (ED Code Sections 200 and 220 and Government Code Section 11135) in any program or activity funded directly by the State or receiving federal or state financial assistance.

Complaints must be signed and filed in writing with:

The California State Department of Education  
Child Development Division  
Complaint Coordinator  
1430 N Street, Suite 3410  
Sacramento, CA, 95814

If the complaint is not satisfied with the final written decision of the California Department of Education, remedies may be available in federal or state court. The complainant should seek the advice of an attorney of his/her choosing in this event.

A complainant filing a written complaint alleging violations of prohibited discrimination may also pursue civil law remedies, including, but not limited to, injunctions, restraining order, or other remedies or orders.

#### F. Zero Tolerance

CSB prohibits inappropriate behavior towards staff, or in the presence of families, children or providers on the program. Such use of abusive/foul language, intimidating actions (including belligerent emails

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and voicemails), physical harassment, destruction of property, threats to staff, etc., will be documented and may lead to termination from the program.

#### G. Termination Policies

##### 1. Reasons for Terminations

Child Care services may be terminated for any, but not limited to, the following reasons:

- Failure to maintain required need and/or eligibility for the program with which the family is enrolled
- Failure to inform the Child Care Assistant Manager within five (5) days of changes that affect the families need and/or eligibility to retain services
- Failure to recertify in a timely manner
- Failure to pay family fee or co-payment
- Failure to make payments to licensed exempt in-home providers in a timely manner
- Failure to use services for sixty (60) consecutive days, or two (2) consecutive months
- Violation of the Zero Tolerance policy towards staff
- Failure to comply with the State mandates requirements of the program
- Family's income exceeds the state income ceiling
- Children are no longer age appropriate for the program with which they are enrolled, and family cannot provide required documentation to maintain services past that age (i.e. IEP, verification of non-traditional hours)
- Failure to maintain a 2.0 GPA if services are based on a vocational training need
- Failure to abide by attendance policies and reimbursement guidelines

##### 2. Appeal Process

All terminations will be documented by a Notice of Action (NOA). The Child Care Assistant Manager will issue a NOA to the parent and send an informational copy to the provider(s). If a parent disagrees with an action taken by CSB, the parent may file an appeal request for a hearing with Employment and Human Services Department Appeals Unit:

Office of Appeals Coordinator  
400 Ellinwood Way  
Pleasant Hill, CA 94523  
(925) 677-2900

If the parent disagrees with the written decision of the hearing, the parent can appeal the decision to the Child Development Division of the California Department of Education within 14days.

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#### III. Provider Participation

##### A. General Requirements- Parental Choice

CSB policies provide for parental choice in selecting a child care provider. Parents are responsible for selecting the child care provider and the type of care, which they feel best, meets the needs of the family and meets enrollment requirements. Parents also have the right to change providers while they are participating in the child care program. Parents may choose the following types of care:

- Licensed Child Care Centers/Licensed Family Child Care Homes  
Child care centers and family child care homes are all licensed by the California Department of Social Services Community Care Licensing division, which ensures all standards of health and safety criteria are being met. These programs will be required to submit and comply with the following:
  - A copy of their current license
  - A copy of their current policies, rules and rates
  - Provide services to all eligible children on a non-discriminatory basis, giving equal treatment and access to services without regard to race, color, creed, religion, sex, national origin, or any other category that is prohibited by law
  - Providers must report observed and/or suspected child abuse to the local police departments and/or Children and Family Services and refrain from all forms of punishment, cruelty, and/or physical/corporal punishment
  - Providers must maintain confidential child and family records and other information with the exception of authorized disclosures to CSB staff or other authorized State or Federal agency staff in accordance with the law
  - Allow CSB to visit licensed facilities if requested
  - Provide care for children only during the period authorized
  - Enter into Child Care Provider Agreement with CSB as an independent contractor and in no way be considered an employee of the CSB or any of its funding sources
  - Hold CSB harmless for any damages to person(s), or property, which arise out of the delivery of services under agreement with CSB
  - Inform Child Care Assistant Manager if religious instruction is part of their child care program or curriculum. This will allow CSB to maximize the correct funding for the child care program.
- Licensed-Exempt Out of Home Providers  
Licensed-exempt providers are not licensed by the state of California. Parents are responsible for hiring, terminating services, and setting up the days and hours when care will be used. Licensed-exempt child care providers must be Trust line Registered. A Trustline registration means completing an application within fourteen (14) calendar days, which includes a health and safety self-certification and checklist and being fingerprinted through the Department of Justice (DOJ) and the Federal Bureau of Investigation (FBI).
- If the parent selects a grandparent, aunt or uncle of the children to provide care, they would be exempt from the Trustline registration.
- Within fourteen (14) calendar days of application, CSB is required to have on file:
  - of the provider's qualifications and experience
  - A health statement, including Tuberculosis clearance

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- A statement from the parent that he/she has interviewed and approve of the provider
  - A California driver's license number or a valid California ID verifying the provider to be at least eighteen (18) years of age
  - The exempt caregiver's name, address and a copy of their Social Security Card
  - Names and ages of all other adults residing in the home where the child care is provided
  - The address where the care is to be provided
  - The hours and rates for the care
  - All forms signed by both the parent and provider, as appropriate
- Licensed-Exempt In-Home Providers  
License-exempt In-home providers will be required to have the same documents on file as License-Exempt Out of home providers. In addition the following will be required for License-Exempt In-Home Providers:
  - A copy of a Worker's Compensation policy that the parent has taken out for the employee (care provider)
  - A copy of required documents the parent has filed indicating that they are the employer of record and will be withholding income tax, social security tax, and any additional withholdings from the provider's pay as required for the Internal Revenue Service, the Franchise Tax Board and Social Security Administration
  - In-Home child care providers must be assured California Minimum Wage. Effective January 2008, California Minimum Wage is \$8.00 per hour (subject to change as defined by the State of California. Adjustments to provider compensation must be made when those changes occur). In some cases, the highest amount CSB is authorized to pay for child care will not meet the minimum wage requirement. The parent, then, will be responsible to co-pay the provider the difference between what CSB can pay and California Minimum Wage to assure adequate compensation for the provider. The parent and provider will be asked to submit written documentation that they have agreed upon a payment plan to ensure minimum wage requirements are met.

#### B. Provider Rate Sheet

Providers shall submit a statement of their current rates to CSB. Rates must be the same for both subsidized and private pay families. If the provider charges more than the current Regional Market Rate allows CSB to pay, the parent will be responsible to pay the difference directly to the provider. If a provider offers any discount for siblings, the subsidized family will offered the same discount.

Providers must submit a written thirty (30) day advanced notice of any changes to their rates; all rate increases are subject to availability of funds. New rate increases will take effect thirty (30) days after receipt of notice. Providers may only change their rates once per fiscal year (July 1st – June 30th).

#### C. Attendance Sheet Policies

Providers are responsible for the accurate completion of the CSB attendance sheets (CCARE5). They are the provider's method of billing for payment and are the only form of documentation that will be accepted for reimbursing provider claims. CSB can only pay for childcare services, not private school tuition, educational fees, transportation, diapers, clothing items, or other expenses that are not part of the basic child care cost.

Below are criteria for accurate and reimbursable attendance sheets:

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- Only original attendance sheets will be accepted. Parents/Providers may request additional attendance sheets by calling the main office or their Child Care Assistant Manager. CSB will not reimburse copies of any attendance sheets.
- Attendance sheets must be filled out DAILY. The parent must sign their full name and record the actual in and out times for when the children are dropped off and picked up. (Do not round off the time, the actual time must be recorded.) If the attendance sheet appears to not have been filled out daily, it may result in non-payment.
- The provider must sign school age children in and out from school on the attendance sheet using the exact drop off/pick up times and by initialing where appropriate.
- The parent must fill in a reason explaining the child's absence from care and sign appropriately.
- The parent and provider must sign their full signatures on the back of the attendance sheet each month indicating the accuracy of the information on the form and acknowledgement of receipt of fees due the provider.
- Attendance sheets are to be completed in blue or black ink only. Should you make a mistake on the attendance form, simply cross out the error, initial it and write in the correct information. (We will not reimburse for corrections using correction tape.)

Complete and accurate attendance sheets are due by 5pm on the seventh (7th) day of each month following the month in which services were rendered. If the seventh (7th) day falls on a weekend, or holiday, attendance sheets will be due by 5pm on the next business day following the seventh (7th).

Payments for complete and accurate attendance sheets received by the seventh (7th) of the month we will be processed and mailed out by the end of the month they were received. Any attendance sheet submitted after the 5pm on the seventh (7th) day of the month will be processed and mailed the following month. (For example, an attendance sheet submitted on April 8th will not be processed and mailed until May.)

**\*\*Any attendance sheet submitted sixty (60) days after the month in which services were rendered, will not be reimbursed.**

#### D. Child Care Agreement

Upon approval for child care services the Child Care Assistant Manager will issue a NOA indicating initial approval for services and will be accompanied by a Child Care Agreement that will outline the schedule approved for services and will indicate if there is a Family Fee and/or Co-payment. The Child Care Agreements will be sent to both parent and, if applicable, the licensed provider. These certificates must be signed and returned to the Child Care Assistant Manager within ten (10) days of receipt acknowledging the approved schedule and rates for service provided.

#### E. Reimbursement

##### 1. Regional Market Rate (RMR)

Child Care is reimbursed up to 70% of the average ceiling rate as set by the California Department of Education for our county. This is referred to as the Regional Market Rate (RMR). (This rate is subject to change, if directed from the California Department of Education (CDE).)

Children attending less than thirty (30) hours of child care per week will be reimbursed at the part-time benefit ceiling and children attending thirty (30) hours or more will be reimbursed at the full time

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benefit ceiling. Those families that have variable schedules will be assessed by the Child Care Assistant Manager and assigned the most appropriate ceiling for their needs.

Should the parent chose a provider with a rate exceeding the allowable payment of the program, the parent must pay the difference with a co-payment. This is paid by the parent to the provider directly and not accounted for by CSB.

If the provider has a registration fee (licensed providers only) the rate for reimbursement will be determined by State guidelines and may be paid no more than once a year if the provider meets eligibility requirements.

#### F. Provider Days of Non-Operation

CSB will only pay for up to ten (10) days of non-operation (per fiscal year) to a licensed provider when the center, or family child care home, is closed if they fall on a contracted day. The provider contract MUST list the days of non-operation on the Provider Self Declaration form to be eligible to receive payment for them. Days of non-operation may include, but are not limited to the following:

- Holiday (i.e. New Year's Day, Christmas, Labor Day)
- Provider Vacation Days
- Staff Training/Development Days
- Multiple/Alternate Providers

CSB can only pay one provider per child for child care services. However, there are some exceptions:

If a family has needs that exceed the hours of operation of the first provider, the Child Care Assistant Manager will assess the families need status and approve multiple providers as necessary.

If a child's usual child care provider is closed, or if the child is sick and cannot attend the usual care, the parent may need to seek alternate child care. CSB will contract separately with the alternate provider for child care services. CSB can only pay an alternate for ten (10) days per fiscal year.

#### G. School Age Children

Providers will not be reimbursed for school age children care during instructional minutes, whether they are attending public or private schools.

#### H. Parents Rights to Change Providers/Providers Right to Terminate Services

Parents have the right to change their providers, up to twice annually, unless they can provide the Child Care Assistant Manager with reasonable concerns for more changes. CSB asks all parents to provide a written, or verbal, two (2) week notice to their licensed provider regarding the termination of care. The Child Care Assistant Manager will follow up with any notifications necessary. (\*\*License-exempt providers are only paid for time the child is in their care.)

Should the parent not give a two (2) week notice to the licensed provider, CSB will work with the licensed provider and offer any reimbursement as required by the licensed provider's established policies and procedures submitted with the initial approval of care.

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## Policies and Procedures

### Section 5: Alternative Payment Program

A licensed provider may terminate services with cause in adherence to his/her established policies and procedures and with a two (2) week advance notification to the parent and the Child Care Assistant Manager. Should a licensed provider terminate a family without notification, CSB will not reimburse any days past the child's last day of care.

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## Policies and Procedures

### Section 5: Alternative Payment Program

#### IV. Staff Roles and Responsibilities

##### A. Stage II/CAPP Unit Clerks

- Administrative Support to Unit Managers
  - Program Calendars
  - Form Revisions
  - Mass Mailings
  - Other clerical tasks as assigned by Assistant Managers
- Reimbursement Calculations
  - Collect, review and distribute incoming CCAREs to appropriate staff
  - Perform initial reimbursement calculations for Assistant Managers
- Incoming Phone Calls
  - Check and empty Stage II/CAPP Unit General Voicemail
  - Return all calls within 24 hours of retrieving the message
  - Answer and forward calls to appropriate staff member
- Mail Process
  - Log all mail on "Mail Log Sheet"
  - Forward mail to appropriate staff member
- Scanning Process/Document Record Keeping
  - Scan and Index all documents into ~~Northwoods Compass~~ database
- Stage I Transfers
  - Prepare and send Welcome Packets
  - Prepare Working Files
  - Coordinate with Unit Manager on case assignments
- Family Recertification's
  - Prepare and mail recertification packets
- Suite Support
  - Monitor office supplies
  - Monitor Postage Meter

##### B. Stage II/CAPP Unit Child Care Assistant Managers (CCAM)

- Case Management
  - Initial intake for new/transferred families
  - Verify documents
  - Coordinate with referring agencies about prior case information
  - Review selection of provider(s)
  - Monitor families need and eligibility
  - Family/Provider Correspondence as needed
  - Recertify families need/eligibility for services at minimum once annually
  - Termination procedures where appropriate
- Process Reimbursements
  - Review calculations
  - Process payments into CalWIN system for fiscal review/release
- ~~Review and release payments to providers in CalWIN~~
- Monitoring/Audits/Reviews
  - Monthly monitoring of selected family files

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## Policies and Procedures

### Section 5: Alternative Payment Program

- Assist Unit Manager with fiscal and/or state audits and reviews of program
- Prepare family files as needed for reviews

#### C. Stage II/CAPP Unit Manager – (CSM)

- Reports
  - ~~Monthly~~ to Program Director
  - Monthly to fiscal
  - As needed to CDE
- Personnel
  - Supervise CAT Assignments
  - Supervise Field Intern Assignments
  - Supervise Clerks
  - Supervise Child Care Assistant Managers
- Program Handbook
  - Revisions per CDE regulations
  - Annual Update
- CDE Regulations
  - Monitor Management Bulletin Releases
  - Participate in CDE conference calls regarding program regulations
  - Review Title 5 and Education Codes as they pertain to program implementation
- Client/Provider Correspondence
- CCAM Support
- Clerk Support
- Stage I Transfer Process
  - Monitor incoming Stage I transfer process
  - Assign cases to CCAMs
  - Review potential cases to be transferred out
- Monitoring
  - Review monthly reimbursements
  - Monitor CCAM Caseloads
  - Review terminations
  - Monitor Unit calendar
  - Fiscal Audit
  - State Reviews
- Facility Support
  - Order office supplies for Suite
  - Design and Implement Emergency Plan
  - Submit requests for equipment/work orders
  - Maintain location binder

#### ~~D.~~ Stage II/CAPP Fiscal Support (Accountant III)

- Review and release payments to providers in CalWIN in the absence of Program staff
- Monitor program budgets
- Review and release payments for Maintenance of Effort contracts
- Submit to Sate CDE monthly Fiscal and Caseload reports on or before the 20<sup>th</sup> of each month

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## Policies and Procedures

### Section 5: Alternative Payment Program

- ~~Submit year-end financial reports and schedules to External Auditors~~
- Correspond with Unit Manager/Program Manager (Administrative Services Assistant III responsible for AP/CAPP program)

#### E. Stage II/CAPP Program Manager (ASA III)

- Program Support
- State Correspondence
- Liaison with Appeals Unit
- Monthly Monitoring
- ~~Contract initiation/renewal~~

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CONTRA COSTA COUNTY EMPLOYMENT & HUMAN SERVICES DEPARTMENT  
COMMUNITY SERVICES BUREAU

# POLICIES AND PROCEDURES

## SECTION 6-LOW-INCOME HOME ENERGY ASSISTANCE PROGRAM

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Policies and Procedures

Section 6: Low Income Home Energy Assistance Program

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## Policies and Procedures

### Section 6: Low Income Home Energy Assistance Program

#### I. Introduction

##### A. Program Overview

The Low-Income Home Energy Assistance Program (LIHEAP) is a federally-funded program that assists low-income households with their heating and cooling needs, while helping protect the health and safety of the household.

##### B. Types of Assistance are Available

- Bill Payment Assistance  
LIHEAP may pay a portion of your energy bill in the form of a dual or single party warrant or a direct payment to a utility company. The amount of assistance is based on household income and size, energy cost, and funding availability.
- Energy Crisis Assistance  
LIHEAP funds are available to low-income households that are in a crisis situation; such as receiving a 48-hour disconnect notice, or service termination by a utility company.
- Weatherization Assistance  
The weatherization program provides services designed to reduce heating and cooling costs and improve the energy efficiency of a home, while safeguarding the health and safety of the household.

##### C. Service Center Locations

- LIHEAP Assistance  
Summit Center  
2530 Arnold Dr. Ste. 360  
Martinez, CA 94553  
Phone: 925 335-8900  
Fax: 925 335-8905
- Weatherization Assistance  
220-A Glacier Dr.  
Martinez, CA 94553  
Phone: 925-335-2100  
Fax: 925-335-2119

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## Policies and Procedures

### Section 6: Low Income Home Energy Assistance Program

#### II. LIHEAP Eligibility Guidelines

##### A. General Guidelines

- Families with children 5 years or younger living in the household.
- Families with elderly members (60 years or older) living in the household.
- Families who have permanent and/or temporary disabled members in the household, and proof of disability.
- Households who are new clients and have a high energy burden with very low to zero income.
- Utility bill must be \$300 or less in order to receive assistance.
- Repeat clients with no vulnerable population will receive negative points.
- Active Military and Veterans.
- Documents verifying legal status in the USA for applicant of the household.
- Copy of documentation verifying current total gross income for ALL household members.
- ID for person named on bill.

B. Credit Balances: If credit balance on client's account is more than double the monthly gas and electric charges; the client will have to re-apply when the credit balance has exhausted.

C. High Balances: HEAP or Fast Track payment must bring clients to zero balance. If the HEAP payment doesn't bring the balance to zero, the client must make a co-payment before our pledge can be made.

##### D. LIHEAP Questions to determine Eligibility:

- What City do you live in? (Contra Costa County residents only)
- What is the total of your PG&E?
- If over \$300, we will determine eligibility at their appointment and will have to make a payment depending on eligibility.
- Are there any children 5 years or younger?
  - If yes, birth certificates of children are required.
- Is there anyone in the household 60 years or older?
- If yes, verification of identification is required.
- Is there anyone in the household disabled?
- If yes, verification of disability can vary from State Disability, Social Security, workers comp., Paid Family Leave.
- Have you been helped in the past (new client)?
- If there an Active Military or Veteran in the household?
- Whose name is on the PG&E bill? Is that person over the age of 18? If so, please bring I.D. of the person.
- Current monthly whole utility bill (blue strip) and a 48hr notice or shut off (if applicable), income of all household members over the age of 18 for the past 30 days and legal status for the applicant.

Clients will have to make a payment depending on eligibility. Our payment will have to bring their account to zero or credit balance.

LIHEAP does not Guarantee Assistance.

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## Policies and Procedures

### Section 6: Low Income Home Energy Assistance Program

#### III. Weatherization Referrals

##### A. General Description

After the interview process is complete and the client is eligible for our assistance, we ask and offer weatherization for their homes. We ask if they are renting or owning their home. Weatherization will improve their home and make it more energy efficient. This could include windows, doors, caulking, weather stripping, heaters, water heaters, stoves, refrigerators and more. All home improvements are done at NO COST to landlords with eligible tenants, or eligible property owners.

##### B. Weatherization for Rental Units

If the client is renting they have to ask their landlord to fill out and sign the Energy Service Agreement for Rental Units and Post Weatherization Lead Forms. This is requesting permission to go in the home and do inspection for improvement. The Post Weatherization Lead Form is the only item not paid by the program and the cost is between \$200 and \$400. If the landlord does not wish to pay this they can select wish not to pay and sign the form.

##### C. Weatherization for Home Owners

If the client owns the home and has been determined eligible for services the client can fill out and sign the Energy Service Agreement for Owner and Post Weatherization Lead forms. This is giving the program authorization to inspect and improve their home to be more energy efficient. The Post Weatherization Lead Form is the only item not paid by the program and the cost is between \$200 and \$400. If the owner does not wish to pay this they can select wish not to pay and sign the form.

Include these forms with the LIHEAP Intake Application, Statement of Citizenship, current monthly utility bill, current monthly income, legal status, Energy Service Agreement and Post Weatherization Lead Forms.

After the forms are filled and signed include them with our LIHEAP application and fax them to the Weatherization office at (925) 335-2119. As soon as the Weatherization Program receives the fax they will contact the applicant for an appointment and start with improvements in their home.

This will ensure their home to be more energy efficient and same money on their utility bill.

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## Policies and Procedures

### Section 6: Low Income Home Energy Assistance Program

#### IV. Receiving and Processing Applications

##### A. Procedures for starting a client file:

- All documents are date stamped (date received)
- Have client fill out application (assist if needed)
- Ensure that client has brought all required documentation
- Ensure that the application is signed and dated
- Ensure that the citizenship form is filled out, signed and dated

##### B. Application and Documentation Review

##### 1. Check to see if all 5 documents are included in file folder and date stamped:

- Intake Application
- Statement of Citizenship Form
- Income for the past month
- Whole monthly utility bill (48hr notice also included if FT)
- Birth Certificate of the applicant or any children in the household under the age of 5.

##### 2. Intake Application:

- Has date stamp on entire paperwork.
- Application is signed and filled out completely.
- Social Security matches on the intake form and **update on the Serv Traq N-1 database.**

##### 3. Statement of Citizenship **Form**:

- Has name of applicant, place of birth and signature on form.

##### 4. Current Income:

- Show current monthly income for a month from the date stamped for everyone in the household.
- Total the Gross Income for the month.
- Income can include SSI, SSA, TANF (cash aid), unemployment, state disability, retirement, pension, and check stubs.

##### 5. Complete **Monthly Utility Bill**:

- Show whole current monthly utility bill from the date stamped.
- Also a 48hr notice or shut off included if Fast Track.
- The name, account number from page one and utility bill address from page 3 match the utility information on the application.

##### 6. Birth Certificate:

- Attach a certified birth certificate of applicant.
- Passport, naturalization form and green card are also acceptable.

##### 7. Complete the priority points sheet and calculate points.

##### 8. Complete Assurance 16 Activities form with appropriate action taken.

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## Policies and Procedures

### Section 6: Low Income Home Energy Assistance Program

#### **V. LIHEAP/Fast Track Complaint Procedure**

Any complaints are to be handled immediately by the intake clerk who received the complaint.

Complaints that cannot be resolved by the intake clerk in a reasonable amount of time, up to two weeks, are to be passed to the LIHEAP Assistant Manager.

Should the LIHEAP Assistant Manager be unable to resolve the complaint; it will be forwarded to the Program Manager.

Once a complaint has been resolved, a written dated account is to be made and filed in the complaint file.

#### **VI. Appeal Procedure**

##### A. General Description

Contra Costa County residents are entitled to apply for assistance from the Low Income Home Energy Assistance Program (LIHEAP) with their energy cost. The LIHEAP program is funded by the state and federal government, and is administered by the State Community Services and Development Department in Sacramento.

There are cases when a client is denied assistance. A client does, however, have the right to appeal that decision. State Regulation 22 CCR 100805 defines situations as appealable:

- If the application was not acted upon within 15 working days
- Unsatisfactory performance
- If you are denied LIHEAP services

##### B. Appeal Procedure

1. The client receives a letter denying LIHEAP services and the reason(s) why. If client disagrees with this decision the client may call the HEAP office and set up an appointment with the intake clerk for a file review to discuss the reasons for denial and to see if anything can be done to correct the information so that the application may be approved (This is not true in cases of families who are over income or who do not have a minimum of five priority points. If client makes too much money or does not have enough priority points there is nothing we can do.)

If the client is not satisfied after meeting with the Intake Clerk she/he will assist the client in completing an appeals form. If the client is not interested in filing an appeal at that time, has a total of ten working days after the date of meeting with the Intake Clerk to file a written appeal.

2. The client file and completed appeals form will then go to the Assistant Manager where he/she will review the information and either overrule the Intake Clerk's decision or agree with the current decision. Client is notified by letter within five (5) working days of the Assistant Manager's decision after the review.

3. The client file and completed appeals form will then go to the Program Manager where he/she will review the information and either overrule the Assistant Manager's decision or agree with the current

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## Policies and Procedures

### Section 6: Low Income Home Energy Assistance Program

decision. Then client is notified by letter within five (5) working days of the Program Manager's decision after his/her review.

At this point, if satisfaction is not reached, the client still has the option to appeal at the State level by contacting the Department of Community Services and Development in Sacramento, CA by writing to:

California Department of Community Services and Development  
PO Box 1947  
Sacramento, CA 95812  
(916) 576-7109  
(916) 263-1406

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# POLICIES AND PROCEDURES

## SECTION 7-WRITTEN SERVICE PLAN

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## VII. WRITTEN SERVICE PLAN

### A. 1304.20 CHILD HEALTH AND DEVELOPMENT SERVICES

Description	Perform Standards	P&P Manual	Responsibility	Outcome Measure	Date
<b>Child Health and Development Services</b>					
<b>1304.20</b>					
(a) Determining Child Health Status	1304.20(a)(1)(i) - 1304.20(a)(2)	Section 2 Pg. 5	CSAM	Child Health Status shall be determined for all children.	Within 90 days of enrollment
(b) Screening for Developmental Sensory and Behavioral Concerns	1304.20(b)(1) – 1304.20(b)(3)	Section 2 Page 13	CSAM and Teachers	All children will be screened.	Within 45 days of enrollment
(c) Extended Follow-up and Behavioral Treatment	1304.20(c)(1)&(2) – 1304.20(c)(5)	Section 2 Page 15	CSAM / MH Interns	All children benefit from extensive follow-up and treatment for all identified health needs.	Upon identification & ongoing
(d) Ongoing Care	1304.20(d)	Section 2 Page 3	CSAM	All children receive treatment at their medical home.	Ongoing
(e) Involving Parents	1304.20(e)(1) – 1304.20(e)(5)	Section 2 Pages 15-27	CSAM, Teachers and Site Supervisors	Parents are notified immediately when problems are suspected or identified and are familiarized with all services.	Ongoing
(f) Individualization of the Program	1304.20(f)(1) – 1304.20(f)(2)(iv)	Section 2 Page 56	All Staff/CS Managers	Services are individualized to meet the unique needs of each child & family.	Ongoing

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## B. 1304.21 EDUCATION AND EARLY CHILDHOOD DEVELOPMENT

Description	Perform Standards	P&P Manual	Responsibility	Outcome Measure	Date
<b>Education and Early Childhood Development</b> 1304.21					
(a) Child Development and Education Approach for All Children	1304.21(a)(1)(i) - 1304.21(a)(6)	Section 2 Page 61	CSM – Education	Approach to child development services is developmentally and linguistically appropriate and individualized to the child's unique needs and attributes.	Ongoing
(b) Child Development and Education Approaches for Infants and Toddlers	1304.21(b)(1)(i) – 1304.21(b)(3)(ii)	Section 2 Page 61	CSM – Infant/Toddler Education	The research-based Creative Curriculum for Infants, Toddlers and Twos is implemented for infants and toddlers and focuses on relationships. In addition caregiving is provided with a focus on the Program for Infant and Toddler Care policies.	Ongoing
(c) Child Development and Education for Preschoolers	1304.21(c)(1) – 1304.21(2)(2)	Section 2 Page 61	CSM – Pre-School Education	The research based Creative Curriculum for Preschool is implemented in the program. This curriculum is developmentally and linguistically appropriate.	Ongoing

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## C. 1304.22 CHILD HEALTH AND SAFETY

Description	Perform Standards	P&P Manual	Responsibility	Outcome Measure	Date
<b>Child Health and safety</b> 1304.22					
(a) Health Emergency Procedures	1304.22(a) - 1304.22(a)(5)	Section 2 Pages 92-95, 99, 104-105	Site Supervisors	Health Emergency Procedures are implemented	Daily
(b) Conditions of Short-Term Exclusion and Admittance	1304.22(b)(1) – 1304.22(b)(3)	Section 2 Pages 85-86, 90-93	Site Supervisors	Health checks and Sick Policy is implemented.	Daily

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(c) Medical Administration	1304.22(c) – 1304.22(c)(6)	Section 2 Pages 95-98	Designated Staff in the classroom	Medication is stored and administered correctly with consent.	Daily
(d) Injury Prevention	1304.22(d)(1)&(2)	Section 2 Pages 99, 101-102	All Staff/Health and Safety Officers	Health and Safety checks result in injury prevention	Daily and Monthly
(e) Hygiene	1304.22(e)(1)&(2) – 1304.22(e)(7)	Section 2 Page 87	All Staff	Staff, children and parents practice hygiene according to program standards.	Daily
(f) First Aid Kits	1304.22(f)(1) – 1304.22(f)(2)	Section 2 Page 103	Site Supervisors and CSM – Health Services	First Aid Kits are stocked at all times and readily available.	Daily

#### D. 1304.23 CHILD NUTRITION

Description	Perform Standards	P&P Manual	Responsibility	Outcome Measure	Date
<b>Child Health and safety</b> 1304.22					
(a) Identification of Nutritional Needs	1304.23(a) - 1304.23(a)(4)	Section 2 Page 78	CSAMs	Children with nutritional risk are identified.	Upon enrollment and within 45 days.
(b) Nutritional Services	1304.23(b)(1) – 1304.23(b)(4)	Section 2 Page 112	Registered Dietitian	Staff, families and children benefit from nutritional services.	Ongoing
(c) Meal Services	1304.23(c) – 1304.23(c)(7)	Section 2 Pages 66, 108-112	Food Services Manager	Children receive nutritious meals.	Daily
(d) Family Assistance With Nutrition	1304.23(d)	Section 2 Pages 79-82	CSAMs	Families receive nutrition education resources, and referrals to meet their needs.	Ongoing
(e) Food Safety and Sanitation	1304.23(e)(1) – 1304.23(e)(2)	Section 2 Page 108	Food Services Manager	All food is served in as safe and sanitary.	Daily

#### E. 1304.24 CHILD MENTAL HEALTH

Description	Perform Standards	P&P Manual	Responsibility	Outcome Measure	Date
<b>Child Mental Health</b> 1304.24					
(a) Mental Health Services	1304.24(a)(1)(i) -	Section 2	Mental Health	Quality Mental Health Services are	Daily

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	1304.24(a)(3)(iv)	Pages 24-25, section 3 Page 9	Manager/Interns	provided as appropriate	
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## F. 1304.40 FAMILY PARTNERSHIPS

Description	Perform Standards	P&P Manual	Responsibility	Outcome Measure	Date
<b>Family Partnerships</b>					
<b>1304.40</b>					
(a) Family Goal Setting	1304.40(a)(1) - 1304.40(a)(4)&(5)	Section 3 Page 4	CSAMs	Families are engaged in meaningful goal setting.	Ongoing
(b) Accessing Community Services and Resources	1304.40(b)(1) – 1304.40(b)(2)	Section 3 Page 8	CSAMs/Home Educators	Parents receive community services and resources appropriate to their needs and desires.	Ongoing
(c) Services to Pregnant Women Who Are Enrolled in Programs Serving Pregnant Women, Infants and Toddlers	1304.40(c)(1)(i),(ii)&(iii) – 1304.40(c)(3)	Section 3 Page 10	CSM – Infant/Toddler Programs	Pregnant women receive comprehensive services	Ongoing
(d) Parent Involvement – General	1304.40(d)(1) – 1304.40(d)(3)	Section 3 Page 11	CSM – <del>Parent</del> , Family and Community Engagement	Parents are engaged in all aspects of the program.	Ongoing
(e) Parent Involvement in Child Development and Education	1304.40(e)(1) – 1304.40(e)(5)	Section 2 Pages 70-71 Section 3 Pages 11, 16	Teachers/Home Educators	Parents are recognized as their child's primary educator and involved in all aspects of education services.	Ongoing
(f) Parent Involvement in Health, Nutrition, and Mental Health Education	1304.40(f)(1) – 1304.40(f)(4)(i),(ii)&(iii)	Section 3 Page 17	CSAMs/Home Educators	Parents are engaged in health, nutrition, and Mental Health Education.	Ongoing
(g) Parent Involvement Community Advocacy	1304.40(g)(1)&(2)	Section 3 Page 18	CSM – <del>Parent</del> , Family & Community Engagement	Parents are involved in advocacy efforts in their community.	Ongoing
(h) Parent Involvement in Transition Activities	1304.40(h)(1)-(4)	Section 2 Pages 58-60 Section 3 Page 18	Teachers/Home Educators	Parents are engaged in transition activities.	Ongoing
(i) Parent Involvement in Home Visits	1304.40(i)(1)-(3) – 1304.40(i)(4)&(5)	Section 2 Page 69-71 Section 3 Page 19	CSM – Home Based Services	Parents are involved in all home visits and socializations.	Ongoing

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## G. COMMUNITY PARTNERSHIPS

Description	Perform Standards	P&P Manual	Responsibility	Outcome Measure	Date
<b>Community Partnerships</b>					
(a) Partnerships	1304.41(a)(1) - 1304.41(a)(4)	Section 3 Page 20	ASA III CSM – Parent, Family and Community Engagement	CSB engages in multiple formal and informal community partnerships that enhance services to children and families.	Ongoing
(b) Advisory Committees	1304.41(b)	Section 3 Page 21	CSM – Health and Registered Dietitian	Health Services Advisory Committee and Nutrition Advisory Committee are active.	Twice Annually
(c) Transition Services	1304.41(c)(1) – 1304.41(c)(3)	Section 3 Page 18	CSM – Education and Disabilities	Transitions into and out of EHS and HS are seamless and coordinated.	Ongoing

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## H. 1304.50 PROGRAM DESIGN AND MANAGEMENT

Description	Perform Standards	P&P Manual	Responsibility	Outcome Measure	Date
<b>Program Design and Management</b>					
<b>1304.50</b>					
(a) Policy Council, Policy Committee, and Parent Committee Structure	1304.50(a)(1) - 1304.50(a)(5)	Section 1 Pages 4-6	CSM – Policy Council	A formal structure of program governance provides parents and other community representatives with the authority and opportunity to participate in shared decision-making concerning program design and implementation.	Ongoing
(b) Policy Council Composition and Formation	1304.50(b)(1) – (b)(7)	Section 1 Pages 4-5	CSM – Policy Council	Policy groups are formed based on approved bylaws.	Ongoing
(c) Policy Council Responsibilities-General	1304.50(c)&(d)	Section 1 Pages 6-12	Head Start Director	Policy Groups are charge with the responsibilities as noted in Appendix A.	Ongoing
(d) The Policy Council or Policy Committee	1304.50(c)(d) – 1304.50(d)(2)(v)	Section 1 Pages 6-11	Head Start Director and Delegate Agency Director	Policy Council and the Local Policy Committee are engaged in policy decisions regarding the nature and operation of the program.	Ongoing
(e) Parent Committee	1304.50(e)(1),(2) &(3)	Section 1 Pages 5-6	Site Supervisor	Parent Committees are appropriately engaged and carry out their designated responsibilities.	Ongoing
(f) Policy Council, Policy Committee, and Parent Committee Reimbursement	1304.50(f)	Section 1 Pages 73-74	CSM – Policy Council	Reimbursements to parents are reasonable and provided timely for any travel, lodging, childcare and per diem expenses.	As requested
(g) Governing Body Responsibilities	1304.50(g)(1)&(2)	Section 1 Pages 4, 6-12	Head Start Director	Governing body is engaged in decision making as required.	Ongoing
(h) Internal Dispute Resolutions	1340.50(h)	Section 1 Pages 12-13	Head Start Director	Internal disputes are resolved in accordance with policy.	As needed

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## I. 1304.51 MANAGEMENT SYSTEMS AND PROCEDURES

Description	Perform Standards	P&P Manual	Responsibility	Outcome Measure	Date
<b>Management System and Procedures 1304.51</b>					
(a) Program Planning	1304.51(a)(1)(i)-(iii) - 1304.51(a)(2)	Section 1 Pages 15-17	Directors & Assistant Directors	The program has an established, dynamic, and cohesive management system that support continuous improvement and foster commitment to providing the highest level of services to children and families.	Ongoing
(b) Communication – General	1304.51(b)	Section 1 Pages 17-25	Division Managers	Systems are in place to ensure a smooth flow of two-way communication with staff, parents, governing bodies, and delegate agency.	Ongoing
(c) Communication with Families	1304.51(c)(1)&(2)	Section 1 Pages 18-19	Site Supervisors	Communication with families is clear, concise, respectful, confidential and timely.	Ongoing
(d) Communications with Governing Bodies and Policy Groups	1304.51(d)	Section 1 Pages 19-20	Head Start Director	Communications with Governing Bodies and Policy Groups is of high quality, informational, educational and responsive.	Ongoing
(e) Communication Among Staff	1304.51(e)	Section 1 Page 18	Assistant Directors/ <b>Senior Managers</b>	Quality outcomes for children and families are facilitated by various mechanisms for regular communication.	Daily
(f) Communication with Delegate Agencies	1304.51(f)	Section 1 Pages 19-20, 25	Analyst for Partners	Communication with the delegate is effective and timely.	Ongoing
(g) Record keeping Systems	1304.51(g)	Section 1 Pages 26-30	<b>Business Systems Manager</b>	Multiple record keeping systems are in place which provides accurate and timely information.	Ongoing
(h) Reporting System	1304.51(h)(1) – 1304.51(h)(2)	Section 1 Pages 18-26	Division Managers	Efficient and effective reporting systems are in place.	Ongoing
(i) Program Self-Assessment Monitoring	1304.51(i)(1) – 1304.51(i)(3)	Section 1 Pages 39-40	Analyst	Self-Assessment is conducted to determine the program's effectiveness.	Annually

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## J. 1304.52 HUMAN RESOURCES MANAGEMENT

Description	Perform Standards	P&P Manual	Responsibility	Outcome Measure	Date
<b>Human Resources Management 1304.52</b>					
(a) Organizational Structure	1304.52(a)(1) - 1304.52(a)(2)(i)&(iii)	Section 1 Page 41	Personnel Administrator	The organizational structure outlines how staff & functions are set up to meet the program's mission & goals. The structure also describes how Head Start fits into a larger agency.	Ongoing
(b) Staff Qualifications-General	1304.52(b)(1)&(2) – 1304.52(b)(4)	Section 1 Pages 51-52	Personnel Administrator	Staff and consultants have the knowledge, skills, and experience to perform.	When hired
(c) Early Head Start or Head Start Director Qualifications	1304.52(c)	Section 4 Page 44	Personnel Administrator	The Head Start Director has meets and exceeds the required qualifications.	When hired
(d) Qualifications of Content Area Experts	1304.52(d) – 1304.52(d)(8)	Section 4 page 45	Personnel Administrator	Content Area staff is qualified to fulfill their job responsibilities, including comprehensive services manager with disabilities expertise.	When hired
(e) Home Visitor Qualifications	1304.52(e)	Section 1 Page 51-52	Personnel Administrator	Home Visitors meet qualifications	When hired
(f) Infant and Toddler Staff Qualifications	1304.52(f)	Section 1 Pages 51-52	Personnel Administrator	Infant and Toddler Staff meet qualifications.	When hired
(g) Classroom Staffing and Home Visits	1304.52(g)(1) – 1304.52(g)(5)	Section 1 Page 52	Personnel Administrator	Staffing ratios and class sizes are maintained and home visits and home educator caseloads meet regulations.	Daily
(h) Standards of Conduct	1304.52(h)(1) – 1304.52(h)(2)&(3)	Section 1 Page 54	Personnel Administrator	All staff signs the Standards of Conduct Policy and adhere to standards.	Upon hire and annually thereafter
(i) Staff Performance Appraisals	1340.52(i)	Section 1 Pages 60-62	Supervisors	All staff receives their performance evaluation in a timely fashion.	Annually, or more often as needed
(j) Staff and Volunteer Health	1304.52(j)(1) –	Section 1	Personnel Analyst	Staff and volunteers are in good	Established within

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	1304.52(j)(3)	Pages 62-63	and Site Supervisors	health.	7 days of hire or when volunteering regularly
(k) Training and Development	1304.52(k)(1)-(3) – 1304.52(k)(4)	Section 1 Pages 65-70	Personnel Analyst	Training programs are required, & it is mandatory staff attend. Attendance is tracked.	Ongoing per training calendar

## K. 1304.53 FACILITIES, MATERIALS AND EQUIPMENT

Description	Perform Standards	P&P Manual	Responsibility	Outcome Measure	Date
<b>Facilities, Materials, and Equipment 1304.53</b>					
(a) Head Start Physical Environment and Facilities	1304.53(a)(1) - 1304.53(a)(10)(xvii)	Section 4 Pages 46-49	Facilities Manager	Facilities meet state and local licensing requirements, are hazard free and safe.	Daily
(b) Head Start Equipment, Toys, Materials, and Furniture	1304.53(b)(1) – 1304.53(b)(3)	Section 4 Pages 53-55	Site Supervisor	Equipment, toys, materials and furniture are age and developmentally appropriate, in good repair, and hazard free.	Daily

## L. 1305 ELIGIBILITY, RECRUITMENT, SELECTION, ENROLLMENT, AND ATTENDANCE IN HEAD START

Description	Perform Standards	P&P Manual	Responsibility	Outcome Measure	Date
Determining Community Strengths and Needs	1305.3	Section 1 Pages 15-17	Analyst – Grants	A community assessment is conducted to determine strengths and needs.	Every three years and updated annually
Age of Children and Family Income Eligibility	1305.4	Section 4 Page 9	CSAMs	Enrolled children meet age and income requirements.	Ongoing
Recruitment of Children	1305.5	Section 4 Pages 9-10	Analyst – ERSEA	Recruitment Plan is fully implemented.	Ongoing
Selection Process	1305.6	Section 4 Pages 9-10	CSAM	Children are selection according to approved selection criteria.	Ongoing
Enrollment and Re-enrollment	1305.7	Section 4	Site Supervisor	Children are enrolled when	Ongoing

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		Pages 12-13		vacancies occur and re-enrolled in accordance with policy.	
Attendance	1305.8	Section4 Pages 36-38	Site Supervisor	Attendance is tracked, analyzed and corrective action plans are in place for centers below 85%.	Daily tracking monthly reporting
Policy on fees	1305.9	Section4 Pages 5, 39	Site Supervisor	No fees are charged for Head Start and Early Head Start Services.	Ongoing
Compliance	1305.10	Section 1 31 Section4 Page 9	Analyst – ERSEA	Agency is compliant with CFR 1305.	Ongoing

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## M. 1306 HEAD START STAFFING REQUIREMENTS AND PROGRAM OPTIONS

Description	Perform Standards	P&P Manual	Responsibility	Outcome Measure	Date
<b>Head Start Staffing Requirements and Program Options</b> <b>1306</b>					
<b>Subpart B – Head Start Program Staffing Requirements</b> <b>1306.20-1306.23</b>					
Program Staffing Patterns	1306.20	Section 1 Pages 51-53 Section 4 Pages 44-45	Personnel Administrator	Program staffing patterns meet/exceed standards.	Daily
Staff Qualification Requirements	1306.21	Section 4 Pages 44-45	Personnel Administrator	Staff meets HS Act Requirements.	Daily
Volunteers	1306.22	Section 1 Pages 53, 62	CSM-Family & Community Partnership	Parents are active volunteers in the program	Daily
Training	1306.23	Section 1 Pages 63-67	Personnel Analyst	Staff is well trained.	Ongoing per T/TA plan
<b>Subpart C – Head Start Program Options</b> <b>1306.30-1306.36</b>					
Provisions of Comprehensive Child Development Services	1306.30	Section 2 Pages 61-76	Head Start Director	All services meet local, State, and Federal regulations, involve parents, and involve community partners.	Daily
Choosing a Head Start Program Option	1306.31	Section 1 Page 15	Head Start Director	Head Start options are chosen to meeting the needs of the community, family, and child.	Ongoing
Center-based Program Option	1306.32	Section 2 Page 61	Assistant Directors	The center-based program is operated in accordance with the regulations.	Daily
Home-based Program Option	1306.33	Section 2 Pages 61, 70-71	Assistant Directors	The home-based program is operated in accordance with the regulations.	Daily
Combination Program Option	1306.34	N/A	N/A	N/A	N/A
Additional Head Start Program Option Variations	1306.35	Section 1 Page 15	Head Start Director	24-Waiver classrooms are operation with ACF/OHS approval.	Daily
Compliance Waiver	1306.36	N/A	N/A	N/A	N/A

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## N. 1308 DISABILITIES SERVICES

Description	Perform Standards	P&P Manual	Responsibility	Outcome Measure	Date
A. Subpart A General					
Purpose	1308.1 1308.2	Section 2 Pages 37-38	All Comprehensive Services Team	HS grantees and Delegates ensure that children with Disabilities enrolled in HS/EHS receive all the services to which they are entitled.	Ongoing
Definitions	1308.3	Section 2 Pages 38-39	All Comprehensive Services Team	Understanding Definitions related to Disabilities service area.	Ongoing
B. Subpart B Disabilities Service Plan					
Purpose and Scope	130.4	Section 2 Pages 37-42	Disabilities CSM	Development of Disabilities Service Plan to meet the special needs of children with disabilities and their parents.	Annually (July)
C. Subpart C Social Services					
Recruitment and Enrollment	1308.5 (a)(b)(c)(d)(e)(f)	Section 4 Page 10	All CSB Staff	The grantee and delegate has implemented plans to locate and recruit children with disabilities. Meet 10% enrollment of children with disabilities.	Ongoing
D. Subpart D Health Services					
Assessment of children	1308.6 (a)(b)(c)(d)(e)	Section 2 Pages 43, 52-54	All CS Team / Education Team	All children benefit from screenings and assessments. Children identified as needing further assessments are referred for further evaluations to LEA or RCEB.	Within 45 days of enrollment
Eligibility Criteria:					
Health Impairment	1308.7	Section 2 Page 50	All CS Team / Home Educator / Teachers	Disability CSM coordinates with Health, Mental Health, Nutrition, Family Services and Education Manager to ensure the needs of the children with disabilities are met.	Ongoing
Emotional/behavioral disorders	1308.8	Section 2 Page 50			
Speech and language	1308.9	Section 2 Page 50			

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Description	Perform Standards	P&P Manual	Responsibility	Outcome Measure	Date
Intellectual Disability	1308.10	Section 2 Page 50			
Hearing impairment including deafness	1308.11	Section 2 Page 50			
Orthopedic impairment	1308.12	Section 2 Page 50			
Visual impairment	1308.13	Section 2 Page 50-51			
Learning disabilities	1308.14	Section 2 Page 51			
Autism	1308.15	Section 2 Page 51			
Traumatic brain injury	1308.16	Section 2 Page 51			
Other impairments	1308.17	Section 2 Page 51			
Disabilities/health services coordination	1308.18	Section 2 Page 51	Disabilities CSM, Nutrition CSM and Health CSM	Disability CSM assures that the special needs of each child with disabilities are met.	Ongoing
E. Subpart E Education Services Performance Standards					
Developing individualized education program (IEP)	1308.19	Section 2 Pages 43-46	Disability CSM/ Family Services CSM / LEA / Education Team/ CS Team	Individualized services are provided to meet the unique needs of each child with disabilities and their families are met.	Ongoing
F. Subpart F Nutrition					
Nutrition Services	1308.20	Section 2 Page 54	Nutrition CSM/ Health CSM/ CS Team	Nutrition program provides identification, education, resources and referrals to serve children with disabilities.	Ongoing
G. Subpart G <del>Parent involvement</del>					
Parent participation and transition of children into Head Start and from Head Start to public school.	1308.21	Section 2 Page 58	<del>Disability</del> CSM/CSAM / Home Educator / <del>Education Team</del>	Transitions are provided for children transferring from: -EHS to HS -HS to kinder -Or to other related agencies	Ongoing

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## O. 1310 HEAD START TRANSPORTATION

Description	Perform Standards	P&P Manual	Responsibility	Outcome Measure	Date
<b>Subpart B – Transportation Requirements 1310.10 – 1310.17</b>					
General	1310.10	Section 4 Page 59	CSAM	Agency does not provide transportation; families are connected with transportation resources as needed.	Ongoing
Child Restraint System	1310.11	Section 4 Page 57-59	CSM – Health Services	All children are secured in appropriate child restraint systems.	Any time a child is transported in a car or van.
Required use of School Buses or Allowable Alternate Vehicle	1310.12	N/A	N/A	N/A	N/A
Maintenance of Vehicles	1310.13	Section 4 Page 56-57	Facilities Manager	All vehicles are maintained in safe operating condition.	Daily
Inspection of New Vehicles at the Time of Delivery	1310.14	Section 4 Page 56-57	Facilities Manager	All new vehicles are inspected	Upon delivery
Operation of Vehicles	1310.15	Section 4 Page 56-57	N/A	N/A	N/A
Driver Qualifications	1310.16	Section 4 Page 56-57	Personnel Administrator	All staff driving county vehicles has a valid CDL.	Daily
Driver and Bus Monitor Training	1310.17	N/A	N/A	N/A	N/A
<b>Subpart C – Special Requirements 1310.20 – 1310.23</b>					
Trip Routing	1310.20	N/A	N/A	N/A	N/A
Safety Education	1310.21	Section 2 Page 65	CSM – Family and Community Partnerships	All children and parents are provided with Pedestrian Safety Education.	Annually in Sept. and Ongoing for children
Children with Disabilities	1310.22	N/A	N/A	N/A	N/A
Coordinated Transportation	1310.23	N/A	N/A	N/A	N/A

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CONTRA COSTA COUNTY EMPLOYMENT & HUMAN SERVICES DEPARTMENT  
COMMUNITY SERVICES BUREAU

# POLICIES AND PROCEDURES

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CONTRA COSTA COUNTY EMPLOYMENT & HUMAN SERVICES DEPARTMENT  
COMMUNITY SERVICES BUREAU

# POLICIES AND PROCEDURES

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## SECTION 1-ADMINISTRATION

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Policy Council Approved:  
Board of Supervisors Approved:

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#### I. Program Governance

##### A. Service Area

Contra Costa County Employment and Human Services Department, Community Services Bureau (CSB) is the designated Community Action Agency for Contra Costa County. CSB is the Head Start and Early Head Start Grantee for Contra Costa and also administers the California Department of Education Child Development Programs, Community Services Block Grant, Stage 2/Alternative Payment Programs, Low-Income Home Energy Assistance and Weatherization Programs.

##### B. Service Recipients

The Bureau's services are directed toward building self-sufficiency among the county's low-income residents and vulnerable populations. CSB serves pregnant women and children ranging in age from birth through kindergarten, individuals and families. All service recipients served under the various CSB funding streams must meet the eligibility requirements of the funding source.

##### C. Program Governance

###### 1. The Board of Supervisors

The Board of Supervisors is a body of publically elected officials whose role is to oversee the operations of county departments and to exercise executive and administrative authority through the county government and county administration. The BOS also is charged with responsibility and oversight to the Head Start and Early Head Start grants as outlined in Appendix A in this section.

###### 2. Policy Council Composition and Formation

The County Board of Supervisors and the Policy Council determine the total size of the Policy Council, procedures for electing parent members, and selection of community representatives.

Policy Council composition is reviewed annually to ensure that it meets the General Membership guidelines of HSPS 1304.50(b)(2). Consideration is given to the number of Head Start and Early Head Start currently enrolled children along with program options (Full Day, Part Day, and Home Base). The following steps explain how to determine Policy Council composition:

- Determine the total number of Head Start and Early Head Start slots
- Determine the total HS/EHS slots for each site by program option based on the current CSB slot map (HS/Full Day, HS/Part Day, EHS/FD, and Home Base (EHS/HS collectively). Calculate the percentage of each program option (multiply the number of program option slots for each site by the total number of slots). This will give you the percentage of membership that each option should represent.
- The number of currently enrolled representatives is set at 39. This is determined using the formula  $1/60$  (1 representative per site for every 60 HS or EHS slots).

Head Start Part Day 29%	9 Representatives
Head Start Full Day 50%	13 Representatives
Early Head Start 17 %	5 Representatives
Home Based Option 4%	1 Representative

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This information will be included in the Policy Council Bylaws approved annually by the Board of Supervisors and the Policy Council. The term for members is one year, October to September. Parent representatives will be (re)elected annually by each center's parent committee. Community representatives will be selected annually. The maximum number of one-year terms an individual can serve is three. No grantee or delegate agency staff (or members of their immediate family) may serve on the Policy Council or on the Delegate Agency's Policy Committee, except parents who occasionally (no more than 10 hours/month) substitute for regular Early Head Start or Head Start staff.

Immediate family is defined as any parent, child, sibling, grandparent, significant other, co-parent or spouse of Community Services Bureau staff. At least 51% of the Policy Council members must be parents of currently enrolled children.

#### 3. Procedures for Electing Parent Representatives to the Policy Council

The parent committees at each site will elect parent representatives as early as possible in the program year. This is done by voting at the parent meeting. Parent representatives must be parents of currently enrolled children in the program.

#### 4. Procedures for Electing Community Representatives to the Policy Council

Community representatives are drawn from the local community. They represent past parents and local community agencies. All Community Representatives must be elected by the Policy Council. Membership for Individual Community Representatives is also limited to 3 one-year terms (1304.50(b)(5)).

- Past Parent Community Representatives

The past parent representatives must submit a letter to the Policy Council requesting consideration to be a community representative. Letters are read during a business meeting, and the Policy Council must vote to approve the parent's request. If the Policy Council receives more requests than vacancies, all letters are read for consideration, and the Policy Council votes, and the majority decision rules.

- Community Agency Representatives

The Policy Council determines which community agencies they would like to invite to participate on the Council. Agencies are drawn from the local community and are familiar with resources and services for low-income children and families. CSB staff to Policy Council assists by contacting agencies to seek interest in joining and requesting the name of an agency representative to be elected onto the Policy Council as early in the program year as possible. Agency representatives are presented and considered for approval by the Policy Council.

#### 5. Parent Committee

The Parent Committee must carry out at least the following minimum responsibilities:

Advise center staff in developing and implementing local program policies, activities, and services.

Plan, conduct, and participate in informal, as well as formal, programs and activities for children, parents and staff.

#### 6. Policy Council Responsibilities

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The Policy Council has policy-making authority and is governed by its By-Laws. Each year, through ongoing trainings, the Policy Council and Board of Supervisors are trained on Governance and Head Start Performance Standards, and oriented to CSB program services. CSB staff provides a comprehensive orientation to CSB and Policy Council roles and responsibilities each year. A make-up orientation is also provided for members joining later in the program year. A joint training with the Board of Supervisors is also scheduled annually.

#### 7. Appendix A: Governance and Management Responsibilities

The following chart outlines the shared responsibilities between the Board of Supervisors, Policy Council, Head Start Director and EHSD Director.

FUNCTION	BOARD OF SUPERVISORS	POLICY COUNCIL	HS* PROGRAM DIRECTOR	AGENCY DIRECTOR
I PLANNING 1304.50(d)(1)(iii)				
(a) 1304.50(d)(1)(iii)	A & C	C	B	C
Procedures for program planning in accordance with this Part and the requirements of 45 CFR 1305.3 (this regulation is binding on Policy Councils exclusively).				
(b) 1304.50(d)(1)(iv)	A & C	C	B	C
The program's philosophy and long - and short - range program goals and objectives (see 45 CFR 1304.51(a) and 45 CFR 1305.3 for additional requirements regarding program planning).				
(c) 1304.50(d)(1)(v)	A & C	C	B	C
The selection of delegate agencies and their service areas (this regulation is binding on Policy Councils exclusively) (see 45 CFR 1301.33 and 45 CFR 1305.3(a) for additional requirements about delegate agency and service area selection, respectively).				
(d) 1304.50(d)(1)(vii)	A	C	B	(Review Only)
Criteria for defining recruitment, selection, and enrollment priorities in accordance with the requirements of 45 CFR Part 1305.				

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(e) 1304.50(d)(1)(i)	A & C	C	B	C
All funding applications and amendments to funding applications for Early Head Start and Head Start, including administrative services, prior to the submission of such applications to the grantee (in the case of Policy Councils).				
(f) 1304.50(f)	A	C	B	(Review Only)
Policy Council, Policy Committee, and Parent Committee reimbursement. Grantee and delegate agencies must enable low income members to participate fully in their group responsibilities by providing, if necessary, reimbursements for reasonable expenses incurred by the members.				
(g) 1304.50(d)(1)(viii)	A	C	B	C
The annual self-assessment of the grantee or delegate agency's progress in carrying out the programmatic and fiscal intent of its grant application, including planning or other actions that may result from the review of the annual audit and findings from the federal monitoring review (see 45 CFR 1304.51(i)(1) for additional requirements about the annual self-assessment).				

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FUNCTION	BOARD OF SUPER- VISORS	POLICY COUNCIL	HS* PROGRAM DIRECTOR	AGENCY DIRECTOR
<b>II GENERAL PROCEDURES 1304.50 (d)(1)(vi)</b>				
(a) 1304.50(d)(1)(vi) The composition of the Policy Council or the Policy Committee and the procedures by which policy group members are chosen.	A & C	C	B	C
(b) 1304.50(g)(1) Grantee and delegate agencies must have written policies that define roles and responsibilities of the governing body members and that inform them of the management procedures and functions necessary to implement a high quality program.	A & C	C	N/A	C
(c) 1304.50(d)(1)(ii) Procedures describing how the governing body and the appropriate policy group will implement shared decision-making.	A & C	C	B	C
(d) 1304.50(h) Internal dispute resolution. Each grantee and delegate agency and Policy Council or Policy Committee jointly must establish written procedures for resolving internal disputes, including impasse procedures, between the governing body and policy group.	A & C	C	B	C
(e) 1304.50(d)(2)(v) Establish and maintain procedures for hearing and working with the grantee or delegate agency to resolve community complaints about the program.	B	B	B	B
(f) 1304.50(g)(2) Grantee and delegate agencies must ensure that appropriate internal controls are established and implemented to safeguard federal funds in accordance with 45 CFR 1301.13.	A	N/A	B	B
(g) 1304.50(d)(1)(ix) The annual independent audit that must be conducted in accordance with 45 CFR 1301.12.	A & C	N/A	B	B

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<b>III HUMAN RESOURCES MANAGEMENT 1304.50(d)(1)(x)</b>				
(a) 1304.50(d)(1)(x) Program personnel policies and subsequent changes to those policies, in accordance with 45 CFR 1301.31, including standards of conduct for program staff, consultants, and volunteers.	A & C	C	B	B
(b) 1304.50(d)(1)(xi) Decisions to hire or terminate the Early Head Start or Head Start Director of the grantee agency.	A & C	C	N/A	B
(c) 1304.50(d)(1)(xii) Decisions to hire or terminate any person who works primarily for the Early Head Start or Head Start program of the grantee agency.	C	C	B (Grantee Only)	C
(d) 1304.50(d)(1)(xi) Decisions to hire or terminate the Early Head Start or Head Start Director of the delegate agency.	N/A	N/A	N/A	B
(e) 1304.50(d)(1)(xii) Decisions to hire or terminate any person who works primarily for the Early Head Start or Head Start program of the delegate agency.	N/A	N/A	B (Delegate Only)	C

#### KEY AND DEFINITIONS AS USED IN CHART

\* When a grantee or delegate agency operates an Early Head Start program only and not an Early Head Start and a Head Start program, these responsibilities apply to the Early Head Start Director.

A. General Responsibility. The group with legal and fiscal responsibility that guides and oversees the carrying out of the functions described through the individual or group given operating responsibility.

B. Operating responsibility. The individual or group that is directly responsible for carrying out or performing the functions consistent with the general guidance and oversight from the group holding general responsibility.

C. Must Approve or Disapprove. The group must be involved in the decision-making process prior to the point of seeking approval. If it does not approve, a proposal cannot be adopted, or the proposed action taken, until agreement is reached between the disagreeing groups.

D. Determined locally. Management staff functions as determined by the local governing body and in accordance with all Head Start regulations.

#### Procedures, Plans, & Applications

Requiring Board & Policy Council Approvals (rev. 5/19/09)

(Existing Appendix A requirements PLUS the added ones from the 2007 HS legislation)\*\*

Procedure/Plan/Application	Approval Required		Frequency of Approval
	Board of Directors	Policy Council	
Planning Procedure (Road Map)	X	X	Annually

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Goals and Objectives	X	X	Annually
Child Recruitment/Selection Procedures	X (added)	X	Annually
Budget and Grant Application	X	X	Annually - and as needed for supplements
Self Assessment and Plan for Corrections	X (added)	X	Annually
Board Composition Requirements for non-governmental agencies	X (added)	—	One-time (until changed)
Board and PC Conflict of Interest requirements	X (added)	X (added)	One-time (until changed)
Board approval of PC Composition Procedure for how PC members are selected	X X (added)	— X (added)	One-Time (until changed)
Policy defining roles/ responsibilities of governing board members for implementing a high quality program	X	—	One-Time (until changed)
Procedures describing how shared governance is implemented	X	X	One-Time (until changed)
Dispute Resolution & Impasse Procedure (OHS will issue procedure)	X	X	One-Time (until changed)
Procedures to resolve community complaints, conduct investigations.	X Previously "operating" role	Previously "operating" role	One-Time (until changed)
Personnel Policies & Procedures (Revisions to originally approved)	X	X	As Needed
Service Area Plans	—	X	Annually
Financial Management Accounting & Reporting Policies including audit	X (added)	—	One-Time (until changed)
Board: Hiring/Termination procedures for Executive, Head Start, Fiscal, and HR Directors	X (added)	—	One-Time (until changed)
Policy Council: Hiring and firing criteria for program staff.		X (added)	

Required Reports	To Board	To PC	Frequency
Budget and Program Reports	X	X	Periodic
Budget Reports	X	X	Monthly
Credit Card Expense Reports	X	X	Monthly



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USDA Meals/Snacks	X	X	Monthly
Program Information Summaries	X	X	Monthly
Enrollment Reports	X	X	Monthly

\*\* Additional clarifications and revised regulations will be forthcoming from OHS.

#### 8. Responsibilities of Board of Supervisors, Policy Council, Employment and Human Services Executive Director and Community Services Bureau Director

##### i. Background

- The responsibilities of the Board of Supervisors, Policy Council, and Director of Program Services are described in the Head Start Performance Standards. The Performance Standards describe certain responsibilities for the Director of the Head Start program, leaving decisions regarding other responsibilities to Executive Directors of the local Head Start Grantee.

##### ii. Reference

- Head Start Performance Standards, 45 CFR 1304.50(g)(i)
- Policy

The Employment and Human Services (EHSD) Director and the Community Services Bureau Director shall ensure that the Policy Council and the Board of Supervisors are routinely and frequently informed of, and trained on, management procedures and functions, as well as the Federal laws and regulatory compliance issues required to ensure a quality program. Mutual communication and understanding between the governing board, the policy council and program management are fundamental prerequisites for a healthy Head Start Program. The EHSD Director and the Community Services Bureau Director will also ensure that the Board of Supervisors has an understanding and appreciation of the Head Start Philosophy and the role of parents and Policy Council in shared governance. Careful and complete communication and planning will ensure effective oversight and appropriate actions and interventions that will foster the mutual understanding and actions of all entities responsible to maintain a quality Head Start Program.

##### iii. Procedures

- The Employment and Human Services Department (EHSD) Director will meet monthly with the County Administrator's Office.
- Topics for the monthly meetings will include, but not be confined to:
  - Fiscal/budget issues
  - Personnel matters
  - Facility issues
  - Policies and Procedures
  - Program planning
  - Annual Self Assessment
  - Annual independent audit
  - Grant development and submission
  - Correspondence with ACF
  - Program issues
  - Enrollment and Average Daily Attendance
  - Regulatory changes
  - Parent Involvement
  - Planning for joint Board of Supervisors/ Policy Council training activities

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- A meeting report will be generated by the Employment and Human Services Director and the Community Services Bureau Director.
- The report of the meeting will be sent monthly to the Health and Human Services Committee of the Board of Supervisors, agendaized by the Board of Supervisors and the Policy Council.
- The Employment and Human Services Director and Community Services Bureau Director will jointly meet throughout the program year, individually, with each member of the BOS to review reports, give updates and advice, and train on new regulations and initiatives.

#### 9. Role of Policy Council in the Annual Grant Development Process

Throughout the year, the Policy Council is involved in the grant process through a variety of ways:

- The Program Services/Ongoing Monitoring subcommittee meets throughout the year to review and update the annual program goals and objectives and the annual parent services budget and activities.
- The Fiscal subcommittee meets monthly to develop, adjust and approve the program budget for the coming year's grant and tracks it throughout the year.
- The Policy Council approves the annual program goals and objectives.
- The Policy Council reviews and approves the Community Assessment annual updates and the full assessment every three years.
- The Policy Council also reviews and approves the Annual Planning Calendar, Child Recruitment and Selection Criteria, the Self Assessment and Plan for Corrective Actions, all of which are included in the submission of the Annual Grant Application.

Once these components of the grant are reviewed and approved, the Policy Council approves the full grant in the fall before submission to ACF.

#### 10. Resolution of Disputes between the Board of Supervisors and the Policy Council (Impasse Policy)

##### i. Background

- The Performance Standards require that Head Start grantees establish a policy and necessary implementation procedures for the resolution of internal disputes between the Board of Supervisors and the Policy Council.

##### ii. Reference

- Head Start Performance Standards, 45 CFR 1304.50(h)

##### iii. Policy

- It is the policy of Contra Costa County to resolve any disagreements between the Board of Supervisors and the Head Start Policy Council fairly and expeditiously. Whenever possible, disagreements will be resolved through processes of mediation and conciliation, including discussion, compromise, and consensus-seeking between parties, and, if necessary, professional mediation.

##### iv. Administrative Procedure

- Informal Resolution

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The Chairpersons of the Board of Supervisors and the Policy Council will monitor actions and decisions of each body as they relate to their respective responsibilities. In the event that a conflict exists, they will initiate informal discussions between representatives of the two bodies and seek a mutually acceptable resolution.

- Mediation

If informal resolution is not effective, the Chairpersons of the Board of Supervisors and the Policy Council shall request that the Community Services Bureau Director identify qualified individuals who provide professional mediation services. The Chairpersons will confer and mutually designate a professional mediator who will be retained to mediate the disagreement. The mediator will use conciliation, compromise and consensus-seeking between the two bodies. The mediation process shall be non-binding.

#### 11. Resolution of Community Complaints

i. "Community complaint" is defined as any complaint from anyone other than staff.

ii. The Policy Council is generally responsible for (and has the legal and fiscal responsibility for guiding/directing/carrying-out the establishment of) a method of hearing and resolving community complaints about the Contra Costa County Community Services Bureau.

#### iii. Process for Solving Disputes/Complaints

- Any parent (enrolled or applying for services) or community member may report a complaint to a program staff member of any of our program/sites, i.e. Site Supervisor, Teacher, Associate Teacher, or Comprehensive Services, Analyst, or clerical staff. If the complaint comes in by phone, the staff member documents that complaint. Complaints may come from sources other than the site, i.e. Board of Supervisors. Anyone receiving a complaint will immediately contact a program manager by phone with the following information:
  - Step 1: Document the complaint in writing to include the following information:  
Contact information of the complainant: Name, Address, Phone Number, email (if appropriate);  
Information Shared: When was the occurrence, Who was involved, What happened, Where did it occur, What was the impact.  
Other information that the complainant wishes to share.  
If the complaint comes in by phone: program staff document call, note time, date & staff member name
  - Step 2: Complaint goes first to Site Supervisor who must discuss the details with their Assistant Director within 24 hours of the report. The Assistant Director works with the program staff to attempt resolution within 48 hours.
  - Step 3: Complaints not resolved within 48 hours will be brought to the attention of the Division Manager, Bureau Director, or their designee.
  - Step 4: If the complaint is then resolved, the Bureau Director will send a memo to all involved, stating remedial actions to be taken by staff and the time line for these actions.
  - Step 5: If satisfactory resolution is still not achieved, the Bureau Director will request the EHSD Director to review all documentation. When the complaint is then resolved,

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the EHSD Director will send a memo to all involved, stating remedial actions to be taken by staff and the time line for these actions.

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#### II. Planning

##### A. Philosophy

The Community Services Bureau Philosophy of Program Management is as follows:

To establish a culturally competent, systematic and innovative process of program planning that demonstrates forward mobility and strategic thinking, in an effort to meet the changing needs of the children and families within the community.

In efforts to fulfill our philosophy, administrative staff including fiscal, personnel, information technology and administration, is committed and dedicated to carry out the following program goals:

- (1) Poor health and nutrition are significantly correlated to children and families living in poverty. CSB will address the need to improve indicators of nutritional health through increased education and physical activity.
- (2) Disabilities and mental health needs continue to trend upwards. CSB will expand mental health and disabilities assessment, treatment, and case management linkage opportunities for children and families.
- (3) Exposure to violence has a lasting impact on children's development including their emotional, mental and physical health. CSB will promote positive and enduring adult-child relationships that increase a child's level of secure attachments by providing services to promote the safety and well-being of children and families.
- (4) CSB will provide ongoing learning opportunities to enhance employees' career development and assist in meeting new job requirements.

CSB implements a systematic, ongoing process of program planning that includes consultation with the programs' governing body, policy groups, program staff, and with other local community organizations that serve enrolled families. CSB planning includes: community assessment, multi-year (long-range) program goals and short-term objectives, systems planning calendar, and written plans for implementing services in each of the program areas.

##### B. Methodology

###### 1. Community Assessment

- The Community Assessment is conducted once every three years with annual updates during the onset of each program year. The community assessment helps keep CSB abreast of substantive issues facing the community which informs all systems and services of the bureau. Strengths, resources, needs and trends in the CSB service area are identified and integrated into the planning process and into the development and implementation of policies, procedures, service plans, goals and objectives. The findings of the Community Assessment are used to help reach decisions in areas such as: to help determine CSB program philosophy, long-range and short-range program objectives, help determine the type of services and program options to be provided, help determine the recruitment areas of the program, help identify locations of centers and home-based programs, and help set the criteria for recruitment and selection.
- The Community Assessment process is led by a CSB Analyst. The data that is collected externally and internally consists of, but is not limited to demographic make-up of eligible children and families, other child development and child care programs serving eligible children including infant/toddler, and pregnancy programs, services for children with disabilities, education, health, nutrition and social services needs for eligible children and families and community resources that could address the needs of eligible children and families.

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- The Community Assessment helps to identify strengths, disparities, needs and trends in the community which guides management, Policy Council, and the County Board of Supervisors in the planning process for eligibility, recruitment, selection criteria, site and classroom placement, as well as general program management, including curriculum and family support services. The Community Assessment also guides the program goals and objectives.

#### 2. Self-Assessment

- Once each program year, CSB conducts a joint Grantee and Delegate Agency self-assessment of the effectiveness and progress of our programs in meeting program goals and objectives and in implementing federal regulations. Self-assessment tools include resources from the OHS Monitoring Protocol, and CLASS assessment. The modes of assessment in the protocols include: Observation, Interview, and Records Review.
- A training and overview of the self-assessment process is given prior to the designated week the self-assessment is conducted. The role of the Bureau Director and Delegate Director and/or their designees in the self-assessment process are as “advisor” to the team. The analyst responsible for the self-assessment is the Team Leader and may be supported by a consultant. Teams are comprised of grantee and delegate agency management and non-management staff, parents, community partners, and representatives of the Board of Supervisors. Teams are formed in November of each year.
- The self-assessment process concludes with the team leader and/or his designee(s) writing a cumulative and comprehensive report that addresses program strengths as well as potential non-compliances. If needed, a corrective action plan is developed to remediate areas of non-compliance. The final report of the self-assessment, including the certifications of corrective actions, is presented to the Policy Council, Local Policy Committee, Delegate Board, and Board of Supervisors for approval in March of each year. As soon as these approvals are secured, the final report is then forwarded to the ACF Program Specialist.
- The results of the self-assessment are used in the planning process, in developing and improving program services, and in formulating the program approach included in grant applications.

#### 3. Strategic Plan

- With the support of the Employment and Human Services Director, CSB adopts the Program Goals and Objectives as the bureau’s five year Strategic Plan. The plan addresses needs and concerns that are identified through the community assessment, self-assessment, and ongoing monitoring results. They are also developed with input provided from parents through the Policy Council’s Program Services Subcommittee. The strategic plan is reviewed and updated semi-annually by the Senior Management Team. Annual updates are presented to the Policy Council and Board of Supervisors.

#### 4. Bureau Systems Planning Calendar

- The purpose of the CSB Planning Calendar is to provide chronological guidance and a timeline for critical events such as: reviews, audits, reports, etc. that occurs within the year.
- The planning calendar ensures continuity within the programs as well as throughout the bureau. Included in the planning calendar are methods to ensure consultation and collaboration with the program’s governing body, policy groups and program staff. The planning calendar is updated and submitted for approval annually by the Policy Council and the Board of Supervisors.

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5. Management Planning Meetings

- Planning is conducted on an on-going basis at varying levels throughout the bureau during planning meetings, staff summits, and management retreats. Additional information regarding management planning meetings is found under Section III-Communications.

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#### III. Communications

##### A. General Description

All staff is expected to communicate within the department and externally using the following communication tools:

- Common, not technical terms
- A professional tone
- Assurance that the approach is based on each family's cultural/linguistic preferences
- Adherence to the principles of Facilitative Leadership
- Encouragement of a team approach
- Ensure that translation services are available when needed

##### B. Internal Communication

Employees must follow County policy with regards to courtesy and confidentiality. High staff morale is dependent on friendly greetings, active listening and a display of a helpful attitude toward team members. The following are methods of internal communication with program staff:

- Staff summits
- Regularly scheduled staff meetings at varying levels, such as:
  - Senior Administrative Management
  - Senior Management
  - Comprehensive Services
  - Cluster-based
  - Site-level
- Daily Interactions
- Staff newsletters
- Internal memos
- Policies and Procedures
- Fax
- Email
- Payroll notices
- Telephone
- Bureau Reports
- Computerized Tracking Systems (COPA)/CLOUDS
- Video Conferencing System
- Annual Planning Calendar

##### C. The following are methods of internal communication with parents:

- Monthly Policy Council meetings – program planning, policy and financial information is shared
- Monthly Policy Council sub-committee meetings
- Monthly Policy Council executive board meetings
- Monthly parent meetings
- Parent surveys
- Parent-teacher conferences
- Home visits
- Monthly Comprehensive Services Team newsletters



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- Quarterly family newsletters
- Parent bulletin board that includes:
  - Upcoming activities; posted memos; health and safety information logs; site emergency procedures; parents' and child's rights; and Policy Council minutes and agendas
- Daily classroom schedules
- Weekly lesson plans
- Parent policies and procedures
- Dissemination of pertinent information regarding program planning, communications from Office of Head Start, financial reports and grant applications.
- Planned site activities
- Planned community events
- Social Media Tools
- Communication with Delegate Agency and Community Childcare Partners:
- Regularly scheduled meetings
- Regular monitoring
- Joint trainings
- Appointed members from the delegates on the Policy Council
- Joint annual self-assessments
- Email
- Telephone
- Fax
- Monthly reports

#### D. Communications with Governing Bodies and Policy Groups

1. The Policy Council serves as a link between public and private organizations, Delegate Agency Policy Committee(s), Subcontractors, the Grantee-Operated Program Site Committees, the Grantee, County Board of Supervisors and the community it serves.

Mutual communication and understanding between the governing board and program management are fundamental for a high quality Head Start Program.

2. Monthly meetings with the County Administrator's Office: The Employment and Human Services Department (EHSD) Director and the CSB Director also ensure that the Board of Supervisors has an understanding and appreciation of the Head Start philosophy and the role of parents and Policy Council in shared governance.

Monthly meetings are held with the County Administrator's Office to discuss various areas of the program. A meeting report is generated by the EHSD Director and the CSB Director. The meeting's report is sent monthly to the Health and Human Services Committee of the Board of Supervisors. In addition, the CSB Director and other assigned staff, meet throughout the program year, individually, with each member of the BOS to review reports, tour centers, give updates and advice, and train on new regulations and initiatives.

#### E. External Communication

##### 1. Communication with Partnerships

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CSB has several types of Community Partnerships and all of them provide valuable services to our children and parents. Our reputation in the community is often dependent upon the respect and assistance provided our partners when in contact with them. Every employee is responsible for delivering clear and helpful information to the public at large and to our partners in particular. External Partners include:

- State/Local Policy Groups
- State Department of Education
- Local Planning Council
- First Five Commissions
- County Departments
- Community-based Organizations
- Contra Costa County SELPAs
- Child Care Partners
- Policy Forum
- County Board of Supervisors
- Local Education Agencies
- Contra Costa County School Superintendents
- Contra Costa One Stop Consortium
- California Welfare Directors Association Committees
- News / Media Inquiries

#### 2. Press Calls

i. All press calls should come to, or be referred through, Legislative and Community Relations Coordinator at (925) 313-1676 or the Advanced Level Secretary at (925) 313-1769 in the Office of Administration for the Employment and Human Services Department. This will guarantee that the Bureau Director and Senior Administrative Staff know which stories and issues are attracting press attention. It will also make it easier for the reporter to be connected with the proper Department spokespersons who can respond fully and accurately. It will enable the Legislative and Community Relations Coordinator or the Advance Level Secretary in the Office of Administration for the Employment and Human Services Department to follow up with reporters and Department Staff to ensure that deadlines are honored and follow up questions, issues and photography are well managed.

The Legislative and Community Relations Coordinator or the Advanced Level Secretary in the Office of Administration for the Employment and Human Services Department will be available to prepare staff for interviews, review the topic of interest and discuss points that will help the interview be complete and accurate while getting the Department's message across to the public.

On occasion, members of the press will take a shortcut into the Department and contact staff directly. If the staff member has been authorized by their Bureau Director to respond to the press, they are free to respond to the reporter. They should then contact the Legislative and Community Relations Coordinator at (925) 313-1676 or the Advanced Level Secretary at (925) 313-1769 in the Office of Administration for the Employment and Human Services Department to discuss the story and allow for the Legislative and Community Relations Coordinator or the Advanced Level Secretary in the Office of Administration for the Employment and Human Services Department or designee to follow up.

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ii. If the staff person has not been authorized by their Bureau Director to respond to the press, they are required to adhere to the following:

- Do not respond directly to print, vocal, and/or visual media representatives;
- Politely refer all contacts to the Legislative and Community Relations Coordinator at (925) 313-1676 or the Advanced Level Secretary at (925) 313-1769 in the Office of Administration for the Employment and Human Services Department;
- Inform your manager/supervisor immediately;
- Provide the following information: date, time, and location of contact;
- Media representative's name, organization, and phone number and
- Summary and nature of the inquiry

There are many differing aspects and/or components related to the successful operation of our program. It is unfair for individual staff members to be placed in and/or to place themselves in a position of stating, explaining, and/or formulating policy for the department. An innocent comment intended to project a positive view can be reproduced with a negative spin or violate the right to privacy of our clients. Proposed dialogue:

- "I would like to respond to your questions. My concerns rest with preserving and protecting the privacy of our children and their families. Please give me your name, organization, and phone number so that I can properly refer your request."
- Staff with story ideas or events to promote are asked not to contact the press directly, but to call the Legislative and Community Relations Coordinator at (925) 313-1676 or the Advanced Level Secretary at (925) 313-1769 in the Office of Administration for the Employment and Human Services Department, so these stories can be channeled to the press most likely to publish them.

4. Tools for External Communication are as follows:

- Formal/informal agreements
- Regular meetings
- E-mail
- Telephone
- Membership activities
- Social Media Tools (Facebook/Twitter and etc.)

F. Reporting for County Child Protective Services and State Community Care Licensing

The purpose of these policies and procedures are to provide all department employees with instructions on what specific steps they must take to properly handle any incident involving an abused and/or neglected child, the injury of a child, or a potential child's rights violation. It is important to note that while all employees are charged with the responsibility of reporting incidents involving an abused and/or neglected child, only the EHSD Director or Bureau Director or designee is charged with the responsibility of reporting potential child's rights violations to State Community Care Licensing.

In addition, this policy is intended to make clear the procedure for reporting incidents that may occur both off site and on site.

1. Definitions

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- CCL (State): The acronym for State Community Care Licensing, which is a Division of the State of California Social Services Department, and which is responsible for the licensing of the Department's Child Care facilities.
- EHSD Director: The Director of the Employment and Human Services Department
- Bureau Director: The Director of the Community Services Bureau.
- CFS (County): The acronym for Children and Family Services, formerly Child Protective Services, which is a Division of the County's Employment and Human Services Department and is mandated by the Federal and State government to assess and investigate all referrals which allege that a child is endangered by abuse, neglect, or exploitation.
- Major Injury: Any incident involving a child that requires the intervention of any medical professional (examples of medical professional include: medical advice nurse, hospital, clinic, doctor, ambulance service, emergency room).
- Minor Injury: Any incident involving a child that does not require the intervention of any medical professional as noted above.
- Child's rights violations: Any incident that occurs at a Community Services Bureau facility and involves an employee, contractor, or volunteer of the Department that might violate either the Head Start Code of Conduct or the rights of a child in accordance with State Child Care Licensing Regulations.

All employees, at all levels, are expected to follow the policies and procedures so that accurate and timely reporting can be assured to both the County CPS and the State CCL.

#### 2. Children and Family Services (CFS) (Protective Services, County)

Any employee or contractor who knows or suspects that a child has been abused and/or neglected off site should immediately discuss his/her concerns with a Site Supervisor or Assistant Director.

If the discussion leads to the reasonable suspicion that a child has been abused and/or neglected off site, the employee or contractor should report his/her concerns immediately to CFS.

The employee or contractor making the report will provide a copy of the above referenced report to their Site Supervisor and Assistant Director.

#### 3. Child Injuries

i. Minor Injuries: (any incident not involving any medical professional) immediately report the injury to your Supervisor and the parent after you have tended to the child.

Employees do not report minor injuries to CCL.

If a parent of a child who has sustained a minor injury reports back to the center that they subsequently took the child to be seen by any medical professional, the injury needs to be reported as a major injury. All head injuries regardless of staff determination that it is minor or major shall be reported to the Supervisor immediately who shall contact the parent immediately to pick up the child. "Head Injuries" are defined as injuries to the skull or cranium, and do not include the mid and lower facial areas. Staff shall complete a written injury report for the parent prior to pick-up time and at pick-up time talk with

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the parent to explain the injury, action taken by staff, and provide a copy of the written report. Supervisor shall make a complete entry in the Supervisor's Injury Log for all injuries, minor and major.

ii. Major Injuries: Report the incident immediately to a Site Supervisor, the Assistant Director, and the parent. Depending on the severity of the injury, all staff present shall:

- Comfort the child.
- Phone 911 immediately.
- Report the injury to the Assistant Director, Bureau Director and/or Executive Director.
- The Site Supervisor or designee will make an Unusual Incident Report to Licensing in accordance with the Unusual Incident Reporting policy and procedure.
- The Bureau Director may assign staff to investigate.
- The Department's Licensing Liaison may prepare a written report.
- Staff shall complete a written injury report (form CSB-208) for the parent immediately and provide a copy of the written report to the parent.
- Supervisor shall make a complete entry in the Supervisor's Injury Log for all injuries, minor and major.

iii. Potential Child's Rights Violations

- Any incident that occurs on site at a facility and involves employee(s), contractor(s), or volunteer(s) of the Community Services Bureau that might violate the rights of a child in accordance with Child Care Licensing Regulations or the Community Services Code of Conduct must be immediately reported to the CSB Administration in Martinez using the following protocol:
  - Any potential and/or unusual incident must be reported by CSB employees to the Center's Site Supervisor or the designated person-in-charge no later than 15 minutes after being made aware that an alleged incident has or may have taken place.
  - The reporter shall be any employee, contractor or volunteer who has witnessed or heard about an alleged incident, or any employee, contractor or volunteer who was involved in an alleged incident.
  - The Site Supervisor or person-in-charge must phone-in the alleged incident to the Assistant Director and, as directed by the AD, one or together the AD and Site Supervisor will call CSB Administration Office at (925) 313-1777 no later than one hour after being made aware of the alleged incident.
  - Caller shall make it clear to the clerk answering the phone at CSB Administration Office that you are reporting a possible licensing incident that must be handled by the appropriate staff immediately.
  - When the Unusual Incident Report is phoned into the CSB Administrative Office, the front desk clerk who receives the phone call shall immediately and personally notify the Division Manager. If the Division Manager is not in, the notification succession shall be to the Bureau Director.
  - The Site Supervisor or person-in-charge will then complete, obtain AD approval of report, and fax CSB Unusual Incident Report to CSB Administrative Office within two hours of the alleged incident. The completed form shall be faxed to (925) 313-1772 to the attention of the Division Manager immediately followed up with a telephone call to CSB Administrative Office at (925) 313-1724 to verify that a copy of this report has been received.

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- Site Supervisor shall compile and send upon request all written documentation related to the incident to the Assistant Director, Division Manager and Personnel Services Assistant III. Documentation may include but is not limited to CSB incident Report, small group conference forms, notes on discussions with parents or other employees, and observation notes. Materials shall be complete, legible, objective, and fact-based.
- It is a requirement of CCL that unusual incidents must be reported to CCL by a telephone call within 24 hours of the County learning that an incident may have occurred.
  - In accordance with CCL protocol, the Site Supervisor remains the official contact with the CCL during any on-site CCL review/investigation process.
  - The Assistant Director must be notified by the Site Supervisor any time a representative from CCL conducts an on-site visit for any reason.
- Any employee who fails to report an alleged incident as outlined above will be subject to disciplinary action, up to and including termination.
- Any Site Supervisor or person-in-charge who fails to follow the protocol instructions as outlined above will be subject to disciplinary action, up to and including termination.

#### iv. CSB Administration Responsibilities

- When the Unusual Incident Report is received by CSB Administrative Office, the front desk clerk will personally deliver copies of the faxed report to the Personnel Administrator, Division Manager, and Bureau Director, and EHSD Director for review. When the review process is completed and approved copy of the Unusual Incident Report will be faxed to the appropriate Assistant Director to sign and either fax/scan to CCL or authorize the Site Supervisor or designee to fax/scan to CCL.
- A fact finding team will be immediately convened and directed to visit the center to gather information and determine if a child's rights have been violated and report these facts back to the Bureau Director.
- After reviewing the facts, if the Bureau Director determines that a true incident has not occurred, the case will be documented as such and closed.
- After reviewing the facts, if the Bureau Director determines that an incident may have occurred, the EHSD Director, Bureau Director or designee will make the mandatory telephone call to State Licensing.
- Only the EHSD Director or designee has the authority and responsibility on behalf of the County to report these matters to Licensing.
- Upon the notification by the EHSD Director or Bureau Director that an incident may have taken place, an investigation team will be sent out by the next business day to investigate and prepare a draft investigative report and findings.

CSB Administrative Office, in conjunction with the Assistant Director and Site Supervisor of the impacted center, will make all decisions related to protecting the rights of children on behalf of the Department until the investigation has been concluded.

Any employee who is considered to be involved with the violation of the rights of a child in connection with the incident report will be directed to leave the facility for the day and then report to the 40 Douglas Drive office in Martinez, or other designated site, for work by the next business day.

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Failure on the part of the employee to report to, and remain at the 40 Douglas office, or other designated site as directed, will cause the employee to be docked for absence without leave and subject to further discipline, up to and including termination.

The investigative team will have three business days to perform the required investigation and prepare a draft report for the Bureau Director and EHSD Director.

The Bureau Director and EHSD Director will review the report and decide next steps, including, if necessary, any disciplinary or remedial action that should be implemented as a result of the report's findings and conclusions.

The investigator's written report shall also include a "holistic analysis" of the causes associated with the incident, and develop specific recommendations to prevent their recurrence.

Recommendations will be reviewed by the Bureau Director and EHSD Director for consistency with appropriate personnel policies prior to being entered into the final report.

After appropriate action is taken by the Department, pertinent information regarding each incident shall be shared with key managers and Site Supervisors to prevent the recurrence of a similar incident at another site (1).

For major incidents, a detailed critique by management of the incident itself shall be provided to all employees on a Department-wide basis to prevent the recurrence of a similar incident at another site.

G. Reporting for Partner Agencies including the Delegate Agency shall:

- Notify and provide County with copies of any licensing citations, licensing visit reports, unusual incident report, and/or any other citations within 48 hours of Contractor's receipt of the report or citation.
- Maintain full compliance with Community Care Licensing Regulations and State and/or Federal Regulations as applicable given other funding sources received by CSB.
- Notify and provide CSB with copies of any Medical Alerts (such as infectious disease outbreaks) within 48 hours.

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<sup>1</sup> Any report information shared with Department employees must be pre-reviewed by CSB Administration to ensure that it does not violate the confidentiality of any employees or children involved in the incident.

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#### **IV. Record Keeping and Reporting**

##### **A. General Description**

##### **Record-Keeping and Reporting Systems**

The effective and efficient reporting system used in CSB meets federal guidelines as spelled out in the Performance Standards Record-Keeping Instruction and the state guidelines as required by state contract and licensing requirements.

The system provides for accurate and timely information regarding children, families and staff and meets the Confidentiality Policy of the bureau.

Each area of program services maintains the appropriate record-keeping and reporting systems according to the above mentioned federal and state guidelines to include: child and family records, site safety records, child records, child health records, family records, and personnel records. Systems for maintaining the records, specific to a program service area, are described in each section of these policies and procedures.

A file and records system is established/maintained by the Contra Costa County Community Services Bureau personnel office. In addition, copies of certain personnel records pertaining to all permanent staff, including Teacher Assistant Trainees job qualifications are kept at each child care center as required by state licensing.

i. Confidential files and records system shall be maintained in a locked cabinet to include official documents for each staff member.

- **Procedure for File Transfers**

When staff transfers to another site, it is the responsibility of the Site Supervisor at the new site to assure all required personnel files are sent to the new site by communicating with the Site Supervisor of the site from which the employee is transferring.

- The following procedures are in place to protect confidentiality of all sensitive material:  
If files are faxed by CSB Personnel to the employee's new location, CSB Personnel will contact the site supervisor and request the site supervisor to oversee the fax machine to verify all confidential information is transmitted to the site supervisor only, protecting the employee's HIPAA rights to privacy.
- After the Personnel Staff receives a confirmation from the fax machine, the Personnel Staff will call or e-mail the Site Supervisor to ensure that all the documents sent to that site have been received.
- The site supervisor at the employee's previous location will shred all documents pertaining to the transferred employee, and will send email verification to CSB Personnel when shredding is complete.
- Employees have the option of personally transporting their files to their new site. The employee must sign for the file material, and immediately transfer the file contents to their new site supervisor. The site supervisor must send verification to CSB Personnel when proper filing procedures have been completed.
- Under no circumstances may files be transmitted by interoffice or "pony" mail.



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##### B. Personnel Files

All personnel files are stored in the Personnel Unit in a locked cabinet and in a locked office. The access to the personnel files is granted only to the authorized personnel. An employee's union representative must have a written authorization from the employee to obtain access to his/her personnel file. When reviewing a personnel file, a member from the personnel staff must accompany the authorized personnel at all times in the closed door office. The authorized personnel must sign, date and write the reasons on the "Access to File" card located in front of each personnel file.

##### C. Family Files

The Site Supervisor, comprehensive service staff or the head teacher at each site is responsible for maintaining the family's basic data file at each site. All children's files must be kept in a locked file cabinet. Access to files is permitted only by authorized personnel. When authorized personnel must access a child's file, the protocol must be adhered to. Two types of access and removal of a file from the cabinet can take place.

- The file is taken off site for audit or review  
Authorized staff must record the removal of the file off the site premises on the Shared Folder called "Record Keeping Log" He/she must log: "check in/out status by completing the required information on the site template. "
- The file is accessed on site  
Authorized staff needing to work on a file on site must pull the file and in its place insert the file check-out card indicating: date, name and signature of staff pulling file. Upon return of the file, staff must sign in verifying the return of the file, and the check-out Card is removed.

In both of the above situations, an Access to File form must also be completed by the authorized person accessing the file. This is located on the right hand side of the first section of the child's file. One must indicate date, name, and purpose for accessing the file.

Files are kept on site for the current enrollment year until after the annual audit is complete. After the audit, files are prepared to be archived, and sent to a warehouse for storage. Children's files are kept for five years after our services to the family ends. Files are then shredded.

Effective January 1<sup>st</sup> 2014, any document or record may be maintained on electronic format if it was originally created in an electronic format and kept in its original unconverted electronic format. Documents or records created in paper form cannot be scanned and stored electronically alone. These records must be stored in their original paper format. Independently of being hard copy or electronic format, all records must be kept for at least five years.

##### D. Fiscal Files

Fiscal records and documents are stored and filed in designated cabinets inside the Fiscal, Purchasing and/or Personnel units. Staff is required to maintain current and accurate records of financial activities. This includes fiscal and accounting records in order to show the costs incurred by each program. Records adequately identify the use of funds for Federal and State programs. Accounting records are supported by documentation such as purchase and travel receipts, invoices, journals, etc. and show a clear audit trail for all funds received and disbursed.

The following documents are maintained by the designated units:

- Accounting Policies & Procedures Manual

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- Administrative Reports - Head Start & Early Head Start
- BRASS Files
- Budget Statement
- CAFR
- CDE Projections
- CDE Contracts
- CDFS8501
- CDFS9500
- CDFS9529
- CDFS9530a
- CDFS CalWORKS, APP or FCCH Fiscal Report
- CDFS CalWORKS Caseload Report
- Child Development Audit Reports
- Child Nutrition Expenditure/Revenue Report
- Child Start Allocations Binder
- Contractors' Files – Purchasing Unit
- Delegate Agency Files
- Employee Timesheets – Personnel & Purchasing Units
- Expenditure Activity Report - Energy Programs
- Expenditure Detail Report
- Federal Financial Reports to ACF (SF-425:Semi-Annual, Annual and Final)
- Financial Monitoring Report - Head Start & Early Head Start
- Financial Projections Package
- Financial Report for Drawdown - Head Start & Early Head Start
- Financial Status Report (SF425) - Head Start & Early Head Start
- Journals
- Open Encumbrances Report
- Partners' Files – Purchasing Unit
- Payment Ledgers – Contracts/Purchasing Units
- Payroll Detail Report – Payroll/Purchasing Units
- Payroll Register Report – Payroll/Purchasing Units
- Policy Council Financial Reports
- Procurement Card Files – Personnel Unit
- Program Improvement Grant
- Purchase Requisitions/Orders – Purchasing Unit
- Recommended Budget Binders
- Revenue Detail Report
- SBFS Files
- Single Audit Reports
- Supplemental Funding Applications
- Travel Demands – Purchasing Unit
- Vendors' Invoices, Bills, D-15 – Purchasing Unit

#### E. Contract Files

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Contract files are stored in designated cabinets in the Contract & Grants Administration office. Contract staff is required to maintain current and accurate records of contract activity. This includes contracts, board orders, insurance verifications, required clearances and Internal Revenue Service (IRS) documentation. The documents are kept in individual contract files, labeled by contractor name and contract number. Board orders are kept with each corresponding contract and in a general board order file, organized by month and year. EHSD Contracts and Grants Unit will maintain a record of all contractors' files and will include all licensing and program mandated forms. The following documents are maintained by the Contracts & Grants Unit:

- Independent Contractor contract files
- County Administrator Office Questionnaire for determining Independent Contractor status
- Corporation (non-profit and for-profit) Contractor contract files
- Contract files for contracts with other legal status, such as general partnership
- Contra Costa County Small Business Enterprise award forms (where applicable)
- Board of Supervisors board orders
- IRS W-9s and IRS W-4s (where applicable)
- Certificate of Liability Insurance
- Fingerprint clearance form (where applicable)
- Current Health Screening Form or proof of current physical exam and TB clearance (where applicable)
- Contra Costa County Auditor-Controller Insurance clearance
- CSB Contract Request forms, with authorizing signatures

#### F. Public Access to County Records

In accordance with the California Public Records Act and the Better Government Ordinance, any person is entitled to inspect and to receive copies of the public records of the County, including records of individual departments. Upon a request for a copy of public records, county staff is to make the requested records available to any person upon payment of applicable fees. Disclosable county records may be inspected anytime during regular business hours. Every attempt should be made to allow prompt inspection of the requested disclosable records. If copies are requested, they should be provided no later than the next business day if possible to do so.

##### i. Disclosable Records:

Any existing writings containing information relating to the conduct of the public's business prepared, owned, used or retained by the County regardless of physical form or characteristics are considered public records and should be disclosed by request. These include, but are not limited to, papers, books, maps, charts, photographs, audio tapes, and video tapes, information stored in non-paper form on a computer or other electronic media and other material. Additionally, writings that are not, in whole or in part, exempt from disclosure under the Public Records Act and the Better Government Ordinance.

##### ii. Exempt from Disclosure Records:

Personnel, medical or similar records which cover intimate and personal information such as: employee performance evaluations, employee home address, home telephone number and all personal information. Certain other public employee information may be released: (1) amount of an employee's

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gross salary and benefits, job classification, and job duties; (2) Merit board and arbitration disciplinary proceedings and writings submitted in such proceedings; (3) information in case of emergency or need when such disclosure appears reasonable to protect any person's health or welfare; (4) information for authorized criminal law enforcement purposes; (5) information required by subpoena, testimony or other legal process; (6) information authorized to be released to third parties by the written consent of the effected employee; and (7) any other information, when reviewed and approved by CC County Counsel prior to release.

- Investigatory records compiled for correctional or law enforcement purposes such as: records of complaints, preliminary inquiries if a crime or violation has been committed, full investigations, and memoranda "closing" an investigation.
- Examination data such as questions, scoring keys, examination data used to administer a licensing, employment or academic examination.
- Confidential legal writings such as writings to or from the CC County Counsel to an attorney who represents the County or writings especially prepared for or by the County Counsel providing legal advice, analysis of proposed legislative actions or positions, terms of settlement of litigation, post-negotiation reports.
- Health Services contracts between the County and the State and writings related to those contracts.
- Particular statutory exemptions related to specific situations such as information about health facilities, assessment records, agricultural information, etc.
- Real estate appraisals or engineering studies relating to the acquisition of properties or to prospective construction contracts.
- Preliminary drafts, notes, memoranda and "deliberative process".

CSB employees are encouraged to contact Personnel when approached with requests for disclosure of documents by the public. Personnel staff will provide advice or contact County Counsel for additional clarification. In such cases, the employees are expected to provide the requestor/s with timelines in which the requested information will be provided to them.

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#### **V. Monitoring**

##### **A. Purpose**

CSB Ongoing Monitoring is a key management system for ensuring program quality and compliance with Head Start/Early Head Start Performance Standards, California Child Development Title V Regulations, California Desired Results and Environment Rating Scales, NAEYC Standards and Title XXII Child Care General Licensing requirements. Ongoing Monitoring ensures that the program is moving toward achieving its goals and objectives while providing high quality, comprehensive services to the ever-changing needs of the children and families served. CSB is committed to the continuous improvement of our programs through regular and ongoing monitoring of all aspects of our operations.

##### **B. Methodology**

The ongoing monitoring process is comprehensive in scope. The system provides a method to examine service delivery including the tracking of child and family outcomes on an ongoing basis and incorporates a process to connect the results to management systems. Staff at all operational levels participate in the ongoing monitoring process and any identified concerns are communicated in writing to the appropriate staff responsible. Corrections are validated according to specific timelines.

Ongoing monitoring occurs on a regular and routine basis to assess systems and program operations for evaluation and continuous improvement of our programs. It includes the review and evaluation of services and systems, documentation of results, tracking and analyzing areas of concern and correction, and validation that correction has been completed. Results of monitoring and completion of corrective actions for findings are shared by the Bureau Director or designee with: EHSD Director, Board of Supervisors, Policy Council, Assistant Directors, Site Supervisors and their staff. Results are used to conduct root cause analysis and develop plans for improvement and program planning.

##### **C. Multi-Level Monitoring**

i. Center-Level and Cluster Level Monitoring is conducted by Site Supervisors, Comprehensive Services Assistant Managers, Clerks, and Teachers for the purpose of monitoring day-to-day center operations, delivery of services, and overall health and safety of internal and external environments of children at the center for which they are assigned. Assistant Directors receive monthly reports from Site Supervisors that provide an overview of each of the centers they are assigned to track any concerns as well as highlight strengths and special activities occurring each month.

For partner centers, the CSB Partners Unit visits subcontracted centers weekly to monitor the delivery of services and health and safety to ensure ongoing communication. The delegate agency provides monthly communication reports to the Analyst responsible for partners and the delegate agency.

ii. Content and Service Area Monitoring is conducted by Comprehensive Services Managers and Analysts responsible for a specific content or service area to ensure that staff are trained and comply with funding requirements and regulations around a specific content or service. CSMs and Analysts review trends across centers and services and identify risks or concerns and provide ongoing training as well as targeted training when needed.

For partner agencies, the designated Analyst reviews monthly reports and monitoring performed by the agencies and provides support and training as needs are identified. The delegate agency completes its

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own internal ongoing monitoring. Monthly reports on these activities, including corrective actions, will be submitted to the Analyst overseeing the Partner Unit.

iii. Agency-level monitoring is conducted by the CSB Quality Management Unit (QMU). This unit is responsible for conducting compliance monitoring of directly operated, partner and delegate agency centers in five key areas: center health and safety, comprehensive services compliance, need and eligibility, education (environment), and CLASS observations. Corrections for non-compliances are completed by the responsible person at the center and are validated by a Comprehensive Services Manager or designee. The Assistant Director or designee completes a final review of correction and validation.

Each directly operated; partner and delegate agency center is monitored once per year (July-June). A random sample of 30% of files is reviewed in the areas of need and eligibility and comprehensive services compliance. Thirty percent sample of classrooms in the center receives a health and safety monitoring. All directly operated and partner agency classrooms are monitored for education environment.

Classroom Assessment Scoring System (CLASS) Observations are conducted by a trained CLASS observer working with the QMU. Fifty percent of the eligible classrooms are randomly selected using an automated system. Selected classrooms receive CLASS observations twice in the year. Ratings below cut-off scores require a corrective action. CSB's CLASS cut-off scores for corrective action may vary from year-to-year as they are established after the National Designation Renewal System trigger scores have been made available.

Upon completion of each area of monitoring, the QMU distributes results and the Feedback Form listing areas of non-compliances and strengths to the predetermined group responsible for that center, classroom, or service area monitored. The designated responsible person corrects non-compliances which are then reviewed and validated by a Comprehensive Services Manager. The Assistant Director reviews all non-compliances, validations, and submits verification to the QMU.

Data collected from monitoring is compiled into agency reports for review by staff, managers, the Policy Council and Board of Supervisors to inform of agency trends, strengths and areas in need of improvement. All reports and findings are shared with the partner and delegate agencies.

The Analyst overseeing the QMU compiles results and findings and distributes reports to senior management, Comprehensive Services Managers, Site Supervisors, center staff, Board of Supervisors, and the Policy Council twice per year. These reports are a high-level representation of the agency's compliance and non-compliance concerns in the five areas monitored by QMU. Comprehensive Services Managers and senior managers responsible for a content or service area reviews these bi-annual reports to identify trends and develop staff training.

iv. The Bureau Director or her designees will monitor all administrative internal team members with responsibility over service areas. This may include periodic walk-through activities or unannounced visits to sites.

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v. Additional information on multi-level monitoring is available in the Appendix of the Policies and Procedures.

#### D. Fiscal Monitoring of the Delegate Agency by the Grantee

The Grantee certifies that the Delegate Agency is complying with regulations and generally accepted accounting principles. Monitoring is conducted using the following format:

- **Monthly Reports:**

Delegate Agency shall submit monthly financial reports that record cumulative and accrued expenditures and obligations through the end of the contract year. Monthly reports are due on the 20th of each month for the preceding month. Reports shall be submitted on Form M2092 (Monthly Financial Report) and shall include, at a minimum:

- Separate reports for Program Accounts 20 and 22
- Reimbursement reports for the Child Food Program
- Line item documentation of administrative expenditures
- Copies of contractor's monthly financial statement and payroll reports
- A separate monthly report summarizing the local share reported in the financial report.

#### E. Early Childhood Environmental Rating Scale and Infant Toddler Environmental Rating Scale (ECERs and ITERs)

- ECERs and ITERs observations are conducted annually for the grantee operated programs. Corrective action plans are developed to address any identified areas of weakness.
- For the partners, the Education Manager assigned to the partners will conduct annual validations on the ECERs and ITERs that they submit. If a partner site has more than one classroom, one classroom will be randomly selected for validation. If a significant discrepancy is found between the partner's ECERs/ITERs scores and the CSB validation of the scores, additional ECERs/ITERs from other classrooms will be validated.

#### F. Fiscal Officer or his/her designee reviews the financial information for content and consistency before reimbursing monthly expenditures

- **Annual On-Site Monitoring:**

After the annual audit by a Certified Independent Accountant, the Grantee performs an on-site review of the Delegate Agency records using the OHS Monitoring Protocol. This procedure is performed no later than May of each year for the prior award year. The following is monitored:

- **Accounting Records:**

Records are reviewed to assure that they adequately identify the source and application of funds for contract-supported activities, and that they are maintained. Records are reviewed to make sure that they contain information pertaining to contract awards, authorizations, obligations, un-obligated balances, assets, outlays, income, and liabilities.

- **Internal Controls:**

Controls are reviewed for effectiveness, and that accountability is maintained for all contract cash, real and personal property, and all other assets. Contractor is reviewed for adequately safeguarding all such property and that property is used solely for contract purposes.

- **Budgetary Controls:**

The actual and budgeted amounts for each contract allocation are compared.

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The grantee will conduct regular and routine monitoring including delegate agency annual management and fiscal systems review.

##### G. Center Visit Documentation

- CSB Director, Assistant Directors, or other Administrative Managers may conduct unscheduled/unannounced monitoring visits at directly operated or partner agency sites. These visits are documented on the Center Visit Documentation form. Any issue requiring a corrective action is documented and validation of correction is assigned and verified upon completion.

##### H. Procedures for Review, Analysis and Reporting

The monitoring analyst will ensure that the data is entered into the Monitoring database and that reports are distributed to all stakeholders, including the Bureau Director, Assistant Director, and Comprehensive Services Managers and site staff. A monitoring results report is also prepared for the Delegate Agency. All monitoring results will be formally submitted to the delegate agency. Issues or corrections cited will be communicated with corrective action requirements as part of the notification.

##### i. Monitoring Database

- The program uses databases designed in-house to track monitoring findings and areas of strength to inform the reporting process and ensure the system is working effectively and efficiently. The databases produce lists such as the top ten issues to improve, the top ten areas performing well, as well as the top 10 sites to improve and the top 10 sites that are performing well. The analyst responsible for the ongoing monitoring system uses the database to track completion or corrective actions to ensure that closure is established for any item found to be non-compliant.
- The databases allow program managers to view trends and isolated incidences and assist them in conducting root cause analysis and plans for improvement as appropriate in a timely fashion.
- Non-compliances will be utilized by all staff to: to identify program weaknesses; to correct identified non-compliance issues; and to seek continuous improvement.

##### ii. Monitoring Reports

- Monitoring analyst compiles results and findings such as: program strengths, areas of improvement, site performance reports and other reports as needed.
- Reports are disseminated to: senior management, comprehensive services unit, site supervisors, and site staff Board of Supervisors, and Policy Council.
- Monitoring Analyst will complete a semi-annual analysis report and provide roll up summaries within 4 weeks of completion of Quarter 2 and Quarter 4.

##### iii. Root Cause Analysis

- Content Area Managers will review semi-annual monitoring reports for trends across their service area and complete a Root Cause Analysis and provide an Ongoing Monitoring Corrective Action Plan in response to areas identified as needing improvement within 4 weeks of report distribution.
  - Review the monitoring reports for areas needing improvement to address and identify root causes for non-compliances (tangible, materials items failed, something was done incorrectly, system or process to do work requires revision).
  - Define the problem, collect data, identify possible causal factors surrounding the problem, and identify the root cause.



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- Submit an action plan to the Assistant Director to recommend and implement solutions, identify responsible persons.
- Effectiveness of action plan will be reviewed at the release of the following semi-annual monitoring report.

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#### **VI. Self-Assessment**

##### **A. Self-Assessment Team**

The Grantee and the Delegate Agency conduct a joint Self-Assessment each year. The role of the Bureau Director and Delegate Director and/or their designees in the self-assessment process are as “advisor” to team. The analyst responsible for the Self-Assessment is the Team Leader and may be supported by a consultant. Small teams are comprised of grantee and delegate agency management and non-management staff, parents, community partners, and representatives of the Board of Supervisors. A cross-section of staff is represented on each team. Teams are formed beginning in October of each year and finalized in January.

##### **B. Methodology**

1. In January of each year, the team leader and consultant, if applicable, identify sites and classrooms for the self-assessment. The following factors are considered in site selection:

- Monitoring results, including recent Federal Review, licensing visits, and assessment Findings
- History of site inclusion in last three years of self-assessment
- Program options and funding models to ensure all variations are assessed
- Representation of Supervisory Districts
- Site based special initiatives and projects
- Operational days

2. The current Office of Head Start (OHS) Program Monitoring Instrument and the Classroom Assessment Scoring System (CLASS) are the tools used for the self-assessment each year. Slight modifications may be made to the tool by the team leader to streamline it for ease of use by community partners, parents, and board representatives. Other tools may be introduced as needed.

3. A timeline is established which includes ample time for site visits and report writing, scheduled team check-in sessions, and ongoing training and technical assistance.

4. Training is provided to all team members in January of each year and addresses the following items:

- Purpose and Approach
- Self-assessment process
- Methods of collecting applicable data
- Timelines
- Confidentiality
- Reporting procedure used in the “non-compliant” portion of each review team’s report
- Report writing format and techniques

##### **C. Parent Involvement**

The Policy Council has a Self-Assessment sub-committee, which forms in October of each year after being provided with a description of the work of the committee. The Policy Council is oriented to the self-assessment process and timeline in November, at which time additional members of the sub-committee are recruited. These parents are trained fully with the rest of the team in January and are paired with an experienced manager to mentor them through the process, if necessary. The varying availability of parents is accommodated to maximize the involvement of all parents who express an

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interest in participating. Non-English speaking parents are encouraged to get involved and are paired with a staff person who speaks their language.

##### D. Process of Self-Assessment of Agency's Program Services

The Self-Assessment is conducted in February of each year. Each team is assigned specific service areas and several sites to assess and determine compliance. Examples of tasks of the various teams include:

- Interviewing appropriate staff, community partners, and parents
- Observing the classroom environment
- Reviewing documents such as policies, procedures, and service plans
- Observing procedures as they are implemented in the field
- Completing checklists for health and safety and eligibility

Teams check in regularly to report progress, problem solve questionable compliance areas, and plan their next day. At the conclusion of the data-collecting process, individual teams meet and review their findings, and determine the following:

- Program strengths and compliances
- Non-compliances
- Recommendation of a plan of action to meet compliance
- Evaluate the process using a plus/delta approach which is used to inform the process for the next year.

##### E. Self-Assessment Results

Individual results of the self-assessment teams are submitted to the Analyst, who consults with the Bureau Director and Delegate Agency Director, and then compiles a complete report of the self-assessment.

The written report is sent out to staff, and if non-compliances are found, content area experts are assigned to develop a corrective action plan. Once the corrections are validated (immediately for health and safety items and within 30 days for all other items), the self-assessment report and plan of action are submitted to the Policy Council and Board of Supervisors in March. An approval is obtained for any corrective action plan involved. The final report, inclusive of the validation of submission and/or approval by the Policy Council and Board of Supervisors, is then submitted to the Administration for Children and families (ACF).

The results of the self-assessment are to be used in the planning process, in developing and improving program services, and in formulating the program approach, service plans, and goals and objectives for the program.

##### F. Monitoring the Plan of Action Resulting from Self-Assessment

Throughout the year, management staff responsible for any areas of non-compliance identified in the self-assessment process shall continue to monitor the status of the corrective action, using the results of ongoing monitoring efforts, to ensure the issue is resolved and continues to remain compliant.

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#### **VII. Program Human Resources Management (Personnel Policies & Procedures)**

##### **A. Statement of Purpose of Policies and Procedures**

These personnel policies are produced for the purpose of:

- Promoting an effective, efficient, and economic operation of programs;
- Providing fair and equal opportunity to all qualified individuals to enter employment with Employment and Human Services Department, Community Services Bureau (CSB) and assuring that employees are promoted or advanced under impartial procedures;
- Maintaining a program of recruitment and advancement which will provide career development opportunities;
- Maintaining a uniform plan of evaluation, duties and wages based upon the relative duties and responsibilities of positions in CSB;
- Employing persons who can perform their duties with competence and integrity.

##### **B. Governing Board**

The ultimate authority to manage the Head Start and Early Head Start program is vested in the County Board of Supervisors. According to Contra Costa County, Personnel Management Regulations, the Executive Director or Department has the authority to act on behalf of the County Board of Supervisors on certain personnel actions as stipulated throughout the regulations. All authority for day-to-day administration of CSB is delegated to the Community Services Director.

The Board of Supervisors, upon the recommendation of the Employment and Human Services Director, reserves the exclusive right to hire, evaluate, compensate or release the CSB Director (HS/EHS Director), Human Resources and Fiscal Officers. The Policy Council shall approve or disapprove in advance the hiring of the Community Services Director.

The Board of Supervisors delegates the authority of the Head Start and Early Head Start program to the Community Services Director or his/her designee, who is responsible for carrying out the policies, procedures, and intent of these policies to include power to employ, promote, assign duties and responsibilities, evaluate, train, reprimand, suspend, discharge, or reward employees within the guidelines of all applicable federal, state and local regulations.

CSB will observe standards of organization, management, and administration that will ensure, so far as reasonably possible, that all program activities are conducted in a manner consistent with the purpose of Head Start Performance Standards and the objective of providing assistance effectively, efficiently, and free of any taint of partisan political bias or person or family favoritism.

##### **C. Organizational Structure**

This section contains policies governing the activities of all CSB employees. It is not intended to supersede the Memorandum of Understanding between Contra Costa County and Public Employees Union, Local One (MoUs), the Personnel Management Regulations (PMRs) or any other policies adopted by the County Board of Supervisors. It establishes standard procedures which are applicable to all programs operated by CSB, irrespective of funding source. Unless otherwise noted, all provisions of the manual apply to each and every employee of CSB. If the requirements of MoUs, PMRs, funding sources, et cetera are less stringent than the provisions of this section, then these provisions will apply. If personnel provisions imposed by the MoUs, PMRs, funding source, et cetera conflicts with the provisions of these policies, then such regulations shall apply.

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The Community Services Director or designee has the authority to identify and interpret regulations which conflict with these policies. Employees may not take it upon themselves to interpret regulations which may permit them or require them to behave in a manner which is inconsistent with the provisions of this policy. If doubt arises, employees must request their supervisors to secure a ruling from the Community Services Director or designee.

In addition to these policies, the MoUs, PMRs, management bulletins, memos, side letters, et cetera regarding personnel policies issued by the County and funding sources shall be considered a part of CSB's personnel policies and procedures whenever applicable. All personnel policies and practices contained herein are established in accordance with current applicable rules and regulations of CSB funding sources and other mandates. All CSB staff members are required to become thoroughly familiar with these policies and adhere to their provisions.

The Community Services Director and senior management are charged with the responsibility for assuring that all provisions of these policies are administered fairly and impartially.

According to Contra Costa County, Personnel Management Regulations, the Executive Director or Department has the authority to act on behalf of the County Board of Supervisors on Certain personnel actions as stipulated throughout the regulations.

#### D. Additional Personnel Policies Relating to Employees of Program Services

##### 1. Criminal Record Clearance (Fingerprinting)

###### i. Live Scan Process

- According to the Head Start Act, 45 CFR 1304.3(a)(18) and California DSS, 101170(f), all employees/adults must be fingerprinted. Failure to obtain clearance free of an exemption or to comply with fingerprinting regulations will result in refusal of employment.
- Applicable employees must be fingerprinted and cleared before their first day of employment. CSB will not employ anyone without an active clearance nor will they hire anyone who has a clearance with an exemption.
- CSB Personnel schedules a Livescan appointment and provides the applicant with a Livescan form to take to their appointment.
- After the Live Scan is completed, the Department of Social Services notifies CSB Personnel Unit of the following clearances via a Letter of Criminal Record Clearance. The following checks are conducted:
  - FBI
  - Child Abuse Index
  - State Department of Justice
- Should a conviction occur while the employee is employed, CSB receives an "Immediate Action Required (IAR)" letter from the Department of Social Services Caregiver Background Check Bureau. In this case:
  - The Community Services Bureau Director determines the appropriate action to be taken based on individual circumstances.
  - If a manager receives an IAR letter, he/she is to notify CSB Personnel Unit immediately. If CSB Personnel Unit receives an IAR letter, they will notify the Manager, Site Supervisor and immediately have the employee removed from the facility. Disciplinary actions may be taken up to and including termination.

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- It is the responsibility of the employee to obtain a waiver form from DSS and submit the waiver. Any employee who obtains a waiver may apply for reinstatement and applications will be considered by personnel. If no waiver is obtained as requested by the Personnel Unit, the employee may be terminated from employment with Contra Costa County.
- Declaration-The State requires that all current/prospective employees must sign a declaration, Criminal Record Statement prior to employment, which reveals any background information that might be detrimental to their employment with CSB. The declaration or Criminal Record statement must list:
  - All pending and prior criminal arrests / charges related to child sexual abuse and their disposition
  - Convictions related to other forms of child abuse / neglect
  - All convictions
- The grantee must review each application for employment individually in order to assess the relevancy of an arrest, a pending criminal charge, or a conviction.
- The declaration may exclude listing of:
  - Any offense, other than the ones related to child abuse and/or child sexual abuse or violent felonies, committed before the prospective employee's 18th birthday which was adjudicated in a juvenile court or under a youth offender law
  - Any conviction the record of which has been expunged under Federal or State law
  - Any conviction set aside under the Federal Youth Corrections Act or similar State authority

#### 2. Emergency Procedures

##### i. Chemical Accident

In case of a shelter-in-place emergency, a manager will notify all affected sites. In this case, all employees are required to follow shelter-in-place protocols.

SHELTER—Go inside a building immediately to avoid exposure to airborne chemicals.

SHUT—Seal all doors and windows/turn off ventilation systems. (Locking doors and windows creates the best seal.) Parents must be informed during orientation that staff is not authorized to release children during a shelter-in-place accident.

LISTEN—Turn on the radio/listen for up-to-date information. Avoid using the telephone unless you have a life-threatening emergency. All sites must have a working radio available at all times.

##### ii. Earthquake Emergency

Duck and cover under a table or desk, crouching on knees with face down and hand covering the back of the head.

Stay clear of outer walls, windows, glass, cabinets, files, or shelves.

Evacuate the building to Assembly Area after counting 100.

- Avoid re-entry into the building.
- Allow the Building Warden to re-enter the building (searching for missing persons, assessing the extent of damage, turning off utilities as needed, and checking for gas leaks).
- Keep clear of overhead wires, poles, buildings, trees, and falling objects if outside.
- Prepare for aftershocks.

##### iii. Fire Emergency

Notify the fire department immediately, giving required information:

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- CSB building, room number, address, and other means of identifying location of the fire
- Description of size / type of fire
- Information regarding any injured people
- The name, telephone number, and extension of the employee reporting
- Evacuate all people from the fire area and close off the fire area using posted emergency routes.
- Report to Assembly Area (consult the Evacuation Plan)
- Use appropriate type of fire extinguisher. If smoke or heat endangers safety, evacuation of the area is required (to allow emergency personnel to handle the situation).

#### iv. Medical Emergency

- Provide appropriate first aid and/or cardiopulmonary resuscitation (CPR).
- Call the Fire Department if advanced first aid is required (911).
- Call an ambulance if appropriate (911).
- Send the injured to either the physical location of his or her choice or to the nearest medical emergency center or hospital. Notify the family of the injured.
- Report injuries to the appropriate supervisor immediately. The supervisor is responsible for notifying Community Care Licensing via telephone within 24 hours and in writing within 7 days.
- If an injury results in death or hospitalization of an employee for over twenty-four hours, notify CSB Personnel and the Workers' Compensation/Safety Coordinator. She/he is responsible to inform the CCC Risk Management and the State Division of Occupational Safety and Health (CAL/OSHA).

### 3. Work-Related Injury and Illness

All County employees who are injured or become ill as a result of their job are covered under Workers' Compensation.

Workers' Compensation is a no-fault insurance plan paid for by the County and supervised by the State. It is a plan where fault does not have to be proven to receive medical expenses and lost wages. If an employee is unable to work because of a work-related injury or illness, (s)he is eligible for benefits. All benefits are determined by the California State Legislature.

#### i. If an employee is injured or becomes ill as a result of her/his job, the following steps should be taken:

- The employee must immediately notify her/his supervisor. All work-related injuries/illnesses, including first-aid, need to be reported
- The supervisor must notify CSB Personnel (the designated Workers' Compensation/Safety Coordinator)
- The supervisor and the employee are to complete the required workers' compensation forms: CCC Supervisor's Occupational Injury or Illness Report Procedures (AK 30 –Part A & B), and Workers' Compensation Claim Form (DWC – 1), as soon as possible
- The supervisor is to submit the completed forms to CSB Personnel (CSB Workers' Compensation Coordinator) by the end of the business day of the injury/illness or by the end of the day (s)he became aware of the injury or the illness; The Supervisor is to fax the first white page of the DWC-1 and parts A & B of the AK-30, Supervisors Report, to the CSB Worker's Compensation/Safety Coordinator at Personnel on the day of the injury and to send the original paperwork via the Interoffice Mail.

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- The CSB Workers' Compensation Safety Coordinator will submit the required documentation to CCC Risk Management Office. County policy requires the documentation to be submitted to Risk Management within 24 hours of the injury/illness
- Injured/ill employees are encouraged to seek immediate medical attention. The CSB Workers' Compensation/Safety Coordinator will provide information on medical facilities that can be visited in case of a work-related injury/illness
- The injured/ill employee may only return to work with a doctor's note stating that employee is cleared to return to work on that date. If the employee is placed on "Off Work" or any modified work status, (s)he must notify her/his supervisor and the CSB Workers' Compensation/Safety Coordinator about her/his status and fax/deliver the appropriate doctor's note to both parties
- Modified work will be assigned only by the CSB Workers' Compensation/Safety Coordinator in coordination with the employee's supervisor if accommodations are viable
- If an employee is ordered for follow-up doctor visits or therapy as a result of a job-related injury or illness, (s)he is required to attend all prescribed visits and furnish Work Status Reports to her/his supervisor and the CSB Workers' Compensation/Safety Coordinator after each visit
- Employees leaving work for appointments connected to work-related injuries/illness are to claim the time off as workers' compensation time (WC) on their time cards
- Doctor bills and hospital expenses related to on the job injuries or illness will be paid directly by the County. If an employee receives a bill that is related to a job-connected injury or illness, (s)he should notify the CSB Workers' Compensation/Safety Coordinator and should not pay the bill.

#### ii. Return-To-Work Program

CSB participates in the Return-To-Work (RTW) Program. It is a plan utilized by Contra Costa County with the main objective to manage the employees' successful and timely return to work after a work related injury. The program facilitates the earliest possible return of an injured employee to meaningful, productive work within the parameters of her/his physical capabilities. If necessary, the program allows for temporary modifications to the employee's job description or position to accommodate the physical restrictions identified by the medical provider. Employees participating in the program are assigned transitional jobs. Two main transitional jobs are available for employees through the RTW program:

- Modified work within the employee's unit – this is usually for on-the-job injured employees who can perform their usual jobs full time or part time with significant accommodations
- Bridge Assignments – these are for employees who cannot perform their usual jobs, but can be assigned to other meaningful jobs. Usually, Bridge Assignments are much broader and employees assigned to them may be placed in any of the EHSD's Bureaus or even other County Departments.

Assigning employees to transitional jobs is facilitated by the CSB RTW Coordinator (Personnel) in collaboration with the employee's supervisor. While in the RTW program, each employee is required to furnish Personnel with Work Status reports after each visit with the Worker's Comp doctor.

Employees with work related injuries benefit from participating in the RTW Program by returning back to work quickly, by continuing to participate in meaningful jobs and maintaining their self-esteem, by the on-the-job hardening, and faster recovery.



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##### 4. Ergonomic Safety and Evaluation

All employees are expected to maintain their work environment and equipment safe and in good repair. Employees are to organize their work space considering basic ergonomic and safety practices such as, easy access/reach of desk equipment, appropriate lighting, use of appropriate equipment, avoidance of forceful lifting, pushing or pulling, prolonged repetitive motions. Employees performing mainly sitting jobs are encouraged to periodically change activities and positions, take small stretch breaks to reduce repeated stress to various parts of the body.

Employees who experience discomfort by using their work equipment or have doctor's recommendation for ergonomic evaluation are to notify their direct supervisor and request evaluation. The supervisor should contact CSB Personnel, the Workers' Compensation/Safety Coordinator and request ergonomic evaluation for the employee. The CSB Workers' Compensation/Safety Coordinator will review the request and arrange for the evaluation.

After the completion of the ergo evaluation, the employee and her/his supervisor will receive a copy of the evaluation report and an Ergonomic Equipment Acknowledgment Form. The employee is to review and keep the copy of the evaluation. Both the employee and the supervisor are to sign the Ergonomic Equipment Acknowledgment Form and return the original to the CSB Workers' Compensation/Safety Coordinator at the Personnel Unit for authorization of the recommended ergonomic equipment.

The CSB Workers' Compensation/Safety Coordinator will work with the CCC Ergo Lab to ensure the appropriate accommodations are made and that the employee is trained on ergonomic and safety practices. Ergonomic Equipment Acknowledgment forms sent by the employees directly to the CCC Ergo Lab without the authorization of the CSB Workers' Compensation/Safety Coordinator will not be accepted by the Ergo Lab and the requested equipment/accommodations will not be provided.

##### 5. Employee Relations

As a part of a team providing services for the benefit of the public, each employee must cooperate with co-workers and supervisors and the public through professionalism and mutual respect in order to set a high standard of work performance. The entire staff of CSB must function as a team. Each employee is required to make a positive contribution in the interest of efficient public service.

Unwillingness or failure to cooperate will not be tolerated and will be cause for disciplinary action.

##### 6. Smoke-Free Environment

CSB will create a smoke-free environment and eliminate exposure to tobacco smoke by children, staff and parents in the Head Start program.

By state regulation, smoking is prohibited at all times in all space utilized by the program. This includes classrooms, staff offices, kitchens, restrooms, parent and staff meeting rooms (used in the evenings as well as during the day), hallways, outdoor play areas, county vehicles and vehicles used for transporting children.

If there is a designated smoking area, it will be located out of the children's sight, and at least 20 feet away from the main entrances, exits and operable windows of the building (California Government Code, Sections 7596-7598). All smoking trash, including butts and matches, will be extinguished and

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disposed of in appropriate containers. Staff is encouraged to wear protective wear, such as a smoke or “smoking jacket” so that when they finish smoking, they can remove it so as to not carry the tobacco chemicals on their clothing into the classrooms or offices.

If a CSB program shares a building with other occupants, staff will take steps to reduce children’s exposure to smoke from other sources in the building by altering traffic patterns or establishing a “smoke-free zone” around the site.

Adults are also prohibited from smoking during group socialization activities, such as field trips, neighborhood walks, and other outdoor activities. The only situation under which this does not apply is during a presentation or field trip related to American Indian cultural customs in which tobacco is utilized.

Educational and wellness activities, such as smoking cessation programs for adults and inclusion of developmentally appropriate activities in health education for children will be developed to assist in carrying out smoke-free policies. Staff and parents are encouraged to call the California Smokers Helpline at 1-800-NO-BUTTS for help in quitting. Smoking cessation programs for adults are available through the program’s collaboration with the WIC Program. Additional information and resources are available by contacting the Comprehensive Services Unit’s Health Services Manager.

#### 8. Drug-Free Work Environment

In Compliance with the Federal Drug-Free Workplace Act 1988, the Contra Costa County Board of supervisors instituted a Drug-Free Workplace Policy (Resolution No. 90/674 from October 16, 1990). The Board is committed to a Drug-Free Workplace because of the inherent dangers to employees who abuse drugs and/or alcohol. According to the Drug-Free Workplace Policy:

- The County prohibits the unlawful manufacture, distribution, dispensing, possession, or use of controlled substance in the workplace, and/or during work hours.
- Any violation of this policy may result in disciplinary action, up to and including termination, or when needed, mandatory participation of the employee in a drug-abuse assistance or rehabilitation program.
- Any employee convicted of any State or Federal criminal drug statute for a violation occurring in the County workplace or on County time, shall report the conviction to their supervisor, department manager or personnel officer no later than five (5) days after such conviction.

CSB strives to maintain a workplace that is reflective of the County Smoke-Free and Drug-Free Workplace Environment Policy. CSB employees are expected to conduct themselves responsibly. Upon report that an employee appears to be under the influence of alcohol or illegal drugs, the employee’s supervisor must notify the Assistant Director or the Division Manager, or the Personnel Administrator. One of these CSB Senior Managers and the employee’s supervisor will immediately meet with the employee and determine if she/he is under the influence of alcohol or illegal drugs. If they determine that the employee is under the influence, the employee shall be instructed to immediately leave the workplace. An employee under the influence of alcohol or illegal drugs is to report back to work sober and clean of drugs at least one day after the incident. The employee has the option to claim unpaid time or to use her/his own accruals.

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##### 8. Solicitation of Goods

Contra Costa County prohibits the solicitation of goods on any County property. Goods for sale will not be accepted, bought, or sold at any Grantee office or CSB center. This applies to commercial activities only. This does not apply to parent fundraising. Parent fundraising activities are reviewed and approved by the Policy Council and the Bureau Director.

##### 9. CSB Telephone Usage Policy

There may be times when personal telephone calls must be made or received during working hours. Personal telephone calls must be kept to a minimum, and may not interfere with classroom or business activities. CSB expects employees to make these calls during break or lunch periods. No long distance calls can be made on CSB telephones. Personal cellular phone usage, unless in an emergency situation, is prohibited in the classroom and business offices at all times.

##### 10. Food in the Classroom

Food for individual staff consumption is not allowed in the classroom unless the staff member is eating a meal or snack with the children. Any other food and drink must be consumed by the staff member during break or lunchtime, away from the classroom.

##### E. Analysis of Staff Needs

The needs of individual staff members for assistance and training, as well as the training tools are analyzed regularly to ensure optimal performance and efficiency of services. The Community Services Director or designee assesses staff needs by considering levels of responsibility, experience, performance of assigned tasks, and other relevant factors. On the basis of such assessment, the Community Services Director or designee determines the delivery of needed assistance after considering funding limitations. Assessment of staff needs is performed annually or as needed.

##### F. Recruitment and Selection

It is the policy of CSB to employ qualified, capable, and responsible personnel who are of good character and reputation. Consideration will be given to provide employment opportunities to parents of enrolled Head Start and Early Head Start children. CSB will follow the guidelines for recruitment as required by the MoUs, PMRs, Management Bulletins and other provisions established by the County and funding sources.

CSB shall make certain that its recruiting procedures afford adequate opportunity for the hiring and career advancement of its parents and staff. The attainment of a high level of education may be important to performance in certain positions; however, formal educational qualifications, unless required by state, local or federal law, where practical, shall be made discretionary rather than required for employment and advancement. Head Start staff will be required to meet the educational requirement as established in the Head Start Act and/or Head Start Performance Standards.

The Policy Council will approve or disapprove all Head Start and Early Head Start employees prior to employment including the Head Start Director, Director of Human Resources, Chief Fiscal Officer and any other person in an equivalent position in CSB.

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#### G. Hiring of CSB Staff

A position will not be filled until concurrence is reached between the Community Services Director and the Policy Council. The following steps are taken when hiring staff:

- Following the approved Contra Costa County Personnel Management Regulations, the Personnel Unit will work with the County Human Resources Department, as required, to publicly announce a position for employment.
- Upon receipt of applications, the Human Resources Department or designee will screen the applications to ensure that applicants meet the minimum requirements for filling the position.
- The Human Resources Department shall designate selection procedures that may be written tests, oral tests, physical agility tests, assessment centers, training and experience evaluations or other selection procedures, or any combination of these. Selection procedures shall be practical and job related, constructed to sample the knowledge, skills, abilities and / or personal attributes required for successful job performance.
- When, after public announcement, the number of accepted candidates is equal to or less than the number necessary for a full certification, after consulting with the Community Services Director, the Personnel Unit may waive competitive testing and certify the applicants without rank or score. Under these circumstances, the Community Services Director will appoint a Qualifications Appraisal Board within the Community Services Bureau to conduct oral interviews of the applicants.
- In examinations where an oral interview is to be conducted as part of the total examination, the Personnel Unit shall appoint two or more qualified staff, as well as a Head Start Parent to conduct oral interviews.
- After completion of the examination process, the Personnel Unit will certify to the Bureau Director in rank order, according to the overall scores in the examination process, the names, addresses and phone numbers of the persons entitled to certification.
- The designated interview panel consisting of staff and parents will interview the prospective employee to determine:
  - If the individual will be able to work effectively with parents and/or children in a positive, supportive manner;
  - If the individual will be able to work with staff in a cooperative, team-like manner;
  - The individual's commitment to low income families and the community;
  - The experience the individual has working with or the understanding the individual has of culturally diverse groups;
  - Personal characteristics such as warmth, strength, flexibility, understanding, empathy, ability to respond quickly under stress;
  - The ability of the individual to work within systems;
  - The individual's respect for authority and ability to work under supervision; and
  - Any other special skills such as speaking, reading, or writing in other languages.
- After the interview, the Personnel Unit will conduct personal and employment reference checks on all potential new hires prior to names being recommended to the Community Services Director or designee and Policy Council.
- After the interview, staff will submit a recommendation to the Policy Council that will include the prospective employee's suitability for employment in the position being considered.

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- The name and qualifications of the candidate/s will be considered for approval by the Policy Council. Only after the candidate has been approved for employment by the Policy Council may the candidate be officially employed and report for work.
- No Head Start funds may be obligated for payment of salary to any permanent employee not previously approved by the Policy Council.
- All newly hired employees will serve a probationary period as outlined in Section 9 of the Personnel Management Regulations and Section 20 of the Memorandum of Understanding between Contra Costa County and Public Employees Union, Local One.

#### H. Reject from Probation

When an employee is being separated from employment while on probation, a CSB Manager or Assistant Director will serve a copy of a Project Employee Probation Report (CSD-50) to the employee and at that time shall ask for any keys and/or employee badges they may have to the facility.

#### I. 9/80 Work Schedule

A 9/80 work schedule has been established for a period determined by the Community Services Bureau Director. The schedule is available for Senior Management and some management and middle management classifications. There may be some job functions or classifications that are not feasible for participation in the 9/80 schedule. Additionally, probationary employees are not eligible for a 9/80 schedule until successfully completing their probationary period. Furthermore, temporary employees are excluded from the 9/80 work schedule. The Director of Community Services Bureau has the authority to determine the exclusion or the participation of particular jobs or classifications in the 9/80 shift.

The 9/80 schedule is voluntary. An employee who participates in the 9/80 schedule is not obligated to maintain it except for a two-week cycle from the beginning of the 9/80 shift. If an employee opts out of the schedule, she/he may opt back in once in the following three-month period. Work expectations do not change as a result of an employee's participation in a 9/80 schedule. If her/his performance deteriorates due to participation in the 9/80 schedule, the employee may be returned to a regular schedule. This action requires the approval of the Community Services Director or designee.

Employees requesting participation in the 9/80 work schedule should complete a Participation Request form that can be obtained from CSB Personnel Unit. The employees are to submit the completed form to their supervisor. Approval is granted by the Community Services Director or designee with consideration for adequate coverage of the Department and the individual units. A copy of the approved request should be submitted to the Fiscal unit and to CSB Personnel to be filed in the employee's personnel file.

Employees participating in a 9/80 schedule must take a day off during the two-week pay period. During the period, the employees work one 8 hour day and 9 hours each day thereafter. The total work hours for the pay period should equal 80. If a holiday falls on the employee's day off, the employee should take her/his 9/80 day within the pay period before or after the holiday. If a holiday falls on a work day, the employee must use 1 hour accruals to make the required 9-hour work day since a holiday is 8 hours.

#### 9/80 Work Schedule For Employees Temporary Disabled Due To Industrial Injury

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In accordance with the Memorandum of the Office of the County Administrator, dated November 23, 2009, and the Contra Costa County's Return to Work Policy for Industrial Injury or Illness, Section VI, A. Restrictive Duty, the 9/80 or flexible work schedule for every employee who has sustained industrial injuries, who has an accepted worker's compensation claim and is temporarily disabled from working full time will be temporarily revoked. Upon release to full time work by the treating physician and only if the employee is able to work more than 8 hours per day, the 9/80 or flexible schedule may be resumed.

#### J. Separation

Employees are dismissed, suspended, and demoted in accordance with Contra Costa County, Personnel Management Regulations Part 11, Separation and Memorandum of Understanding between Contra Costa County and the Labor Unions.

#### K. Resignation

A resignation letter from the employee shall be made in writing and submitted to the employee's immediate supervisor and/or Assistant Director. The original letter should be sent to Personnel Unit.

#### L. Nepotism

No immediate family member of a supervisor shall work directly under his/her supervision. Immediate family member shall be defined as spouse, natural child, stepchild, foster child, child in employee's custody, legally adopted child, legal guardianship, foreign adoption, tribal adoption, disabled adult child, domestic partner, and child of domestic partner.

#### M. Enrolled Children of CSB Employees

To maintain an equitable educational environment at our child care centers, CSB requires that every effort will be made to place the enrolled child of a CSB employee at facility that is different from the employee's worksite. In NO case will an employee's child be placed in the employee's classroom. CSB employees' children may be enrolled in the program only if eligible.

#### N. Staff Qualifications – General

All site-based staff must meet the minimum qualifications of the State Department of Education matrix and the Early Head Start and Head Start staff qualification requirements as stated in Sections 645(A) and 648(A) & (B) of the 2007 Head Start Act. This includes Assistant Directors, Site Supervisors, Infant/Toddler Master Teachers, Master Teachers, Infant/Toddler Teachers, Teachers, Infant/Toddler Associate Teachers, and Associate Teachers.

It is the employee's responsibility to maintain and provide to Personnel and their Site Supervisor a current Permit or Temporary Certificate issued by the Office of Education and to meet the Head Start and Early Head Start staff qualification requirements by the established timelines.

In addition, all staff must meet the minimum qualifications as stated in the Community Services Bureau Job Descriptions and as set forth by state and federal regulations. Should an employee fail to meet the minimum qualification of his or her job while employed with Contra Costa County, he or she will be dismissed as stipulated in the Personnel Management Regulations, Part 1108 and the Public Employees Union, Local One MoU, Section 24.2.

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##### O. Qualification Requirements for Positions

Minimum qualification requirements are set for all Contra Costa County Community Services Bureau positions.

The Personnel Director, in conjunction with the Assistant Directors and/or other managers, drafts minimum qualification requirements for certain positions. These are received by Policy Council for input and review.

Where minimum qualification requirements affect health, education, food service, or other component positions, the draft is received by the appropriate committee for input and review.

The draft is then submitted to the Community Services Director for review and approval. After Community Services Director's approval, the draft is sent to the CSB Personnel Unit for further processing.

Managers receive copies of job descriptions and qualifications adopted by Human Resources. Preference will be given to former and current parents who meet the qualifications as set forth in the job descriptions.

All families must be able to perform the Essential Functions as set forth by the Department at all times (please refer to Essential Functions documentation). If staff is unable to perform the functions at any time during employment, the Department will try to accommodate needs; however there are some instances where this may not be possible.

New Hires: Before a new employee / volunteer who will work directly with the families and children begin work, (s)he must have completed the following:

- Complete health screening by a physician including a tuberculosis test (prior to employment) or a written statement from a doctor stating a TB test is not required.
- Fingerprint / criminal record clearance without any exemptions.

##### P. Classroom Staffing and Ratios and Comprehensive Services Staffing

###### 1. Classroom Staffing and Ratios

Each classroom maintains the adult/child ratios required by Title V: For children ages 3-5, 1:8; for toddlers, 1:4; for infants 1:3. Children under three years of age may not be in groups with more than eight children. Each full-day classroom is staffed with a qualified Teacher and 2 Associate Teachers. If this is not possible, an Associate Teacher may be substituted for a Teacher and a Teacher Assistant Trainee for an Associate. Each part-day classroom is staffed with two Teachers and Teacher Assistant Trainees.

CSB center classrooms will have no more than 20 children enrolled at any time, except in State Preschool classrooms where there may be 24 children enrolled at one time and in Head Start classrooms with an approved 24-waiver from the Administration for Children and Families (ACF).

The Supervisor must ensure that adult/child ratios are maintained at all times. If a staff member is absent, the Site Supervisor must do the following:

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- Assess the staffing needs of the classroom based on the number of children present and the staff/child ratios in other classrooms at the site.
- Request the services of a parent volunteer.
- If a substitute is needed, the Supervisor must contact the clerk who coordinates the substitutes.

All staff inside the classroom and outside in the yard are responsible to ensure that all children are visible at all times and that they are being supervised at every moment.

- Whenever the classroom is outside on the yard or on a field trip, all members of the teaching team must be present to ensure the health and safety of children. No scheduled prep time or breaks are permitted during times scheduled outside of the classroom.

Teaching staff supervise infants and toddlers/twos by sight and sound at all times. When infants and toddlers/twos are sleeping, mirrors, video or sound monitors may be used to augment supervision in sleeping areas, but such monitors may not be relied on in lieu of direct visual and auditory supervision. Sides of cribs are checked to ensure that they are up and locked.

Teachers, assistant teachers, or teacher aides are aware of, and positioned so they can hear and see any sleeping children for whom they are responsible, especially when they are actively engaged with children who are awake.

CSB management ensures that the staff reflects the cultures and languages of the children and families served in the program whenever possible. If this is not possible, the Supervisor must contact the main office to obtain the services of a translator or the CSB Language Line in order to communicate with families.

#### 2. Comprehensive Services

The program is supported at all times by the following personnel:

A health services content area expert who is trained and experienced in public health, nursing, health education, maternal and child health, or health administration. Additionally, when a health procedure must only be by a licensed or certified health professional, the agency will ensure that this requirement is met.

- A nutrition services content area expert who is a registered dietitian or nutritionist.
- A mental health services content area expert who is a licensed or certified mental health professional with experience and expertise in serving young children and their families.
- A family and community partnership or parent involvement content area expert who is trained and experienced in field(s) related to social, human, or family services and who is skilled in assisting parents of young children in advocating and decision-making for their families.
- A disabilities services content area expert who is trained and experienced in securing and individualizing needed services for children with disabilities.

#### Q. Site Administration

Each site that receives State Department of Education funding must have a full time Site Supervisor housed in the building. For sites with more than nine classrooms, an additional Site Supervisor will be housed at the building. This Supervisor may be counted in the ratio if working directly with the children. Sites with infant/toddler care must have a Site Supervisor who, in addition to the regular qualifications, has completed 3 units of Infant and Toddler Care.



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As an entity operating child care and development programs, providing direct services to children at two or more sites, CSB shall employ Assistant Directors that meet the minimum qualifications of a Program Director as outlined in the State Department of Education matrix.

##### R. Teacher Assistant Trainees (TATs)

CSB may employ Teacher Assistant Trainees (TATs) through the County or the ROP program. The following applies for all teaching staff with less than 12 units in Early Childhood Education courses:

- The TAT must be at least 18 years of age UNLESS: (S)he has a high school diploma or equivalent or a part of the ROP or other occupational program.
- The TAT may never be alone with the children – the Teacher/Associate must always supervise the interactions with the children.
- If the TAT has enrolled in or completed at least 6 units in Early Childhood Education, (s)he may supervise children at nap time and escort children to the bathroom without the direct supervision of a Teacher/Associate.

In order to support the professional development and career advancement of Teacher Assistant Trainees, CSB will afford a select number, appropriate to funding availability, of Teacher Assistant Trainees the opportunity to participate in the Teacher Assistant Trainee Program, as outlined in 31(a)(4).b of this section.

##### S. Volunteers

CSB encourages volunteers from the community whenever possible. Each year, program staff recruits volunteers through flyers and other announcements. Before a volunteer begins in the program, (s)he must go through the ASA III responsible for volunteer coordination. This ensures that the volunteer has fulfilled the necessary requirements prior to being given an assignment. All potential volunteers must complete a Volunteer Application. If the volunteer works more than sixteen (16) hours at one facility s/he must obtain fingerprint clearance. All volunteers, regardless of the number of hours they are planning to work, must submit a statement of good health. The statement could be issued by a doctor, a medical professional or be a self-disclosure signed by the volunteer. Each volunteer must undergo a TB risk assessment and if at risk submit a negative TB test result at their own cost prior to volunteering. The statement of good health and the TB result should be provided to the ASA III and kept on file by the Site Supervisor as outlined in California DSS section 101170(b), certain volunteers may be exempt from the requirement to submit fingerprints.

Once fingerprint and TB clearance is received, the volunteer coordinator will contact site supervisors to see if there is an appropriate volunteer opportunity at their site. The volunteer coordinator will forward all paperwork to the site supervisor for their Licensing and Health file. The Site Supervisor or designee will review the Volunteer Policy with the volunteer and have him/her sign the Standards of Conduct, Certification Statement and all other Licensing forms. Only then will CSB make the final volunteering assignment which includes: start date, end date, and number of days and hours per week. The volunteer enters hours worked daily on an in-kind form for the whole month. At the end of the month, the volunteer submits the completed in-kind reporting form to the assigned volunteer supervisor to have them sign their approval and to make a copy of form for the volunteer. The volunteer's supervisor or designee submits the in-kind records monthly to the cluster clerk for entry into the In-Kind Log in the shared drive.

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##### T. Standards of Conduct

CSB ensures that all staff, consultants, and volunteers will observe the program's Standards of Conduct. All employees must sign the Standards of Conduct annually and the original will be maintained in their personnel file.

Every employee, consultant and volunteer involved in the Program, must subscribe to the following:

- Respect and promote the unique identity of each child/family.
- Refrain from stereotyping on the basis of gender, race, ethnicity, culture, religion, or disability.
- Follow program confidentiality policies concerning information about children, families, and other staff members.
- Never leave a child alone/unsupervised while under their care.
- Use positive methods of child guidance.
- Never engage in corporal punishment, emotional/physical abuse, humiliation, intimidation, ridicule, coercion or threats.
- Never prohibit a child from attending religious services outside the agency.
- Never use methods of discipline that involve:
  - Isolation
  - The use of food as punishment or reward
  - The denial of basic needs
- Provide a safe, healthy and accommodating environment that meets the children's needs.

Every employee engaged in the award/administration of contracts or other financial awards will sign a statement to the effect that they will not solicit or accept personal gratuities, favors, or anything of significant monetary value from contractors or potential contractors. Additionally, employees will not engage in any form of picketing, protest, or other direct action that is in violation of law and must comply with Contra Costa County Administrative Bulletin 405.4.

If a staff member, consultant, or volunteer violates any of the above Standards of Conduct, the following disciplinary steps may be followed:

- Conference(s) with the individual's supervisor to discuss implications of their behavior, and corrective action plans.
- Further training for the individual may be provided.
- A letter of Coaching and Counseling may be sent to the individual, detailing the seriousness of their violation(s) of the Standards of Conduct.
- If the letter of Coaching and Counseling is ignored, the employee may receive further disciplinary action.
- If the behavior of the individual does not change, disciplinary measures may be applied, such as Letter of Reprimand, suspension, and/or termination of employment. In some cases, termination may be the first discipline.

##### U. Professional Behavior and Attire

To ensure the health and safety of enrolled children and to foster professionalism at our child care centers and offices, staff is expected to adhere to the following dress code.

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Staff at child care centers, whether direct caregivers or support staff, must wear clean, neat, comfortable clothing and footwear suitable for the daily tasks of significant bending, walking, lifting, sitting and running. Central Kitchen staff must adhere to policies that specifically pertain to hygiene and attire.

- Professional Behavior and Attire

As representatives of County government, it is important that staff adhere to high standards of professional behavior at all times. Public and client perceptions of our staff and services can be significantly affected by a single negative interaction with any employee in our department.

As professionals, staff members need to refrain from excessively negative behavior in all interactions with their colleagues, in meetings and training sessions, with clients, or the public. Such behavior can over time create a hostile work environment, be experienced as harassment, interfere with client access to services, or violate client rights.

Examples of excessively negative behavior can include: rudeness, being overly brusque and impatient, showing contempt for others, being excessively critical and fault-finding, demeaning and sarcastic, disrespectful, slamming doors or files, raised voices, use of profanities, sexual and national origin harassment and discrimination. There may also be other behaviors that create a hostile or extremely unpleasant environment for staff or clients.

Staff who engages in such behaviors will receive counseling and coaching from their supervisors. Continued engagement in unprofessional behavior after counseling and coaching has been provided may result in disciplinary action.

- CSB Standards for Appropriate Attire

- Shoes: heel height to a maximum of 1 inch, closed toe and heel required
- Shorts: must reach the knee, transparent fabric is unacceptable.
- Tops: prohibited are tops that expose the midriff, low cut necklines, backless, strapless, halter or tube tops, spaghetti straps, or any transparent material.
- Skirts/dresses: hem must be knee length or longer; fabric may not be transparent.
- Pants: hems of pants cannot drag on the floor, and waistband may hit no lower than the top of the hip. Transparent fabric is unacceptable.
- Jewelry: Earrings must be shorter than 1 inch from lobe, rings no higher than ¼ inch from shank. Any jewelry that may pose a hazard to children or staff may not be worn to work.
- Any articles of clothing with statements deemed by CSB to be political, offensive, or inappropriate are prohibited. The display of 'gang colors' is prohibited.
- Administrative staff shall dress in a manner that reflects a positive public image. In general, appropriate business attire will include well maintained clothing, as described above. 'Casual Friday' attire is acceptable, but must incorporate the above standards. Administrative staff may wear blue jeans on Casual Friday but may not be worn with sneakers, thong shoes, or T-shirts.

#### V. Non-Discrimination and Anti-Harassment Policies

It is the policy of Contra Costa County to maintain a work, service and program environment free of discrimination, harassment, or intimidation based on sex, gender, age, race, religion, national origin, ancestry marital status, sexual orientation, disability or medical condition. These policies are also

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mandated by state and federal law. It is the policy of the Community Services Bureau to comply with all applicable state and federal statutes and regulations prohibiting discrimination in employment, contracting, buildings, facilities, and provision of services. All employees should be familiar with all of the provisions in the County's "Notice of County Non-Discrimination and Anti-Harassment Policies" and the procedures for "Reporting Discrimination, Harassment, and Retaliation".

In addition to policies and regulations which prohibit harassment on the job on the basis of one's membership in one of the protected classes as well as all forms of sexual harassment, please note that the County policy also states that:

- "Employees are entitled to, and will be provided with, a workplace environment which is free from harassment...All employees are individually responsible for conducting themselves in ways that ensure others are able to work in an atmosphere free of discrimination, harassment or intimidation...Each employee has a duty to report incidents of unlawful discrimination and harassment. Retaliation for reporting discrimination or harassment or participating in an investigation of a discrimination claim is both unlawful and against County policy."

Supervisors have an affirmative and legal duty and responsibility to report all allegations of sexual and other forms of harassment or discrimination to their managers or supervisors. The Employment and Human Services Department will fully comply with these policies and will not tolerate discrimination, harassment, or intimidation in any form. Reports of violations of these policies will be promptly investigated and appropriate disciplinary action taken if warranted. This policy also includes more subtle forms of harassment, such as threats, name-calling, and use of slurs, innuendo, or misrepresentation of actions or intent to damage an employee's reputation.

#### W. Whistleblowers are Protected

Community Services Bureau adheres to the California Whistleblower Protection Act (Government Code Sections 8547-8547.13) and EHSD Policy against Retaliation. It is the public policy of the State of California to encourage employees to report or "blow the whistle" to an appropriate government or law enforcement agency when they have reason to believe their employer is violating a state or federal statute, or violating or not complying with a state or federal rule or regulation. These violations may include fraud, waste, abuse, unnecessary government spending, an unsafe or unhealthy employer practices.

A "whistleblower" is an employee afforded with the following protections:

1. An employer may not make, adopt, or enforce any rule, regulation, or policy preventing an employee from being a whistleblower.
2. An employer may not retaliate against an employee who is a whistleblower.
3. An employer may not retaliate against an employee for refusing to participate in an activity that would result in a violation of a state or federal statute, or a violation or noncompliance with a state or federal rule or regulation.
4. An employer may not retaliate against an employee for having exercised his or her rights as a whistleblower in any former employment.

Information regarding possible violations of state or federal statutes, rules, or regulations, or violations of fiduciary responsibilities should be reported by calling the California State Attorney General's Whistleblower Hotline at 1-800-952-5225.

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A copy of this Labor Code and how to report improper acts is posted at each CSB center.

##### X. Protocol for Tracking Staff Absences

Consistent staff attendance is critical to the operation of quality child development centers. To maintain our daily staffing levels so that our work is completed effectively and efficiently it is necessary to keep accurate account of the use of these benefits.

Use of vacation and personal leave accruals is by mutual agreement between the employee and the supervisor. Request for use of this time must be made and approved in advance using the form provided by CSB.

For employees who do not have pre-approved absence from work, each Site Supervisor is required to maintain a daily employee call-in log to record employee absences that were not pre-approved. Employees calling off of their shift must do so by 6:00am on the day of the absence. For consecutive absences, employees must notify their supervisor by 3:00pm of the day prior. If no communication between the employee and supervisor takes place during the first day of absence it is expected that the employee will be present for their shift on the next business day. The employee is required to provide the following information when calling in: Name, date of the absence, job classification, shift, time of the call, reason for not reporting to work.

Supervisors are to track absences on the monthly Staff Absentee Tracking log that is provided in an Excel workbook. Assistant Directors are to review monthly Staff Absentee Tracking logs for analysis of staffing patterns, site needs for substitutes, etc.

##### Y. Family Medical Leave Act (FMLA)

CSB provides coverage under the Family Medical Leave Act (FMLA). Eligible employees can receive up to 18 weeks unpaid, job-protected leave in any 12 months period. An “eligible” employee is an employee who had work for his/her employer for at least a year and had worked a minimum of 1,250 hrs. and meets any of the qualifying reasons listed below:

- The birth of a child or placement of a child with the employee for adoption or foster care
- The employee’s own serious health condition
- The employee’s need to care for her/his spouse, child, parent, due to his/her serious health condition
- The employee is the spouse, son/daughter, parent, next of kin of a service member with a serious injury or illness (in this case the FMLA may be up to 26 weeks in a single 12 month period)
- Qualifying emergency arising out of the fact that the employee’s spouse, son/daughter, parent is on active duty or call to active duty status in support of a contingency operation as a member of the National Guard or Reserves

Employees needing to take FMLA are required to notify their supervisor and Personnel, and submit a medical certification or appropriate document/s issued by a court, law/enforcement agency or a military service entity showing need for the employee to take time from work. Medical certification has to be provided on CCC Certification of Health Care Provider Form. This form can be obtained from the CSB Personnel Unit. The employee is required to submit the completed and signed by his/her doctor

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document within 15 calendar days of receiving the form from Personnel. The CSB FMLA Coordinator will provide the employee with official letter approving/disapproving the FMLA and information on the employee's benefits and rights while away of work.

If a supervisor is aware that an employee is off work due to a condition qualifying under the FMLA, she/he should notify CSB Personnel on behalf of the employee. Personnel will contact the employee and will provide information on his/her rights under the FMLA.

While on FMLA, an employee may be eligible for Temporary Disability Benefits or Paid Family Leave. The employee is to make personal decision if (s)he wants to take advantage of these benefits. Employees are encouraged to contact CCC Benefits Unit at (925) 335-1746 for specific information regarding their benefits during time off work. While on FMLA, employees may choose to use their accruals. In this case, they are to contact their payroll clerk and make specific arrangements for the use of their accruals.

#### Z. Confidentiality

As public employees, CSB is governed by numerous federal, state, and county regulations that are designed to ensure that public resources are being administered in an ethical manner and that the right of both employees and the public CSB serves are respected and honored. These include regulations that ensure that the rights of individual employees are respected to work in an environment that is free of discrimination, intimidation, hostility, or retaliation. CSB department's mission to serve the most vulnerable members of the community also requires even higher standards of professional conduct to ensure that rights are respected and that there will be no cause of additional harm and suffering.

Knowing what these myriad regulations are and understanding their relationships to each other can be confusing. The purpose of this policy is to update and summarize the major policies that govern employee conduct. References will be made to other policy documents that contain the more detailed provisions.

These policies will be reviewed with all existing employees and will be presented to and discussed with all new employees and temporary staff at the time of their orientation. New employees will sign a statement that certifies that they have received and read these Standards of Conduct.

1. General Policies-Policies and procedures in this matter bind CSB employees who have access to confidential information. The policy is:

- No information about a child or family is to be released without written, parental informed consent if the material is personally identifiable.
- "Personally identifiable" information is defined as information about a child or family that would make it possible to identify the child or family with reasonable certainty. Such information includes:
  - The child's name, address, telephone number
  - Medical record
  - Social Security number
  - Any other data that can readily identify the child or family.

When the child's name is attached to any of the following, that information is considered confidential:

- Specific educational/medical screening
- Diagnostic data

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- Disability
- Categorical diagnosis
- Child's functional assessment
- Family needs assessment
- Home visit reports
- Progress reports

#### 2. Confidentiality Procedure

All records containing information pertaining to a child and/or family must be kept in a locked file. The locked file should be maintained at each center location, and the Site Supervisor shall designate a staff member to be responsible for the key.

A list of individuals authorized to review files must be available at every center. Any individual not on the list, but requesting access to files must be approved by the lead Teacher/Site Supervisor prior to release of files.

Please refer to Record Keeping and Reporting Section for protocols for file review.

An Individual Access Log must be kept in each file, and any individual working with/reviewing/monitoring the file must sign his/her name, date, and reason for accessing the file.

Files or papers containing confidential material regarding a family must not be left on desks, tables, or other areas where others may have access to them. After current business concerning a file is completed, the file must be returned to the file cabinet, and the cabinet locked.

Discussions of family problems or situations are to be held only with those staff members working directly with the family. Information should be shared only if it is relevant to that staff member in assisting the family. The normal mode of information sharing is the Case Conference/Case Management. The following must be followed:

- Problems of one family must not be discussed with another family.
- Family situations/problems must not be discussed in the presence of parents, children, or visitors at the centers or division office.
- Written information regarding families must not be shared with any community agency without express prior written authorization from the family.
- After a child's participation in the program has ended, no records of home visits, Case Conferences/Case Management, IEP's or other confidential reports are to be forwarded to any school without prior written authorization from the parent(s).
- Prior to using children's photographs outside the program or allowing children to participate in research, parents' written permission must be secured.

#### 3. Parent Access to Family Records

The following protocols are followed with regards to family records:

- Parents have full review / access rights to information regarding their children and themselves.
- CSB has an obligation to explain to parents any information in the records that pertains to the child/family.

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- Parents have the right, after reviewing their child's records, to have them amended or corrected. The request can be written or verbal; the Site Supervisor must approve it.
- If the parents cannot come to an agreement with the Comprehensive Services team/Site Supervisor, then all explanations and requests for change must be kept with, and become part of, the child's permanent record.
- Parents may obtain from the Site Supervisor, upon written request, a list of locations of all personally identifiable information kept by CSB.

##### AA. Staff Performance Appraisals

1. A Uniform Service Rating System includes provision for periodic rating of employees' performance for the purposes of:

- Promotion
- Transfer
- Demotion
- Termination
- Salary adjustment
- Re-hiring
- Recommendation to future employers
- Performance improvement

Every employee is evaluated within the first six months of employment, in accordance with Contra Costa County probationary requirements. A formal, written review of the employee is completed annually by the immediate supervisor.

In the process of formal evaluation of the employees, CSB utilizes also peer feedback evaluation and self evaluation. The information collected through the feedback evaluation tool is analyzed and summarized by the supervisor and included in the employee's Performance Evaluation. The employee is given the opportunity to evaluate his/her Professional Goals and submit the self evaluation form to his/her supervisor before the Performance Evaluation meeting. The employee's self evaluation is included in the Performance Evaluation.

The initial six-month period is used as the final phase of the examination process. It is utilized by the appointing authority for effective adjustment of new employees, and for release of employees whose performance is unsatisfactory. Ongoing evaluation continues throughout employment.

(For more information on the probationary period, see "Personnel Management Regulations, "Part 9, Sections 901 and 902, pages 9-10.)

Performance Evaluation Schedules (due dates) are tracked monthly by the Personnel Unit and notifications are given directly to the immediate supervisors as well as the 2nd line supervisor and the Bureau Director. The immediate supervisor is also notified via the COPA/CLOUDS electronic system.

##### 2. When Completing Employee Evaluations

The immediate supervisor rates an individual employee on work performance, efficiency, dependability, and adaptability. Step ratings are made in a formal report by the immediate supervisor (responsible for



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the work of the employee being rated) for each employee at the end of the probationary period, and at the end of the first year of employment in the job occupied (and annually thereafter).

In completing the Performance Evaluation for each employee the supervisor takes in consideration the feedback information received from the employee's peers, as well as, the self evaluation completed by the employee. At least two weeks before completing the employee's evaluation, the supervisor will ask 2-3 employees working closely and familiar with the employee to complete the appropriate feedback tool. The supervisor will summarize and analyze the results and include them in the employees review. Prior to the meeting with the employee, the supervisor will also ask the employee to evaluate his/her performance in the area of Professional Goals. The employee self-evaluation will be reviewed at the time of the Performance Evaluation meeting and included with the Performance Evaluation. Evaluations are filed in the employee's personnel records. The formal report becomes a part of the employee's permanent personnel record.

An employee who receives an unsatisfactory rating may be ineligible for a higher pay or job rating until a satisfactory rating has been received.

An employee may be reassigned, demoted, or discharged for receiving an unsatisfactory rating. Both the employee and supervisor may review and discuss his/her performance and service rating, as well as their goals. The employee may review a step rating (as soon as possible) after the supervisor prepares the rating, but unauthorized persons may not see the rating. After discussion, the employee must sign the rating form.

Each employee shall receive a copy of his/her rating.

The primary functions of supervisory personnel are: 1) guidance, and 2) improvement of the operation. Each supervisory visit shall be a positive approach to improvement, and add to the employee's contribution to the department.

In accordance with section 648(A)(f) of the Head Start Act, staff and supervisors will collaboratively complete a Professional Development Plan that connects the employee's professional goals to training and educational programs and/or resources that support attainment of such goals. Each plan will clearly outline high quality activities that will improve the knowledge and skills of staff as relevant to their roles and functions in a manner that will improve delivery of program services to enrolled children and families. Supervisors shall ensure that the plans are regularly evaluated for their impact on teacher and staff effectiveness. Professional Development Plans are part of the performance evaluation process and must be submitted with the completed evaluation tool.

#### 3. Supervisor's Approval

Before evaluations are reviewed with employees, they must be approved by the second level supervisor. The supervisor's supervisor or designee reviews step ratings. That reviewing official must:

- Approve or disapprove the service rating
- Change the service rating, without formal appeal procedures, when in the interest of sound administration
- Discuss the rating with the employee
- Upon request of the employee, provide an impartial review of the service rating.

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##### 4. Appealing a Performance Evaluation

If the employee is dissatisfied with the review/decision, the employee may appeal in writing (within ten days) to the CSB Director for an impartial review of their service rating. The Bureau's Director shall render a written decision, sustaining or modifying the rating to the employee within ten days following a hearing.

If the employee is dissatisfied with the decision of the Community Services Director, the employee may appeal in writing (within ten days) the decision to the local authority for a review. This authority reviews the appeal, rating, and Community Services Director's decision, and renders (in writing) a decision to the employee (within ten days).

Policy Council must be involved in the decision if a recommendation to terminate an employee is given. Policy Council must approve the termination, in accordance with CSB regulations.

##### BB. Chronological Supervision and Filing System

Chronological Supervision is a management and record-keeping system that organizes and facilitates the tasks of supervision, staff development, and progressive discipline. It is based on the concept that all employees are trained and supervised over a chronological period of time. Since this training and supervision occurs over an indefinite time period, the documentation of these activities should be filed in the chronological order that they happened. Chronological supervision supports non-discriminatory documentation of employee professional growth and performance, increases management accountability, and contributes to personal and organizational development. Chronological Supervision files will contain all non-disciplinary correspondence and documents pertaining to the supervision of subordinate employees. Examples of mentoring and supervision include, but are not limited to recognition for excellent and/or consistent performance of assigned tasks; written instructions for improving job functioning with follow-up of monitoring activities; and documentation of meetings held with employees.

Each site will maintain a site Chronological and Supervision File. If a staff person's site assignment changes, Site Supervisors are responsible for transferring the employee's Chronological and Supervision File to the new assigned site.

##### CC. Staff and Volunteer Health

###### 1. Volunteer Health

In accordance with California Care Licensing Regulations, all volunteers (regardless of the number of hours volunteering) must sign and date form CSB232-Volunteer Health Statement (See Forms CSB232), indicating that they are in good health and pose no threat to the health and safety of the staff and children of the program. All volunteers must provide proof of a negative TB test or negative chest x-ray, certified by a health care professional. TB tests are not required for visiting experts.

The test must be administered and the results documented by an authorized medical provider. CSB will help in obtaining a TB test with our LVN. Also, provide all potential volunteers with information regarding the latest schedule for the immunization clinics throughout the county. Call 1-800-246-2494 for clinic times and locations. The cost is approximately \$10.00, but may be covered under some insurance policies.

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A signed statement from a provider indicating the test date and result must be on file before the first day of volunteering at the site(s). For parent volunteers, place the documentation behind the volunteer health statement in the health section of the comprehensive file. For non-parent volunteers, place the documentation in file specific to that volunteer along with other required documentation such as fingerprints and volunteer applications. Keep all information confidential.

For frequency of testing and other details regarding TB test results, please refer to "Tuberculosis Screening Guidelines," below.

#### 2. Staff Health

New employees must obtain and submit to CSB Personnel Unit a Physical and an Intradermal Mantoux 5TU PPD skin test (note: Tine or other multiple puncture tests are not acceptable.) prior to starting work. If an employee has had a positive PPD skin test in the past, a negative chest x-ray and physician's statement must be obtained. Initial Physicals and TB tests must be obtained within one year of the date of employment with CSB.

In compliance with California Community Care Licensing regulation 101216(g)(1), staff shall obtain a health screening performed by or under the supervision of a physician not more than one year prior to or upon employment. No further re-examination is required by the State of California.

#### 3. Tuberculosis Screening Guidelines for Staff and Volunteers

If staff or volunteers present a positive TB test (10mm or more of indurations), it must be followed by a chest x-ray and a statement from the examining physician indicating that the employee or volunteer is free from active disease.

Employees and volunteers with a negative initial TB test, who do not live in the Richmond or San Pablo area, must repeat the test every four years. Employees and volunteers with a negative initial TB test must complete a TB Risk Assessment every year (See Form CSB262) to determine whether annual TB testing is recommended.

An employee or volunteer who lives in the Richmond or San Pablo area must have a TB test done yearly. Employees and volunteers with a documented positive initial TB Test that was followed with an x-ray showing no active disease do not require any additional exam. These employees and volunteers must complete the TB Symptom Review (CSB260) every year to determine whether they require further medical evaluation.

#### 4. Hand Hygiene Standards at Sites

To assist in the prevention of spreading infection and viruses, and for safety reasons, all staff at child care facilities, whether considered direct caregivers, clerical or management must adhere to the following standards of hand and fingernail hygiene.

Artificial or natural fingernails must be clean, and at a maximum, ¼ inch in length.

Large rings that extend above the ring base more than ¼ inch may not be worn while at work.

Hands must be washed, at a minimum, before and after diapering, before and after food preparation or handling, before and after morning health check-in, after contact with any bodily fluid (blood, mucus

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etc.), after personal use of the restroom, after playing with pets or other animals, after handling garbage, and after playground activities, including sandbox play.

If staff are found in violation of the hand hygiene policy, they may be required, at the Site Supervisor's or CSB management's discretion, to rectify the problem by washing their hands, removing rings or trimming or cleaning nails before returning to their position.

#### DD. Career Development Opportunities

The County encourages/supports employees' efforts to improve their skills, abilities, and knowledge to be more productive in their current assignments and to be prepared for career advancement (as opportunities arise). Staff may be required to attend trainings and/or educational advancement programs to meet licensing, state and/or federal regulations. For example, the staff qualifications requirement in Section 648A(a) of the Improving Head Start for School Readiness Act of 2007, which requires teachers to obtain specific degrees by October 1, 2011 and September 30, 2013 may necessitate that staff complete additional training or other academic programs. As resources are available, CSB will support staff in attaining certain goals; however, it is the responsibility of CSB staff to meet the minimum qualifications and requirements of their position.

Service Requirements may be established for certain professional development programs to comply with federal, state, or local regulations. As mandated in the Improving Head Start for School Readiness Act of 2007, Section 648A (6), employees who receive financial assistance to pursue a degree shall:

- Teach or work in a Head Start program for a minimum of 3 years after receiving the degree; or
- Repay the total or a prorated amount of the financial assistance received based on the length of service completed after receiving the degree.

Contra Costa County Community Services Bureau agrees that:

- Career development activities are the joint responsibility of the individual and the County.
- All staff members should engage in continuing education, whether it takes the form of formal courses of study, participation in technical society activities, attendance at meetings, reading, or other forms of communication with the profession. CSB will make every effort possible to accommodate working schedules to permit occasional attendance at educational meetings.
- To encourage continuing education, the Board of Supervisors has established a career development education policy. Applications for assistance will be considered by the department and, subject to funding limitations. The details of this policy are outlined in Administrative Bulletin 112.9. Funds may be provided for tuition, books, and other direct costs, providing that the following criteria are met:
  - The employee must start and complete course while associated with the County, within timelines.
  - The field of study must relate to assigned duties or prospective assignments.
  - Attendance at all meetings or classes is required, unless compelling reasons for missing sessions occur.
  - Passing grades must be maintained throughout the course.

Certain classified, exempt, and project management employees may be eligible for reimbursement for up to \$625 every two years for memberships in professional organizations, subscriptions to professional publications, professional engineering license fees required by the employee's classification, and

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attendance fees at job-related professional development activities. Individual professional development reimbursement requests are authorized by the department head.

Training sessions are held to provide opportunities for staff development and to help employees grow professionally. Such sessions help orient employees to their assignments, explain policies and procedures, teach new skills and methods, and help prepare for a particular program. Professional growth is accomplished through staff meetings and conferences, supervisory interviews, correspondence, extension courses, attendance at professional conferences, inspection tours, and directed readings.

If an employee is directed to undertake a course of study or to attend any meeting or lecture requiring travel and/or expenditure of funds, the County reimburses the authorized expenses. Time out of the office during normal working hours attending meetings will be counted as regular hours worked. The details of allowable training travel and reimbursable expenses are outlined in Administrative Bulletins 111.7 and 204.13 respectively.

The department provides opportunities for employees to attend conferences which may benefit the employee and which would help to improve the department's operation or service. All employees must submit written reports to their supervisor within fourteen (14) days after attending a conference. The written report should include a summary of ideas or methods, which may benefit or improve the services or operation of the department. Requests to attend conferences are made to the department head.

Teaching and technical staff members are encouraged to participate as active members of technical societies and professional organizations of their choice. With prior approval, time off to attend local meetings of particular interest and benefit may be arranged. The same pertains to national meetings dealing with subjects benefiting professional advancement.

Ongoing staff meetings are held for all employees. Individual employees may be called upon to present assigned topics to the group or be appointed to a committee to study special problems/lead discussions. All such meetings are held on department time and are designed to improve overall job performance/efficiency and services of the department.

CSB has designated the Personnel Unit as the lead for professional development and training activities within the program.

#### EE. Staff Training and Development

##### 1. Training and Technical Assistance Plan

The Training and Technical Assistance Plan is reviewed and updated annually and included as part of the continuation grant process to promote program improvement and enhancement. Senior managers, Content Area Experts, and other stakeholders are to submit projected trainings for each year that support the needs of their staff and meet program mandates, and are responsible for the delivery of such trainings. These trainings are included in the Training Calendar for each program year. Any training requested after the Training and Technical Assistance Plan is finalized will require approval by the Community Services Director or designee.

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The designated Staff Development Coordinator should be informed of all scheduled CSB trainings in advance. Aside from their own recordkeeping, training leaders are responsible for submitting original sign-in sheets and copies of training agendas and materials to the Staff Development Coordinator.

The Training Calendar that has been developed is based, in part, on career development training needs.

#### 2. Staff Training and Development System

Purpose/Philosophy: CSB delivery of high quality services depends on enhancing the skills, knowledge, and ability of the staff. The management staff and Training Committee carefully design training and professional growth opportunities for staff, which serve as critical resources for maintaining and improving program quality.

##### i. Strategic Training Plan

This reflects the training and staff development needs identified through Community Assessment, Program Self-Assessment, Performance Indicator Report (PIR), Ongoing Monitoring, Federal and State Reviews and Regulations. The Strategic Training Plan is closely aligned to CSB short and long term goals and objectives.

ii. Annual Training Plan is developed based on: Staff Training and Professional Development Survey results from the program's self-assessment and the ongoing monitoring, staff's needs and goals identified in their performance evaluations, and federal, state and county regulations.

##### iii. Training Calendar

This identifies training topics and events for a 12-month period. It is updated quarterly and training opportunities and events are reflected on a monthly program calendar available to each CSB staff member. In addition, staff members are informed of ongoing community training events and opportunities.

##### iv. Training Budget

This is developed annually to support the implementation of the Training Plan. The budget also provides for additional training activities, as well as for training materials and equipment.

##### v. Training Delivery / Implementation-Required Staff/Management Training

- Orientation – All new staff are required to complete a bureau orientation covering all Department and County policies relating to employment. A site-based and program orientation is conducted within the first 2 weeks of employment. Additional orientation information is included in the New Employee Orientation section below.
- Ongoing Training – provided throughout the year in a timely and balanced fashion to ensure that staff possess the knowledge, skills, and expertise required to fulfill their job responsibilities and to operate a successful program.
- Head Start Required Training – provided to ensure that line and management staff develop skills and knowledge needed to operate a successful and effective Head Start program, one that fully meets the Head Start Performance Standards and the program objectives of the grantee.
- California Department of Education (CDE) Required Training – provided to meet the requirements of the Exemplary Program Standards and the State regulations.

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- Community Care Licensing (CCL) Required Training – provided to ensure that line and management staff have knowledge and skills to provide services and operate a program in congruence with the Community Care Licensing requirements.
- Contra Costa County (CCC) Required Training – provided to all CSB staff to ensure that the program creates a working environment that meets the County requirements and that staff members conduct themselves in a manner prescribed by the Code of Conduct.
- Domestic Violence Training- All Head Start and Early Head Start staff are trained on an annual basis regarding domestic violence. This training includes identifying the effects these situations may have on a child's behavior, how to talk with a parent who has made a disclosure of domestic violence, and community resources available to those in need. The role of staff is to listen to the parents' needs and provide specialized resources/assistance as requested and appropriate following the procedure for supporting families in crisis.

#### vi. Staff/Professional Development

Staff/Professional Development activities are the joint responsibility of the individual and CSB. All staff members are encouraged to improve their knowledge and skills to advance in their career and effectively serve enrolled children and families. Staff/Professional Development training supported/offered by CSB are as follows:

- Basic Professional Level – Staff members are encouraged and supported to engage in continuing education.
- Participation in activities leading to an associate or bachelor degree – Teaching staff working toward their associate or bachelor degree are supported by various continuing education programs offered by CSB. Additional information is included in the Continuing Education Programs section below.

All permanent County employees are eligible for financial assistance as specified by the policy for training (Administrative Bulletin 112.9) and reimbursement (Administrative Bulletin 204.13).

Additional financial support may be provided for CSB teaching staff through the Teacher Degree Program, while funding is available, as approved by the Board of Supervisors in May of 2009.

With the support of educational advancement grants for teaching staff awarded to CSB, staff is eligible for the benefits specified in such grant.

Whenever possible, appropriate accommodations are made to allow staff participation in the training opportunities leading toward an associate or bachelor degree.

CSB makes every effort to accommodate the work schedule to permit staff's attendance in formal training classes, conferences, and professional meetings.

Staff receive information about classes offered through the Community Colleges, Adult Schools, community based workshops, and conferences.

vii. Teacher Assistant Trainee (TAT) Program – Staff with less than 12 units in Early Childhood Education (ECE) are given the opportunity to participate in an 18-month training program to receive their 12 units in ECE as required for the Associate Teacher Permit. Head Start parents seeking a career in early

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childhood education and development are encouraged to apply for the TAT position and participate in the TAT program.

viii. Clerical Assistant Trainee (CAT) Program – Income-eligible Contra Costa Residents, including parents, are provided with employment, mentorship, on-the-job training and support in establishing and pursuing career advancement objectives and goals within the field of clerical support and administrative services.

ix. Professional Growth Activities for renewal of existing or receiving of a new Child Development Permit –staff are provided the opportunity to participate in a variety of training/ professional development activities offered by CSB or the educational community, leading to completion of the CDE required professional growth hours for Child Development Certification. It is the responsibility of the employee to ensure that all renewal or upgrade requirements are met to maintain a valid Child Development permit as required by their position.

- CSB managers and supervisors, who are certified Professional Growth Advisors, counsel program staff and provide them with effective guidance and assistance in accomplishing their professional goals.
- Participation in professional organizations and technical societies – staff are encouraged and supported to participate in technical societies and professional organizations.
- Staff are given time off to attend meetings/conferences, whenever possible.
- Staff's membership in the NHSA is paid by CSB. Participation in other professional organizations and technical societies is governed by the CCC Personnel Management Regulations (PMRs).

x. Parent training is conducted throughout the year in a variety of settings including:

- Annual Parent Conferences
- Monthly Policy Council Meetings
- Monthly Parent Committee Meetings
- Policy Council training events
- Monthly Parent Trainings (in each part of the County)
- Annual Trainings

xi. Evaluation and Monitoring

Evaluation and monitoring of the training activities are effective ways to determine the extent to which the training achieved its objectives and to plan follow-up activities. They also ensure a consistent sequence in the whole training process. The following tools are used to evaluate and monitor the Staff Training and Development process:

- Staff Performance Evaluations - provide information for effectiveness of training, follow-up activities, individual training needs.
- Tracking System - provides data regarding individual staff training and the sequence for balance of training opportunities in general.
- Training Summary - provides information about effectiveness of the training, the follow-up activities and the need for technical assistance.
- Ongoing Monitoring and Self-Assessment findings - provide information for the update of the training plan. Monitoring and Self-Assessment are used to determine the training needs and professional development activities for the next school year and for the next three-year



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Strategic Plan. The Staff Training and Development System operate in a cycle. The results from the Evaluation and Monitoring are crucial elements for the beginning of the new planning cycle.

##### FF. New Employment Orientation

1. All new employees will receive a CSB orientation covering department and county policies and programs and will sign a New Employee General Orientation Record form. The Personnel Unit is responsible for conducting New Employee Orientation Trainings, which include but are not limited to:

- CSB Mission Statement and Organizational Structures
- Employee Rights and Responsibilities
- Payroll and Claiming Expenses
- Employee Benefits and Training
- Information Technology and Systems

2. All newly employed teaching staff, including Site Supervisors, will receive an Education Orientation. The CSB Education Team is responsible for conducting the Education Orientation, which includes, but is not limited to:

- Performance Standards
- Job Descriptions
- Curriculum goals and objectives
- Screenings, assessment, individualization, and parent-teacher conferences
- Kindergarten transition
- Positive Guidance and Discipline
- Project Approach
- Lesson Planning

Additional initial and ongoing orientation trainings will be provided to new employees as required by County, State and Federal regulations.

All volunteers and temporary/substitute staff will review the CSB Substitute and Volunteer Handbook, and will sign the Handbook receipt which will be kept on file at the center and the personnel files. Both volunteers and substitute staff will also receive on-site orientation at the center/office. Substitute staff additionally will complete the Substitute Orientation Checklist with the Substitute Coordinator.

##### GG. Continuing Education Programs

CSB will make every effort to support staff pursuing a degree in higher education that is relevant to the public services provided by CSB.

##### 1. Community Services Degree Program (CSDP)

This program is offered to CSB staff in accordance with Administrative Bulletin 112.9 and section G.25 of these Policies and Procedures. CSB staff enrolled in courses required to complete an associate or bachelor degree are encouraged to participate in this program and receive the benefits outlined in Administrative Bulletin 112.9.

In addition, CSB is committed to support teaching staff required to obtain an advanced degree in early childhood education, or related field, as specified in the Teacher Qualifications Section 648(A)(2) of the

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Improving Head Start for School Readiness Act of 2007. With the financial support of grants issued by the Administration of Children and Families, CSB has established the following continuing education programs through the duration of such grants:

##### 2. Teacher Degree Program (TDP)

This program is available to all teaching staff interested in pursuing an associate degree or baccalaureate degree in early childhood education or related field. Two program models are offered through the TDP, which provide several support systems to financial, tutorial, mentoring, and technological training and equipment.

i. Individualized Education Plan: Established between the TDP participant and a college counselor/advisor at the college or university of attendance. These participants have chosen to take the required courses for their associate or bachelor degree at their own pace, under the guidance of the college or university. They are aware of the degree completion timelines and will ensure timely completion of all required coursework to meet the mandate deadline.

ii. Structured Cohort with a local four-year college: CSB has established a partnership with California State University Sacramento (CSUS) to deliver a cohort program with 14 CSB teaching staff working towards a Bachelor of the Arts in Early Development, Care and Education after completion of eight consecutive semesters. Additional cohorts may be offered as funding sources become available. Program Requirements:

- All participants must sign the Teacher Degree Program Agreement with Contra Costa County. The Agreement outlines both parties' responsibilities as follows:

The TDP participant agrees to:

- Enroll in a program leading to an associate or baccalaureate degree in Early Childhood Education, or related field.
- Consistently maintain enrollment in part-time classes; at a minimum of 8 quarter units or 6 semester units until you complete an associate or baccalaureate degree program.
- Earn a grade of "C" or better for each course.
- Complete the required coursework for an associate or baccalaureate degree in Early Childhood Education, or related field.
- Meet with a CSB mentor and/or college/university academic advisor at least once every quarter/semester to discuss your academic progress.
- Submit a copy of the classes registered for at the beginning of each quarter/semester to CSB's Personnel Office.
- Submit a copy of transcripts at the end of each quarter/semester to CSB's Personnel Office.
- Return ALL books reimbursed/paid by CSB to the Personnel Office at the end of each quarter/semester. The books will be available for future use by other TDP participants.
- As stated in Section 648A (6) of the Improving Head Start for School Readiness Act of 2007, commit to continue your employment with Community Services Bureau for a minimum of three years after having completed your degree program, or repay the total or a prorated amount of the financial assistance received based on the length of service completed after receiving the degree.

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#### Section 1: Administration

- Not drop or withdraw from any class. If you drop a class, it is at the discretion of CSB to reinstate you in the program.
- Maintain an updated Teacher Degree Program binder with all required degree tracking information.

Contra Costa County Community Services Bureau agrees to:

- Reimburse/pay tuition fees for courses taken at an accredited college or university required to complete an associate or baccalaureate degree in Early Childhood Education, or related field, up to a maximum of \$1,115 per quarter or \$1,486 per semester.
- Reimburse/pay for books required for the courses taken to complete an associate or baccalaureate degree, up to a maximum of \$300.00/quarter or \$400.00/semester.
- Reimburse/pay for your campus Parking Permit.
- Work with CSB staff, local colleges and universities, and community organizations to provide mentorship, tutorial, and other support services.
- Provide a Teacher Degree Program Binder where program information and degree tracking documents can be organized.

Degree Completion Timelines:

- Participants must have a bachelor degree in early childhood education or related field by September 30, 2013.

#### HH. Delegate Agency Policies

The Delegate Agency develops their own policies and procedures and are reviewed annually by the Grantee during the Self-Assessment.

The Delegate Agency is under contractual agreement to adhere to all local, state, and federal regulations, as applicable.

#### II. Short-Term Contract Employees

Contract employees working over one year must have the approval of Contra Costa County.

The need for contract labor is determined and funds must be available for contract labor.

Selection of persons to fill contract labor positions is determined by the appointing authority or designee.

Contra Costa County Managers and Directors give input into the development of the Service Plan.

Please see reference to contracts and grants under Record Keeping and Reporting.

#### JJ. Union Membership

Contra Costa County follows the State of California Legislature, adopting a set of codes pertaining to employer-employee relations for public agencies as follows:

- The Contra Costa County Board of Supervisors recognizes collective bargaining units to represent certain classifications of County employees - to determine the wishes to be represented, and by which organizations.

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- Representatives of the collective bargaining unit provide literature/information regarding the services of that unit, and conditions of employment (agreed to by the Board of Supervisors and that collective bargaining unit).

The Board of Supervisors approves processes by which representatives of the bargaining unit may use Contra Costa County time, facilities, and bulletin boards to communicate with members.

The collective bargaining unit provides its members with information regarding these matters.

Questions relating to policies guiding the collective bargaining process are directed to:

*Human Resources Department  
Employee Relations Division  
651 Pine Street, Second Floor  
Martinez, CA 94553*

#### KK. Equal Opportunity/Affirmative Action Policy

CSB shall not illegally discriminate in their recruitment, selection, promotion, or implementation of personnel policies and procedures against any person without regard to race, religion, sex, sexual orientation, national origin, age, disability, or military status. All applicable state and federal laws will be followed including, but not limited to Title VI, and Title VII, of the Civil Rights Act of 1964, as amended; the Age Discrimination in Employment Act of 1967, as amended, Section 504 of the Rehabilitation Act Amendments of 1974; the Civil Rights Restoration Act of 1987; the Americans with Disabilities Act of 1990 and the Civil Rights Act of 1991. Employment Discrimination procedures are set forth in Contra Costa County Administrative Bulletin 429.3.

#### LL. Approval of New Personnel Policies and Revisions

All personnel policies must be approved by Community Services Bureau, Policy Council, the County Human Resources Department, and the Board of Supervisors. Personnel policies and procedures must be consistent with collective bargaining agreements, and approved by County Counsel and County Human Resources as appropriate. The process is as follows:

- A policy is drafted with input from managers and program staff, related committees, and appropriate department personnel.
- County Counsel and County HR review it as appropriate.
- The draft policy is submitted to appropriate Managers and Assistant Directors for review/input before it is submitted to the Community Services Director for review and approval.
- After the Community Services Director's approval of the draft policy, it is submitted to the Policy Council for review and approval.
- If the draft policy is health-related, the draft is reviewed by the Health Advisory Committee before submission to the Policy Council.
- The draft policy must be consistent with written policies of collective bargaining agreements.
- The draft policy is submitted to the Board of Supervisors for review and approval.
- If the content of a policy has changed since the Policy Council's original approval, the Policy Council must approve the final version.
- After personnel policies and procedures have been approved, they are made available to staff electronically and in hard copy if requested.
- Policies and procedures are translated as needed.

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- Policies and procedures are being made available in Braille as needed.
- Community Services Director and Personnel Director are responsible for amending, revising, or otherwise modifying these policies and procedures.

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#### **VIII. Fiscal**

##### **A. Advance Amount for Travel**

Advance amounts for travel are not allowed for County employees.

##### **B. Travel Reimbursement-County Employees**

County employees are allowed compensation for mileage, meals and miscellaneous other travel expenses. Eligible individuals are entitled to claim reimbursement for actual, reasonable, and necessary expenses arising from the discharge of their official duties, subject to limitations established by law and policy.

###### **1. Mileage**

As authorized by the department head or designee, use of private automobiles may be reimbursed for mileage between an individual's normal work location and other designated work locations. The reimbursement rate is set by the County, adjusted periodically to conform to IRS approved rates. Please see note in item #4 below for the time frame of submitting mileage reimbursements.

###### **2. Meals**

Actual expenses, including tax and gratuity, for individual meals will be reimbursed. However, such reimbursement shall not exceed the following individual maximums:

- Breakfast: \$10.00
- Lunch: \$20.00
- Dinner: \$35.00

When away from the normal work area for an entire day, individuals eligible for meal reimbursement may claim reimbursement for the actual cost of each individual meal, notwithstanding the maximum per meal amounts specified above. However, the total amount claimed for the day shall not exceed \$65.00.

###### **3. Other Travel Expenses**

- Bridge tolls, parking; Telephone and facsimile charges required in connection with County business; BART or bus fares; and Tips, parking, and checking fees in accordance with local custom.

See County Admin Bulletin #204.13 (02-20-08) regarding expense reimbursement and #111.7 (07-18-06) regarding travel.

##### **C. Travel Reimbursement-Parent Reimbursement for Policy Council Activities**

Per HSPS 1304.50(f), Policy Council, Policy Committee, and Parent Committee reimbursement- Grantee and delegate agencies must enable low-income members to participate fully in their group responsibilities by providing, if necessary, reimbursements for reasonable expenses incurred by the members (i.e. childcare and transportation).

Parents requesting reimbursement should complete and submit Form CSB 325 to the Clerk of the Policy Council who will verify the request and determine the amount of reimbursement. After approval is received from the ASAI for Policy Council, a check will be issued, no later than 30 days after the request.

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Reimbursements are given for approved Policy Council activities only (i.e. monthly PC meetings or committee meetings). Exceptions must be preapproved before reimbursements are issued. Mileage is calculated using distance from home to meeting location. Childcare hours include reasonable travel time to and from meeting and is based on reasonable arrival time to the approved activity.

Representatives attending conferences and out-of-area meetings will be given a per diem allotment for meals and ground transportation, and reimbursed for childcare expenses. Travel requests must be submitted a minimum of 30 days prior to the travel date to allow ample time for approval and advance processing. Upon return from the trip, Liquidation of Cash Advances requires that all receipts must be submitted to the appropriate PC staff person no more than 7 days after return from travel.

If receipts are not received within the 7 day timeframe, a verbal reminder will be given via the ASAll responsible for Policy Council.

If receipts are still not received after a reasonable amount of time, a certified letter will be sent to the representative and a copy will be maintained in the CSB PC travel files.

Failure to return receipts within the allotted time will prevent the opportunity to attend future conferences and can prevent reimbursement for other PC activities.

*\*Note-Approved travel reimbursement rates are provided to parents at the beginning of each program year and prior to travel.*

#### D. Using Employee's Own Funds for County Expenditures

Only in an emergency should an employee use his/her own funds or personal credit cards to purchase materials/services for a County purpose. An "emergency" is when:

- An event occurs which requires material or service to correct a safety hazard, or to prevent damage to facilities or equipment.
- A significant program need occurs which will have a significant impact on the goals of the program.
- Note: Lack of planning is not considered an emergency.
- While it is not encouraged, employees may purchase minor items that would not meet the criteria of an emergency as stated above. The purchase of minor items that are required to meet program needs must:
  - Be approved by the Assistant Director (AD) in writing if under \$100.00.
  - Anything over \$100.00 must be approved by the Director, Division Manager or designee.

#### E. Reimbursement for Expenses - Employees

Employees will be reimbursed for approved, necessary eligible expenses, provided that reimbursement requests are made on the appropriate forms, in a timely manner and with receipts. When employees incur expenses for an approved purpose, one of the following procedures occurs for getting reimbursed:

1. Petty Cash – Most of the emergencies involving minor purchases can be met by use of the department's petty cash fund maintained in each Division Administrative Office. Normally, this fund is to be used for general office needs and for minor emergency requirements. A supervisor or employee

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may present a request for petty cash approved by an Assistant Director, to the Petty Cash Fund Custodian for payment.

2. Demand (Form D15) – (See EHSD Intranet> Community Services> CSB Forms > Fiscal > Demand D15). In the event you are unable to get payment from the petty cash fund, you may use the Demand (Form D-15) to get reimbursed. This form is to be used to reimburse employees for non-travel related purchases. This form should be used for items of small value, as defined above, not related to travel or entitlements.

3. Employee Travel Demands (See EHSD Intranet> Community Services> CSB Forms > Fiscal > Travel Demand (Form M8154 Rev. 11/09) — This form is designed for reporting an employee's expenses relating to travel, mileage, or for other employee benefits or entitlements such as training costs. It will normally not be used for any other purpose. The purpose for each expense must be shown; for example, mileage should show the destination, and the reason for the trip (See Employee Handbook).

Note: County regulations allow you to include expenses for only one month on a single Travel Demand. For example, if you have expenses for May and June, you may not combine expenses on one form, but must submit two separate forms - one for May and one for June. Demands are to be submitted to your immediate supervisor for approval. Claims should be submitted within one month of completion of travel. The Bureau has no obligation to pay travel expense reimbursement submitted more than three months following completion of the travel. If an employee has over three months of mileage reimbursement to claim, the employee must submit a request letter, stating the reason for submitting a late claim, to Bureau Director or designee for approval.

#### F. Use of Procurement Cards

County Procurement Cards are assigned to an employee at the discretion of the EHSD Director and CSB Director. Card holders must abide by all policies as stated in the Procurement Card Manual, County Administrative Bulletin 111.8, and County Administrative Bulletin 204.13.

CSB card holders must obtain written approval from a Senior Administrative Manager prior to making a purchase to ensure that all expenditures are known about at the time the Approving Official is reviewing and approving the monthly Statement of Account.

- The Procurement Card is to be used for official County business purposes only and may not be used for any personal transactions.
- Card holders are responsible for adherence to all County Policies and Procedures regardless of whether a transaction is allowed at the point of sale.
- The Procurement Card is not intended to avoid or bypass appropriate purchasing procedures.
- Each card has a preset transaction, 24 hour, and billing cycle spending limit which varies by card. Employees are not authorized to exceed their spending limits.
- Disputes to charges must be made within 60 days of the statement date.
- Authorized Purchases include:
  - Small Tools/ Computer supplies
  - Safety/ First Aid
  - Books/Subscriptions



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- Office Supplies (If not available through our office supply contractor)
  - Conference Registration/ Travel ( an approved travel request is still required)
- Unauthorized Purchases include:
  - Repetitive purchases better served under a blanket purchase order
  - Meals/ Alcohol /Entertainment
  - Local/ Long distance telephone charges/Internet connection costs
  - Parking/Fuel
  - Committee membership/Professional Membership Dues
  - Services of any kind
  - Items to be reimbursed through a travel demand
  - Items available under a County Contract
  - Cash/ Gift Card/ Gift Certificate/ Money Order, etc.
  - Fines/Donations
  - Any expense prohibited under County Administrative Bulletins
- A log must be kept of all purchases which includes:
  - Charges split between the appropriate org codes
  - Original sales receipt/ credit or return receipts/packing slips

#### G. Other Compensation

See Contra Costa County Personnel Policies and Procedures.

#### H. Salary

Employee salaries are set according to procedures established by the County Board of Supervisors and the Memorandum of Understanding as agreed to by the Board and collective bargaining units.

The Salary schedule and range of steps for Community Services Bureau classifications is available in each work location.

New employees generally are appointed at the minimum step of the salary range established for the particular class of positions to which the appointment is made. The appointing authority, however, may fill a particular position at a step above the minimum of the range.

Upon satisfactory completion of the probationary period, employees receive a salary increase to the next step.

The performance of each employee, except those employees already at the maximum salary step of the appropriate salary range, is reviewed on the employee's anniversary date to determine whether the salary of the employee is to be advanced to the next higher step in the salary range. Advancement is granted on the affirmative recommendation of the appointing authority, based on satisfactory performance by the employee. The appointing authority may recommend denial of the increment or denial subject to one additional review at some specified date before the next anniversary, with the date set at the time the original report is returned. This decision may be appealed through the Grievance Procedure.

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Except as provided by County procedures, increments within range shall not be granted more frequently than once per year, nor shall more than one step within range increment be granted at one time, except as otherwise provided in deep class resolutions. Nothing may be construed to make the granting of increments mandatory on the County.

If an operating department verifies in writing that an administrative or clerical error was made in failing to submit the documents needed to advance an employee to the next salary step on the first of the month when eligible, the advancement will be made retroactive to the first of the month when eligible.

A part-time employee is paid a monthly salary (in the same ratio to the full-time monthly rate to which the employee would be entitled as a full-time employee) as the number of hours per week in the employee's part-time work schedule bears to the number of hours in the full-time work schedule of the department.

Any employee who is appointed to a position of a class allocated to a higher salary range than the class previously occupied - except as provided by County procedures - receives the salary in the new salary range, which is next higher than the rate received before promotion. If this increase is less than five percent, the employee's salary is adjusted (to the step in the new range which is at least five percent greater than the next higher step), provided that the next step does not exceed the maximum salary for the higher class.

Any employee who is demoted (except as provided under Contra Costa County procedures) will have the salary reduced to the monthly salary step in the range for the class of positions to which he or she has been demoted next lower than the salary received before demotion. If this decrease is less than five percent, the employee's salary will be adjusted to the step in the new range which is five percent less than the next lower step provided that the next step is not less than the minimum salary for the lower class.

Whenever a demotion is the result of layoff, cancellation of position, or displacement by another employee with greater seniority rights, the salary of the demoted employee will be the step on the salary range which would have been achieved if the employee had been continuously in the position to which he/she has been demoted, all within range increments being granted.

Whenever any employee voluntarily demotes to a position in a class having a salary range lower than that of the class from which he/she demotes, the salary remains the same if the steps in the new demoted salary range permit. If not, the new salary is set at the step next below the former salary.

##### I. Bilingual Pay Differential

A salary differential of one hundred dollars (\$100) per month is paid to incumbents of positions requiring bilingual proficiency as designated by the appointing authority and the Bureau Director of Human Resources.

The bilingual salary differential is prorated for employees working less than full-time and/or who are on an unpaid leave of absence for a portion of any given month.

(See Contra Costa County Management Handbook.)

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##### J. Accounting Certificate Differential

Incumbents of Management professional accounting, auditing or fiscal officer positions who are duly qualified as a CPA, CIA, CMA or CGFM shall receive a positive differential of five percent (5%) of base monthly salary.

(See Contra Costa County Management Handbook.)

##### K. Management Longevity Pay

Employees who have completed ten (10) years of appointed service for the County shall receive a two and one-half percent (2.5%) longevity differential.

Employees who have completed fifteen (15) years of appointed service for the County shall receive an additional two and one-half percent (2.5%) longevity differential.

(See Contra Costa County Management Handbook.)

##### L. Management Paid Personal Leave (Admin Leave)

Un-represented management employees (exempt from payment of overtime) receive paid administrative leave (90 hours per year) annually.

All management employees exempt from payment of overtime are authorized paid administrative leave credit for each year, in accordance with current Contra Costa County policies.

Use of administrative leave credits may be requested whenever desired by the employee; however, approval of requests is subject to the same department process as used for vacation requests.

All unused paid administrative leave will be canceled on December 31 of each year.

For further information on management paid administrative leave, see Contra Costa County Admin Bulletin #423.3 (06-23-98).

##### M. Unemployment Compensation

Employees of Contra Costa County may be eligible for unemployment compensation. The cost of unemployment compensation is borne by the County. To qualify for unemployment compensation, an employee must:

- Be unemployed and registered with the State Employment Development Department for work
- Have separated for good cause
- Have received minimum base-period wages as currently established by State law or regulation
- Comply with regulations in regard to filing claims
- Be available to immediately accept suitable work
- Be actively seeking work
- Be physically able to work

On all voluntary resignations, a Notice of Voluntary Termination of Employment (AK-219) must accompany the Notice of Separation (AK-16), and must be immediately forwarded to the Personnel Office, Records Division.

On non-voluntary separations, complete details must be attached to the separation notice (with the exception of rejection of probation separation).

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See County Admin Bulletin #420.1 (01-19-81) for further information.

#### N. Vehicle Use

The County establishes policies on the use and operation of vehicles, both County-owned and privately owned, on County business.

Please see County Admin Bulletins #507.8 (02-20-08), County Vehicle Operation, and #535 (06-22-90), Use of Private Vehicles, for further information.

NOTE: For Contra Costa County's Policies and Procedures, please refer to the Contra Costa County's Administrative Bulletins and Management Handbook.

#### O. In-Kind (Non-Federal Share)

##### 1. Background

The Head Start Act stipulates that the Federal share of the total costs of the Head Start program will not exceed 80 percent of the total grantee budget unless a waiver has been granted (Head Start Act Section 640(b)). If the grantee agency fails to obtain and document the required 20 percent, or other approved match, a disallowance of Federal funds may be taken. Non-Federal share must meet the same criteria for allowability as other costs incurred and paid with Federal funds.

##### 2. Definitions

- Allowable Cost: Third party in-kind contributions shall count toward satisfying a cost-sharing or matching requirement only where, if the party receiving the contribution were to pay for them, they would be an allowable cost. Allowable costs are determined by the tests of reasonableness, necessity and allocability as defined in Office of Management and Budget (OMB) Circulars A-21, A-87 and A-122.
- In-Kind: Property or services that benefit a grant supported project or program and are contributed by non-Federal third parties without charge to the grantee. In-kind contributions may consist of the value of real property and equipment and the value of goods and services directly benefiting the grant program and specifically identifiable to it. In-kind match is counted for the period when the services are provided or when the donated goods are received and used.
- Volunteer: An individual providing a service that is necessary to the operation of the Head Start program at no cost to a grantee agency.
- CSB Categories for third party in-kind contributions:
  - Classroom Help (CH): In-Kind to assist in the classroom.
  - Field Trip Help (FT): In-Kind to assist supervising children and their activities during a field trip.
  - Home Visits (HV): Volunteer at Home visits where parent is involved in child-directed activities.
  - Parent Meetings/Family Events (PM): Volunteer at Parent Meetings: Participating in site based events.
  - Policy Council Meetings/Subcommittees (PC): Volunteer at Policy Council and approved related events.
  - Home Activities (HA): Volunteer working on educational goals with child at home.
  - Donated Goods (DG): Materials donated directly to HS including land, buildings, or space that offset normal operating expenses.

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- Donated Services (DS): Time provided by professionals within the community on a professional level; i.e. Fire person, fence builder, mechanic, library aide, doctor, dentist, counselor and other professions.

3. Values of third party in-kind contributions will be determined and computed by CSB Fiscal Unit for the following contributions:

- Classroom Help
- Field Trip Help
- Home Visit Volunteer
- Site Meeting/Family Events Volunteer
- Policy Council Meetings/Subcommittee Volunteer
- Home Activities Volunteer

4. Donated Goods and Services (professional) will be determined by the community member or professional delivering the contribution within the standards of reason for the value and goods of the service.

5. CSB Staff will adhere to the following procedures for collection, documentation, calculation and record keeping of Third Party In-Kind contributions:

- Head/Lead Teachers: Daily/Monthly
  - Prepares CSB320 (CSB-320), in-kind form for classroom
  - Ensures proper completion of in-kind form-Full Name, Type of in-kind contribution, Service Time, signature of volunteer
  - Submit the CSB320 to Site Supervisor by 1st of each month with the 9400 sign-in sheets
- Site Supervisor: Monthly
  - Ensures collection of in-kind forms from every classroom by the 1st of each month
  - Reviews and monitors forms for completion and accuracy
  - Sign form indicating review and approval
  - Follows up with any classrooms submitting zero or low in-kind
  - Submits the in-kind form to the Cluster Clerk by the 5th of each month with the 9400s
- Assistant Director Monthly
  - Reviews in-kind sheets and signs off
  - Follows-up with any sites submitting zero or low in-kind
  - Submits to Cluster Clerk for data entry
- Cluster Clerk: Monthly
  - Calculates the total number of in-kind hours per activity for each site
  - Calculate EHS and, HS separately as directed by CSB fiscal unit
  - Inputs data into COPA/CLOUDS by the 20th of each month
  - If a cluster clerk receives in-kind forms after the 15th, hold for next month tracking
  - Maintains original documents
- Fiscal:
  - Determines the in-kind rate calculation for volunteer contributions (Non-professional) Annually
  - Monitor volunteer in-kind hours once a month Monthly
  - Ensure proper value of in-kind rates and calculations

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- CSM in charge of Parent Involvement / PC Clerk: Monthly
  - Reviews monthly in-kind data entered by Cluster Clerks
  - Reports in-kind hours by site as reported to CSM in charge of Parent Involvement
  - Reports in-kind hours by cluster as reported to Assistant Directors
  - Provides training and support, as needed, to teachers and/or Site Supervisors
  - Provides total in-kind contributions as needed or requested

CONTRA COSTA COUNTY EMPLOYMENT & HUMAN SERVICES DEPARTMENT  
COMMUNITY SERVICES BUREAU

# POLICIES AND PROCEDURES

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## SECTION 2-CHILD DEVELOPMENT

**2013-2014**

Policy Council Approved:  
Board of Supervisors Approved:

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Section 2: Child Development

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#### I. Prevention and Early Intervention

##### A. Determining Child Health Status

Community Services Bureau establishes and maintains individual, comprehensive files for children and families. Health records, developmental progress portfolios, and files, including Administrative, Delegate Agency, and Grantee-Operated Program and Subcontractor's filing systems, are kept confidential with use of the "Access to File" form (See Form CSB900) and following the approved Confidentiality Policy. All staff with access to health information is trained on HIPAA (Health Information Portability Accountability Act) requirements.

##### 1. Physical Examinations

As much pertinent health information as possible is accumulated and recorded for each child, paying particular attention to the items required by the Early and Periodic Screening, Diagnosis and Treatment Schedule (EPSDT) to ensure that children are following a schedule of complete well child care.

The child's initial physical examination required for program entry must be current (in accordance with the EPSDT schedule) and received no later than thirty days after entry into the program. One extension is allowed with documentation of a pending appointment. Children returning for a second year require additional physical exams in accordance with the EPSDT Schedule.

##### 2. TB Clearance – CSB Center-Based Program

In accordance with section #101220 of Licensing Code, TB Clearance documentation must be obtained for each child within 30 days of enrollment (admission) into the program. TB Clearance documentation must consist of either:

- A negative TB Skin Test or Chest X-Ray result, or
- A physician's check mark indicating "Risk Factors not present" or "Communicable TB disease not present" on CSB207–Report of Health Examination for Program Entry (See CSB Forms) or other signed or stamped document from physician/clinic.

The TB screening referenced in the TB Clearance documentation must be in accordance with the EPSDT schedule. The one extension allowed for pending Physical Exam appointments does not apply to TB Clearance documentation. Children without TB Clearance will be excluded if clearance is not obtained within 30 days of enrollment.

##### 3. Health Insurance

Each parent is provided with a Report of Health Examination for Program Entry form (See CSB Forms > CSB207) for use in obtaining a physical examination. In the event that the child has no insurance, staff will refer the child to the Child Health and Disability Prevention (CHDP) Gateway program, assist with Covered California, or another appropriate resource, to obtain a free or low cost exam. Comprehensive Services Teams enter all data on the physical form into the CLOUDS system. This enables program staff to track services and follow-up on needed treatment. Managers access reports to help monitor progress in meeting program requirements in a timely manner.

At intake, children and families with no medical and/or dental insurance are identified. Comprehensive Services Teams assist parents in determining eligibility and applying for medical/dental insurance such as Medi-Cal/Denti-Cal, the Kaiser Permanente Child Health Plan or services through Covered California. Comprehensive Services Teams also assist parents in establishing a medical/dental home (ongoing

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source of accessible health/oral care) and navigating the managed care system to access needed services.

#### 4. Health Records

In the event that health records are returned to the program with information missing, Comprehensive Services Teams obtain consent for release of information from parents. This consent is used to obtain information from medical/dental offices, medical records departments and laboratories. Every effort is made to educate parents regarding the EPSDT schedule and the documentation needed prior to visiting a dentist or doctor.

The following information shall be obtained and entered into CLOUDS and the child's confidential file:

- Health and developmental history
- Immunization Record
- Treatment plans, including immunizations and in series/waivers
- Age-appropriate physical exams, dental exams and screening results
- Records of major/minor illnesses and injury during program activities
- Schedule of daily medications, including fluoride and vitamins if applicable
- Allergic reactions
- Dietary intake and food habits
- Age and gender-appropriate growth charts
- Source of payment for services, including free federal, State of California, and locally funded health services
- Medi-Cal number or private insurance identification
- Referral and follow-up information
- Record of follow-up and documentation of actual services provided
- Emergency information/Parent Contact
- Signed parent consent forms
- Case Management Documentation
- Teacher observations
- Progress reports
- Other information as needed

A child whose authorized representatives adhere to a religious faith that practices healing by prayer or other spiritual means shall not be required to meet the requirements of the health examination. In this case, the authorized representatives must provide:

- Information on the child's health history
- A signed statement that indicates:
  - Their acceptance of full responsibility for the child's health.
  - Refusal to obtain a medical examination for the child.
  - Request that no medical care be given to the child.

#### B. Protocols for Determining Child Health Status

##### 1. Application

Before enrollment, Comprehensive Services Clerks are responsible for:

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- Reviewing the electronic application information/intake documents.
- Noting concerns (known or suspected) using the Red/Yellow Flag System as indicated on the Eligibility Certification Checklist Form (See Form CSB604).
- Generating a CLOUDS referral based on application information, as needed and clearly noting details of child's condition in Case Notes.

Before enrollment, the Comprehensive Services Assistant Managers are responsible for:

- Reviewing the application information/intake documents and ensuring referrals are generated and Red/Yellow Flags are in place if needed.
- Coordinating with the Site Supervisor to set up case management or interventions as appropriate.

Before enrollment, the Site Supervisors are responsible for:

- Reviewing the application, Red/Yellow Flags, and referrals
- Coordinating with the CSAM to set up case management or interventions as appropriate.

#### 2. Immunizations

The State of California Immunization Branch requires that programs institute a "No Shots, No School" policy, however, parents and medical providers may indicate that a child may not have any or all immunizations. In this case, the waiver on the back of the California School Immunization Record Card (blue card) must be completely filled out. Medical exemptions must be accompanied by documentation from a physician as to which immunization is prohibited and the date, if any, when a child may have the immunization. Immunization waivers based on personal beliefs require the signature of the parent on the Personal Beliefs Affidavit section on the back of the California School Immunization Record Card (blue card) and effective January 1, 2014, personal belief exemptions require the completion of the Personal Beliefs Exemption to Required Immunizations Form (CDPH-8262) prior to admission to school.

Names of all exempt children will be maintained on an exempt roster for immediate identification in case of disease outbreak in the community. Annual immunization training, including the most current immunization schedule for children 0-5, is provided to staff each August prior to the completion of the Annual Immunization Report due to the local health department in September/October of each year. Children are tracked throughout their enrollment to ensure they remain up-to-date or in-series. Records are updated accordingly.

Prior to enrollment the Comprehensive Services Clerks are responsible for:

- Collecting valid immunization records from parent.
- Obtaining parent consent for use of California Immunization Registry (See CSBForms > CSB243 CAIR Consent) and requesting immunization registry search if parent is unable to provide immunization verification.
- Entering immunization data into CLOUDS and completing the results column on the right to indicate one of the following: In Compliance, In Series, Personal Belief Waiver, Medical Waiver or Non Compliance.
- Emailing the name of child exempt from immunizations to the Comprehensive Services Manager (Health Content Area) for placement on the exempt roster.
- Determining overall immunization status.
- Notifying parent of shots needed.

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- Assisting the parent in obtaining a doctor office/clinic for immunizations needed.
- Using the Red/Yellow Flag system on the CSB-604- Eligibility Certification Checklist form to indicate temp files as needing immunizations prior to start date.
- Printing the Immunization Blue Card from CLOUDS/CAIR or manually filling in blanks, signing it, and placing it in the temporary file with documentation of a physician's statement for Medical Exemptions and the completed CDPH 8262 Form for Personal Belief Exemptions..

On an ongoing basis, Comprehensive Services Clerks are responsible for:

- Tracking in-series children and notifying the parent of the next dose due prior to the due date.
- As needed, Comprehensive Services Clerks are responsible for:
  - Preparing exclusion letters if child fails to obtain shots on time.

Each August/September, Comprehensive Services Clerks are responsible for:

- Attending the annual immunization training and preparing the annual immunization report.

Responsibilities of Comprehensive Services Assistant Managers

Prior to enrollment, Comprehensive Services Assistant Managers are responsible for:

- Reviewing files to ensure up-to-date or in-series immunizations or waiver is in place before file is provided to Site Supervisor for placement.
- Conducting ongoing immunization registry searches.

On an ongoing basis, Comprehensive Services Assistant Managers are responsible for:

- Ongoing monitoring of CLOUDS for immunization compliance
- As needed, reviewing exclusion letters generated by clerk and verifying information, which is forwarded to the Site Supervisor for action.

Each September, CSAMs are responsible for:

- Reviewing annual immunization reports prepared by clerk, verifying accuracy, and forwarding copies to the Site Supervisor, and the Comprehensive Services Manager (Health Content Area) after online submission is complete.

Site Supervisors are responsible for:

- Reviewing immunization compliance prior to enrollment
- Returning the temp file to the Comprehensive Services Assistant Manager if immunizations are not complete or required exemption documentation is missing.
- As needed, verifying, signing, dating and issuing exclusion letters prepared by the clerk and reviewed by the Comprehensive Services Assistant Manager.

Responsibilities of the Comprehensive Services Health Manager

- Providing annual immunization training each August.
- Overseeing the process and submission of the annual immunization report to the County / State by the September/October due date of each year.
- Conducting ongoing immunization registry searches.
- Maintaining a roster of children who are exempt from immunizations for immediate identification in case of disease outbreak in the community.

#### 3. TB Clearance – CSB Center-Based Program

Comprehensive Services Clerks are responsible for:

- Informing parent of TB requirement

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- Collecting valid TB screening records from parents which include either TB Skin Test or Chest X-Ray results, or a Physician's Clearance indicating: Risk Factors not present -TB test is not required (noted on CSB207 – Report of Health Examination for Program Entry) or other signed or stamped document from physician/clinic.
- Inputting TB screening data into CLOUDS upon receipt.
- As needed, preparing the exclusion letter if TB Clearance is not provided within 30 days of enrollment (TB Clearance: Negative TB skin test or Chest X-Ray results, or a Physician's Clearance)

Site Supervisors are responsible for:

- Notifying the parent of 30 day requirement at enrollment.
- Tracking receipt of TB screening records.
- Ensuring that no child is in the program without TB Clearance beyond 30 days from enrollment.
- Communicating with the Comprehensive Services Clerk to prepare exclusion letters.
- Reviewing, authorizing and signing all exclusion letters, and designating staff for distribution.

#### 4. Health History

Prior to enrollment, Comprehensive Services Clerks are responsible for:

- Completing the Health History on CLOUDS.
- Printing a copy of the Health History for the child's file.
- Obtaining signatures on the Health History if possible.
- Placing a "sign here" sticker on the Health History document if the parent is not present to sign.
- Reviewing information and flagging any suspected or known special needs using the Red/Yellow Flag System on the Eligibility Certification Checklist Form (CSB-604).
- Generating a CLOUDS referral for any special needs noted on the Health History.
- Providing Medical/Dental Home/Insurance intervention with all families that indicate they have no medical / dental provider or coverage. Document the intervention on the Health History in CLOUDS.

Prior to Enrollment, Comprehensive Services Assistant Managers are responsible for:

- Reviewing the child's Health History.
- Ensuring proper Red/Yellow Flags are in place as appropriate with sufficient detail noted for the Site Supervisor.
- Reviewing CLOUDS referrals generated from the Health History.
- Contacting the Comprehensive Services Manager for guidance if unsure of how to proceed with any special needs.
- Coordinating with the Site Supervisor to set up a pre-enrollment case management as needed.

Site Supervisors are responsible for:

- Reviewing the Health History, checking for Red/Yellow flags and referrals, coordinating with the Assistant Comprehensive Services Manager to set up case management / intervention as appropriate and returning any file without a Health History.
- Acquiring a parent signature on the Health History, if necessary at enrollment.
- Ensuring that teaching staff has reviewed the Health History in order to address health conditions/needs and the completion of the consent section.

The Services Comprehensive Services Health Manager is responsible for

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- Providing and/or arranging training and technical assistance as necessary for special needs identified in the Health History.
- Attending Case Management for complex cases as needed.

#### 5. Physical Exam

The Comprehensive Services Clerk is responsible for:

- Providing a physical exam form (CSB 207-Report of Health Examination for Program Entry) to the parent and informing the parent of the 30 day requirement prior to enrollment.
- Educating the parent about the Early and Periodic Screening, Diagnosis and Treatment schedule copied on the back side of the CSB-207 exam form.
- Noting in the Child Case Notes in CLOUDS that the parent was given a physical form.
- Referring the parent to a medical provider/insurance as needed.
- Inputting the physical exam data into CLOUDS upon receipt and documenting data entry in CLOUDS by placing clerk's first initial, last name and date on the upper right hand side of the exam.
- Immediately, upon receipt of exam, reviewing the information and notifying the Comprehensive Services Assistant Manager of any known or suspected disabilities.
- Entering follow-up data on the CSB-207 under "Staff Follow up: and into CLOUDS as needed.
- Collecting consents for release of information from parents and faxing them to providers to obtain incomplete/missing results.
- Making follow up calls to clinics, doctors' offices, and laboratories to obtain missing results.
- Tracking physical exam due dates and sending reminder notices to parents as needed.
- Providing handouts for screening value results and guidelines as needed.
- Providing exclusion letters at the direction of the Site Supervisor.

#### CHDP Assessment Guidelines for Blood Pressure Readings:

Further evaluation or follow-up is indicated for a child who sustains a systolic or diastolic reading at or above the 95th percentile for age and gender (measured on at least 3 occasions and averaged together). In the case results are entered in CLOUDS as "Abnormal" and a CLOUDS health referral is generated.

Age in Years	90th and 95th PERCENTILE BLOOD PRESSURE ACCORDING TO AGE and GENDER							
	Boys				Girls			
	Systolic		Diastolic		Systolic		Diastolic	
	90th%	95th%	90th%	95th%	90th%	95th%	90th%	95th%
3	107	111	68	73	106	110	69	73
4	108	112	69	73	107	111	69	73
5	109	113	69	74	109	112	69	73

The Comprehensive Services Assistant Manager is responsible for:

- Reviewing all physicals with known or suspected disabilities immediately upon receipt of exam.
- Initiating care plans with providers as appropriate.
- Conducting follow-up with parents on an ongoing basis.



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- Conducting follow-up with providers to obtain documentation to complete the exam data or to obtain follow-up information.
- Monitoring physical exam due dates to ensure compliance with the EPSDT Schedule.

The Site Supervisor is responsible for the following:

- Notifying the parent of the 30 day requirement at enrollment.
- Tracking receipt of the annual physical exam for preschoolers on an ongoing basis
- Tracking receipt of Well Child Exams for infants and toddlers in accordance with the EPSDT Schedule.
- Ensuring that no child is in the program without a physical past 30 days (one extension allowed with documentation of a pending appointment).
- Directing clerks to prepare exclusion letters as necessary.
- Issuing Notice of Action (NOA) for children in state-funded programs that have not complied with requirements.
- Referring families who need assistance in accessing care to the Comprehensive Services Team.
- Reviewing the physical exam for each child and calling for case management when appropriate.
- Working with teaching staff to ensure child's medical and developmental needs are addressed appropriately.
- Ensuring implementation of care plans.

The Comprehensive Services Health Manager is responsible for the following:

- Supporting staff and attending Case Management for complex cases as needed.
- Interfacing with community partners for health education, services and assistance.

#### 6. Dental Exam

Comprehensive Services Clerks are responsible for:

- Informing parent of the 90 day dental exam requirement upon enrollment.
- Educating the parent about the Early and Periodic Screening, Diagnosis and Treatment Schedule for Dental/Oral Health Care.
- Providing parent with the dental form (CSB-206).
- Providing a list of dental providers/insurance to the parent as needed.
- Tracking dental exam due dates on an ongoing basis.
- Preparing reminder letters to parents and follow-up letters to dental providers as needed.
- Entering dental exam data into CLOUDS upon receipt and documenting data entry in CLOUDS by placing first initial, last name and date on upper right hand corner of the exam.
- Collecting consents for release of information from
- Generating referrals for children without dental care access, treatment needed or non-compliance issues as needed and documenting referral follow up under referral/ case notes.
- Obtaining parental dental consents for onsite dental services and events.

The Comprehensive Services Assistant Manager is responsible for:

- Monitoring dental exam due dates on an ongoing basis.
- Following up to ensure treatment plans are in progress, ongoing or complete.
- Conducting case management for dental access or non-compliance issues as needed.
- Assisting the Comprehensive Services Manager with coordination of exams by volunteer dentists/mobile dental care, and other oral health events/services.

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The Site Supervisor is responsible for:

- Collecting dental forms and forwarding them to Comprehensive Services Clerks.
- Attending case management for dental issues as needed and keeping teachers informed with updates.
- Coordinating with Comprehensive Services staff for onsite dental activities/trainings.

The Comprehensive Services Health Manager is responsible for:

- Coordinating volunteer dentists, mobile services and oral health events on an ongoing basis.
- Attending case management for complex dental issues.
- Interfacing with the Children's Oral Health Program, Contra Costa Dental Society and other community partners for oral health education, services and assistance.

#### 7. Staff Protocol for Dental Referrals

If Dental Exam indicates Treatment Needed:

The Comprehensive Services Clerk is responsible for:

- Generating a Dental Referral and updating the status as needed in CLOUDS.
- Determining dental insurance status and providing a list of local community dentists and/or community clinics (dental care providers near family's home, work and/or childcare center) and/or the Ronald McDonald Care Mobile (RMCM) schedule—for families with Denti-Cal or Healthy Families.
- Providing the parent with "Dental Exam/Treatment" Form (See Form CSB206).
- Entering contact information and date provided or RMCM referral information in CLOUDS Dental Referral Case Notes (indicating status "in progress").
- Following-up with the parent regarding the status of scheduled appointment within 2 weeks and frequently thereafter until treatment is complete and enter each follow-up activity in CLOUDS Dental Referral Case Notes (once treatment is finished enter status "complete").
- If parent/child does not have dental insurance
  - Contact the parent to discuss options including community clinics, volunteer dentists, Ronald McDonald Care Mobile, and/or CHDP Gateway to Health Coverage or the Lebow Foundation.
- Providing the parent with "Dental Exam/Treatment Needed" Form (See Form CSB206).
- If the preferred option is RMCM, contacting CSB area liaison for status of services/to begin the referral process.
- If the option selected is CHDP Gateway, providing the parent with contact information for the designated community clinic or Financial Counseling Line for county clinics.
- Entering option selected and date information was provided to parent in CLOUDS Dental Referral/Case Notes (indicate status keep "in progress").
- Referring to the CSAM if the family has exhausted all options without success

The Comprehensive Services Assistant Manager is responsible for:

- Monitoring CLOUDS reports to identify children in need of dental services, referrals and follow up.
- Following-up with the Comprehensive Services Clerks and the parent to assist with extended "in progress" referrals.

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- In cases where CHDP Gateway pre-enrollment eligibility determination is “No” and/or parent cannot afford treatment, referring to local clinics, the Children’s Oral Health Program, Give Kids a Smile dentist or the Lebow Foundation.
- Entering status/follow-up data in CLOUDS Dental Referral Case Notes.

Referring to the Comprehensive Services Manager for health if services for treatment cannot be provided. Referring to the Comprehensive Services Health Manager if services for treatment cannot be provided the Comprehensive Services Health Manager is responsible for:

- Collaborating with community partners to provide services on site or through local dental offices and dental events.
- Initiating the request process for Head Start funds (last resort) – working with CSAM to acquire treatment estimate, letter from parent, date of dental appointment and additional documents needed.

#### 8. Medical/Dental Home

Comprehensive Services Clerks are responsible for:

- Assisting families with health/oral health homes and coverage as well as applications as needed.
- Documenting Medical/Dental interventions and health/oral health coverage in CLOUDS within 90 days of enrollment.
- Providing ongoing support for families in need of a medical/dental home.

#### C. Developmental, Sensory, and Behavioral Screening

All children are screened by the teaching staff in the areas of social emotional development, speech, self-help skills, motor and cognitive development, and as needed, by the Comprehensive Services Team for hearing, vision, and nutrition, within 45 days of class entry. Parents should be informed about all screenings and their purposes in advance. The results from the screenings are used as part of the individualization process for each child.

It is the Site Supervisor’s responsibility to work with the teacher and Comprehensive Services Team to ensure that the speech/language, mental health, sensory and developmental screenings are completed within 45 days of class entry.

The teacher places completed copies of the Speech and Language Checklist, Brigance Cognitive Screening and Behavioral Screening in the Education section of the child’s file and enters screening data in CLOUDS. The originals are placed in the child’s file in the education section. If concerns are noted, the appropriate service area staff will follow up to ensure services meet the needs of the child. Teachers will give each child time to adjust to the new environment before completing this form.

#### 1. Protocols for Sensory (Visual and Hearing) Screening

Screenings are to be completed within 45 days of enrollment for children who do not have results as part of their Well Child Exam and for returning children, as needed, based on the EPSDT schedule.

The Comprehensive Services Assistant Manager is responsible for:

- Identifying those newly enrolled children in need of initial screenings, returning children in need of screenings based on the EPSDT schedule and re-screenings due within two weeks of the initial screening through use of CLOUDS Smart Reports.

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#### Section 2: Child Development

- Coordinating screening team logistics for Comprehensive Services Clerks to administer screenings on an ongoing basis.
- Notifying the Site Supervisor of the upcoming screening schedule with a minimum two week notice. Note – Two week notice may not apply for children absent on the initial screening date.
- Directing Comprehensive Services Clerks to input data results in CLOUDS, preparing referrals as needed and providing follow-up until treatment is established and complete.
- Tracking referrals to physicians and providing ongoing assistance to clerks and parents until testing/treatment is established and the referral is complete.
- Completing vision and hearing screening certification courses as soon as possible after hire.

The Site Supervisor is responsible for the following:

- Obtaining a screening schedule from the Comprehensive Services Assistant Manager and providing a schedule for teaching staff.
- Providing teaching staff with the screening preparation curriculum.
- Monitoring the implementation of screening preparation in the classroom curriculum and on the lesson plan.
- Providing an appropriate screening area on site for the administration of screenings.
- Designating teaching staff to accompany children to and from designated screening location.

The Teaching Staff is responsible for:

- Implementing screening preparation curriculum in the classroom.
- Including screening preparation on the lesson plan. Note – In an effort to complete all screenings within the 45-day deadline, it is important to include screening preparation into the lesson plan for the first week of school for part year programs and two weeks prior to July 1 for year round programs.
- Providing flexibility with the classroom schedule to support Comprehensive Services in completing the screenings.
- Introducing Comprehensive Services Staff to children on the screening day.
- Assisting Comprehensive Services with gathering children to be screened. Tracking children as they are removed from and re-enter the classroom and accompanying children to and from the screenings as directed by Site Supervisor.
- Completing the Educational areas of the Screening Results Form (See Form CSB212) including the Brigance, Sp/Lang and Behavioral areas, signing in the designated area.
- Assisting with the distribution of Screening Results Forms (See Form CSB212-Screening Result) to parents.

Comprehensive Services Clerks are responsible for:

- Engaging parents in conversation about the importance of screenings.
- Notifying parents of dates and screenings to take place by posting a flyer on site, one week in advance.
- Reviewing reports of children to be screened.
- Verifying consents for screenings on the Health History forms of those children to be screened
- Obtaining additional consents for screening to be administered by collaborative agencies as needed.
- Obtaining equipment needed and setting up screening tools on site.

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- Introducing screening staff to the classroom teaching staff and allowing teaching staff the opportunity to introduce the screening staff to the children.
- Encouraging teachers to assist in choosing the order in which the children will be screened.
  - Note – Those children unwilling to participate will be given future opportunities and parents and/or staff may be encouraged to accompany the child to complete needed screenings within the 45-day deadline.
- Partnering with teaching staff and Site Supervisors to accompany children to and from the classroom to the location of the screening administration.
- Administering the vision and hearing screenings and, noting results for input in CLOUDS.
- Cleaning up the equipment and leaving the area as it was found.
- Entering all screening data in CLOUDS and documenting screening results, re-screens and referrals.
- Informing the Comprehensive Services Assistant Manager and Site Supervisor of those children in need of re-screening.
- Administering re-screenings within two weeks of the initial screening and within 45 days of enrollment if the child was unable to condition.
- Preparing referrals to physicians and in CLOUDS for those children identified as needing further evaluation.
- Contacting parents of children with referrals, offering resources for a medical/dental home and additional assistance as needed.
- Completing the Screening Results Form (See Form CSB212-Screening Results) and ensuring that the education section is also completed prior to making a copy for the file and distributing the original to the parent in a confidential manner within 75 days of the child's date of enrollment.
- Providing ongoing assistance for referrals and resources until each referral is complete.
- Completing vision and hearing screening certification courses as soon as possible after hire.

The Comprehensive Services Health Manager is responsible for:

- Overseeing the monitoring of all sensory screenings, referrals and follow up.
- Coordinating the annual Vision/Hearing Screening Trainings with CHDP.
- Registering Comprehensive Services Staff in need of vision/hearing training and certification as soon as possible after hire.
- Coordinating screenings with collaborative agencies and notifying the Site Supervisor and Comprehensive Services Team of those screening dates and requirements.

#### D. Follow-Up and Treatment

Early medical/dental exams and other screenings enable parents and program staff to identify any concerns and respond in a timely manner. Whenever concerns are present the Comprehensive Services Team works with the parent to obtain necessary follow-up services or treatment. Assistance is provided in the acquisition of equipment needed for medical/dental conditions and parents are educated regarding their child's specific condition and needs. Dental follow up/treatment includes preventive measures and further treatment as ordered by the dental professional.

Medical Treatment includes treatment of any condition as identified in the physical exam, IFSP, or IEP. Follow-up treatment is tracked in the CLOUDS system using the referral feature and is referenced in the child's confidential file.

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Where no resources exist in the community for follow-up and treatment, the program will pay for services as long as funds remain in the budget earmarked for this purpose. To access program funds, the Comprehensive Services Team must document that all available resources have been exhausted and that program funds are being used as a last resort. This information, along with proof of need and the estimated cost for treatment, must be submitted to an Assistant Director for approval and submitted to the fiscal unit and the Bureau Director.

##### 1. Protocols for Referrals, Follow Up and Treatment

The Comprehensive Services Clerk is responsible for:

- Generating a referral in CLOUDS as soon as a need is identified
- Assisting in collecting documentation regarding the case management process on an ongoing basis
- Entering related data into CLOUDS

Comprehensive Services Assistant Managers are responsible for:

- Monitoring CLOUDS reports and following up on referrals on a weekly basis
- Supporting families through the referral/case management process
- Updating the status of the referral as it changes
- Contacting the Comprehensive Services Manager for training or technical assistance as needed.

##### 2. Monitoring and Tracking

Comprehensive Services Assistant Managers are responsible for the following on an ongoing basis:

- Monitoring the process for accuracy and compliance.
- Creating action plans as needed
- Providing reports and updates to the Assistant Directors as needed
- Providing training and technical assistance as needed

Assistant Directors are responsible for:

- Reviewing reports
- Ensuring follow-up and corrective action plans completion

##### E. Children with Disabilities- Screenings, Case Management and Referral Procedures

Early childhood experiences are known to shape the developmental outcomes for children. Trauma during the early years also affects long-term outcomes by impacting brain development, cognitive, physical, and social/emotional functioning. The Community Services Bureau has systems in place to mitigate these factors which include early screenings/assessments, case managements and linkage with appropriate agencies to provide any/all necessary comprehensive services the child and family might need. Parents need to agree and provide a written consent (Sign CSB 501 Form) prior to receiving referrals or linkages to any other agencies. Agencies closely working with the Community Services Bureau are: the Regional Center of the East Bay, the Contra Costa School Districts, the Contra Costa Children and Family Services Bureau among others.

##### 1. Screenings

The Community Services Bureau is committed to early identification of children at risk of developmental delays in order to provide the necessary early intervention that will lead to a better future for the child.

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Prior to enrollment during the application period the child's file might be flagged using the Red and Yellow Flag System to alert the staff of known or suspected concerns based on the completed health history by the parent. The health history briefly screens children for possible health, nutrition, and socio-emotional and developmental risks.

Child's Physical Exams/Baby Well Checkups provide a great source of information and they are given to us by the parents within 30 days of enrollment and thereafter as required by the EPSDT schedule.

In addition, sensory and developmental screenings and assessments are provided to all enrolled children within 45 days of enrollment.

Children determined to be in need of further evaluation/assessment based on screening results, staff observations, and/or parent observation are referred to the appropriate agency with parental consent.

#### 2. Data Gathering, Case Management and Referral

The Community Services Bureau staff follows the next steps when referring a child for a diagnostic assessment and early intervention to an outside agency.

##### i. Data gathering by CSB staff prior to Case Management Meeting

- The child's file and the CLOUDS system are reviewed to identify other related concerns.
- The developmental history taken at enrollment is reviewed. (It provides information regarding the child's history of exceptional items not normally occurring, i.e., low birth weight, allergies, premature and/or post-mature, difficult birth, accidents, eating behaviors, meeting milestones and/or other concerns).
- The medical records completed in the last 12 months are reviewed to identify health concerns or other relevant information given by the pediatrician.
- The sensory/cognitive screening and assessment results are reviewed and verified to ensure further evaluation if necessary.
- The Initial Home Visit form (CSB 170) is reviewed to identify parent's concerns.
- The At Risk Referral Form (CSB 622) is reviewed. (CSB 622 form indicates that the child/family has as an open CFS case and is receiving Child Protective Services and childcare/development services are necessary component of the Child Protective Services Case Plan or the child/family has an At-Risk Case and is NOT receiving Child Protective Services, but is at risk of abuse, neglect or exploitation and childcare and development services are needed to reduce or eliminate the risk).
- Teacher/Site Supervisor/Disabilities Comprehensive Services Disabilities Manager observes the child in the classroom and produces written documentation about child's strengths and challenges.

##### ii. Case Management Meeting

After gathering data, the site supervisor, teacher and CSAM review the strategies that will be presented to the parent in a case management meeting.

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The Site Supervisor/CSAM invites the parent/s to a case management meeting to be held at the parent's convenient time and to identify if the parent will need an interpreter.

The CSAM invites the additional team members in collaboration with the site supervisor. The case management team members include but are not limited to the class teacher, the Site Supervisor, the assistant manager, content area managers, the interpreter, any other family friend/relatives, the physical therapist, the occupational therapist, the speech/language therapist, CFS welfare social worker and any other professional involved with the child/family receiving services.

The meeting is facilitated by the CSAM but can be led by other agency staff. The meeting is documented in the Case Management Form (CSB 514) and/or directly entered in CLOUDS under "Disabilities-Case Management Information" attached to the Meeting/Event sign-in Sheet Form (CSB 905). All participants are required to sign the CSB 905 form. These original forms will be placed in the child's file under the Special Needs Section.

The purpose of the meeting is to open communication relevant to the individual needs of the child, to provide strategies for the parent and to place necessary referrals to outside agencies for further evaluations. The case management meeting is dismissed after identifying actions, roles and responsibilities for each member and scheduling a follow up meeting if necessary.

#### iii. Referral

Based on the agency identified for referral, the CSAM will explain in detail the requirements for their referral process, their timelines, and provide copies of the parent rights and responsibilities under IDEA to the parent. It is crucial that this portion be clear to the parent and an interpreter assist the parent with any clarification.

The parent is encouraged to sign the Child Referral and Parent Consents Form (CSB 501), only after understanding the referral process and his/her parent rights under IDEA. The assistant manager assists the team by providing the copy CSB 501 form to be signed.

For Mental Health referrals, the medical provider information is completed on the referral form and a copy of the child's Medical card (if insured) is attached. When a child is on disciplinary steps and has a behavior action plan, a copy of this plan, the child's Devereux Early Childhood Assessment and Development Screening is included with the referral.

The Child Referral and Parent Consents Form (CSB 501), is reviewed to ensure the document is correctly filled out after acquiring parent signature. Additional signatures are obtained from the Site Supervisor and the Comprehensive Services Assistant Manager. A copy of this form (CSB 501), is given to the parent, one to the assistant manager to process the referral and the original is placed in the file.

The CSAM reviews the signed CSB 501 and processes it immediately. Once verified referral receipt by phone with the appropriate School District, Early Intervention Agency, or Mental Health Unit, the assistant manger completes the Response to Referral Form (CSB 502).



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The original form (CSB 502) is placed in the child's file while the copy is given to the parent attached to additional relevant informational resources.

The CSAM enters the referral notes in the "Disability Intervention Referral", "Intervention Notification" and "Case Management Information" under the disability tab in CLOUDS. Copy of the case management (CSB 514) or Case Management CLOUD's print out form is placed in the child's file.

The CSAM contacts the family for a follow-up within 30 and 60 days after submitting the referral to ensure proper evaluation meetings are in place, proper support is given to the parent in preparation of the diagnosis meeting, and ensure participation in the IEP/IFSP meeting.

Additional Case Management will follow up as needed and/or as determined in the initial meeting.

#### F. Child and Family Mental Health Services

##### 1. Description

The Community Services Bureau Mental Health Unit provides individual psychotherapeutic services to children enrolled in the Early Head Start and Head Start program. The staff provides individual and group consultation to parents and teaching staff on child abuse, parenting skills, parent advocacy, developmental and mental health issues impacting the 0-5 year-old population and their caregivers.

The Mental Health Unit operates a comprehensive Master's level Internship Program in collaboration with Contra Costa County Health Services Department, Mental Health Division on a year-round basis.

The Contra Costa County Community Services Bureau program staff, partners with parents and mental health professionals, to identify mental health concerns of children and parents in the program. The task of the Case Management Team is to:

- Ensure the delivery of appropriate mental health services in a timely manner
- Assist in designing strategies to identify mental health concerns of children
- Recommend appropriate placement and/or program modifications to meet the individual needs of children
- Support and include parents in the decision making regarding mental health services for their child

##### Goals of the Mental Health Unit

- Some of the goals of prevention activities address self-concept, building positive relationships among children, their peers and their caregivers; developing coping and problem solving skills, and stress management.

##### 2. Mental Health Services

The Mental Health Unit delivers the following services:

- Prevention, early identification and intervention in problems that may interfere with a child's development
- Developmental/Social and Emotional Screening (ASQ3 and ASQSE)
- Focus on early detection of concerns of caregivers, staff and children who may be in need of mental health services
- Mental health assessment

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- Play Therapy (Individual Psychotherapy with children)
- Family Support
- Parent (Guardian) – Child Interaction Therapy
- Staff Training on mainstreaming and social integration techniques
- Parent Training on social, emotional and mental health development of children
- Parent Training on positive child rearing techniques and stress management
- Program evaluation and performance partnership review to ensure planning and delivery of excellent supports and services.
- Case Management
- Crisis Intervention
- Provide community resources to families
- Child Abuse and Domestic Violence awareness

The objectives of Mental Health treatment are to alleviate and resolve identified symptoms per a diagnosed mental health issue and medical necessity. The clinicians perform assessment and ongoing treatment based on a diagnosis by their licensed supervisor. The treatment is provided in accordance with the parent or legal guardian's consent; parents or guardians are encouraged to be active participants in the treatment planning process as outlined by the Head Start Performance Standards.

Services are individualized and are primarily provided at the preschool sites in dedicated play therapy rooms. The Clinical Team coordinates care of children, parents and families with other contracted and non-contracted county child and family service agencies while a child is enrolled in and transitioning out of Head Start. The hours of operation vary depending on the child's school program and individual needs. The school sites are generally open Monday through Friday, 8:00 a.m. to 5:00 p.m., and clinicians provide some services in the early morning or evening to accommodate caretakers' work schedules. Additionally, all Mental Health staff is available via voicemail, and email through the Mental Health unit administrator.

#### 3. Mental Health Referral Procedures

If recommendation is for referral to Mental Health services within Head Start/Early Head Start or other agency, the Education Staff or Comprehensive Services member will follow this protocol:

The child's teacher is responsible for:

- Consulting with Site Supervisor to recommend a referral.
- Providing documentation regarding concerns such as Positive Guidance Plan, tracking report, observations.

The Site Supervisor is responsible for the following:

- Reviewing child's file and any pertinent screening results such as Brigance, DECA, Health History to identify and gather additional information to share with appropriate parties as support for the referral.
- Scheduling a meeting with parent to offer mental health services for additional services.
- Completing referral forms and securing parent consent and signature. (CSB 501 Child Referral and Parent's Consent)
- Processing the referral with the appropriate Comprehensive Services Assistant Manager.

CSAM are responsible for:

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- When Comprehensive Services Assistant Managers receive a referral for MH, they must thoroughly review it before processing. All sections of the referral must be filled out on the CSB501 form (See CSB Forms) including:
  - Name
  - Birthdate
  - CLOUDS ID#
  - Center name and EHS or HS checked
  - MediCal #
  - Check if child has a Positive Guidance Plan and provide copy of the plan with referral
  - Check if child is on one of the 4-Step Discipline Policy Steps, and if applicable, indicate which step and provide copy of the Discipline Letter
  - Address
  - Phone #
  - Parent's name
  - Home Language and English skills level of Parent and child
  - If child is being raised by grandparent or foster parent
  - Name of person making referral (not just "teacher")
  - Reason for Referral
  - Initials for consent for assessment and exchange of information, signatures and dates.
  - CSAM name and phone number
- Provide parent with copy of referral
- Entering the referral in CLOUDS
- Entering the reason for the referral in the comment section
- Entering 'Parent Consent for Release of Info' as 'Received' and entering the date that the parents signed the form
- Entering the child's Medi-Cal Number in CLOUDS
- Faxing referral with cover sheet to confidential fax at CSB Mental Health Unit at (510) 374-7033. and Including the following documents:
  - Completed Referral Form
  - MediCal Card or other insurance documentation
  - Positive Action Behavior Plan/Discipline Step Policy Letter if on file
  - DECA (as available)
- Sending email or call Mental Health Manager and Mental Health Clerk to advise that referral is being faxed. Include the following information:
- The CLOUDS # of the child
- If it is a high priority case and needs immediate attention, such as a CFS At-Risk referral, use the High Priority Flag on the email, and write in, "High Priority Case-Please process ASAP".
- Changing referral status from "New" to "In Process"
- Changing the referral status in CLOUDS from "In Progress" to "On Going" when a clinician has been assigned
- Adding extra notes under Case Notes as applicable
- Scheduling case management
- Creating a new Referral in CLOUDS if there are no available case openings, the child is not eligible for Medical Services, or the parent declines services and an outside provider is available

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- CSAM will follow-up with the parent to see if they are receiving services. Update in CLOUDS Referral section and note when the child is actually receiving outside services
  - CSAM will continue to communicate with Site Supervisor and the Mental Health team regarding services or for support in providing referrals
- If parent fails to obtain outside services, CSAM will assist in finding services and check back periodically with MH clerk to see if CSB MH has case openings and is able to serve the child, CSAM, updates CLOUDS to reflect status of referral (Complete, Parent Refused).

Mental Health Clerk is responsible for:

- Verifying if the child qualifies for services
- Entering in the Case Notes section of the referral, beginning with the date, and ending with her first initial and last name.
- Sending an email to CSAM and Site Supervisor to let them know the referral was received. The referral will be processed and assigned to a mental health clinician who will perform an assessment and provide ongoing services if the child symptomatic behaviors meet medical necessity for treatment.
- Emailing the CSAM and Site Supervisor with child's CLOUDS # with the child's MediCal eligibility status and advise if services can be provided or if an outside referral is needed.
- Entering in the Mental Health Section of CLOUDS "Facilitated Referral"
- Sending an email to CSAM and CSB Site Supervisor to inform that the child's case has been assigned to a clinician and when services will begin.
- Entering the clinician assignment in the Mental Health section and Case Notes of CLOUDS
- Emailing the CSAM and Site Supervisor when a referral is closed or returned.

The Mental Health CSAM is responsible for:

- Advising CSAM if there are no available case openings, the child is not eligible for Medical Services, or the parent declines services.
  - Case Management may be held to provide support/follow up and/or additional resources to parent.
- Recommending a referral for outside services if appropriate (and document in referral section of CLOUDS) and communicating to site supervisor and CSAM.
- Including CSB site supervisors in e-mail notifications. (The CSAM will notify Partner agency staff)

Clinicians are responsible for:

- Contacting the child's parents to obtain informed consent and to start services
- Consulting with CSAM to advise and/or coordinate first parent contact meeting as appropriate

CSAM or Mental Health Assistant (whichever applicable) will update CLOUDS in the Referral Section and change status of the original referral and select "Complete" from the drop down menu and provide brief explanation in Observation Comments Section.

#### 4. Mental Health Emergency/Crisis Referral Procedures

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If a CSB Site Supervisor and/or CSAM believe that a child is experiencing and/or responding to an emotional crisis or emergency in their life and need urgent mental health intervention, the following people in this order should be notified before making a referral:

- Mental Health Clinical Supervisor, Lora Groppetti: (925) 890-7540
- CSAM/Mental Health, Rowena (Reena) Torres: Cell (925) 383-4913
- Lead Assistant Director, Janissa Rowley: Cell (925) 525-9951
- Cluster A Assistant Director, Pam Arrington: Cell (925) 864-9084
- Cluster B Assistant Director, Carolyn Johnson: Cell (925) 852-9735
- Comprehensive Services Assistant Managers (If MH Manager or ADs cannot be reached)

The responding Mental Health Manager, Clinical Supervisor or Agency Manager will determine an appropriate intervention or course of action based on the level of crisis and an initial clinical assessment. If CSB Mental Health determines that the case needs specialized intervention that CSB cannot provide, the responding clinical supervisor/manager will assist site staff in the facilitation of an appropriate outside referral. If the CSB Mental Health team can provide treatment and the child is determined to be in crisis, a referral will be processed and treatment will be provided regardless of the child's MediCal eligibility.

The referral should be rushed through the current procedure; MediCal eligibility and/or health insurance information can be checked after the referral is faxed to the mental health unit (refer to Mental Health Referral section: Section 2, Part 1, F3).

##### 5. Mental Health Professional Staff

The Mental Health unit employs licensed Clinical Supervisors and unlicensed Master's level staff working towards Marriage Family Therapist or Clinical Social Worker licensure and who are specialized in children and families Mental Health. The staff strives to provide excellent early intervention to children and support services to parent and guardian caretakers that are designed to meet their specific needs.

The Mental Health unit attempts to employ staff to accommodate the linguistic and cultural needs of a diverse Head Start population. The unit is supported by one full-time Bachelors level mental health assistant and seven CSB Comprehensive Services Assistant Managers. These staff help provide with the identification and facilitation of referrals.

To promote children's mental wellness, CSB develops collaborative relationships with local mental health agencies for the purpose of securing ongoing prevention, intervention, consultation, and direct services to the program's children and their families.

##### 6. Mental Health Services & Special Education Services Sign-In Protocol at All CSB Sites When Providing Mental Health and Special Education Services

The Mental Health Professionals and site staff will follow this protocol when Mental Health services are provided at all CSB sites.

Mental Health Clinicians are responsible for:

- Signing the Site Visitor log at each site visit when providing services to a child or attending a meeting. Only sign name and do not identify self as a Mental Health provider to ensure client confidentiality and comply with HIPAA regulations.

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- Adhering to appropriate classroom protocols when removing/returning child from/to classroom for play therapy services

Special Education Staff are responsible for:

- Accessing the Special Services Log from its locked location and sign it every time the Mental Health Intern or Special Education staff comes to the site to provide services to a designated child.
- Filling in the date and both the child's name and the intern's name.
- Giving special services log back to site staff (secretary at front desk, site supervisor) and ensure the log is returned to a locked file/drawer.

Front Desk Staff is responsible for:

- Signing a confidentiality statement annually.
- Making sure Special Services Log is filled out correctly.
- Ensuring that the Special Services Log remain in a locked location at all times when the intern/special education staff is not using it.

Site Supervisors are responsible for:

- Signing a confidentiality statement annually.
- Monitoring the safe locked storage of the Special Services Log.

CSAMs are responsible for:

- Signing a confidentiality statement annually.
- Entering all Special Services Log entries to the child's chart by the end of the month.

#### 7. Policy Regarding Response to Legal Situations

##### i. Description of CSB Policy Regarding Involvement in Custody Disputes by Treating Mental Health Clinical Staff

If there is a custody dispute involving the child who is receiving Mental Health services from CSB's Mental Health unit, it is the policy of this agency that the treating clinician or Mental Health Clinical Staff not get involved in such a custody dispute. This dispute may be between the parent and the system or between Social Services and the parent(s).

Mental Health Clinical Staff are discouraged from writing letter or reports in support of either side in such a dispute. The treating clinician will serve their client best by staying neutral in a custody dispute. Taking sides opens the door for the clinician to be asked to testify in a court of law and expose confidential client information.

If a parent (or Social Services) requests a written report about the child's treatment, and after a Release form has been signed by the parent, a short treatment summary should be composed and – upon approval by the supervisor – mailed to the child's parent ONLY.

##### ii. Description of CSB Policy Regarding Subpoenas

- Subpoena of Records  
If a subpoena for records is served to the treating clinician, the clinician must attempt to have the child's parent sign a release form permitting the release of a treatment summary. If such a

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release cannot be acquired, the clinician must claim the Psychotherapist/Patient privilege. The court will then have to override the privilege and request the records.

- Subpoena to Appear in Person  
If a subpoena to appear in person is served to the treating clinician, the clinician, upon consultation with his/her supervisor must also claim the Psychotherapist/Patient privilege. The clinician must not respond to or talk to any court representative, serving officer, or lawyer for any party, without the special written permission of the child's parent(s) (or Social Worker for Social Services). If a Mental Health Intern gets served with a subpoena, he/she should contact his/her supervisor immediately for a consultation.

#### 8. On- Site Mental Health Consultation

The Mental Health Clinical Supervisor and Comprehensive Services Assistant Managers facilitate and make referrals for psychological assessments for children having potential emotional or behavioral problems with parental written parental consent.

The Mental Health Clinical Supervisor and Comprehensive Services Assistant Managers utilize the Directory of County Mental Health Providers to make referrals when appropriate and work with parents to obtain information on available school resources and services in the area of mental health, locating placement for individual children including securing psychological services.

Parents and staff collaborate in the planning of all mental health and educational services.

The Mental Health Supervisor, clinical staff and Comprehensive Services Assistant Managers advise the site supervisor and educational staff on integrating mental health activities into the curriculum. Mental Health clinical staff collaborates with site supervisor and classroom teachers to implement strategies and plans related to social emotional curriculum. Periodic observation of children's behavior and classroom learning environment is performed. Case management meetings are held to discuss the observations with education staff, parents and/or Comprehensive Services Managers.

The Mental Health Clinical Supervisor and clinical staff provide workshops to staff and parents on topics relating to child mental health, such as childhood depression, management of difficult childhood behaviors, stress management, recognition of child abuse/neglect, increasing children's self-esteem, and play therapy and positive parenting. Information is also provided to staff on identifying mental health needs, making mental health referrals and utilizing case management to facilitate a referral. The Mental Health Clinical Supervisor and clinical staff provide consultation at case management meetings to discuss children who are presenting with atypical behavior or emotional/behavioral needs.

#### 9. Additional Mental Health Supports

Staff and parent support group meetings are held to discuss child mental health parenting and caregiver issues and challenges. Case management meetings are conducted a minimum of twice per year depending on the needs of the family.

##### i. Identifying Mental Health Concerns

Mental Health Staff collaborate with CSB health, disabilities, nutrition, and education colleagues and CFS to determine a child's need for a diagnostic evaluation. Diagnostic evaluations are recommended for all

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children who present with symptomatic behavior indicating signs of severe stress, social, emotional, educational, developmental delays and/or physical concerns.

Program staff, in partnership with parents, uses the following steps:

- The teacher and/or parent assess the child's behavior (through DECA, direct observation, monitoring tool etc.), and determine that there are concerns at school or at home.
- In the case of children involved in the Child Welfare System, the CFS worker may determine that a child needs assessment and/or intervention based on the child's exposure to trauma as a result of early abuse, neglect in addition to risk factors such as prenatal drug exposure, prematurity, low birth weight, poverty, homelessness, parental depression, and other mental health problems. The CFS worker may also deem that the child needs assessment and/or intervention as a result of the removal of the child from the biological home and placement in foster care.
- The teacher observes and records behavior and consults with Site Supervisor before requesting assistance from the Comprehensive Services/Disabilities/Mental Health Supervisor.
- The appropriate content area Comprehensive Services Manager reviews the child's file (or Child Health/Education Passport in CFS child case) for pertinent information (e.g., health issues, family history, Family Partnership Appraisal, screening results, and other areas of concern) that may have significant impact on the referral.
- If the recommendation is for referral to a school district or other agency, the nature of the referral is discussed with parent through a case management meeting. Staff checks with parent for understanding, and parent initials and signs the Child Referral Parent's Consents form CSB501. (see Mental Health Referral section)
- If a parent requests service only for him/herself, the Mental Health Manager or clinical staff will provide brief confidential consultation and appropriate referrals utilizing the County Mental Health Provider directory. If the parent's issues will have significant impact on the child's classroom behavior or emotional and/or physical health and well-being, appropriate steps are taken to ensure the child's safety and stability. Referrals are provided to Child Protective Services, County Health Services, and/or community agencies that assist with crisis, domestic violence, and homelessness.

#### ii. Strategies for Behavior Management

Any form of discipline or punishment that violates a child's personal rights is not permitted (see Discipline Policy section: Section 2, H).

The teaching staff must utilize positive guidance techniques and developmentally appropriate practices in managing children's behavior. Children respond differently to various intervention approaches, and have individual temperaments that staff must consider in behavior management.

- **STRATEGY A**-implement Best Practices
- **STRATEGY B**-Positive Behavior Action Plan (Refer to Form CSB-134B)
  - Case Management with parent/caregiver and site staff to develop plan
- **STRATEGY C**-Case Management
  - If behavior continues/escalates, review and assess the Positive Behavior Action Plan
- **STRATEGY D**-Discipline Policy Implementation



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- Apply only when Strategies A-C have been executed
- Site Supervisor must be consulted prior to implementation

##### STRATEGY A-Implementing Best Practices

Undesirable behavior, while a normal part of growing up, is discouraged or redirected. The following strategies reflect best practices for responding to inappropriate behavior:

- Anticipate/eliminate potential problems
- Evaluate and adjust the environment
- Redirect child away from conflict or negative events to more positive activity
- Offer choices to the child
- Assist child to learn logical/natural consequences of their actions
- Encourage respect for the feelings/rights of others
- Encourage initiative
- Encourage identification and healthy and socially acceptable ways to express emotion
- Encourage development of self regulation and behavior control through positive reinforcement of pro-social behavior

Additional behavior management strategies include:

- Let children know what is expected and why – Inform children what the rules are, and the reasons for these rules. Let children help create classroom rules. Example: “We walk inside – so we don’t bump into tables or other children.”
- Model/encourage expected behavior – Show children, with actions and words, what is expected. Praise children’s actions when appropriate. Example: “Thank you for helping!”
- Respect children’s developing capacities – Ensure that expectations match/respect children’s developing capacities. Example: do not expect a four-year-old to sit still/be quiet for long periods of time.
- Talk to children about why they are behaving a certain way – Kneeling down/getting on the children’s level and listening, communicates caring concern about them as individuals.
- When reminding children of expectations, move close to them, touching them gently on the hand or arm (if culturally acceptable).
- Be patient; wait for children to respond (when appropriate) –Tell a child what behavior is expected, and allow time for the child to process this information. Example: “When the toy is picked up, you may join us in the circle.”
- Allow someone else to step in and help – If a teacher becomes angry with a child, immediately ask another teacher/supervisor to help. (It is best to request another adult to take over until you have calmed down.)
- Observe/record behavior - especially recurring behavior – to determine factors involved in the behavior. Maintain a positive/loving attitude – Keep your sense of humor, do not focus on the difficult behavior. View the behavior and responses as opportunities to help children grow/learn.
- Discuss with children healthy ways to deal with anger, stress, and frustration.
- “Time out” for children is not an acceptable strategy for dealing with inappropriate behavior.
- Use Social Emotional Learning Curriculum (DECA) screening results to determine which protective factors the child needs help building and employ recommended classroom strategies to address the child’s need.

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- Consult with Mental Health clinical staff and collaborate with clinicians and parents to develop effective intervention plans.

#### STRATEGY B-Positive Behavior Action Plan

##### iii. Positive Behavior Action Plan

When the above listed strategies are ineffective, the next step is for teacher, with site supervisor support and guidance, to consult with parent to develop a Positive Behavior Action Plan (CSB-134B-Positive Discipline Action Plan). Steps include:

- Identifying the child's protective factors (Review DECA results)
- Defining the child's strengths
- Defining the child's social, emotional, physical, learning needs
- Defining the child's behavioral concerns
- Partnering with parent/caregiver through mutual decision-making process in:
  - Developing a plan to redirect the behavior with specific quantifiable and observable goals
  - Developing a plan to reinforce the child's positive behavior (specific strategies for intervention related to each goal).
- Set timelines for plan implementation and progress follow up (2-4 weeks should be given to implement behavior plan and should be followed up with case management within 4 weeks to review implementation and any needed changes)

##### iv. Case Management Team Meeting

After classroom observations have been completed, and DECA results have been reviewed, a Positive Behavior Action Plan that considers any necessary modification to environment and teacher/child interactions (per DECA), is developed and implemented. If there is little or no progress in relation to the goals of the plan, or the child's behavioral concerns increase, the Site Supervisor follows up with the Comprehensive Services Manager/Disabilities Manager/Mental Health Staff to schedule a Case Management Team meeting. A Comprehensive Services Assistant Manager or CS Manager will facilitate this meeting. The Case Management Team will discuss strengths/concerns/recommendations at this time. Please see Case Management section for more details.

#### G. Parent Involvement in Health, Nutrition, and Mental Health Education

CHDP consultants train parents and staff on prevention of common childhood illnesses.

(Contra Costa County Health Services) MediCal representatives provide education and information to parents and staff on MediCal application procedures and the Managed Care system.

Dental representatives train parents and staff on dental hygiene. A Mental Health Consultant trains parents and staff on early prevention/intervention of children's Severe Emotional Disorder, Behavior Disorders, and stress related behavior.

#### H. Discipline Policy

If a child consistently displays inappropriate behavior in the classroom, the teacher is responsible for calling the Site Supervisor immediately for assistance. If a child's behavior continues to escalate, the following guidelines will be followed in the classroom with the child (after having implemented the above strategies-implementing best practices and developing and implementing the Positive Behavior Action Plan).

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**In compliance with Section #101221 of the Licensing Code, and in support of children's right to be treated with dignity and respect, the following covers our philosophy and methods for handling behavior of young children.** Examples of hurtful behavior include biting, hitting, spitting, damaging school property or hurting classroom pets.

CSB will report to Community Care Licensing any incidents requiring medical attention

To ensure that CSB provides an environment that fosters the development of a positive self-concept and self-control, CSB will implement this four step discipline policy. After each step, staff and parents are required to sign that each step has occurred:

##### Step 1

If the child bites, hurts someone or damages school property for the first time, the teacher will inform the parent privately about the incident. At that time, parent is provided with resources and intervention strategies to address the specific behavior. The parent is asked by the site supervisor if they would like an information/linkage to parenting classes and/or consulting (confidentially) with a CSB Early Childhood Mental Health/Behavioral Healthcare specialist. The Site Supervisor will evaluate the incident in the classroom.

The following actions shall be taken:

Teachers are responsible for:

- Reviewing and completing the Discipline Policy- Step Letter to Parents form (CSB521- Discipline Policy and Step Letter) with parent and provide parent with copy.
- Informing the Site Supervisor about the incident by submitting the Accident/Incident Report (See Forms CSB208)
- Ensuring that the parent signs a copy of the "Accident/Incident Report"
- Reviewing the Positive Guidance Plan (if not already created) or provide a copy of the plan and additional documentation relating to child's behavior as applicable

Site Supervisors are responsible for:

- Evaluating the incident in the classroom.
- Reviewing and signing the Discipline Policy- Step Letter to Parents form (CSB521- Discipline Policy and Step Letter)
- Reviewing and signing the Accident/Incident Report (form CSB208).
- Offering parent resources and/or linkages to consultation.
- Discussing child referral for assessment with parents if appropriate and securing Parent's signature on a Child Referral Parent's Consent form (CSB501).

##### Step 2

If the child bites, hurts someone or damages school property for the second time, the parent will receive an incident report. The Site Supervisor will meet with parent to provide resources as needed to help deal with the situation at home and discuss how staff is dealing with the situation in the classroom. The site supervisor will offer the parent linkage to confidential consultation with the CSB Mental Health Staff.

The following actions shall be taken:

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Teachers are responsible for:

- Informing the Site Supervisor about the incident by submitting the second Accident/Incident Report.
- Meeting with the Site Supervisor and parent to discuss the second "Accident/Incident Report" and request the parent to sign.
- Reviewing the Positive Guidance Plan with parent for progress and modifications needed.

Site Supervisors are responsible for:

- Calling the parent immediately and setting up a conference to discuss the incident.
- Meeting with the teacher and the parent.
- Reviewing and signing the Discipline Policy- Step Letter to Parents form. (CSB521- Discipline Policy and Step Letter)
- Reviewing the Positive Guidance Plan and provide resources and make adjustments as needed.
- Offering parent linkage to confidential consultation with CSB Early Childhood Mental Health Manager or follow-up on previous referral to linkage.
- Discussing child referral for assessment with parents if applicable. Completing a Child Referral Parent's Consent form (CSB501) will be signed.
- Scheduling a case management meeting with parents to discuss new strategies for behavioral modification and the possibility of a more appropriate placement for the child.
- Requesting Education Manager to observe classroom.

#### Step 3

If the child bites, hurts someone, or damages school property a third time and the two previous steps are proving to be ineffective, parent is required to attend a team meeting to discuss the possibility of a more appropriate placement for the child and referrals are provided.

The following actions shall be taken:

Teachers are responsible for:

- Informing the Site Supervisor about the incident by submitting the third "Accident/Incident Report".
- Reviewing and modifying child's progress report and the Positive Guidance Plan if needed with team and Site Supervisor for behavioral modification.

Site Supervisors are responsible for:

- Calling the parent immediately to pick up his/her child if necessary.
- Reviewing and signing the Discipline Policy- Step Letter to Parents form. (CSB521- Discipline Policy and Step Letter)
- Following-up on previous linkage to referral given.
- Securing parent's signature and date "Accident/Incident Report."
- Provide documentation on the child's progress which may include review of teacher's progress report, Positive Guidance Plan or any other behavioral monitoring tool.
- Requesting assistance from Comprehensive Services Manager and informing Assistant Director as needed and Mental Health Clinician if child is receiving mental health services.

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##### Step 4

If the three previous steps prove to be ineffective and the child bites or hurts someone, or damages school property a fourth time, the Site Supervisor and Comprehensive Services Assistant Managers are to assist the parent with securing or transferring the child to a more appropriate environment or program. The parent is given two week's written notice of the change or a Notice of Action to comply with the state regulations and termination notices). During this period program staff is to assist the parent in reviewing alternative referral services and advocating for entry into a new program.

The following actions shall be taken:

Teachers will be responsible for:

- Informing the Site Supervisor about the incident

Site Supervisor will be responsible for:

- Alerting the Assistant Comprehensive Services Manager, Comprehensive Services Manager & Assistant Director
- Reviewing and signing the Discipline Policy- Step Letter to Parents form (CSB521- Discipline Policy and Step Letter)

Comprehensive Services Manager will be responsible for:

- Conducting a case management with Site Supervisor and Assistant Director to consult and discuss child's alternative placement.
- Informing the parent about the child's alternate placement and referrals.

#### I. Case Management

##### 1. Description

Case management is a collaborative process involving parents, staff, social workers, specialized providers and specialists for the purpose of developing, implementing, coordinating, monitoring and evaluating plans and the various options and services available and/or required to meet children and family's needs. Shared decision making, open communication and promotion of the family and child's strengths are key elements to the process and essential to quality outcomes.

##### 2. Purpose

Case management at CSB is strengths-based and enhances access to care and improves the continuity and efficiency of services. Depending on the specific setting and location, Comprehensive Services Managers are responsible for a variety of tasks, ranging from linking clients to services to providing the services themselves. Other core functions include outreach to engage clients in services, assess individual's needs, and arrange requisite support services (such as housing, benefit programs, job training, and advocating for parents rights and entitlements).

Case management is not a time-limited service, but is intended to be ongoing, providing families whatever they need, whenever they need it, for as long as necessary. For children with disabilities or receiving mental health services, it is expected that at least two case managements are conducted per year.

##### 3. Role of the Case Management Facilitator

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A case management facilitator serves as a liaison between the family, service providers, teachers and Site Supervisors to identify what services and resources are needed. They meet with parents individually or as a multidisciplinary team; often at their respective sites, via telephone, or even in a casual environment, all for the purpose of enhancing communication between the present parties.

Case management services are best offered in a climate that allows direct communication between the case management facilitator, the parent, and appropriate program staff in order to optimize the outcome for all concerned. These meetings are always facilitated in a manner that is sensitive to the parent, child and family's needs, allowing the parent maximum opportunity for expression of their concerns, and help the parent develop advocacy skills. All concerns, agreements and process of the meeting are documented in the Case Management Report (form CSB514) and the parent is offered a copy of this report for their records.

Case management facilitators are able to identify those providers and facilities that can best serve the family's needs throughout the continuum of services, while ensuring that available resources are being used in a timely and effective manner for families. For example, parents in need of health-related support and services receive assistance in navigating the healthcare system and working with other outside agencies.

#### 4. Case Management Team Members

It is essential to not overwhelm parents by inviting too many people to the meeting or having too many items on the agenda. Many issues being discussed at these meetings are complicated and can be emotionally difficult for parents. It is also important to encourage the parent to bring an advocate if they feel that will help them better understand the information being discussed, or make important decisions. An agenda and introductions should be required for every meeting so that the parent know what the goals are and who they are sharing information with and understand team members roles.

The Case Management Team may include:

- Parents
- Teachers
- Site Supervisors
- Education Manager
- Disabilities Manager
- Mental Health Supervisor
- Health Manager
- Nutritionist
- Comprehensive Services Assistant Manager
- Other community professionals such as a Pediatric Nurse, Psychologist, Speech Therapist, Resource Specialist, CFS Child Welfare/Social Worker, Public Health Nurse, Special Education Teacher, and/or Mental Health professional

#### 5. Case Management Team Responsibilities:

- To respect the civil rights of the parents, children and families involved.
- To provide a confidential and safe place for the child/family information to be discussed.

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- To ensure that the child/family's private information is protected and managed in accordance with all state and federal laws.
- To review and discuss assessment, evaluation results, placement and outcomes for children.
- Review and discuss appropriate placement or action to be taken.
- Establish time lines and types of service delivery.
- Develop and implement Family Partnership Agreements with parents.
- Meet on an ongoing basis to review and discuss progress of child.
- Review and evaluate Behavioral Management Plan.
- Ensure that a family-focused approach is taken to ensure service delivery
- Develop and implementing transition plans for children.
- Ensure that strengths of children and families are encouraged and considered in identifying expected outcomes for children.
- Ensure that family priorities, concerns, and resources are recognized and are part of the Family Partnership Agreement.

#### 6. The Case Management Team Meeting

##### i. Description

A Case Management Team meeting may be called at any time for a child as the need arises. This meeting is conducted to exchange information, and to develop the most appropriate action plan for a child with disabilities.

These plans may include development of a Family Partnership Agreement (FPA) with the parent(s), home visits, referrals to outside agencies or professionals, requests for additional information from outside agencies or professionals, and classroom placement decisions or modifications. The following is the case management process:

- Site Supervisors and teachers review all children's files prior to Case Management
- Summary notes from the child's file will include but not be limited to health, dental, nutrition, disabilities, mental health, family services and parent involvement. All confidential mental health or other health records are stored in accordance with HIPAA.
- After files have been reviewed, the Site Supervisor will submit cases to the Comprehensive Services unit. The Comprehensive Services Managers will hold Case Management Meetings for all children with concerns or at high risk at any time as the need arises.

To provide continuity of care for children with disabilities, Case Managements are conducted as needed during the year.

##### ii. Referral for Inappropriate Behavior

If a teacher is concerned about a child's consistent display of inappropriate behavior, she/he should call their Site Supervisor.

The Site Supervisor, Head Teacher, classroom staff and Comprehensive Services Manager/Assistant Manager observe the child in the classroom and complete documentations on their observations for use at a Case Management Team meeting. A Case Management Team meeting must be scheduled to plan strategies on how to effectively meet the child's needs.

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The Comprehensive Services Manager/Assistant Manager will be responsible for:

- Creating an agenda that is provided to all participants and keeping the meeting on time/track and have all participants sign-in
- Facilitating Case Management Team meetings
- Coordinating and gathering relevant information before the meeting
- Keeping on file all documentation of Case Management Team meetings and record meeting notes on CSB514.
- Inviting all applicable parties or individual advocates working on behalf or providing services for child/parent (with parent consent), including but not limited to legal guardian, CFS Worker, Speech/language Therapist, Occupation Therapist, and Mental Health Therapist.
- Following up on next steps.

The Site Supervisor are responsible for:

- Reviewing classroom observations and Positive Guidance Plan with the teaching staff prior to a Case Management Team meeting
- Discussing strategies/intervention techniques with teaching staff prior to the Case Management Team meeting
- Discussing recommendations for referral with the parent(s) of a child with disabilities
- Coordinating meeting with CS staff so appropriate staff may attend

If Applicable, the Nutritionist and Health Services Manager are responsible for:

- Gathering relevant information before the meeting
- Writing nutritional plans for children and families

#### J. Child Abuse Reporting Policies

##### 1. CSB Staff Responsibilities

It is essential that all CSB program staff adhere to Mandated Reporters Law to report suspected non-accidental injury, sexual molestation, or infliction of physical and mental suffering and/or neglect of a child.

All personnel having contact with children are required by law to report all instances of suspected child abuse or neglect.

Grantee, Sub-contractors, and Delegate Agencies will maintain confidentiality of records concerning child abuse and neglect in accordance with state law and Head Start Performance Standards.

CSB staff provides children who are identified by Child Protective Services (CFS) as at-risk highest priority for intervention and placement in the school program; and make every effort to retain abused and neglected children and/or admit allegedly abused and neglected children referred by Child Protective Services (if the families are income-eligible).

The Comprehensive Services/Health/Disabilities/Mental Health Managers will coordinate activities regarding the issues of child abuse/neglect. Their responsibilities are to:



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- Providing training and consultation for staff and parents regarding identification / reporting of child abuse. The purpose of this training will be to educate participants that Abusing parents or caretakers need help and support - not punishment.
- Providing support services so that additional abuse/neglect does not occur.
- Providing training to parents and staff yearly on the significant aspects of abuse / neglect. Comprehensive Services/Disabilities/Mental Health Managers will maintain documentation of such training.
- Establishing liaison with Child Protective Services (which has legal responsibility for receiving reports of abuse and neglect).
- Collaborating with Human Resources to ensure that program staff is properly informed/trained on procedures for identifying/reporting suspected child abuse and neglect.
- Collaborating with Human Resources to ensure there is a signed document in each CSB program personnel file acknowledging that the person has been trained regarding child abuse and neglect.
- Ensuring that information/training is provided for parents and staff on the legal requirements regarding reporting of abuse/neglect.
- Providing written explanation of the legal requirements of reporting (given to every parent when he/she enrolls in the program)
- Obtaining a signed acknowledgment from the parent that he/she has received the information, and understands it (HS-610)
- Reviewing annually child abuse reporting laws and updating all employees on new requirements.
- Maintaining tracking sheet for all reports.
- Ensuring that parents are provided ongoing educational opportunities to learn about positive parenting and child abuse prevention techniques.

#### 2. Child Abuse Reporting Laws - Penal Code Sections

Section 11166 (a) - requires that any:

- Child care custodian
- Medical practitioner
- Non-medical practitioner
- Employee of a child protective agency

Anyone listed above having knowledge of, or observing a child in his/her professional capacity or within the scope of his or her employment whom he/she reasonably suspects has been the victim of child abuse, must report such suspected instance of child abuse to a child protective agency immediately by telephone (or as soon as practically possible), and must prepare/send a written report thereof within 36 hours of receiving information concerning the incident.

Section E of 11166 states, "The reporting duties under this section are individual and no supervisor or administrator may impede or inhibit such reporting duties and no person making such report shall be subject to any sanction for making such report. However, internal procedures to facilitate reporting and apprise supervisors and administrators of reports may be established provided they are not inconsistent with the provision of this article."

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Section 11172 (b) states, “Any person who fails to report as required by this article an instance of child abuse which he or she knows to exist or reasonably should know to exist is guilty of a misdemeanor and is punishable by confinement in the County jail for a term not to exceed 6 months or by a fine of not more than five hundred dollars (\$500) or both.”

#### 3. Child Abuse Reporting Procedure

All staff and volunteers in all divisions MUST report child abuse or neglect IF:

- They have knowledge of it,
- They have observed it, or
- They have reasonable suspicion of its occurrence or
- They receive second-hand information of the suspected abuse

The report must be made as soon as the suspected abuse is noticed. Report of child abuse takes priority over other matters. In Contra Costa County, it is the responsibility of the local Welfare Department and the police to assess whether or not abuse has occurred.

If you are unsure if a report should be made, discuss the situation with your immediate supervisor or your second level supervisor and/or consult the CFS directly (see contact information below). You may also call the Mental Health Unit for additional support at the following number: 925-335-8911 or 925-335-8940.

When any member of the CSB staff suspects abuse or neglect of a child, they should first check the child’s file to gather pertinent information; this information is for the purposes of reporting. Particular attention should be made to Health History, physical exam, and Family Partnership Agreement (to become familiar with any details that may provide further explanation for the incident prompting suspicion of abuse or neglect).

The following steps must be taken when a member of CSB staff suspects child abuse or receives the information second-hand

- Call Child Protective Services (Law requires the person suspecting child abuse/neglect to report it to Child Protective Services by phone immediately)
  - To report suspected child abuse, call Children & Family (Protective) Services, at (24 hour Hot Line) 1-877-881-1116
- Teachers to report to their Site Supervisor immediately the information that was reported to them
- Site Supervisors report the information to Assistant Director
- Assistant Directors report the information to Division Manager
- After an oral report is made, a written “Suspected Child Abuse Report” (see EHSD Intranet > FormSTAR > SS 8572) must be completed and sent within 36 hours to (mail or fax):

Central Screening Office  
Child Protective Services  
400 Ellinwood  
Pleasant Hill, CA 94523

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Fax: 925-602-6980/6981

- The Person Making the report must sign the written report and provide the report to their site supervisor.

Site Supervisor is responsible for:

- Maintaining and storing of any/all CFS reports in a locked confidential file, which is separate from the child's cumulative/educational file.
  - Sending a "Notification of Report" email to the appropriate Comprehensive Services Manager and Assistant Manager (of the corresponding Cluster) and Mental Health Clinical Supervisor, (Email should include only the CLOUDS child ID#)
- 
- Only authorized CSB staff will have access to review "confidential" files.
  - Comprehensive Services/Disabilities/Mental Health staff are to discuss the report with the family, when appropriate – with acknowledgment and approval of CPS.
  - Staff may choose to remain anonymous in filing the report.
  - This request must be honored, unless the case goes to court or there is further police investigation.
  - Content area managers meet regularly to discuss mutual areas of concern
  - The Mental Health Clinical Supervisor provides all requested and/or necessary follow-up and/or consultation to support parents and program staff with reporting or incidents involving reports or the removal of a child from the school program or by Child and Family Services.
  - The Mental Health Supervisor or assigned Mental Health staff actively collaborate with Children and Family Services to coordinate delivery of any/all necessary services to children, biological/foster parents to support family preservation, reunification and child/family mental health.

For CSB Mental Health staff, above reporting procedures applicable with the exception of the following:

- Inform and consult with clinical supervisor, rather than site supervisor.
- Provide copy of the CFS report to MH Clerk and file report in child's mental health file, not at site or child's cumulative file.

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#### **II. Services for Children with Disabilities**

##### **A. Purpose**

The Contra Costa County Community Services Bureau is consistent with both Federal and center regulations governing the rights of the disabled. Based on Head Start Program Performance Standards at 45 CFR part 1304, children with disabilities who are enrolled in Head Start programs receive all the services to which they are entitled.

The Contra Costa County Community Services Bureau recruitment efforts include recruiting children who have severe disabilities and must not deny placement on the basis of a disability or its severity to any child when:

- (1) The parents wish to enroll the child,
- (2) The child meets the Head Start age and income eligibility criteria,
- (3) Head Start is an appropriate placement according to the child's IEP/IFSP, and
- (4) The program has space to enroll more children, even though the program has made ten percent of its enrollment opportunities available to children with disabilities. In that case children who have a disability and non-disabled children would compete for the available enrollment opportunities.

The Contra Costa Community Services Bureau will access resources and plan for placement options, such as dual placement, use of resource staff and training so that a child with a disability for whom Head Start is an appropriate placement according to the IEP/IFSP is not denied enrollment because of:

- (1) Staff attitudes and / or apprehensions;
- (2) Inaccessibility of facilities;
- (3) Need to access additional resources to serve a specific child;
- (4) Unfamiliarity with a disabling condition or special equipment, such as a prosthesis;
- (5) Need for personalized special services such as feeding, suctioning, and assistance with toileting, including catheterization, diapering, and toilet training.

The same policies governing Head Start program eligibility for children without disabilities apply to children with disabilities.

The Contra Costa Community Services bureau has instituted a variety of enrollment placement options, including:

- Joint placement with other agencies
- Shared provision of services
- Shared district personnel to supervise special education services
- Shared enrollment slots
- Accepting kindergarten-aged eligible children in collaboration with school districts when IEP states the need
- Increased staff, such as classroom-support aides and volunteers

There are two kinds of children with disabilities identified for services:

- Children who may require special attention due to the specific high risk factors that do not have a diagnostic ability. These children may not have an IEP or IFSP.

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- Children who have been diagnosed by a certified and/or licensed professional as “possessing a disabling condition and have an IEP or IFSP.”

##### B. Definitions

(a) **ACYF**-Administration on Children, Youth and Families, Administration for Children and Families, U.S. Department of Health and Human Services, and includes appropriate Regional Office staff.

(b) **Children with disabilities**-Children with intellectual delays (mental retardation), hearing impairments including deafness, speech or language impairments, visual impairments including blindness, serious emotional disturbance, orthopedic impairments, autism, traumatic brain injury, other health impairments or specific learning disabilities; and who, by reason thereof, need special education and related services. The term children with disabilities for children aged 3 to 5, inclusive, may, at a State's discretion, include children experiencing developmental delays, as defined by the State and as measured by appropriate diagnostic instruments and procedures, in one or more of the following areas: physical development, cognitive development, communication development, social or emotional development, or adaptive development; and who, by reason thereof, need special education and related services.

(c) **Commissioner**-Commissioner of the Administration on Children, Youth and Families.

(d) **Day**-Calendar day.

(e) **Delegate agency**- A public or private non-profit agency that a grantee has delegated the responsibility for operating all or part of its Head Start program.

(f) **Disabilities coordinator**- Person on the Head Start staff designated to manage on a full or part-time basis the services for children with disabilities described in part 1308.

(g) **Eligibility criteria**- Criteria for determining that a child enrolled in Head Start requires special education and related services because of a disability.

(h) **Grantee**- A public or private non-profit agency that has been granted financial assistance by ACYF to administer a Head Start program.

(i) **Individualized Education Program (IEP)** - A written statement for a child with disabilities, developed by the public agency responsible for providing free appropriate public education to a child, and contains the special education and related services to be provided to an individual child.

(j) **Least Restrictive Environment**- An environment in which services to children with disabilities are provided:

(1) to the maximum extent appropriate, with children who are not disabled and in which;

(2) special classes or other removal of children with disabilities from the regular educational environment occurs only when the nature or severity of the disability is such that education in regular classes with the use of supplementary aids and services cannot be achieved satisfactorily.

(k) **Performance Standards**- Head Start program functions, activities and facilities required and necessary to meet the objectives and goals of the Head Start program as they relate directly to children and their families.

(l) **Related services**- Transportation and such developmental, corrective, and other supportive services as are required to assist a child with a disability to benefit from special education, and includes speech pathology and audiology, psychological services, physical and occupational therapy, recreation, including therapeutic recreation, early identification and assessment of disabilities in children, counseling services, including rehabilitation counseling, and medical services for diagnostic or evaluation purposes. The term also includes school health services, social work services, and parent counseling and training. It includes other developmental, corrective or supportive services if they are required to assist

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a child with a disability to benefit from special education, including assistive technology services and devices.

(1) **Assistive technology Device**- Any item, piece of equipment, or product system, whether acquired commercially off the shelf, modified, or customized, that is used to increase, maintain, or improve functional capabilities of individuals with disabilities.

(2) **Assistive technology service**- Any service that directly assists an individual with a disability in the selection, acquisition, or use of an assistive technology device. The term includes: The evaluation of the needs of an individual with a disability; purchasing, leasing, or otherwise providing for the acquisition of assistive technology devices by individuals with disabilities; selecting, designing, fitting, customizing, adapting, applying, maintaining, repairing, or replacing of assistive technology devices; coordinating and using other therapies, interventions, or services with assistive technology devices, such as those associated with existing education and rehabilitation plans and programs; training or technical assistance for an individual with disabilities, or, where appropriate, the family of an individual with disabilities; and training or technical assistance to professionals who employ or provide services involved in the major life functions of individuals with disabilities.

(m) **Responsible HHS official**- The official who is authorized to make the grant of assistance in question or his or her designee.

(n) **Special education**- Specially designed instruction, at no cost to parents or guardians, to meet the unique needs of a child with a disability. These services include classroom or home-based instruction, instruction in hospitals and institutions, and specially designed physical education if necessary.

#### C. List of Disabling Conditions

The classification of a child as “having a disabling condition” requires diagnosis by a qualified professional. Children with disabling conditions require special education and related services, due to one or more conditions including, but not limited to:

- Autism
- Emotional /Behavior Disorder
- Developmental Delay
- Health Impairment
- Hearing Impairment and Deafness
- Intellectual Disability as of Oct. 2010 instead of Mental Retardation
- Learning Disabilities
- Orthopedic Impairment
- Speech/Language Impairment
- Traumatic Brain Injury
- Visual Impairment and Blindness
- Other impairments

No child will be identified as having a disability because of speaking a language other than English, economic circumstances, ethnic or cultural factors, or normal developmental delays.

#### D. Responsibilities of CSB Full Inclusion Teacher

- Work with the Site Supervisor, Comprehensive Services team and school district full inclusion staff.

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- The CSB inclusion teacher and the School inclusion teacher (Special Education Teacher) share joint responsibility for all students in the class with indoor and outdoor activities.
- Obtain appropriate documentation (copy of IEP or IFSP) that identifies the child as having a disability and be aware of other services provided to the child.
- Complete classroom child observations.
- Ensure each child's safety and assist identified children with self-help skills while they are receiving services.
- Assist school district full inclusion staff with bathroom procedures including diapering and toileting.
- Participate in case management and IEP/IFS meetings regarding children in the class.

#### E. Responsibilities of School District SDC, RTI and Full Inclusion Teachers

CSB does not directly supervise the School District staff but works in collaboration to ensure the children and families benefit from their services while ensuring the education and safety of the children under their supervision.

##### Full Inclusion Staff

- Follow all Community Services Bureau policies and procedures.
- School Inclusion Teacher (Special Education Teacher) and CSB inclusion teacher share joint responsibility for all students' supervision during small and large, indoor and outdoor activities. Assisting full inclusion children in bathroom procedures (including diapering and toileting).
- Responsible for providing the special education for identified children, maintaining accurate records of evaluations progress, meeting with parents and overall ensuring the children meet their IEP goals.
- Participate in team planning for classroom inclusion strategies, case management team meetings, meeting schedules regarding full inclusion children and IEP meetings.

##### Special Day Class Staff

- Ensure the safety of the children under their direct supervision (SDC).
- Collaborate directly with the Comprehensive Services Team to ensure the family and children comply with CSB mandates.
- While in the playground, SDC teaching staff and CSB Teacher share joint responsibility for all students' supervision during small and large outdoor activities.
- SDC teachers are responsible for providing the special education for identified children, maintaining accurate records of evaluations progress, meeting with parents and overall ensuring the children meet their IEP goals.
- Participate in case management meetings, SDC program collaboration meetings and children IEP meetings.

##### RTI Teaching Staff

- Ensure children's safety while providing direct supervision under RTI. (Tier II and III)
- Collaborate directly with the Comprehensive Services Team to ensure the family and children comply with CSB mandates.
- Participate in case management meetings, RTI program collaboration meetings and children IEP meetings.

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#### CSB Site Supervisor Responsibilities

- Maintain communication with school District staff (teachers and/or therapists) under the various programs in an effort to coordinate delivery of services at the site level such as: Ordering classrooms supplies, ordering meals/snacks, building maintenance/repairs, communicating site events, etc.
- Monitor the safety transition of children going in and out of the classrooms and in and out of sites such as playground transitions, playground rations, bus arrival/departing, etc.
- Ensure the teachers participation or represents teachers in IEP and/or case managements as needed based on family/child needs.
- Maintain communication with Disability Manager and AD about the program progress in an effort to strengthen up the collaboration.

#### F. Responsibilities of the Comprehensive Services Team

##### 1. Comprehensive Services Clerks

- Complete CSB temp file package at intake.
- Flag the file the file using the red/yellow flag system to alert the staff and assistant manager about the child's health, nutrition, socio- emotional, developmental, parental concerns and family needs.
- Communicate to comprehensive services assistant manager if child's physical exam/baby well check and/or sensory/developmental screening results indicate concerns.
- Keep accurate records of children health/nutrition and families services information.

##### 2. Comprehensive Services Assistant Managers

- Review and follow up children intake packages flagged with the red/yellow flag system.
- Review all records related to the child's heath history, medical records and screening results to ensure children with suspected or identified concerns receive further evaluations and services.
- Lead and coordinate case managements as needed to provide early interventions to children with identified concerns based on health, nutrition, socio-emotional and developmental screenings.
- Lead and coordinate pre-enrollment case managements for new children entering our program with identified health, nutritional, socio-emotional and developmental needs.
- Maintain close communication with parents and staff to ensure delivery of services, resources and/or referrals are in place; based on the individual needs of the child and the family.
- With parental consent participate in IEP/IFSP meetings and any other meetings related to the services the child/family are receiving.
- Maintain accurate and up-to-date documentation regarding current IEP/IFSP and other services provided to the child and family in the children's file and in CLOUDS.
- Coordinate, schedule and participate with the site supervisor in transition planning for children moving from Early Head Start to Head Start and from Head Start to preschool; especially for those children with IEP and IFSP.
- When no other alternative is available, coordinate and schedule transportation with the comprehensive services team to transport the child/family to receive further evaluations/assessments or to the IEP/IFSP meeting.
- Consult and maintain open communication with the disability services manager and any other content area managers as needed.



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##### 3. Responsibilities of the Comprehensive Services Disabilities Manager

- Coordinate and Monitor the delivery of services provided by Community Services Bureau in collaboration with outside agencies to children with suspected and diagnosed disabilities and their families.
- Review, update and implement the Community Services Bureau Disability Services Plan.
- Review, update and train Community Services Bureau staff on following disability protocols to ensure policies and procedures are implemented consistently.
- Create, review, and update interagency agreements with community agencies serving children with disabilities in an effort to:
  - Participate in the public agency's Child Find plan under Part B of IDEA,
  - Joint trainings of staff and parents,
  - Create procedures for mutual referrals and placements,
  - Plan transitions support to children and families,
  - Resource sharing, and
  - Any other items agreed by both agencies.
- Coordinate delivery of services and provision to children with suspected or diagnosed disability.
  - Coordinate with other content area managers the timely completion of health/cognitive screenings.
  - Monitor site data reports to ensure that children received early intervention as a result of their screening and assessments results.
  - Participate in case management meetings and IEP/IFSP meetings as needed.
  - Assist teaching staff with trainings based on a specific disability or as requested.
  - Monitor the implementation of services provided to children with disabilities based on their IEP or IFSP goals and objectives.
  - Monitor the disability referrals tracking system to ensure child referrals are followed up accordingly.
  - Coordinate and monitor classrooms adaptations, accommodations and modification based on the individual needs of the child.
  - Assist identified parents with resources and advocacy information to prepare for meeting with the Regional Center or School District to develop an Individual Family Services Plan (IFSP) or an Individual Education Program (IEP).
  - Regularly visit classrooms to ensure that children with suspected and identified disabilities receive the individualization and accommodation they need based on their IEP and their individual needs. Monitor the delivery of services from both Community Services Bureau and the collaborative agencies.
  - Monitor delivery of services to children with disabilities and their families when transitioning from home to center based program, from infant/toddler program (EHS) to Preschool Program (HS) and from Preschool Program (HS) to Kindergarten. Participate in transition plans and meetings as needed.
- Provide disability content area assistance, support to upper management, teaching staff including home based and comprehensive services team.
- Monitor disability reports for accuracy and timely completion of delivery of services to comply with PIR (Program Information Report) requirements.
- Review Program Self-Assessment reports and create follow up action plans when needed.

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- Manage allocated funds to purchase or lease of special equipment and materials for use in the program and home to assist the child to move, communicate, improve functioning or address objectives which are listed in the child's IEP/IFSP.
- Track and provide detail report of the number of children with disabilities in HS/EHS services area, including types of disabilities to Assistant Directors.

##### G. Documentation of Disabilities Services

CSB must maintain records from all services provided to children with disabilities and their families. Children's records are confidential and are maintained in locked files and password-protected in the CLOUDS data system. Data from these records are used to prepare the annual Program Information Report (PIR).

##### H. Postural Supports / Protective Devices

The Comprehensive Services Disabilities Manager works with educational and health staff to ensure that children with disabilities use approved medical devices including, postural or supportive restraints that are in accordance with state requirements and have CSB approval.

Children needing protective, postural or medical devices due to a disability condition must have a written request from a physician or an IEP/IFSP Team indicating such need.

The use of any medical appliances, devices or supportive restraints must be secure and able to be released in a way that is in compliance with fire clearance and earthquake safety.

CSB Teachers directly working with the children and Site Supervisor should be trained in the use and care of such devices prior to the child starting the program. The training should be documented in the case management notes with attached signatures of the trainer and trainees.

##### I. Disabilities Resources

The Comprehensive Services Disabilities Manager works with the Special Education Local Plan Area (SELPA) and other collaborative agencies to utilize all available resources to ensure the best involvement of the child and family in the program. The Comprehensive Services Disabilities Manager is responsible for developing a coordinated plan with all agencies working with the child and family.

##### J. Service Plan

Community Services Bureau develops annually a disabilities service plan based on the community assessment results, providing strategies for meeting the community needs and the special needs of children with disabilities and their parents. The purpose of this plan is to assure:

- That all components of the Community Services Bureau program are appropriately involved in the integration of children with disabilities and their parents.
- Those resources are used efficiently.

The Community Services Bureau Disability Manager coordinates with other service managers the provisions for children with disabilities to be included in the full range of activities and services normally provided to all Head Start children and provisions for any modifications necessary to meet the special needs of the children with disabilities.

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##### K. Disabilities Budget Coordination

The Comprehensive Services Disabilities Manager is the designated liaison for special education services. Disabilities services outlined in the budget follow the regular budget procedure of parent and staff input with final approval.

##### L. Special Education Budget Allocation

The CSB program works within its budget to assist in providing needed services to children with disabilities. The program accesses all available sources to insure that all needs identified in the IEP or IFSP are met. This includes the local and state LEAs, SSI funding, other agency support, and local educational institutions. Every effort is made to utilize community resources to meet the needs of each child with disabilities enrolled in the program.

##### M. Disabilities Screenings

All preschool children are screened by the teaching staff in the areas of social and emotional development, speech and language, motor and cognitive development. All infants and toddlers are screened for cognitive development. The Comprehensive Services Team screens preschool children in hearing, vision, and nutrition, within 45 days of enrollment and follow CHDP schedule thereafter. Parents are informed about all screenings, their purpose, and give consent in advance before staff can complete the screenings. Comprehensive services complete the screening results form to communicate results to parents. The results from the screenings are used for beginning the individualization process for each child.

The Site Supervisors are responsible for working with the Teachers and Comprehensive Services Team to ensure that the speech and language screening tool, the social/emotional, sensory and developmental screenings are completed within 45 days of entry. Lead teachers must review and initial all education screenings to ensure they are accurately completed and meet required timelines.

Designated site staff enters the screening data in CLOUDS. The Teacher places original documents of the Speech and Language Checklist, Brigance Cognitive Screening and Devereux Early Childhood Assessment (DECA) behavioral screening in the Education section of the family file. If concerns are noted, the appropriate service area staff will follow up to ensure services meet the needs of the child. Teachers will give each child time to adjust to the new environment before completing the screenings. Children whose screenings show concerns may be rescreened within thirty days to ensure the validity of the original screening.

If concerns arise after re-screening, the Teacher (for cognitive-Socio emotional-SP/L screenings results) or the Comprehensive Services staff (for sensory screenings results) will communicate with the Site Supervisor and Comprehensive Services Assistant Manager to follow up with strategies to refer the child for further evaluations.

##### N. Evaluations

All children identified as needing further evaluation are referred to the appropriate agency or professional for further evaluation and assessment. The referral follows the established referral procedure:

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- Through a case management, the guardian's permission is obtained.
- The teacher, Home Educator or Comprehensive Services Assistant Manager follows through on accessing the appropriate services.
- When no other alternative is available, the Comprehensive Services Team provides transportation for the family and child to obtain evaluations.
- The Comprehensive Services Assistant Manager monitors the referrals and supports parents and staff as needed.
- The Comprehensive Services Manager is available to provide knowledge and expertise to handle challenging cases.

##### O. Accessibility of Facilities

All Community Services Bureau facilities provide for handicapped accessibility; in addition special furniture, equipment and materials are provided in conjunction with other agencies working with the child based on their individual needs and their IEP or IFSP.

##### P. Disabilities Transitioning Services

All infant toddler transition plans start when the child turns 30 months old. The Parent, Site Supervisor, Teacher and Comprehensive Service Assistant Manager write the transition using the Infant Toddler Transition Plan Form (CSB 161). This meeting is to plan what needs to be in place for when the child ages out the EHS program. Children with current IFSP are included in this plan.

In addition when a child with IFSP turns 30 months and no later than 90 days prior to their 3<sup>rd</sup> birthday the family and child will transition from the Early Intervention Program (Part C Services of IDEA) to the School District (Part B of IDEA) as part of the IFSP transition. This meeting includes but is not limited to the Parent and any family member for support, the Early Intervention Provider, the School District Coordinator, the Special Education teacher, the Comprehensive Services Assistant Manager or Comprehensive Services Disabilities Manager, and the CSB teacher or Home Educator. The team will create a transition plan; evaluate the child's strengths and areas of concerns, schedule further evaluation by the School District and schedule a diagnosis meeting. At the end of the evaluations the child may or may not qualify for an IEP services under the School District and exit the Early Intervention Program (IFSP) the day before the child turns 3 yrs. old.

Another opportunity for transition starts when the child qualifies for an IEP and CSB placement is available at the site. For that a case management conference is held to evaluate and plan how to best serve the child at the site and how to support his/her learning based on his/her IEP. Evaluation of the classroom and outdoor environment will take place to identify accommodations needed including adaptive furniture or materials, modification of classroom schedules and routines to meet the individual needs of the child. This Transition Plan may include a gradual transition that involves both programs over a period of time. Any needed staff training will be provided as part of the plan.

For children transitioning out of the program into another program, the Teacher, Home Educator or Comprehensive Services Assistant Manager coordinates with parent and School District to how to support the child's transition. The meeting is to explore possible placements for the child. Included in the meeting are the child's Guardian, School District Coordinator, Teacher or Home Educator, and other

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professionals providing services for the child and family. When the best possible placement is decided for the child, the Teacher and the family initiate a meeting with the new Teacher. At that time, a plan for a gradual transition including visits to the new program and sharing information about the child and their individual plan takes place.

#### Q. Transition Policy for Early Head Start Children Receiving Mental Health or Special Education Services

As CSB's Mental Health services have expanded to include services for the EHS children, CSB must consider these children with disabilities in transitioning from the EHS program to the HS program. If an EHS child who is receiving mental health or special education services turns 3, the child must not automatically be terminated from the program. Transition planning must consider the child's individual developmental and emotional needs as well as age. The Head Start performance standards, Sections 1304.41(c) (1) and 1304.41(c) (2), require programs to establish transition procedures which take into account the child's health status and developmental level and current and changing family circumstances among others, and allow for a child to remain in Early Head Start, following his or her third birthday, for additional months until he or she can transition into Head Start or another program. (Based on licensing regulation this might not apply to all EHS programs).

In order to meet these Head Start and Early Head Start requirements and to address each child's individual situation, the following policy regarding transitions will be in effect and only if the EHS blended program can accommodate such transition:

- If a child is receiving mental health services from Community Services Bureau's Mental Health unit, a transition-planning meeting will take place approximately 3 months before the child's 3rd birthday to address this child's individual circumstances. The family, teachers, Site Supervisor and Mental Health clinician will participate in this meeting. This meeting is coordinated by the MH clinician.
- If it is determined that the child is developmentally and/or emotionally not ready to move into the HS program, the child can remain in the EHS program until such time when it is determined that the child is ready to transition to the HS classroom.
- If there is a time gap between the child's 3rd birthday and the beginning of the HS program, in order to ensure continuity in educational and mental health services to this child, the child may remain in the EHS program until he/she can transition into the HS classroom. Follow up meeting with all caregivers can be held as appropriate.

#### R. Special Education and Related Services

All infants/toddlers and preschool age children entering Community Services Bureau must have a well-child exam within 30 days of enrollment. Those preschool children who did not receive a hearing and vision screening as part of their well child exam will be screened by in-house certified trainers within 45 days of enrollment.

Any children identified as having a concern are referred back to their physician for further evaluation or referred to a community agency for assessment. Children who qualify after assessment receive services from the Special Education Local Plan Area (SELPA) or the Regional Center under an IEP or IFSP plan in accordance with our interagency agreement.

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A Mental Health Consultant is available to discuss behavioral/mental health concerns that the family, teacher or home visitor may have about a child. The consultant will share non-confidential results with the teacher/Home Educator and families, and work with them to develop a plan for the child.

When no other alternative is available, the Comprehensive Services Team provides transportation for the guardians and child to obtain evaluations. When services are not provided on site, parents are assisted in finding public transportation to clinics or service providers.

Community Services Bureau works collaboratively with all other agencies involved with the child and the family to meet the objectives in the IEP or IFSP.

Community Services Bureau, subject to budgetary allowances, will purchase any assistive devices identified in the IEP or IFSP that cannot be funded through outside agencies.

Comprehensive Services staff undertakes collaborative partnerships with individual families to develop a Family Partnership Agreement twice a year. The Comprehensive Services staff provides families with community resources such as, parent support groups, parent trainings, advocacy and child development among others to assist families reaching their FPA goals.

#### S. Special Education Services with Other Agencies

Following the preschool age child assessment administered by the Local Education Agency (LEA), an IEP is held which includes the family, the teacher or Home Educator and/or Comprehensive Services Assistant Manager, and the LEA representative. At that time, the appropriate placement is determined and a service plan is developed for the child. For children who do not qualify for placement with the LEA, Community Services Bureau addresses the child's individual needs within the classroom or home based visit and provides required support and services.

For a child with disabilities transitioning in or out of the program, an IEP meeting is held to develop a plan to work together toward common goals. The meeting includes the Family, the Teacher/Home Educator, and the other service providers. CSB and the LEA share resources as appropriate. This resource sharing includes use of the classroom for any individual, family or group work that is necessary for the child's success. The LEA staff member shares ideas and materials with the CSB teaching staff when possible to foster attainment of IEP goals. CSB refers children to the LEA as soon as concern is suspected and does not wait until all screenings are completed.

Children enrolled with a diagnosed disability and have a current IEP or IFSP, receive individualized education based on their unique needs. For Center Based Care, if a child's IEP or IFSP indicates a part-time schedule, he/she may share that enrollment slot with another child. Children who have joint placement in Community Services Bureau and other agencies receive careful monitoring to insure that the program developed for them in each placement is working in concert with the other to provide an overall program that meets all the needs of the child. Frequent communication among service providers is necessary to insure this. The family plays a key role in assessing the success of the shared placement.

#### T. Volunteers

CSB welcomes community volunteers and student interns from colleges.

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Whether paid or volunteer, all staff working with children with disabilities, are provided training that includes specific identified topics relating to the unique needs of each child. Also, general training topics include working with children in group situations and respecting child/family confidentiality.

##### U. Special Education Staff

Community Services Bureau ensures that the Disabilities Services Plan addresses program efforts to meet state standards for personnel serving children with disabilities. Special education and related services are provided by or under the supervision of personnel meeting state qualifications.

All staff working with children with disabilities meets state special education standards for personnel serving children with disabilities. Training and supervision that meet special education standards are developed in collaboration with Local Education Agencies.

##### V. Interagency Agreements

CSB maintains an interagency agreement with the Contra Costa County Special Education Local Plan Area (SELPA) and the Regional Center of the East Bay (RCEB) to establish shared guidelines for providing services to identify children with disabilities within the CSB program.

CSB participates in the Local Education Area (LEA) Child Find plan (Child Find is a component of the IDEA) by providing information on application and enrollment guidelines to the LEA and working with them to enroll eligible children.

##### W. Recruitment and Enrollment

All staff involved with the recruitment and enrollment of children is knowledgeable of all laws (Nondiscrimination on the Basis of Handicap in Programs and Activities Receiving or Benefiting from Federal Financial Assistance and of the American with Disabilities Acts) and Head Start mandates regarding children with disabilities.

Interagency agreements between Community Services Bureau, Local Education Agencies and Regional Centers are developed, maintained and updated annually to aid in the recruitment, enrollment and mainstreaming of children with disabilities. Referral sources are maintained, utilized and updated to provide needed services for children with disabilities. Special efforts are made to recruit children with severe disabilities.

All staff involved with the recruitment and enrollment of children with disabilities receives training on children's records as they apply to each child file.

Obstacles (including staff apprehensions, inaccessibility of facilities, provision of additional resources necessary for child's specific needs, unfamiliarity with a disabling condition or special equipment, and the need for personalized special services) are addressed through needed program adaptations and trainings and do not affect a child's enrollment.

Enrollment placement takes into account the number of children receiving services under the disabilities area, including types of disabilities, severity of the disability, and services and resources provided by other agencies.

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Resources and placement options are utilized according to a child's IEP or IFSP. Children with disabilities enrolled in Community Services Bureau programs follow the same eligibility enrollment procedures stated in the Community Services Bureau Policies and Procedures and comply with all licensing regulations for center based programs. Children with a current certified IEP or IFSP may have an over income waiver to qualify them for the HS/EHS program.

Families whose children have an IEP or IFSP may qualify for an over income waiver for the HS/EHS program. At the same time families enrolled in double funded programs (State/Federal) may have a fee, based on the state portion of the program.

Children with a current certified IEP or IFSP sharing blended state-federal funding need to comply with state requirements providing CSB with the copy of the IEP or IFSP and the Exceptional Needs Verification Form (See Form CSB65).

The Comprehensive Services Disabilities Manager monitors the recruitment and enrollment of children with suspected disabilities and certified IEPs or IFSPs.

X. American with Disabilities Act (ADA) Policy – Enrollment of Children with Disabilities, Recruitment and Enrollment Community Services Bureau serves children with disabilities and other exceptional needs, and their families, in all program options. The following steps are taken to ensure full ADA compliance, to identify the unique needs of each child and family, to facilitate the individualization process collaboratively with parent and to make needed modifications in policies, practices and/or procedures as deemed reasonable.

At intake, the individual needs of each child and family are evaluated.

If it is determined that the child has a disability, whether developmental, behavioral, or health related (and may be documented by an IEP/IFSP) the parent is asked to provide documentation/records regarding the identified need.

The site team, as well as appropriate Comprehensive Services Managers will review the records.

A Case Management meeting is conducted with site team, Comprehensive Services Manager, parent and may include special service providers to:

- Further identify child/family strengths and needs
- Define needed accommodations/adaptations
- Identify staff training needs and supports
- Identify additional needed action

Following the Case Management meeting and completion of additional actions needed, the site team, in collaboration with the Comprehensive Services Manager:

- Will enroll the child or, initiate an Individualized Assessment of the child's needs.
- The Comprehensive Services Manager will lead/conduct the Individualized Assessment. The process will be defined on a case by case basis which may include:



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- Reviewing additional medical or special services, records/information.
- Gathering the most current medical knowledge and/or best objective evidence regarding the disability.
- Child observation in the natural environment or through parent/child site visitations.
- Medical guidance obtained from public health agencies, Center for Disease Control, National Institute of Health, including the National Institute of Mental Health, and other like agencies.

Based on the findings of the previous actions, accommodations/ modifications will be identified that would allow for the child to participate in the program.

The findings/case will then be presented to a management team (including the Assistant Director) to determine if identified modifications constitute reasonable accommodations or if CSB can demonstrate that making such modifications would:

- Create undue financial burden/hardship (all resources available for use in funding and program operation will be considered)
- Fundamentally alter the nature of the program (essential elements of program as well as essential elements necessary for participant will be considered)

The management team must also determine that the child's presence would pose a direct threat to the health and safety of the individual child or others (factors to consider include: nature, duration, and severity of risk; probability of occurrence of injury; whether reasonable modifications of policies, practices, or procedures will mitigate or eliminate risk).

The team will then:

- Recommend enrolling the child in appropriate placement.
- Or provide a written statement of the reasons for reaching the conclusion not to enroll the child based on criteria stated above.

#### Y. Assessment Process of Children with Disabilities

The Comprehensive Services Disabilities Manager coordinates with health and education staff the sensory and cognitive screening of all children within 45 days of enrollment.

The Comprehensive Services staff is involved in the screening process of all children, particularly those requiring further evaluation.

The Comprehensive Services Assistant Managers evaluate the need for further specialized assessment after all standard screenings have been completed.

In a case management meeting families are informed of screening results and are encouraged to sign a written consent for requesting further evaluations with an outside agency.

The Comprehensive Services Assistant Managers refer children for further formal evaluation to the LEA (3 years to 5 years) or RECEB (new born to 2.9 years) according to the established referral procedure. LEA agencies have 60 days to process the referrals and develop an IEP upon receipt of family intake package. RCEB has 45 days to process the referrals upon receipt of parent intake package.

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The evaluation procedure is conducted with the following provisions:

- Obtain parental consent prior to evaluations
- Informing parents of their rights and responsibilities under IDEA
- Administered in a culturally sensitive manner by trained certified/licensed personnel that speak the child's home language. Using more than one criterion in the determining of an appropriate program placement and having a multi-disciplinary team including the child's teacher to do the evaluation using assessment materials validated for the purpose for which they are used

#### Z. Eligibility Criteria: Health Impairment

Children will not be discriminated against if they present any health impairments such as, cancer, severe asthma, uncontrolled seizures, neurological disorders, rheumatic fever, heart conditions, lead poisoning, diabetes, blood disorders, cystic fibrosis, heart diseases, ADD, AIDS and other medically fragile conditions.

Children who meet specific criteria including level of functioning, age, onset of indicators and documented reports may be classified as having Health Impairment.

Children with suspected health impairments are referred for further evaluation. With the parent's consent, CSB teaching staff will provide documentation of behavior observations relevant to the impairment, to the appropriate professional for assessment. Upon receipt of a physician evaluation, a case management will take place to ensure that CSB can accommodate the individual needs of the child.

#### AA. Eligibility Criteria: Emotional / Behavioral Disorders

The identification of children with emotional/behavioral disorder involves specific behavioral characteristics, the use of multiple sources of data, and the review of the child's Head Start physical exam.

Children suspected of having an emotional/behavioral disorder are referred for further evaluation to appropriate community agencies to determine whether IEP services are appropriate. Upon receipt of a diagnosis, a case management will take place to ensure that CSB can accommodate the individual needs of the child in the classroom.

#### BB. Eligibility Criteria: Speech or Language Impairments

All children are screened for speech and language delays, within 45 days of enrollment. Children with suspected speech/language delays are referred for further evaluation to RCEB or SELPA. If a determination is made for intervention or special education, an IEP or IFSP will be implemented through the outside agency (Regional Center or SELPAs). When referring children for assessments, careful consideration is given to cultural, ethnic and bilingual differences as well as temporary disorders and delays that fall within the normal range for the child's age. Upon receipt of evaluation and diagnosis, a case management will take place to ensure that CSB can accommodate the individual needs of the child in the classroom.

#### CC. Eligibility Criteria: Intellectual Disability

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“Intellectual Disability” is a new term in IDEA for Mental Retardation. In October 2010, Rosa’s Law changed the term to be used in future to “intellectual disability.” After screening children suspected of having any delays/deficits in adaptive behavior are referred for further evaluation to the LEA and/or physician and/or MH services. A case management will be in place upon receipt of the diagnosis to ensure proper placement and support for the child.

##### DD. Eligibility Criteria: Hearing Impairment

All children are screened for hearing loss through the program or their private physician. Children needing further evaluation are referred back to their private physician and to the SELPA or to the Regional Center. Upon receipt of evaluation and diagnosis, a case management will take place to ensure the CSB can accommodate the individual needs of the child in the classroom.

##### EE. Eligibility Criteria: Orthopedic Impairment, Visual Impairment / Blindness

Children suspected of having an orthopedic impairment including but not limited to spinal bifida, cerebral palsy, loss of or deformed limbs, arthritis, or muscular dystrophy are referred to their pediatrician for further evaluation. Children requiring special services are referred to the SELPA or Regional Center. All children have vision screenings through the program or their physician. Children needing further evaluation are referred to their physician, an ophthalmologist and/or optometrist to determine whether the child is visually impaired.

Upon receipt of evaluation and diagnosis, a case management will take place to ensure that CSB can accommodate the individual needs of the child in the classroom.

##### FF. Eligibility Criteria: Learning Disabilities

All Head Start children are screened for possible learning disabilities. Those with suspected disabilities are referred to their physician and RCEB or SELPA as needed. Site Supervisors with the assistance of Teaching staff provide classroom observations and child’s work samples as needed to document the child’s needs. Upon receipt of evaluation and diagnosis, a case management will take place to ensure the CSB can accommodate the individual needs of the child in the classroom.

##### GG. Eligibility Criteria: Autism, Traumatic Brain Injury, Other Impairments

Children that present behaviors like autism, traumatic brain injuries or other developmental impairments may qualify for services under the Regional Center or SELPA. CSB supports the early identification and intervention of children at risk and with parental consent children are referred for further evaluation to outside agencies. Upon receipt of evaluation/diagnosis, a case management will take place to review the IEP. CSB will make proper accommodations and maintain the child in dual enrollment if CSB is the proper placement based on the child’s IEP/IFSP goals and objectives.

##### HH. Disabilities/Health Services Coordination

The Comprehensive Services Disabilities Manager works closely with the Health Manager, CS Team and other staff in the screening, assessment process and follow-up to meet the needs of children with disabilities.

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The Health and Disabilities Managers work together to ensure children's special needs are met and supervision of the administration of all prescriptions and over the counter medications occurs in accordance with state requirements. Children requiring medication must have the doctor's instructions and parental consent before the medication is administered. Individual records of all medications dispensed and a regular review with the child's parents occurs.

All medications must be adequately labeled, locked and stored out of reach of children. Individual medical plans should be shared with the teaching staff and closely monitored for compliance. Any changes in a child's behavior related to a drug must be shared with staff, parents and the physician. Pre-enrollment case management is encouraged to ensure CSB staff is aware of the individual needs of the child and accommodation can be made.

#### II. Developing Individualized Education Programs (IEPs)

The School District in advance notifies families in writing of the time, date, location and purpose of the IEP meeting in advance, to enable participation. Repeated and documented attempts are made to facilitate the family's participation in the IEP meeting. Opportunities are provided for reviewing the results of the meetings. Efforts are made to assure that families are knowledgeable about their parent's rights and responsibilities under IDEA and understand (including interpreters) the purpose and proceedings of the child's program.

Head Start must evaluate all pertinent information when determining eligibility and placement options of children with current IEPs. The IEP such as:

- The child's present level of functioning in all areas of development, strengths.
- The identification of needs in areas requiring specific services, challenges.
- Short and long term goals and objectives.
- Specific special education and related services necessary for the child to participate in Head Start including those services provided by other LEAs and professionals.
- Personnel responsible for services provided, projected dates for initiation/duration of services and place of services.
- And evaluation procedures to determine the achievement of goals including family goals and objectives.

#### JJ. Disability Referral Procedures

##### 1. Description

The first five years of the children's life are times of rapid growth and learning. CSB provides rich learning and nurturing environment for them to grow and develop; however, some children will develop at different rates and would need some extra support to reach their age appropriate milestones. The Community Services Bureau is committed to early identification of children at risk of developmental delays in order to provide the necessary early intervention that will lead to a better future for the child.

##### 2. Screening for suspected concerns

i. Prior to enrollment during the application period the child's file might be flagged using the Red and Yellow Flag System to alert the staff of known or suspected concerns based on the completed health

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history by the parent. The health history briefly screens children for possible health, nutrition, and socio-emotional and developmental risks.

ii. Child's Physical Exams/Baby Well Checkups provide a great source of information and they are given to us by the parents within 30 days of enrollment thereafter as required by CHDP (Child Health and Disability Prevention.)

iii. Sensory and developmental screenings and assessments are provided to all enrolled children within 45 days of enrollment.

Children determined to be in need of further evaluation/assessment based on screening results, staff observations, and/or parent observation are referred to the appropriate agency with parental consent.

#### 3. Referral

Based on the agency identified for referral, the assistant manager will explain in detail the requirements for their referral process, their timelines, and provide copies of the parent rights and responsibilities under IDEA to the parent. It is crucial that this portion be clear to the parent and an interpreter assist the parent with any clarification.

- Referral for Regional Center (Children 0 to two years "2.9 yrs")  
The process takes about 45 days from the date of referral.
- Referral to Local Education Agencies/Family Home School District (Children 3 to 5 years)  
The process takes about 60 days from the date of referral.

As part of a case management the parent is encouraged to sign the Child Referral and Parent Consents Form (CSB 501), only after understanding the referral process and his/her parent rights under IDEA. The assistant manager assists the team by providing the copy CSB 501 form to be signed.

For Mental Health referrals, the medical provider information is completed on the referral form and a copy of the child's Medical card (if insured) is attached. When a child is on disciplinary steps and has a behavior action plan, a copy of this plan, the child's Devereux Early Childhood Assessment and Development Screening is included with the referral.

The Child Referral and Parent Consents Form (CSB 501), is reviewed to ensure the document is correctly filled out after acquiring parent signature. Additional signatures are obtained from the Site Supervisor and the Comprehensive Services Assistant Manager.

A copy of this form (CSB 501), is given to the parent, one to the assistant manager to process the referral and the original is placed in the file.

The assistant manger reviews the signed CSB 501 and processes it immediately. Once verified referral receipt by phone with the appropriate School District, Early Intervention Agency, or Mental Health Unit, the assistant manger completes the Response to Referral Form (CSB 502).

Review referral before processing. The referral must be completed including:

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- Child's Name
- Child's Birth date
- Child's CLOUDS ID #
- Child's Center
- Current home address (Encourage family to avoid moving houses while the LEA is evaluating the child)
- Family Phone #
- Parent's name
- Parent's language of preference
- Child's language of preference
- No need of SS# or Medi-Cal for Disability referrals
- CSAM referral contact / name and phone number
- Consents for exchange of information and assessment should be initialed by parent.
- Parent's signature
- Site Supervisor, CSAM or Home Based Teacher signatures

Agency to refer information:

- Determine Home School District for children 3 to 5 years old.
- Access RCEB or other intervention programs if the child is under 2 ½ years old.
- Fax signed form CSB 501 to outside agency and follow up with a confirmation phone call to ensure they have received the referral.
- Complete Response to Referral Form (CSB 502)

The original form (CSB 502) is placed in the child's file while the copy is given to the parent attached to additional relevant informational resources.

- The copy of the Response to Referral Form (CSB 502) is given to the parent
- Community resources such as CARE parent network, IEP/IFPS programs description and advocacy resources are given to the family with any other resources they might have requested.
- The original Response to Referral Form (CSB 502) is placed in the child's file under the Special Needs section.

The comprehensive service assistant manager enters the case management notes and intervention/referral information under the disability tab in CLOUDS (Intervention/Referral). Copy of the case management (CSB 514) is placed in the child's file.

The assistant manager will contact the family for a follow-up within 30 and 60 days after submitting the referral to ensure proper evaluation meetings are in place, proper support is given to the parent in preparation of the diagnosis meeting, and ensure participation in the IEP/IFSP meeting.

Additional Case Management will follow up as needed and/or as determined in the initial meeting.

KK. Nutrition Services for Children with Disabilities

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The Comprehensive Services Disabilities Manager works with the Health Services Manager and the Nutritionist to ensure that provisions to meet the needs of each child are incorporated into the nutrition program.

Appropriate professionals are consulted on ways to assist Head Start staff and families in regards to children having severe disabilities and problems with eating.

Activities to help children with disabilities participate at mealtimes are implemented in the classroom after discussion in a case management meeting.

Case Management meetings with CSB staff, other professionals and families are held to meet the nutritional needs of children with disabilities including the prevention of disabilities with a nutrition basis.

#### LL. Parent Involvement in Transition Services for Children with Disabilities

##### Description

In an effort to support the transition of children with disabilities into CSB programs, or children transferring from one Community Services Bureau program to another, the parent will be asked to attend a Case Management meeting (transition planning meeting) prior to enrollment or transfer. The focus of the meeting will be to:

- Review the IEP/IFSP goals and objectives as well as identify parent goals for child
- Determine the needs of the child
- Insure appropriate placement
- Plan program adaptations (if needed)
- Support family and foster team approach for service delivery
- Provide activities and information to the family to foster the child's development.
- Provide activities to the family to reinforce program activities at home.
- Provide family with resources such as Social Security (SSI), Early Periodic Screening Diagnosis and Treatment (EPSDT) programs and other community resources and assist them in accessing these resources.
- Provide family with information to prevent disabilities among younger siblings.
- Provide parent with information about their rights under the Individuals with Disabilities Act. (IDEA)
- Provide resources to family groups for children with similar disabilities who can provide peer and family support.
- Comprehensive Services Team will support family through the children's transition from Early Head Start to Head Start or from Head Start to Kindergarten or to other agencies.

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#### III. Individualization in the Program

##### A. Description

Individualization is the process used to design a plan for each child that reflects their unique characteristics, strengths and needs.

Individualization is based on information gained from:

- Home visits
- Child's health and nutritional screenings and health histories
- Educational screenings: Speech and Language, Brigance Cognitive Screen and DECA (Devereux Early Childhood Assessment Program)
- Desired Results Developmental Profile (DRDP 2010) Assessment
- Portfolio Assessments
- Parent conferences and contacts
- Children's Individual Education Plans (IEP's, IFSP's)

##### B. Individual Goals

Individualization is documented on:

- CSB Individualized Tracking Sheet
- DRDP 2010 Individualization Form
- Lesson Plans
- First and Second Parent Conference Forms
- Progress Notes
- Case Managements
- Behavioral Management plans

Upon completion of the child's first sixty days, teaching staff review the information collected from the parent contacts, educational screenings, the DRDP 2010 assessment, anecdotal records, health histories and IEP's/IFSPs (when applicable) and determine a minimum of seven goals (2 Social emotional, 3 Cognitive, 1 Motor and 1 Health and Safety) based on the Infant/Toddler and Preschool domains.

Each child's goals including their DRDP 2010 measure number are listed on the CSB Individualized Tracking sheet form under the appropriate category. IEP/IFSP goals and special health goals such as nutrition interventions are listed on the form under Special Needs. In addition, each child is assigned a letter code that is used to document individualized activities on the lesson plan.

##### C. First Parent Conference / Individualized Plan

The first parent conference is scheduled within the first ninety days of enrollment.

During this conference, the teacher and parents discuss the child's progress based on screenings, DRDP 2010 assessment, and parent observations. The teacher and parent develop the goals for the child's individual plan. The child's strengths, individualized goals and activities that will support the development of goals are listed on the conference form. A minimum of seven goals (2 Social emotional, 3 Cognitive, 1 Motor and 1 Health and Safety) must be specified with corresponding DRDP 2010 measures. Home activities are also planned for the parent and child to engage in at home. Parent and teacher must sign and date the form.



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##### D. Second Parent Conference

A second parent conference is scheduled within 20 days of the completion of the second DRDP 2010. During this conference the parent and teacher review the child's progress on the goals and objectives set during the first conference and discuss parent observations and view the child's portfolio. New learning goals and objectives are determined in collaboration with parent. Parent/child activities to support goals are planned for the home.

If the child is going to kindergarten, the Kindergarten Transition Packet may be discussed with the parent. A signed and dated copy of the second parent conference is placed in the portfolio and the child's file. The Kindergarten Transition form is signed by the parent and included in the file.

##### E. The Infant-Toddler Individual Needs and Services Plan

The Individual Needs and Services Plan (CSB-180) is completed prior to the first day of attendance. The process includes a personal interview with a family member by a staff member. The form is then updated quarterly. Included in the plan is:

- The current feeding schedule and the amount and types of food provided including whether breast milk or formula and baby food is used.
- The meal patterns of the child, new foods introduced, preferences and voiding patterns are shared.

Staff should be aware of and may share information about community nutritional issues that may be identified services that are needed by a child that are different from the normal routines shall be provided including but not limited to special exercises for children with physical disabilities.

##### F. Lesson Plans

Lesson Plans are posted weekly. The lesson plan provides a variety of developmentally appropriate activities and materials for the children to engage in that will stimulate their physical, social and cognitive growth. The lesson plan includes activities that meet the children's individualized needs based on the results of their screenings and assessments. Individualization is documented on a tracking form with the children's alphabetic code. These codes are added to the activities planned to meet the children's individual needs.

The lead teachers are responsible for:

- Planning and developing the weekly lesson plan with their classroom team.
- Submitting the draft plan to the site supervisor every Thursday.
- Posting the weekly lesson plan every Monday,

The Site Supervisor is responsible for:

- Reviewing and approving the draft weekly plan.
- Signing off and dating the approved plan.
- Returning the approved plan to the lead teachers every Friday.
- Ensuring the lesson plans are posted in the classrooms every Monday morning.

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##### G. Developmental, Sensory, and Behavioral Screening

All preschool children are screened by the teaching staff in the areas of social emotional development, speech and language, motor and cognitive development, and by the Comprehensive Services Team in hearing, vision, and nutrition, within 45 days of class entry, annually. Infants and toddlers are screened for cognitive development using the Brigance and for behavior development. Parents are informed about all screenings and their purposes in advance. The results from the screening will be used to begin the individualization process for each child.

(For more information on screenings, please refer to Part II, Services for Children with Disabilities, Section L, page 37).

##### H. Assessment

The Desired Results Developmental Profile Child Assessment (DRDP 2010) is the required assessment tool mandated by the California Department of Education and also includes the Head Start Outcome requirements. There is a DRDP for preschool, infant, and toddler age children.

The tool assesses children in the four areas of the California State specified Desired Results: Children are: Personally and Socially Competent, Children are Effective Learners, Children show Physical and Motor Competence, Children are Safe and Healthy. The DRDP 2010 assessment of children is accomplished through on-going observation of the child.

Infants, toddlers and preschool children are assessed three times a year: The first assessment is completed within the first 60 days of enrollment and the second DRDP 2010 assessment is completed within 150 days of enrollment, and the third DRDP is completed in May. Assessment results are entered in CLOUDS within required guidelines. Results of the assessments are shared with parents during parent conferences, are a basis for developing children's individual goals and plans and are used for individualizing the lesson plans.

##### I. Portfolio Assessment

Portfolio assessment is implemented quarterly as an ongoing assessment process for curriculum development, individualization in the classroom and as a basis for communicating with parents. It enables primary caregivers, teachers and parents to follow children's development over the year within and across curriculum domains.

The teaching staff is responsible for collecting meaningful samples of children's work including but not limited to the child's writing, cutting and drawing skills. Infant and toddler caregivers are responsible observe children's growth and developmental changes and document those changes in the portfolios. Documentation may include photos, work samples that document developmental change.

Information gathered in the child's portfolio is used as part of the lesson planning process in which teachers reflect on gathered information and observations in relation to program goals for each child. Information gathered in the portfolio is periodically reviewed at parent conferences and home visits. New educational goals are jointly developed as the ongoing assessment process continues.

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If a child transfers to another center, the portfolio will be placed in the child's file and sent to the office. The Site Supervisor will then route it to the new location; when the school year is complete (June 30), the parent will be given a complete portfolio to utilize with the teacher in kindergarten as part of the transition plan. On July 1, a new portfolio is started for a returning child.

##### J. Program Transitions

Parents are given the opportunity to participate in and be supported in the transition of children into Early Head Start, Head Start and Kindergarten.

##### 1. Transition Policies and Procedures for Infant/Toddlers

Transition into the infant/toddler programs will start for families during the enrollment process into CSB program options. Parents and children will be invited to visit the center or other program options to meet center staff, family childcare providers, home educators, or other program staff, and observe the educational environment. Classroom orientation will be done before the child starts the program, followed by the initial home visit.

To ensure a continuation of program services to children and families, infant/toddler staff and preschool staff will work in conjunction to provide a quality and effective transition to preschool. The transition plan from the infant/toddler program to preschool is mandated to begin six months prior to the move. The CSB Transition form (CSB-161) will be completed by the parent, teacher caregiver and site supervisor six months prior to the transition and updated quarterly. At that time, the child will be placed on the CSB wait list and the Comprehensive Services Team will be notified that a transition is being initiated. Comprehensive Services staff will schedule a meeting with the parents to determine eligibility for CSB programs as soon as possible. If the family is eligible, as per Performance Standard 1305.7c, CSB will ensure whenever possible, that the child receives HS services until enrolled in school. If the family no longer qualifies for CSB programs, they will be provided other alternatives including partner sites and fee-based sites. The persons involved during the transition will be:

- Parents
- Teacher/Primary Caregiver
- Teacher in new site
- Site Supervisor(s)
- Comprehensive Services Team

After three months, the above team will meet to update the Transition Plan (CSB161) and to discuss the preschool placement.

Three weeks prior to the transition, the child will begin visiting their preschool classroom accompanied by their caregiver teacher. The length of the visits and the number of visits will be determined by the child's comfort level. A final home visit will close the child's file and the caregiver teacher will continue to visit the child in the new setting as needed. The infant/toddler file will be placed behind the new preschool file.

##### 2. Transition Policies and Procedures for Preschoolers

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Transition will begin for children and their families during the enrollment process into CSB program options. Parents and children will be invited to visit the center or other program options to meet center staff, family childcare providers, home educators, and other program staff, and experience the educational environment. The initial home visit will be used to begin the transition. The classroom/home-based orientation will further enhance the process.

A child transition plan will be developed according to the individual needs of each child. The plan will be designed when the parent indicates an upcoming change of placement or when the child is scheduled to transition. Staff involved in the plan development with the parent(s) includes:

- Teacher/Family Childcare Provider/Home Educator
- Receiving site staff
- Site Supervisor
- Comprehensive Services team

Prior to a final transition, the parent, child and CSB staff (when possible) will visit the new program. A final home visit will be conducted to finalize the process and determine any additional family support that may be needed.

#### 3. Kindergarten Transition

Kindergarten transition meetings are scheduled between December through March. During the kindergarten transition meeting, parents are given information on their local school districts enrollment procedures and are given written resources to help their child transition to kindergarten.

Representatives from the local public schools are invited to speak to parents about the transition to kindergarten. Parents are also encouraged to attend field trips to kindergarten classes and to familiarize themselves and their child with the school facility. Site staff assists parents with the Kindergarten registration process, and if necessary, assist parents to obtain the necessary documents required for Kindergarten entry.

#### 4. Kindergarten transition planning for children with disabilities

- Identify family concerns, priorities, resources that relate to the change, and parents' expectation(s) of kindergarten.
- Provide training to parents to become knowledgeable regarding the application procedure and their parental rights.
- Review placement options, parental rights as they relate to responsibilities within the school system, and steps they can take to help their child do well in school.
- Review child's progress and update records. Complete "Authorization to Release Information" (CSB139).
- Provide activities for parents to do at home to prepare their child for kindergarten.
- Inform parents of transition meetings, and allow them to decide what role they will play.
- Schedule an introduction for parents with their new contact, either in person or by phone.
- Encourage parents/arrange a visit to the prospective school before their children transfers

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#### **IV. Curriculum (Education and Early Childhood Development)**

##### **A. Child Development and Education Approach**

All CSB Centers implement The Creative Curriculum for Infants, Toddlers and The Creative Curriculum for Preschoolers. Goals for curriculum promote children's active involvement in their own learning. Children will have a learning environment and varied experiences appropriate to their age and stage of development that will help them grow physically, socially, linguistically, intellectually and emotionally. The education program is guided by Head Start Performance Standards (45 CFR 1304), The California Department of Education, National Association for the Education of Young Children Developmentally Appropriate Practices, Program for Infants and Toddlers Caregivers (PITC) and Reggio Emilia Inspired Project Approach. The Program Services Committee of the Policy Council provides input into the program curriculum and approach to children's education.

##### **1. Educational Options**

- Center based: Preschool/infant toddler full-day and Preschool part-day program options.
- Full Inclusion programs: Children with disabilities are mainstreamed into center based classrooms in collaboration with the school districts.
- Preschool Special Day class: school district operates two special day classes in collaboration with CSB.
- Home Based: Home base teachers serve as facilitators of children's learning in the child's home environment. The program provides one home visit per week for a period of 1.5 hours and two group socialization activities per month.

##### **2. CSB Educational Programs**

The curriculum goals are based on the State Child Desired Results and Head Start Child Outcomes.

- Desired Result 1: Children are personally and socially competent
- Desired Result 2: Children are effective learners
- Desired Result 3: Children show physical and motor competence
- Desired Result 4: Children are safe and healthy

The curriculum is enhanced by the Project Approach to learning. The Project Approach is a meaningful way to teach content built on children's knowledge and interests. Projects support the development of a child's knowledge, skills, disposition and feelings.

In addition, the curriculum is guided by:

- Growing, Growing Strong: A Whole Health Curriculum for Young Children.
- I Am Moving, I Am Learning infant and toddler gross and fine motor enhancement.

##### **B. Curriculum Implementation**

###### **1. Orientation**

The CSB program operates year-round, and children are enrolling and departing throughout the year. Orientation is ongoing throughout the year. Orientation Steps are as follows:

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- Phase In: The first day of school is called phase in and lasts a minimum of two hours. The goals for phase in are to welcome the child and family into the program and familiarize them with program philosophy and procedures.
- During phase in, the teacher gives a tour of the classroom and play yard, introduces the daily schedule, lesson plans, parent conferences, emergency procedures, curriculum, screening and assessments, meal-time practices, celebration policies and hygiene practices.
- The Site Supervisor informs parents about sign in-sign out procedures, parent and policy council meetings, attendance and drop off and pick-up policies, volunteer opportunity information, behavior management policies, sick child and medication policy and complaint procedures for parent and completes emergency forms (CSD-112).

#### 2. Classrooms

Preschool Classrooms are divided in clearly defined interest areas including:

- Block, Art, Science, Dramatic Play, Manipulative and Math, Library, Writing, Sand and Water, Computer and a quiet area where children can play alone or with one classmate.
- There is a place where each child can keep personal belongings.
- Learning materials are logically organized, age appropriate, open ended, labeled and accessible to children.
- There are enough materials in each area for several children to work together.
- Classroom displays reflect children's work and activities.
- Classroom rules are generated by the children and posted. Rules are phrased in positive terms, for example instead of saying "no running", say "walk".
- Classroom helper charts are posted.
- The classroom is inviting to families with displays of family photographs, parent information boards, and some adult sized furniture.
- Environments reflect diversity by including visual materials and activities that reflect diversity in gender, family composition, culture, language and ethnicity.
- Rooms are designed to be attractive, comfortable and orderly.

Infant and toddler classrooms are set up considering the needs, interests, and developmental level of each child. In these classrooms, it is the child who drives the curriculum. Teaching staff implement strive to plan based on relationships and adapt their behavior based on cues from the child. In addition, activities are offered that facilitate child-directed learning. Classroom areas include gross and fine motor materials, sensory opportunities, books, and classroom displays that reflect family backgrounds and diversity. For toddlers, materials are offered in logical groupings such as manipulatives, blocks, art, etc. to encourage independent exploration. Materials are rotated regularly as children's interests and disinterests are observed by staff. By encouraging communication with family members, classrooms are also able to reflect the experiences of home and neighborhood.

#### 3. Classroom Transitions

In both the Early Head Start and Head Start classrooms, instructional staff ensures that transitions are considered for each child. Transitions to and from indoor and outdoor activities are implemented intentionally, smoothly, and naturally. Effectively managing and being thoughtful about transitions is important. Around three years of age children begin to internalize a schedule in that they can tell the difference between routine and transition activities from other activities during the day. When activities

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during the day are predictable, it can help children begin to understand the concept of time. Well planned transitions make the difference between a difficult and a harmonious day for early childhood educators as well as for children. Anticipating what is coming next makes children feel they are in control of what is happening. The overall approach to classroom transition is:

- **Be proactive and be alert!** Have strategies to engage children who are having difficulties with transitions, and children who are learning the routines due to irregular attendance or being new in the classroom.
- **Always transition children in small groups**, and ensure children are assigned to a small group at enrollment. This reduces confusion, distraction, and waiting.
- **Plan ahead and make transitions fun!** Transitions are to be planned and anticipated, so that they are engaging for children and “empty” wait-time is minimized. Documentation on the Lesson Plan is recommended.
- **Prepare.** All teaching materials and small group activities are prepared ahead of time so they are ready for the day and easily accessible.
- **Have a back-up plan** for special events or sudden changes, such as when a staff member is out, or other emergencies arise during or before the transition.
- **Talk with the children** and let them know when a transition is going to occur. Give children a warning or signal 3-5 minutes before.
- **Review transition safety with the children** often and whenever needed, especially when providing required Pedestrian Safety at the start of the Program Year.
- **Follow the protocols** outlined in the Transition Head Count Policy and CLOUDS In-Transition feature, which include a visual count and the required sweep of the environment.
- **Always sweep** the environment before leaving the classroom or yard by physically walking the perimeter looking under and around thoroughly.
- **Communicate** counts with all team members.
- Quick and efficient transitions are a **CLASS expectation** in the Classroom Organization domain, Productivity dimension.
- **CSB has zero tolerance for lack of visual supervision!** All designated caregivers are to be present, engaged, and calm during transitions.
- There are a minimal number of transitions in the day.
- All transitions that require children exiting or entering the classroom must be conducted using the Hourly Headcount and Transition form (See Form CSD-700 Head Count Form and CSD-700 Hourly Head Count Protocol). Teacher placement is critical as the children transition, with one staff at the front of the group and one in the back. When there is only one staff member present, his/her placement must be such that she may be able to see every child as they transition.

#### 4. English Language Learners

Education for English Learners is enhanced when preschool programs and families partner around children’s education. The learning environment includes usage of the child’s first language. Promoting language understanding and use in this atmosphere encourages easy communication among children and between children and adults. The following examples help promote language understanding:

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- Give children ample time to talk to each other and ask questions in the language of their choice. Continued use and development of the child's home language will benefit a child as he or she acquires English.
- Encourage free discussions, shared experiences and conversation between children and adults.
- Provide games, songs, stories, or poems that offer new and interesting vocabulary.
- Encourage children to tell and listen to stories. Interest areas offer opportunities for teachers to teach content as children explore materials.

#### 5. The Project Approach

The CSB curriculum is enhanced by the project approach to learning. Projects are in depth investigations on a topic based on children's interests. Projects:

- Must be relevant to children's experiences.
- Topics of study must be real so that children can manipulate and explore real objects.
- Literacy, math, social studies, art, science and technology are incorporated into project investigations.
- Parents and caregivers are an integral part of the planning and implementation of projects.
- Project Components include:
  - Selecting a topic based on the children's interests
  - Creating a web: ideas to incorporate literacy, math, science, social studies, the arts and technology into the study
  - Opening events
  - Involving parents in the implementation of the project.
  - Project investigations
  - Field trips and visiting experts
  - Documentation of Project process
  - Closing events

#### 6. Program for Infants and Toddlers

The infant and toddler program is enhanced by the Program for Infant Toddler Caregivers (PITC) philosophy, which is based on the belief that infants have their own innate curriculum. The CA Department of Education partnered with PITC to create the state Infant Toddler Foundations and Guidelines. Goals are achieved through a responsive curriculum that is based on supporting the child's internal motivation to learn.

PITC Program Components Include:

- Care in small groups
- Emphasis on strengthening the child's developing family and cultural identity so children develop a sense of who they are and what is important within the context of their culture
- Primary caregivers
- Continuity of Care
- Individualized schedules and routines
- Inclusion of children with special needs

#### 7. Ready to Learn Curriculum Enhancement



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Teaching staff implement strategies to assist children and their parents to successfully transition into a preschool or infant toddler classroom. Teaching staff facilitate this transition by welcoming new families; nurturing and bonding with children; modifying the classroom environment; establishing school rules; teaching health, safety and nutrition practices; helping children make friends; and by establishing caregiver groups upon entrance to the classroom.

##### 8. Anti Bias and Supporting Diversity

- CSB curriculum is based on an anti-bias, multicultural approach.
- Families are asked to share their culture and traditions.
- Food served at mealtimes is culturally inclusive
- Teaching staffs reflect the populations in the classrooms.
- Classroom activities and environments reflect children's ethnic identity.
- Environments include diverse visual materials such as pictures, books and photographs. Games, music, planned activities and books reflect diversity in gender, family composition, culture, language and ethnicity.

##### 9. Teacher/Child Interactions

Positive teacher child interactions build trusting, nurturing bonds between staff and children, which supports the children's developing a love of learning.

Teachers:

- Welcome children and families into the program daily.
- Foster positive social behaviors such as cooperating, helping, conflict resolution, and turn taking by using modeling, coaching and encouragement.
- Speak to the children at eye level and move to where a child is to speak with them directly.
- Use an appropriate tone of voice. Teacher's voices should not be heard above children's voices.
- Observe children to assess their level of cognitive development and social skills.
- Facilitate child initiated learning by offering children choices and providing them with materials to manipulate and explore.
- Engage children in conversations during work time, mealtimes and throughout the day. Encouraging verbal expression enhances children's self esteem and cognitive growth.
- Comfort children who are crying and validate their feelings.
- Engage in activities with the children on the floor by sitting on the floor with them unless a doctor's note with such limitation has been provided to the personnel office.

##### 10. Caregiver Groups

Upon entry, each preschool child is assigned to a caregiver group of six to eight children based on their developmental and individual needs. The teaching staff assigned to the caregiver group will plan and implement individualized activities for their group during small group time and assist them during classroom transition times.

Upon entry infants are assigned to a caregiver group of three children per caregiver and a caregiver a group of no more than four toddlers. Infants and toddlers remain with the same caregiver possible

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throughout their enrollment in the program to ensure continuity of care. Caregivers design the learning environment to be responsive to the individual needs of each child.

##### **Caregiver Groups during Transitions:**

- It is CSB's policy to transition in small groups.
- Caregiver Groups are maintained throughout the daily activities, including transitions. Groups can be named after animals, shapes, etc. Each instructional staff works closely with that group at lunch and snack times, small group, bathroom time, hand washing, etc. For children, this reduces confusion, distraction and waiting around and promotes attachment with the primary caregiver.
- It is easier for a small group of children to go outdoors to indoors, get settled for nap, wash hands, etc. When children transition in their caregiver groups, teachers enhance bonding, group interactions, and language. Caregiver groups also enable instructional staff to meet individual needs and be more responsive to the children.
- When children are in caregiver groups, staff and children can take time for transitions and their schedule is more relaxed. For example, if children go outside in a small group, there isn't a mass rush to the door to get to the door first.

##### **11. Child Health and Safety**

Teaching staff integrates health and safety lessons and activities into the daily lesson plan. Health curriculum includes: I Am Moving, I Am Learning Gross Motor Activities, Little Voices for Healthy Choices, oral health, pedestrian safety (first 30 days), sun safety, transportation safety, hygiene practices, home safety, emergency safety including: fire, earthquake, shelter-in-place and school safety.

Children wash hands upon entering school, before eating, after wiping noses, after touching animals, after sand and water play, upon returning from the play yard and after toileting.

Staff inspects classroom and outside area daily to ensure all facilities, furniture, materials and structures are safe and free from hazards. Daily Playground Checklist (CSB form 136) is completed daily to document inspection of outdoor areas accessible to children.

Teachers perform a daily health check of each child upon their arrival to school. Refer to section 2, VI. A daily Health Inspections for further guidance.

For infants and toddlers, this practice is done using the Daily Communication Form where families and staff document for about each child at the beginning and end of the day. The daily health check is also conducted and documented on this form.

Teaching staff conducts head counts hourly and during transitions using CSB form 700 in accordance with Head County Policy as described in CSB form 700A, and checks that door alarms are set and all gates are secured at all times.

Children are supervised at all times, and always supervised while toileting.

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##### 12. Nutrition

Children participate in learning activities planned to affect the selections and enjoyment of a wide variety of nutritious foods.

Nutrition activities include: field trips, planting gardens, reading stories about food and nutrition, and sampling a wide variety of foods. Nutrition activities are planned for work time and circle time.

Children are involved in simple cooking projects including making their own snacks and sandwiches weekly. Teaching staff serve meals family-style at the centers. Children participate in setting the tables, serve themselves, pour their own beverages and scrape their plates.

##### 13. Language / Literacy Curriculum Enhancements

- **Reading is Fundamental:** A federally funded grant that provides for three book giveaways per child. Children participate in motivational activities prior to giveaways to encourage an appreciation of books and reading.
- **Learning through Literature Curriculum Enhancement:** Each month teaching staff receives a picture story book to read to their classroom that contains a written guidance of developmentally appropriate activities based on the content of the story to enhance children's learning.
- **Raising A Reader:** Colorful tote bags filled with books are taken home weekly by each child. Parents are encouraged to read to children daily and discuss the stories. Books are multicultural and include Spanish texts.
- **Books at Naptime:** Each child may choose a book to read to themselves on their mat for at least 10 minutes at the beginning of naptime.

##### 14. Pedestrian Safety

Children and parents are taught the importance of pedestrian safety within the first 30 days of school. This includes educational videos and materials on pedestrian safety for both children and parents, various classroom activities and educating parents at parent meetings.

##### 15. Television in the Classroom

Videos and DVD are not to be used in the classroom unless it is connected to a project topic or is approved as curriculum enhancement. Videos are not to be used for more than 15 minutes at a time. All videos and DVD must be approved by the site supervisor before they are viewed at the site.

##### 16. Lesson Plans

The Infant Plans, Toddler Plans, and Preschool Weekly lesson plans are designed to ensure that all classrooms provide developmentally appropriate activities consistent with Performance Standards, NAEYC Guidelines, and Creative Curriculum. The plan communicates to staff and parents the activities for each day of the week. The lesson plan must include strategies and activities that are consistent with the emergent, project based curriculum and focuses on the children's individual goals and IEP/IFSP goals. The teacher submits a completed lesson plan form to the Site Supervisor weekly for approval. An approved lesson plan is posted in the classroom by 8:00 A.M. Monday morning of the current week.

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Lesson plans are completed at the center by the teaching staff, with input from parents and volunteers (CSB-105A Preschool, CSB-105B Infant Classroom Plans and Weekly Possibilities and CSB-105 Toddler Daily Possibilities). These must include:

- Individualization: activities planned to meet the individual goals of each child including IEP/IFSP goals. Individualization is documented on the lesson plan by adding children's alphabetic code to the activities planned to help them meet their goals.
- Area Enhancements: List of materials that have been added to centers to stimulate children's interests.
- Projects: activities or materials that are provided to facilitate children's project investigations or explorations. Plan should include project related field trips and visiting experts.
- Center Activity: a teacher planned creative activity that children may choose to engage in during work time. Minimum of two science activities planned per week.
- Large Group/Circle Time – includes Music, movement, songs, finger plays, IMIL activities, short discussions, visiting experts.
- Small Group Time: a minimum of three small group language/literacy activities and two small group math activities must be planned.
- Outdoors time: list of activities or materials that will be offered to the children in addition to bikes and balls. I Am Moving, I Am Learning Curriculum enhancement activities must be listed. Outdoor science, art or building activities may be included.
- Health, Safety, Nutrition and Social Emotional activities should be listed at the bottom of the lesson plan in section entitled Weekly Activities Integrated into the Daily Routine. These activities must also be reflected in the upper body of the lesson plan under the appropriate category i.e. Work time, Circle Time, Small Group Time or Outside Time.

#### 17. Required Elements of the Children's Daily Schedule

CSB daily routine blocks out times and establishes sequences for activities in the classroom. It includes active and quiet times, large and small group activities, outdoor times and adult initiated and child initiated activities.

- Greeting/ Health Check- each child and family member is warmly greeted when they enter the program daily. A brief health check is conducted by the teaching staff including touching of the child's skin and looking into their eyes. Staff may ask a child how they are feeling. Parents should remain during the health check and may be asked questions if there are concerns.
- Work Time / Independent Choices – Children have access to all interest areas in the classroom. Project investigations and center activities are offered as additional choices for the children. Teachers add materials for children's creative activities during this time. Teachers work with children and ask open-ended questions to stimulate and enhance child learning. A minimum of two science activities must be offered during the week. (Approximately 75 minutes in AM). For full day students, an additional afternoon work time of 60 minutes should be scheduled.
- Small Group Time – The class is divided into small groups of ten children maximum. This is a teacher-guided activity based on the developmental level of the group (approximately 15-20 minutes in length). A minimum of three literacy/language activities must be planned weekly. Two small group activities a week should focus on math skills. Small group time activities may be conducted anywhere in the classroom or outside. Children must not be restricted to tables.

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- Large Group/Circle Time – Music, movement, songs, finger plays, IMIL activities, short discussions, visiting experts with large groups of children. Every child is offered the opportunity to participate but no child should be forced to attend circle. Alternate activities can be provided until a child wishes to join the large group. (Approximately 15 minutes).
- Outdoor Play - Children are able to use their large muscles and develop socialization skills; activities include tricycles, wagons, balls, games, water tables, obstacle courses, music, art, and dramatic play activities (not less than 30 minutes). Outdoor play is an extension of a child's learning environment experience and reflects the same care and planning given to indoor activity. For full time students, an additional 60 minutes of outdoor time should be scheduled in the afternoon.
- Meal Times - Breakfast, lunch and a snack are provided for full time students. Part time AM students receive breakfast and lunch and PM students receive lunch and snack. Infants and toddlers are fed on an individualized schedule. Mealtimes are learning times when teachers assist students with setting the tables, serving their own food and engage them in conversations. Breakfast and Lunch approximately 30 minutes, snack 15 minutes.
  - Teachers are role models for the children. Adult portions are to model the CACFP-USDA Meal Patterns for Ages Three to Five Years Old. (CSB Forms > Nutrition > CACFP-USDA Meal Patterns for Older Children).
  - Each child in a part-day program will receive one meal and one snack that provide at least 1/3 of the child's daily nutritional needs. A child in a full-day program will receive meals and snacks that provide 1/2 to 2/3 of the child's daily nutritional needs.
  - Any child who arrives after scheduled breakfast time will be offered a nourishing breakfast.
- Rest Time – Full day classrooms are required to schedule a one and a half to two-hour rest period. Infant and toddler classrooms also provide an "on demand" schedule for their routines, including napping. Every child is required to have a crib, cot or mat and once the children are resting, if all children are sleeping, one staff person may supervise the children. All children must be given an opportunity to rest without distraction or disturbance from other activities or children. Those unable to sleep may be given quiet activities to engage in. Teachers encourage children to rest by offering them a book, engaging them in soft conversation and gently rubbing their backs. No child is to be restrained on their crib, cot or mat at any time.
  - The napping space must be equipped with a sheet and blanket. The crib mattress, cot or mat is wiped with detergent as needed and disinfected weekly and when soiled or wet. Infant toddler bedding must be laundered daily. Preschool bedding is individually stored so that one child's used bedding does not come in contact with another's, and is to be laundered weekly.
  - Napping equipment is arranged to provide access to children and spaced to prevent the spread of germs. Cribs must be placed three feet apart. Cots are placed eighteen inches apart and children are placed napping so that each child is alternating head-to-feet.

#### 18. Infant Toddler Routines

Infant and Toddler Routines include:

- Nurturing time with the teacher caregiver
- Indoor and outdoor activities

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- Quiet and active play
- Group play and individual play
- Rest and relaxation on demand with a nap schedule for children over 12 months old.
- Feeding/eating and diapering/toileting on demand

#### 19. Parent Involvement in Planning and Implementing Curriculum

Parents are partners in the processes of planning and implementing curriculum, and are encouraged to participate in the program in a variety of ways:

##### i. Home Visits

- **Initial Home Visit:** Within the first 45 days of enrollment, teachers conduct a home visit. Parents begin to develop a positive relationship with their child's teacher through this initial communication. The home visit gathers information about parent's observations of their children and the goals they have for them. The initial home visit gives the child an opportunity to meet the teacher in a familiar setting and may be used to plan individual goals for each child. Staff should make every effort to conduct the home visit at the child's house.  
If parents request that teachers meet them in an alternate location or if they prefer not to have staff come to their homes, the other location will be considered "home visit." See "Initial Home Visit" form (CSB170-Initial Home Visit and CSB170IT-Initial Home Visit). If the parent chooses not to have the visit in the home the reason for that decision must be stated on the home visit form.
- Each new family will be given a CSB Child Development Brochure, a toothbrush and guidance for tooth brushing and hand washing. The teacher will also assist the parent to complete a DECA behavioral screening. Teaching staff will enter the parent DECA in e-DECA and print out the results and add it to the child's file.
- **Returning Child Home Visit:** For children who are enrolled for a second year in the program, the returning child home visit form should be completed (CSB-106). As with the initial home visit every effort should be made to conduct the home visit in the child's home. Teaching staff will distribute a toothbrush and hand washing/ tooth brushing guidance and assist the parent with to complete the DECA behavioral screening. Teaching staff will enter the parent DECA in e-DECA and print out the results and add it to the child's file.
- **Final Home Visit:** During the final home visit, the teacher and parent review the child's progress, portfolio and assessment results. They may establish new goals, discuss kindergarten readiness, plan activities for the parent and child to do at home and address questions or concerns the parent has.

##### ii. Parent Conferences

All parents must be given the opportunity to participate in two conferences a year. Conferences are not home visits.

- **First Parent/Teacher Conference** – Within 90 days of the child's first day of school, each parent will be given the opportunity to participate in a Parent/Teacher Conference. During this conference, the teacher and parent(s) will discuss the child's progress (based on results of the screening, assessments, observations, and child's work), and will develop an Individual Plan (IP). A minimum of seven goals to include; two social emotional, three cognitive, one motor and one

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health and safety must be determined during the conference. If the child has an IEP, the IEP goals must also be included in the plan. DRDP 2010 measure numbers must be reflected next to the written goals. (See Form CSB118A-1st Parent-Teacher Conference.)

- Second Parent / Teacher Conference – A second Parent/Teacher Conference will be scheduled to review the child's progress/objectives set during the first Parent/Teacher Conference. New objectives will be developed if applicable. (See Form CSB118B 2nd Parent-Teacher Conference) For children going to kindergarten, a kindergarten transition packet may be reviewed with the parent during this conference or scheduled at a different time between December and March. Kindergarten transition packet checklist form should be added to the file with the second parent conference.

#### C. Parent Involvement and Participation in Program

##### Other Elements of Participation

- Parents have the opportunity to participate in planning and implementation of field trips.
- Families are encouraged to share their culture and traditions by volunteering in the classroom.
- Parents are provided with individualized home activities by the child's teacher to reinforce child's learning objectives at home.
- Family Literacy: A variety of family literacy programs are offered to support parents in helping their children develop a love and appreciation of books. These include Raising a Reader, Reading is Fundamental and First Books programs.

#### D. Home-Based Option

CSB's Home-based program option provides opportunities for parents to enhance the parent-child relationship, promote the education and development of their children, enrich the home environment to encourage their children's learning, identify and refer children with special healthcare needs, developmental delays, or disabilities. Home Educators serve as facilitators, educators, and a support system for parents and families. They act as vital links to the local community and resources. All services provided to the home-visited family are the same quality as those given in centers. For Early Head Start, the parent-child bonding and attachment is one of the most important home visitation goals.

The Home-based Option uses the center-based sites for socialization and plans activities with the parents to use the home as their primary learning environment.

Head Start's Home-based Option services include:

- Providing one home visit per week per family (a minimum of 42 home visits per year), lasting for a minimum of 1.5 hours each.
- Providing a minimum of two group socialization activities per month for each child (a minimum of 16 group socialization activities each year).
- Nutrition objectives are accomplished through both home visits and group socialization activities. The emphasis is on nutrition education, helping parents learn to make the best use of existing resources. Parents receive information and guidance on menu planning, consumer education, and money management.
- Home Start

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Home Start is a locally designed option to meet the unique needs of our children and their families in collaboration with exempt providers in Contra Costa County. It is a model designed to support the parent's work toward self-sufficiency. It insures quality services for the children, their families, and providers; enriches the exempt providers' home environment to encourage young children's learning; provides early intervention services for the children and their families; identifies and refers children with special health care needs, developmental delays, or disabilities. The program builds bridges for the exempt providers and families to link them to local community resources.

The program maintains an average of 10 to 12 families per Home Educator with a maximum of 12 families for any individual Home Educator. Services include:

- One home visit per week for each child and provider lasting for a minimum of 1.5 hours each
- Two group socializations activities per month for each child. During socialization, activities and training are planned for parents and providers to increase their knowledge about child development issues.
- Monthly parent meetings are planned for all the parents. Parenting classes, parents support groups, and trainings are scheduled through the year.
- All services provided to the home-visited providers are the same quality as those given in centers. The only difference is the home setting is used as the learning environment, and the provider is the educator.
- The resource center for parents and providers allows parents to meet and use materials in a central location. Materials include manipulative and educational games for children, books, and audio and visual training materials for parents and providers.

#### E. Classroom Assignments

Children are assigned to classrooms and teachers in accordance with their needs, available space, and other relevant variables. Each classroom must have a roster listing all enrolled children. The Site Supervisor notifies the teachers of new enrollees.

Copies of class rosters are continuously available on our CLOUDS System and are kept current as children enroll or leave the program.

Classroom rosters do not list more than twenty children on any given day, per federal enrollment regulations except if a waiver has been granted. State Preschool not receiving HS funding may enroll 24. CSB centers maintain a minimum class size of at least 95% and a maximum of twenty children, and must never exceed the licensing capacity of the classroom.

#### F. Adult-to-Child Ratio

CSB's part day Head Start program is governed by California Community Care Licensing Title 22 Regulations which require a 1:12 ratio. However, Head Start regulations require that the maximum class size is 20 (unless a waiver is granted), so the adult-to child ratio in these classrooms is 1:10.

CSB's California Department of Education programs, including those combined with other funding such as Head Start and Early Head Start is governed by California Community Care Licensing Title V



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Regulations which require the following ratios: For children ages 3-5, 1:8; for toddlers, 1:4; for infants 1:3. For preschool classrooms, Title V regulations allow a classroom to be out of ratio for up to 120 minutes per day. These 120 minutes allow for rest time in early morning or late afternoon and do not apply during the core instructional time of day. During those times, children must be supervised according to the Title XXII regulation of State Licensing at 1 teacher per 12 children.

Children under three years of age may not be in groups with more than eight children. Each full-day classroom is staffed with a qualified Teacher and 2 Associate Teachers. If this is not possible, an Associate Teacher may be substituted for a Teacher and a Teacher Assistant Trainee for an Associate. Each part-day classroom is staffed with two Teachers and Teacher Assistant Trainees.

The EHS Infant and toddler classrooms have the following ratios: Infants (birth – 18 months) is one to three (1:3) and toddlers (18-36 months) is one to four (1:4). Maximum group size for infants is six at all times. Maximum group size for toddlers is 8 at all times.

All staff inside the classroom and outside in the yard are responsible to ensure that all children are visible at all times and that they are being supervised at every moment. Teaching staff supervise infants and toddlers/twos by sight and sound at all times.

#### G. Sign-In and Out Procedures

##### 1. Signing-In

Everyone must sign in at a center: visitors and guests. Upon arrival, every child must be signed in by a parent, friend or relative over 14 years of age, denoted on the emergency contact list. The full signature is required, along with the time of arrival. If a child arrives at the center unaccompanied, teaching staff must bring that child into the center, and contact the parent (and State Licensing) immediately so they may return and properly sign in the child. Failure to sign children in properly may require a referral to County Child Protective Services.

For our part-day sessions, if a parent and his/her child arrive before the start of session or stay after the closing of the session, the teaching staff will remind them that the child is the parent's responsibility during that time.

##### 2. Signing-Out Procedures

The parent must always sign a child out at the end of the day.

Children who leave and return to the center during the day must be signed out and in by an authorized adult, e.g. a child leaving for a doctor's visit.

Adults who arrive at the center to pick up a child must be listed on the Children's Center File Emergency Card. Picture identification must be provided before child is released. It is the teacher's responsibility to keep emergency numbers current. At least two people must be listed who can pick up the child in an emergency.

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If a person picking up the child is not on the emergency form, written preauthorization from the parents is required before CSB staff will release the child from the center. Children will not be permitted to leave the center unless accompanied by a preauthorized adult. Parents may not give verbal authorization for pick-up of children.

##### 3. Child Release Policy

The safety of the children is the priority for all CSB staff; therefore the following policy must be enforced at all times:

- All parents are required to complete emergency forms during the enrollment process. Emergency forms with the names and telephone numbers of persons authorized to pick up the child will be kept in the child's file. Emergency forms must be updated at least every 12 months or anytime information changes.
- Photo identification will be required of all newly authorized individuals or individuals not recognized by staff prior to release of the child. Under no circumstances will a child be released to an unauthorized person.
- If CSB personnel are not certain the pick-up person is who he/she claims to be, the child will not be released.
- Staff will not release children if the person picking up the child smells of alcohol or if staff has reason to believe the person is under the influence of alcohol or other foreign substance.
- Staff will not release children to the person picking up the child if there is a court ordered restraining order on file against the person.
- Children will not be forced to leave the center with someone they are not familiar with.

##### 4. Sign-Out Disputes Due to Child Custody Issues

If a parent requests that the other parent not be allowed to remove a child from the center, Site Supervisor or Head Teacher must request a copy of the court order, and place it in the child's file in the locked cabinet.

The parent must be informed that CSB is not a law enforcement agency and cannot undertake that role. (A parent cannot be denied access to his/her child unless there is a Court Order.)

If a dispute over custody should occur in the classroom, the teaching staff will deal with the family calmly. The staff will ask the person if they would like to talk with a Supervisor. If it seems likely that the parent may become violent, the teacher may release the child, and inform the parent that they (teacher) must call the police as soon as the likelihood of violence becomes apparent. Should the parent leave with the child prior to the arrival of the police, the teaching team must be prepared to provide a description of the person, the car, and the license plate number. The teacher must call her/his Site Supervisor to report and document the incident. Such unusual incidents must be reported to an Assistant Director and to Community Care Licensing using the standard procedure.

##### 5. Adults Signing Their Child In or Out While Under the Influence of Alcohol or Drugs

If the parent appears to be under the influence of drugs or alcohol, the teaching staff must call 911 immediately to notify the police. They must attempt to keep the adult at the center by discussing the child's day or other broad topics until the police arrive. One staff member will call an Assistant Director

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and inform him/her of the problem. Allow the person to take the child if he/she insists on leaving, or the staff and children are physically threatened. The staff must get the license number of the vehicle for the police. If this happens, the teaching staff must:

- Call the police
- Call County Child Protective Services and file a child abuse report
- Make an unusual incident report to Community Care Licensing.

If the police arrive at the center while the adult is still present, it is their responsibility to determine what further action should be taken. Only a police officer can officially determine if an adult is intoxicated.

#### 6. Late Sign-Out Procedures

A parent is considered to be late when he/she has not picked up their child by the agreed upon time. Staff should not call parents to pick up their children before these times. (See Form CSB132-Late Child Notice Procedure) When a parent is late, the teaching staff will implement the following procedure:

- First Time - The staff will verbally inform the parent of the importance of picking up their child on time. This must be documented on the child's folder at the center.
- Second Time - When the child is picked up, the staff will give a late child notice to the parent. A copy of this notice will be kept in the child's file at the center.
- Third Time - The staff will call the Site Supervisor. The Site Supervisor will inform the parent that if this occurs again the child will be suspended from the center and placed on the waiting list. The Site Supervisor will give a "Late Child" letter to the parent. A copy of this letter will be placed in the child's folder at the center. (See Form CSB132.)
- Fourth Time - The staff will call the Site Supervisor, who will inform the family that their child will be placed on the waiting list. If the family receives collaborative funding from the CA Department of Education, a formal Notice of Action will be given terminating the state funding after the 14-day grace period for appeal. The Site Supervisor will notify the Assistant Director and the Comprehensive Services Assistant Managers of the change in that child's status.

Closing Time - If a child has not been picked up by closing, and no one can be reached to pick up the child, the Site Supervisor will determine the plan of action (which may include calling Child Protective Services). CSB staff must never transport children from the center via vehicle or on foot.

#### 7. Full-Day Program Sign In/Out Procedures

The number of hours for each child enrolled in a full-day program is based upon their Contracted Hours Agreement, completed with the staff responsible for enrollment at that site. All full-day children must be signed in according to their contract hours. Each parent will have an individual sign-out time based on their unique needs for full-day services and Contract Agreement. The same procedures for late pickup are to be followed although "late" times will vary according to the parent's contract hours. Parent(s) may request a change in hours through "Request for Change of Contract Hours" form. (CSB-607)

#### H. General Classroom Celebration Policy

##### 1. Description

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The Community Services Bureau avoids endorsing commercialism surrounding the holidays. The focus is about learning and celebrating diversity. The following guidelines are followed when planning activities with staff and parents:

- Holidays are not a major part of the curriculum. They are integrated within the total curriculum. No more than a few days and few activities are dedicated to any holiday.
- Holidays are not a theme and the whole room is not to be decorated reflecting a holiday.
- Learning about holidays broadens children's awareness of their own, and other cultural experiences. Activities must be thoughtfully planned and implemented for inclusion of all children and families.
- Every group represented in the classroom (children and staff) is to be honored.
- Teachers must not assume that everyone from the same ethnic group celebrates holidays in the same way. Teachers check with the families to ensure that activities are indeed reflective of the cultures represented in the classroom.
- Teachers must plan strategies for working with children whose family beliefs do not permit participation in holiday celebrations. Their parents are to be included in planning a satisfactory alternative for these children in the classroom.

#### 2. Children's Birthdays

Children's birthdays are very important and birthday celebrations are as unique as each child. However, the classroom's daily routine should not be changed to accommodate birthday celebrations. Because children learn by example, and to reinforce the nutrition education in the classroom, the following ideas are suggested:

- Giving and/or reading a book to the child and classmates
- Bringing educational toys to share
- Bringing a baby book or other symbolic item, or a special family story to share
- Lead a game
- Decorating the classroom
- Performing magic acts
- Leading a nutritious class project (any food provided cannot be served in place of regular food service)

#### 3. Inappropriate Activities in the Classroom

- Staged performances, plays, and ceremonies where children have memorized vocal parts or if rehearsals are required
- Lectures, where children have to sit and listen for a long period of time
- Commercial displays
- Adult-directed activities that focus on a product rather than a process (i.e., patterned art / work)
- Combined classrooms with large groups of adults and children.
- Graduation ceremonies with caps and gowns

#### I. Field Trips

##### 1. Procedures

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Field trips complement the classroom educational experience, current curricula, and must be developmentally appropriate. Field trips encourage hands-on exploration and experimentation. Field trips permit the child to learn about his/her world (school, neighborhood, and community).

Site supervisors must inform Nutrition office one week prior to date of a field trip using the Field Trip Form (CSB-115). All field trip lunches will consist of sun butter sandwiches, string cheese, fruit, vegetable, and milk.

Parent volunteers are encouraged to plan and participate in field trips. Only children enrolled in the classroom taking the field trip may participate. Parents may not bring siblings or other children on the field trip.

Parents may drive their own child to a field trip after signing their child out of school. Parents may not drive other students or parents on a field trip.

Field trips are approved in advance by the Site Supervisor and are documented in the classroom lesson plan. Teaching staff notifies the Site Supervisor or designee when leaving/returning from the trip.

Parental permission slips are required for all field trips (CSB-114). Transportation is provided as needed, primarily for staff and children.

Travel time for field trips should be no more than 60 minutes in length, round trip, and allow for heavy traffic conditions when necessary. Walking field trips are encouraged, with the destination within a half-mile radius of the center.

- A field trip should be completed within three hours, including lunch and transportation.
- Full-day programs require a two hour nap/rest period. A field trip should not interfere with the regular naptime schedule.
- Requests for additional time for field trips may be submitted to the Assistant Director for approval.

Size of group – no more than one group of twenty children may go at one time. AM and PM classes do not combine or change program hours to go on a trip. Adult-to-child ratio on all field trips is a minimum of one adult for every four children (1:4). This ratio may be adjusted lower (1:3 or 1:2) at the discretion of the teacher or Site Supervisor. Staff (and volunteers) must have assigned groups of children for whom they are responsible at all times. Each group must stay together, within the teacher's area of vision/supervision. Teachers are responsible for ensuring that each adult volunteer properly supervises his/her assigned group of children on the field trip. Attendance on field trips will be taken at the following times:

- Upon leaving the center
- On the bus or van
- Upon arrival at the destination
- At random times during the field trip
- When boarding the bus or van for the return to the center
- After return to the center

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Emergency information for each child, three blank accident forms, a cell phone, and a First Aid Kit must be taken on walking or driving trips. (CSB-113-Field Trip Information and CSB-1015-Vehicle Use Request Form)

- During field trips, each child must wear a tag at all times that only identifies the name of the center and the center's telephone number on the front. Child's name may be written on the back of the tag, but never on the front.
- Field trip leaders must keep to their schedule, or call the center if there are any changes.
- If there are insufficient adults, inclement weather or any circumstance that would make it less than an optimal experience, the trip must be cancelled. A well-planned field trip taken under adverse conditions or circumstances may become a danger.

#### 2. Planning Protocols

When planning a field trip, the following must be completed:

- Establish educational goals and objectives for the planned trip
- Teacher, or their representative, is to visit the destination to check travel time and accommodations, and to ensure the safety of the children
- The field trip planning form must be completed and submitted one month prior the field trip
- If applicable, the request for change of menu and purchase requisition must be completed and submitted one month prior the field trip
- Parents are notified at least two weeks in advance of the upcoming trip, at which time they are encouraged to volunteer for the trip
- Children are prepared for the trip at least one week in advance through in-class discussions of field trip safety

#### In Case of Minor Accident at Site or on Field Trip

- A designated staff member with a valid First-Aid Certificate assesses the situation, and renders first aid if necessary.
- If a minor accident occurs on a field trip, the teacher of an injured child must notify the child's parents on return to the center. (As noted above, the emergency contact list must be on hand.)
- The "Band Aid Report" form is completed, signed, and dated.
- The teacher retains one copy for the center and gives one copy to the parents.

#### In Case of Major Accident at Site or on Field Trip

- The teacher calls paramedics immediately. Classroom staff assesses the situation, and renders first aid as indicated for life-saving measures.
- Injured children are taken to the nearest emergency facility and the teacher or Site Supervisor accompanies the child.
- The teacher of an injured child must notify the child's parent(s) immediately. (The emergency contact list must be on hand.)
- The teacher must immediately notify the Site Supervisor, who will notify the Assistant Director and/or the Bureau Director or designee.
- Licensing must be notified by telephone (with a follow-up of the "Unusual Incident/Injury" report) as soon as possible.
- The parent may accompany the child in the emergency vehicle.

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- If the parent is not at that location, the child's teacher accompanies the child in the emergency vehicle.
- If necessary, CSB staff will provide transportation for the parent to/from the emergency facility.
- The "Accident/Incident Report" form (See Form CSB208) is completed, signed, and dated by the staff person involved in the situation.
- An insurance form is also completed, signed, and dated.
- The teacher retains one copy of the "Accident/Incident Report" and insurance form for the center, and submits copies of the reports (within 24 hours) to the Site Supervisor.
- The Site Supervisor submits copies of these reports to the Assistant Director and/or the Bureau Director.
- The CDE must be notified by the Bureau Director if the client is in a program funded by the state.

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### Section 2: Child Development

#### V. Child Nutrition

##### A. General Description-Identifying Children's Needs

To implement a comprehensive system of services for preventing health problems and intervening promptly when they exist, comprehensive services is responsible for identifying cases for nutrition referral, follow-up and parent conference referrals.

##### B. Nutrition Referral

Comprehensive Services Assistant Managers and Clerks perform the following:

- Review medical records, health histories and growth assessments
- Identify nutrition risk following the guidelines listed below
- Initiate nutrition referral in CLOUDS
- Update existing referrals instead of creating new ones, so that all relevant case notes are kept together
- When talking to the parents, use nutrition terminology as indicated on the "What To Say and What To Do" protocol (see Shared Folder > Nutrition > Training-Flyers) based on the specific nutrition risk when the child has a nutritional risk
- Complete WIC/Food Stamp screening form with parent, and provide other nutrition resources as appropriate (weight, iron-rich foods, picky eater, lead poisoning, and other areas of concern)
- Encourage parents to attend nutrition presentations, such as at parent meetings
- Document in CLOUDS all actions/services provided to parent
- Initial and date all documentation
- Identify nutrition risk following the guidelines listed below

##### 2. Guidelines for Identification of Nutritional Risk

###### *Iron Deficiency Anemia – Criteria*

Criteria for Providing Nutrition Information to Child's Parent			
Age / Years	Sex	Hgb	Hct
< 2	Both	11.4 – 11.0	34.9 – 32.9
2 < 5	Both	11.4 – 11.1	34.9 – 33.0
5 < 8	Both	11.9 – 11.5	35.9 – 34.5
Criteria for Initiating Nutrition Referral and MD Referral			
Age / Years	Sex	Hgb	Hct
< 2	Both	10.9 or less	32.8 or less
2 < 5	Both	11.0 or less	32.9 or less
5 < 8	Both	11.4 or less	34.4 or less

###### *Blood Lead Levels*

Provide nutrition resources to parents if child's blood level is below 10 ug/dl. If child's blood level is 10 ug/dl or greater, a referral should be made to the Comprehensive Services Health Manager.

###### *Diabetes*

If child has been diagnosed with diabetes, obtain "Child Diabetes Care Plan" from child's MD.



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#### *Underweight*

Input child's height and weight under Growth Assessment in CLOUDS to determine nutritional status. Refer children with underweight status.

If child's status is underweight and there is a family history of small stature, a nutrition referral should not be made. If CLOUDS triggers an automatic referral, click "no referral needed," and explain why under comments, unless there are additional concerns such as:

- Failure to thrive
- Developmental disabilities
- Anemia

For infants, initiate nutrition referral if following values are determined after plotting on the growth chart:

- Weight-for-age < 3-5%
- Weight-for-length < 5%
- Head circumference < 5%

#### *Overweight & Obese*

To effectively manage Child Health and Developmental Services, nutrition follow-up must be accomplished in a timely manner and monitored through resolution of the problem. Assigned staff is responsible for the following.

- Comprehensive Services Clerks
  - Follow steps as indicated on the "What To Say and What To Do" protocol (see Shared Folder > Nutrition > Training-Flyers).
  - Download updated list of Overweight and Obese children, and distribute list to the respective Site Supervisors & Partner Agency Staff.
- Comprehensive Services Assistant Managers
  - Monitor to make sure follow-up is completed.
- Site Supervisor and Partner Agency Staff
  - Obtain updated list of Overweight and Obese children from the Comprehensive Services Clerks.
  - Distribute updated list of Overweight and Obese children to the respective teachers in the classrooms.
- Teachers
  - Place updated list in "Nutrition Alert" binder.
  - Follow nutrition interventions for Overweight and Obese children in the classroom as indicated in the Nutrition Alert binder.
  - If child is extremely underweight or obese, staff will follow policies and procedures related to reporting suspected child abuse and neglect. Nutritionist and Health Services Manager are available for consultation as needed.

#### 3. Picky Eaters

When picky eaters are identified, Comprehensive Services Assistant Managers and/or Clerks are responsible for providing the nutrition handout to parents, and to document actions and conversations in CLOUDS in the comment section under Health History. No referral is needed.

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##### 4. Tube Feeding

Case management must be conducted with the family and a public health nurse before any child with a feeding tube can be admitted to the program. If, after case management, enrollment is deemed feasible and reasonable, Community Care Licensing must be informed in writing of CSB's intent to provide tube feeding. A care plan must be developed and LIC 701B is to be used to document permission by licensing and the medical provider. Staff must also be trained by a qualified health care professional.

##### 5. Special Meals and/or Accommodations

If dietary modifications are indicated based on a child's medical or special dietary needs and/or religious/personal/cultural belief, the Nutritionist will modify or supplement the child's diet on a case-by-case basis, in consultation with parents and the child's medical provider.

##### 6. CSB is a Peanut-Free Program

Each CSB center is designated a Peanut-Free Zone. CSB does not serve foods that contain peanuts due to this increasing health risk in young children. The prevalence of childhood peanut allergies has increased dramatically in the past few decades. Peanuts are currently the leading food-related cause of severe life-threatening allergic reactions.

##### 7. Food Allergies and Special Diets

When food allergies and special diets are identified, the following will apply

Comprehensive Services Assistant Managers, Clerks, Site Supervisors, and Site-Based Clerks must:

- Identify food allergy/intolerance or need for special diet if any.
- Immediately give parent a "Medical Statement to Request Special Meals and/or Accommodations" (See Form CSB401). This form is to be used only for food allergies and/or intolerances, and is not complete without the designated healthcare provider's signature.
- Use Request for Special Meals Due to a Cultural, Religious, and/or Personal Beliefs form for non-medical special diets (see Form CSB402). This form is not be used for personal food preferences.
- Follow-up with parent until form is returned.
- Submit completed forms to Nutrition Office two business days prior to child's first day. Original to be kept in child's file, with copy sent to Nutrition Office.

Site Supervisor or assigned staff must:

- Schedule case management with Comprehensive Services Assistant Manager before child starts in the program if food allergy is life-threatening or if several different food items are restricted so that meal pattern becomes unbalanced.
- Post meal modifications weekly in both kitchen and classrooms, with names covered for privacy.

Cooks and transporters are responsible for:

- Checking posted meal modification to confirm accurate food preparation and delivery.
- Reviewing meal modifications and addressing any questions to the Nutritionist.

The Comprehensive Services Assistant Manager is responsible for consulting with the Nutrition Office regarding the possibility of accommodating other food substitutes necessary to meet child's needs.

Nutrition Clerk is Responsible For:

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- Adding child's name to the Allergy List of the center in which child is enrolled.
- Forwarding copy of list to center.
- Updating list as information is received from Site Supervisor or Comprehensive Services for children who are enrolled or dropped from program.
- Keeping on file in Nutrition Office the Medical Statement to Request Special Meals and/or Accommodations form and Request for Special Meals Due to a Cultural, Religious, and/or Personal Belief form.

#### 8. Menu Change Protocol for Food Allergy/Modifications

The Nutritionist is responsible for any food modifications/substitutions. When a recommended food item is not available:

- The Nutritionist will be immediately notified by FS Worker III, FS Manager, or AD. Nutritionist will give an alternate food substitute.
- If Nutritionist is not available, the FS Manager will check past meal modifications to determine appropriate substitution. FS Manager will inform kitchen staff of change.
- FS Manager will also inform Nutritionist when substitutions have been made.
- If FS Manager is also not available, the Supervising AD will check past meal modifications to determine appropriate substitution. Supervising AD will then inform kitchen staff of change.
- Supervising AD will also inform FS Manager and Nutritionist when substitutions have been made.
- Nutrition Office will inform Site Supervisor or assigned staff of food substitutes.
- Kitchen staff is not to make any substitutions without approval from Nutritionist, FS Manager, or Supervising AD.

#### 9. Heights and Weights

As part of nutrition screening, heights and weights must be taken regularly by designated staff to determine the nutritional status of each child.

The Child's Teacher is responsible for:

- Following height and weight protocol when filling out Height & Weight log.

Comprehensive Services Clerks are responsible for:

- Recording heights and weights in CLOUDS from the Height & Weight Log completed by the teachers.
- Returning Height & Weight Log to Site Supervisors for grantee and Site Directors for the partners.
- Plotting Early Head Start length-for-age, weight-for-age, and head circumference-for-age on growth chart whenever information is available on well baby exam based on periodicity schedule.

Site Supervisor (Grantee) is responsible for:

- Distributing back to respective teachers the Height & Weight Log to be filed in the Nutrition Alert binder.

Site Director (Partners) is responsible for:

- Filing Height and Weight log in the Height and Weight binder.

#### C. Child Adult Care Food Program (CACFP)

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#### 1. General Description

To ensure our participation in the USDA Child Nutrition Program, the following must be accomplished by assigned staff.

Site Supervisor or designee is responsible for:

- Completing CACFP form before child attends school, or upon enrollment.
- Completing CACFP enrollment document.
- Filling in days and hours child attends and types of meals served to child while in attendance.
- Ensuring enrollment document is signed and dated by the parent.
- Parent's completion of Meal Benefit form for children being enrolled, and for signing Meal Benefit form.
- Determining eligibility using current eligibility guidelines.
- Collecting enrollment document and meal benefit form from July 1st to October 31st.
- Sending a CACFP form and CACFP enrollment document to the Nutrition Office.
- Completing Enrollment Eligibility Roster each month, which includes:
  - Listing new children for the current month.
  - Determining whether child is free, reduced or base.
  - Marking whether child is in Head Start.
  - Listing child's certification date.
  - Listing children who have dropped for the current month and the drop dates.
  - Sending monthly Enrollment Eligibility Roster to Nutrition Office by the 5th of the following month.

#### 2. Non-Discrimination in Child Adult Care Food Program Services

Community Services Bureau Head Start will comply with Title VI and Title VII of the Civil Rights Act of 1964. Title XI of the Educational Amendments of 1972, Title II of the Americans with Disabilities Act of 1990 and Section 504 of the Rehabilitation Act of 1973.

Each center will prominently display the "And Justice for All" poster.

Staff will receive annual training on Civil Rights requirements and on handling Civil Rights Complaints. Nutrition Office will monitor and oversee training.

#### D. CACFP Monitoring

To ensure compliance and meet CACFP requirements, all grantee sites must be monitored three times a year.

The Nutritionist is responsible for:

- Unannounced monitoring of mealtimes.
- Conducting CACFP facility reviews three times per classroom per academic year.
- Using CACFP Centers Facility Review form (see Form CSB440).
- Reporting findings to Site Supervisor or designee immediately after monitoring.
- Writing corrective action plan based on recent findings.
- Sending findings to the Assistant Director.
- Sending original copy of CACFP Center Facility Review form to Nutrition Office.
- Following up to confirm completion of corrective action within 60 days of findings.

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- Completing CACFP 5-day reconciliation to ensure accuracy of meal claims by each site.

Site Supervisors are responsible for:

- Implementing corrective actions and/or responding to monitoring report within 2 weeks.
- Sending Nutritionist documentation of the corrective action plan taken and date of completion, e.g. Individual/Small Group Conference form, agenda and sign-in sheet for verification of completion of corrective action

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#### VI. Child Health and Safety

##### A. Daily Health Inspection

The teacher is mandated by Licensing to perform a daily health check of each child. The daily health check is performed when greeting the child and parent as they arrive. Parents are requested to remain present while the teacher performs this quick assessment which usually takes less than a minute. The Daily Health Inspection is a head-to-toe check of emotional and physical well-being. This is an effective tool to develop a baseline of what is normal for each child. This exercise helps the teaching staff reduce the spread of illness and establish rapport with the child and parent each day. It is important that this health check be conducted in the form of a greeting and that no invasive inspection, such as lifting clothing, or discussing findings out loud in front of others, should take place. For preschool classrooms, team members will complete the Daily Health Check log (CSB for 230) to document completion of the Health Check for each child in attendance. For infants, the daily health inspection includes a diaper change and is documented on the Daily Communication Form (CSB form 155). Teachers must also observe the child throughout the day.

To complete a daily health inspection, the teacher will do the following:

- Listen: Greet the child and parent.
  - Ask the child “How are you today.”
  - Ask the parent the following questions:
    - “How’s (name of child)?”
    - “Was there anything different last night?”
    - “How did he/she sleep?”

Listen to what the child and parent tell you about how the child is feeling. If the child can talk, is he/she complaining of anything? Is he/she hoarse or wheezing?
- Look: Get down to the child’s level so you can see him/her clearly. Observe signs of health or illness:
  - General appearance (e.g., comfort, mood, behavior, and activity level)
  - Is the child’s behavior unusual for this time of day?
  - Is the child clinging to the parent, acting cranky, crying, or fussing?
  - Does he/she appear listless, in pain, or have difficulty moving?
  - Breathing: Is the child coughing, breathing fast, or having difficulty breathing?
  - Skin:
    - Does the child look pale or flushed?
    - Do you see a rash, sores, swelling, or bruising?
    - Is the child scratching his/her skin or scalp?
  - Eyes, Nose, Ears, Mouth:
    - Do the child’s eyes look red, crusty, goopy, or watery?
    - Is there a runny nose?
    - Is he/she pulling at his ears?
  - Are there mouth sores, excessive drooling, or difficulty swallowing?
- Feel: Gently run the back of your hand over the child’s cheek, forehead, or neck.
  - Does the child feel unusually warm, or cold and clammy?
  - Does the skin feel bumpy?
- Smell: Be aware of unusual odors.

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- Does the child's breath smell foul or fruity?
- Is there an unusual or foul smell to the child's stools?
- Pay particular attention to a child who has been absent or exposed to contagious disease.

After doing the health check, teacher must now use findings to determine if the child looks healthy or sick. Use this chart to identify signs of health and illness:

	Looking Healthy	Looking Sick
General Appearance	Comfortable Cheerful, responsive Active, playing Behavior appropriate for child and time of day	Excessive crying, clinginess, fussiness Doubled over in pain, unable to move Listless, lethargic, unresponsive No appetite Vomiting, diarrhea
Breathing	Breathing slowly Relaxed Quiet	Breathing fast Difficulty breathing Sucking in around ribs Flaring nostrils Persistent Cough Wheezing
Skin	Normal skin color and texture for child Normal skin temperature No rashes, sores, swelling, or bruising No scratching at skin or scalp	Pale, grayish, flushed, yellowish Hot or cold and clammy skin Skin rash, sores, swelling or bruising Scratching at skin or scalp Skin doesn't spring back when pinched
Eyes, nose, ears, and mouth	Eyes bright and clear Nose clean Ears clean Mouth without sores, swallowing comfortably	Eyes swollen, red, crusty, goopy, watery, yellowish, or sunken Nose congested or runny Ears draining pus or blood Pulling at ears Mouth or lips with sores, excessive drooling, difficulty swallowing
Odors	No odor or normal odor for child	Breath smells foul or fruity Stool smells foul

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##### B. Hand Washing

Hand washing is the single most important routine in disease prevention. Both children and staff are required to wash hands upon arriving to work or school, before eating, before/after preparing or serving food, and after outdoor play, after wiping noses or using the bathroom, after handling animals/pets, before and after medication administration, and before and after gloving.

All adults and children in the classroom should follow the procedures for proper hand washing:

- Use soap and running water
- Scrub your hands vigorously for at least 20 seconds
- Wash all surfaces, including:
  - Backs of hands
  - Wrists
  - Between fingers
  - Under fingernails
  - Under and around rings
- Rinse well
- Dry hands with a paper towel
- Turn off the water using a paper towel instead of bare hands

##### C. Infection Control in the Classroom

In addition to Universal Precautions, the following measures are recommended for infection control in the classroom. It is the teacher's responsibility to insure that simple routine practices which reduce disease risks in the group setting are implemented in the classroom. These practices include:

- Hand washing
- General environmental sanitation
- Sanitary food service
- Good personal hygiene
- Careful diapering procedures
- Prompt exclusion of children and adults who have signs and symptoms of communicable disease
- Placement of cribs at least 3 feet apart and cots at least 18" apart

##### Hygiene - Universal Precautions

###### 1. Training

All teachers, site supervisors, managers and food service staff will be trained annually on food sanitation and safety. At least one employee in the Central Kitchen must be trained and certified in Safe Food handling through ServSafe.

###### 2. Tuberculosis (TB) Tests

Licensing requires that proof of a negative TB test or chest x-ray of staff and volunteers (except student volunteers under the age of 18) must be kept in the center Licensing Folder. Resources for obtaining a TB test are available for parents and other volunteers in need.



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##### 3. Standard Precautions

Precautions should be used at all times to protect staff and volunteers from the risk of being exposed to blood, fecal material, vomit, urine, or other potentially infectious materials.

CSB Standard Precautions procedures apply to all program staff and volunteers. They will maximize worker protection from the spread of communicable disease resulting from occupational exposures to blood or other potentially infectious materials. Staff will take the same precautions -- hand washing, use of gloves, disinfecting, and other safety measures -- when dealing with the blood or body fluids of all children and adults, whether or not they appear sick.

CSB will supply staff with appropriate standard precaution personal protective equipment (e.g., gloves, aprons, mouthpieces for CPR). The program will ensure that all program staff receives training in the use of all this equipment.

CSB trains staff on standard precautions as a function of the American Red Cross First Aid certification course. Re-certification is required every three years.

If anyone has questions regarding the appropriate use of this equipment, call the Comprehensive Services Health Manager. If your personal protective equipment becomes damaged or lost, ask for a replacement immediately.

##### 4. Diapering and Toileting Procedure

###### i. Description

Since diapering and toileting are every day procedures for staff, and are a possible way that infectious diseases can be spread, it is extremely important that proper techniques be used at all times. It should also be noted that no child may be denied the opportunity to participate in any program on the basis of toilet training. The program does not make successful toilet training a condition of enrollment.

Each child must be kept dry at all times. The center staff must ensure that there are sufficient changes of clothing and diapers. Each child's clothing and/or diapers must be changed as often as necessary to ensure that the child is clean and dry at all times.

###### ii. Diapering

- Get organized. Assemble supplies in the changing area within reach, (disposable diaper, wipes, gloves, non-absorbent paper liner, clean clothing and plastic bag if needed). Cover the entire changing surface or table with paper. Wash hands thoroughly with soap and warm running water.
- Place child on paper covered changing surface or table. Never leave child unattended during diapering processes.
- Remove child's clothing and put soiled clothing aside.
- Put on gloves using posted procedure.

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- Unfasten diaper and leave soiled diaper under child. Lift the child's legs and use disposable wipes to clean skin creases, genitalia, and bottom. Thoroughly as needed, wipe front to back using a clean wipe each time. Place used wipers in dirty diaper
- Remove soiled diaper. Fold diaper inward and place in covered, hands-free, plastic-lined container. Fold back paper liner if a clean surface is needed. Remove gloves.
- Clean your hands with a disposable wipe and then clean the child's hands with another fresh wipe.
- Put clean diaper on child. (Put ointment provided by parents upon their written request).
- Dress the child. Change the child's clothing if wet or soiled.
- Wash the child's hands with soap and water. Put child safely in supervised area.
- Clean and sanitize the changing surface or table. Throw away the paper liner in covered, hands-free, plastic lined container. Clean any visible soil with detergent and water. Wet the entire changing surface with sanitizing solution.
- Wash your hands with soap and water
- Follow the posted NAEYC Proper Diapering Procedure.

#### iii. Toileting

The following procedure should be followed when toileting a child:

- Have all materials at hand before starting procedures.
- Never leave a child unattended; visual supervision is required.
- Have child sit on potty, but never longer than 5 minutes.
- After child has finished, teach child how to wipe self from front to back.
- If rectal area is still unclear, the adult (using gloves) will clean the perineal/rectal area with disposable, wet towels.
- Before child leaves bathroom, the child is to wash hands properly.
- Adult returns to empty potty, disinfect seat, rinse and dry.
- Staff member washes hands when done.

#### D. Napping Policy

To reduce the risk of Sudden Infant Death Syndrome (SIDS):

- Infants, unless otherwise ordered by the physician, are placed on their backs to sleep on a firm surface manufactured for sale as infant sleeping equipment that meets the standards of the United States Consumers Product Safety Commission.
- Pillows, quilts, comforters, sheepskins, stuffed toys, and other soft items are not allowed in cribs or rest equipment.
- The infants head must remain uncovered during sleep.
- After being placed down for sleep on their backs, infants may then be allowed to assume any comfortable sleep position when they can easily turn themselves from the back position.
- If a blanket is used, the infant is placed at the foot of the crib with a thin blanket tucked around the crib mattress, reaching only as far as the infant's chest.

#### E. Dental Hygiene

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All children with teeth shall brush or have their teeth brushed at least once during the hours the child is in care. For full day and family child care programs, children will brush their teeth after lunch. For part day morning programs, children will brush after breakfast. For part day afternoon programs, children will brush their teeth after lunch. Using a size appropriate toothbrush obtained through the health supply ordering process, the caregiver will either brush the child's teeth (for those children lacking the motor skills to brush themselves), or supervise as the child brushes his/her own teeth. The younger the child, the more the caregiver needs to be involved.

Fluoride toothpaste is available at all centers. The caregiver should use a layer of fluoride toothpaste, not larger than the size of a pea, for children 3 to 5 years of age. Younger children tend to swallow the fluoride toothpaste, which can cause fluorosis. Therefore, children under three shall brush without toothpaste.

After feeding, an infant's teeth and/or gums shall be wiped with a moist cloth, or a product distributed to the sites called "Tenders," to remove any remaining liquid that coats the teeth and gums, which turns to plaque and causes tooth decay. By doing this, caregivers are breaking up the plaque that forms to create a much healthier environment for the teeth that will be coming in later on. Follow these steps when caring for infants:

- Wash hands thoroughly and slip "Tenders" onto your index finger
- Moisten slightly with cool water. Do not use toothpaste
- Carefully swab infant's gums using a gentle circular motion
- Place used "Tender" in garment bag to be washed prior to next use

#### F. Health Issues in the Classroom

Call your assigned Site Supervisor, Comprehensive Services team, or Health Manager when you identify a health concern. It is crucial to provide appropriate intervention or resolution. Any unusual behavior, any injury or any signs of illness requiring assessment and/or administration of first aid by staff must be reported to the parent and documented in the child's confidential file.

Health issues include, but are not limited to rash, high fever, head lice, signs of conjunctivitis ("pink eye"), diarrhea, intestinal problems, vomiting and nutritional problems.

The Comprehensive Services team, Site Supervisor or Health Manager must follow up with the parent and medical provider(s) to confirm any diagnosis offered by the parent or family member. This information will be evaluated, and a decision made as to whether the child can attend school at that time. Both the Site Supervisor and the teaching staff will be kept abreast of the health considerations that impact this decision.

#### G. Child Safety and Supervision

Visiting/socializing on the playground or the premises of a child care facility while on duty is prohibited. Visiting/socializing with fellow employees, who are still on duty regarding non-classroom activities, during break times, is not allowed. All visitors, former employees and relatives must report and sign in at the main office of each center before entering program areas. Information on the nature of the visit will be required.

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- Whenever the classroom is outside on the yard or on a field trip, all members of the teaching team must be present to ensure the health and safety of children. No scheduled prep time or breaks are permitted during times scheduled outside of the classroom.

Semi-annually, during the first month of the program year and in March, each Site Supervisor will complete and submit to their Assistant Director the Semi-Annual Child Safety Checklist (CSB form 751). This checklist will be used to confirm that the following has occurred as required:

- Annual review of Ready To Learn Curriculum safety considerations;
- Annual review of Pedestrian Safety Training for parents and children;
- Semi-annual review of outdoor schedule against staff breaks and prep time and against peek pick-up/drop-off times to ensure no overlap;
- Semi-annual review of schedule and plan of class consolidations in early morning and late afternoon;
- Semi-annual meeting with staff to review child safety, visual supervision, staff placement, and safe transitions;
- Semi-annual completion of Transition Observation Checklist (CSB form 750) in each classroom;
- Semi-annual review of center documentation that all volunteers and substitutes have received an on-site orientation and have reviewed *CSB Substitute and Volunteer Handbook* with a signed *Handbook* receipt on file at the center;
- Semi-annual meeting with front desk/lobby/entrance/exit staff to review procedures to ensure Child Safety at all times; and
- Semi-annual meeting with parents to review Child Safety procedures, facility security, and handout *Parent Guidance for Keeping Children Safe*.

#### H. Child Illness Procedures

##### 1. Admission and Exclusion

The decision to admit or exclude a child with an illness is the responsibility of the Site Supervisor and will be based on whether there are adequate facilities and staff able to care for the ill child and the other children in the group. The Site Supervisor, not the child's family, makes the final determination about whether the acutely ill child can receive care in the childcare program. Children will be excluded if:

- The child's illness prevents the child from participating in activities that the facility routinely offers for well children or mildly ill children.
- The illness requires more care than the childcare staff is able to provide without compromising the needs of that particular child or of the other children in the group.
- Keeping the child in care poses an increased risk to the child or other children or adults with whom the child will come in contact.
- The childcare staff is uncertain about whether the child's illness poses an increased risk to others. The child will be excluded until a physician or nurse practitioner notifies the child care program that the child may attend. A child whose illness does not meet any of these conditions listed above does not need to be excluded.

##### 2. Admission and Permitted Attendance

Specific conditions that do not require exclusion are:

- Children who are carriers of an infectious disease agent in their bowel movement or urine that can cause illness, but who have no symptoms of illness themselves.

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- Children with conjunctivitis (pink eye) who have a clear, watery eye discharge and do not have any fever, eye pain, or eyelid redness.
- Children with a rash, but no fever or change in behavior.
- Children with cytomegalovirus infection, HIV or carriers of hepatitis b.

#### 3. Procedure for Management of Short-Term Illness

The behavior and health of each child must be continually observed during the course of the day, and should a child become ill, the following steps must be taken:

- The ill infant, toddler or child must be isolated on a cot/crib in an area, which is easily supervised and away from the kitchen, bathroom and any other area used by the other children. Infants, toddlers and children in isolation must be under constant visual observation by designated staff.
- Children ill enough to require isolation may not use the same toilets as other children. One toilet and sink must be designated exclusively for the ill child's use. The other children must be prevented from using that toilet and sink until the sick child has been picked up, and those facilities have been thoroughly disinfected.
- The Site Supervisor or designee will call the parent or other emergency numbers to arrange to have the child picked up. If no one can be contacted, the child must remain on the cot/mat under close supervision and staff will continue to try to reach the parents or emergency numbers.
- If the child's condition worsens and becomes life threatening, the teaching staff must call 911. Make a note in the child's file that parents were notified. Notify the Assistant Director immediately.

#### 4. Short-Term Exclusion and Admittance

As the program is not set up to care for ill children, staff and parents should use the following three criteria to exclude children with short-term illnesses from the group care setting:

- The child does not feel well enough to participate comfortably in the usual activities of the program.
- The staff cannot care for the sick child without interfering with the care of the other children.
- The child has any of the following that indicate a contagious disease or an immediate need for medical evaluation:
  - Fever and behavior changes or other signs or symptoms, until the child's inclusion is checked with a health professional who determines that the child may be in child care
  - Signs or symptoms of a possible serious condition, such as those defined below under "Conditions that Require Immediate Medical Attention", until the child is checked by a health professional who determines that the child may be in child care

Children may only be excluded for the period of time when they pose a significant risk to the health and safety of anyone in contact with the child and until the child meets the criteria for re-admission.

#### 5. Conditions that Require Immediate Medical Attention

Get help immediately for a child with any of the following conditions:

- Specific fevers:
  - A baby less than 4 months of age has a temperature of 101 degrees rectally or 100 degrees axillaries (armpit).

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- A temperature of 105 degrees or higher in a child of any age.
- For infants under 4 months, forceful vomiting more than once.
- Looking or acting very ill or getting worse quickly.
- Neck pain when the child's head is moved or touched.
- A stiff neck or severe headache and looking very sick.
- A seizure for the first time.
- Acting unusually confused.
- Unequal pupils (black centers of the eyes).
- A blood-red or purple rash made up of pinhead sized spots or bruises that are not associated with injury.
- A rash of hives or welts that appears and spreads quickly.
- Breathing so fast or so hard that the child cannot play, talk, cry, or drink.
- A severe stomachache without vomiting or diarrhea after a recent injury, blow to the abdomen, or hard fall.
- Stools that are black or have blood mixed in through them.
- Not urinating at least once in 8 hours, a dry mouth, no tears, or sunken eyes.
- Continuous clear drainage from the nose after a hard blow to the head.

#### I. Return to School After Illness

Children who have been excluded from the classroom should not return until:

- A physician has certified that the symptoms are not associated with an infectious agent or the child's symptoms do not threaten the health of other children.
- The child is completely "nit-free" following a head lice infestation.
- The child has an auxiliary or oral temperature of less than 100°F, and does not have symptoms such as:
  - Sore throat
  - Vomiting
  - Diarrhea
  - Headache and stiff neck
  - Undiagnosed rash
- The child has no respiratory problems, such as:
  - Difficult/rapid breathing, severe coughing or a high-pitched croup or whooping sound while coughing.
  - The child is unable to lie down comfortably, due to continuous coughing.
- No Diarrhea (an increased number of abnormally loose stools in the previous 24 hours) - observe the child for other symptoms such as fever, abdominal pain, or vomiting.
- No Vomiting (two or more episodes of vomiting within the previous 24 hours).
- No Eye/Nose Drainage (thick green or yellow mucous from the eye or nose).
- No Sore Throat - especially with fever or swollen glands in the neck.
- No Skin Rash (undiagnosed or contagious) - infected sores; sores with crusty, yellow, or green drainage which cannot be covered by clothing or bandages.
- No Persistent Itching (or scratching) of body or scalp.

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##### J. Medical Alerts

Medical Alerts need to be posted by the teacher after the Site Supervisor has investigated and determined that there was exposure to a communicable disease.

In some cases, the teaching staff may be notified by the parent regarding a confirmed diagnosis (i.e., a child with Chickenpox). In this event, the Medical Alert may be posted immediately. The Site Supervisor, Comprehensive Services Team member, and Health Manager must still be notified about the illness.

After two weeks, the Medical Alert must be taken down from the classroom where it has been posted. (See Forms CSB221 to CSB238.)

##### K. Children Injured at the Center

###### 1. Professional Medical Treatment

All head injuries require an immediate call to the parent. Parents can make the determination to pick up their child or not based on the staff report and advice as the seriousness of the injury. The CSB-208 form must be completed.

In the event that medical treatment is required, the center staff will instruct the parent to take their child to the doctor. If the parent cannot be contacted and a child needs to be transported by ambulance to the hospital, the teacher will accompany the child. The teacher will notify the Site Supervisor if a child needs professional medical treatment.

The parents will be responsible for any medical expenses incurred. If the parent feels that it is the responsibility of the program to pay for these expenses, they must file a claim against the program. Contact the Health Manager for details regarding submission of claims.

###### 2. Student Accident Reports / Band-Aid Reports

Whenever a member of the center staff uses first aid or informs a parent that a child has been hurt, the Site Supervisor or Teacher will call the Assistant Director to report the accident. If necessary, prompt arrangements for obtaining medical treatment will be made.

The teacher is also required to complete an "Accident/Incident Report Form," (CSB208-Accident-Incident Report) noting any recommendations for the parent on spaces provided.

To maintain confidentiality, the names of other children involved in the incident should not be written on the "Accident/Incident Report Form."

If more than one child is injured, a report must be done for each child. The information of who was involved is written and kept confidential, but not given in the report the parents receive.

The Assistant Director should be notified immediately of all accidents/incidents.

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If the Assistant Director notices that an elevated amount of accidents are occurring, he/she should call the Site Supervisor/Teacher to discuss the situation and develop a plan/solution to prevent accidents.

Band-Aid Reports are completed for minor injuries such as scrapes or small cuts that require minor first aid. (CSB-255 First Aid-Band Aid Report).

Site Supervisors must maintain a "Site Accident Log" for each injury at all times.

#### L. Blood Protocol

##### 1. Description

This protocol is used to prevent the remote and unlikely possibility of the spread of blood and blood diseases in the school setting and applies to all site personnel who have direct contact with children and custodial personnel as necessary

##### 2. General Information

The so-called blood-to-blood diseases (AIDS, Hepatitis B, etc.) are spread by an organism's travel from the blood of an infected person to the blood of a non-infected person.

Blood and semen are the only body fluids that have been demonstrated to be capable of transmitting AIDS (Acquired Immune Deficiency Syndrome).

##### 3. Supplies needed

- Plastic gloves (disposable)
- Plastic bags
- Rubbing alcohol

##### 4. Procedure

- Wash hands and put on gloves when having any contact with child's blood or bodily fluids. Use gloves for one time and only one student.
- After completing the necessary task for the child, remove gloves by grasping the cuff and then stripping it off by turning it inside out. Be careful not to touch the contaminated surfaces of the gloves.
- Dispose of glove in a disposable plastic bag. See "Disposal of Blood/Body Fluid" below.
- Wash hands after de-gloving. This is necessary because bacteria multiply rapidly inside a glove.
- Fill out "Accident/Incident" and "Band-Aid" reports as applicable. (See Form CSB208-Accident-Incident Report and CSB255-First Aid-Band Aid Report) File reports as required.

##### 5. Disposal of Blood / Body Fluid

Put all blood/body fluid disposals in clearly marked garbage containers. Examples: soiled wet diapers, used gloves, wipes, vomit, blood products, and all other contaminated materials/supplies.

Close the bag and tie it, then double bag, and dispose of it in a separate container marked for such disposals. Make sure this container is not used for trash, and that is out of children's reach and can be easily moved around.



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Be safe - always wear gloves. Questions should be directed to the Health Manager.

##### M. Medication Administration

###### 1. Administering Medication

Because administration of medication poses an extra burden for staff, and having medication in the facility is a safety hazard, families must check with the child's physician to see if a dose schedule can be arranged that does not involve the hours the child is in the child care facility. Whenever possible, the first dose of medication should be given at home to see if the child has any type of reaction. Parents may administer medication to their own child during the child care day.

###### 2. Procedure

Staff, designated by the Site Supervisor, will administer medication only if the parent has provided written consent, the medication is in an appropriately labeled and stored container, and the facility has on file the written or telephone instructions of a licensed physician to administer the specific medication. (See Form CSB213-Medication Form)

For prescription medications, parents will provide caregivers with the medication in the original, child-resistant container that is labeled by a pharmacist with the child's name, the name of the medication, the date the prescription was filled; the name of the health care provider who wrote the prescription; the medication's expiration date; the administration, storage and disposal instructions. For over-the-counter medications, parents will provide the medication in a child-resistant container. The medication will be labeled with the child's first and last names; specific, legible instructions for administration and storage supplied by the manufacturer; and the name of the health care provider who recommended the medication for the child.

Instructions for the dose, frequency, method to be used, and duration of administration will be provided to the child care staff in writing (by a signed note or a prescription label) or dictated over the telephone by a physician or other person legally authorized to prescribe medication. Instructions from a parent or provider may not conflict with the instructions on the prescription label.

A physician may state that a certain medication may be given for a recurring problem, emergency situation, or chronic condition. The instructions should include the child's name, the name of the medication, the dose of the medication, how often the medication may be given, the conditions for use, and any precautions to follow. Example: children may use sunscreen to prevent sunburn; children who wheeze with vigorous exercise may take one dose of asthma medicine before vigorous activity (large muscle) play; children who weigh between 25-35 pounds may be given 1 teaspoon of acetaminophen for up to two doses every four hours for fever. A child with a known serious allergic reaction to a specific substance who develops symptoms after exposure to that substance may receive epinephrine from a staff member who has received training in how to use an auto-injection device prescribed for that child (e.g., EpiPen®). A child may only receive medication with the permission of the child's parent and when the staff person who will give the medication has the skills required. All documentation regarding a child's medication and its administration shall be kept in the child's confidential file.

Nonprescription medications may be administered without approval or instructions from the child's physician if all of the following conditions are met:

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- Nonprescription medications shall be administered in accordance with the product label directions.
- For each nonprescription medication, the parent must provide written approval and instructions that are consistent with product labeling. This documentation must be kept in the child's confidential file.

#### 3. Storage

Medications will be kept at the temperature recommended for that type of medication in a locked container that is inaccessible to children, separate from any other hazardous material storage. An example of an acceptable location is at the back of a locked file cabinet that is not used to store any other hazardous products or materials. Do not place medications that do not require refrigeration, such as inhalers for asthma, in the refrigerator. This can damage them and render them ineffective.

Medications that require refrigeration must be stored in the designated locked refrigerator medication boxes supplied to each center.

Epipens must be stored in a designated Epipen box and should be out of reach of children in an easy and quick to access area with Epipen signage posted.

When the child no longer needs the medication or the child drops from the center, the medication must be returned to the parent or disposed of if the parent cannot be reached.

Medication will not be used beyond the date of expiration on the container or beyond any expiration of the instructions provided by the physician or other person legally permitted to prescribe medication. Instructions which state that the medication may be used whenever needed will be renewed by the physician at least annually.

#### 4. Medication Log Documentation

A medication log will be maintained by the classroom staff to record the instructions for giving the medication, consent obtained from the parent, amount and time of administration, and the person who administered each dose of medication. Spills, reactions, and refusal to take medication will be noted on this log. All records of any changes in the child's behavior, as documented on the Medication Log, will be communicated to the parent. Parents will be assisted in communicating these incidences to the physician as necessary. (CSB213-Medication Form) Parents will be informed as to when authorized medications have been given via this log.

#### 5. Asthma Protocol

Since asthma is a very common health condition and one that typically requires medication, the following protocol will assist the teaching staff. Teachers will receive training regarding asthma, its symptoms, and treatment procedures.

The Comprehensive Services Assistant Manager, upon review of the child's Health History form, will contact both the parent and medical provider(s) to clarify the current status of the asthma condition. It

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is the responsibility of the Comprehensive Services team to obtain confirmation of the diagnosis and any current treatment using the Asthma Action Plan (See Form CSB219).

Subsequent to the initial health review by the Site Supervisor and Comprehensive Services team, if the teacher becomes aware of a possible asthma condition, previously unknown to staff, she must call the Comprehensive Services team assigned to the classroom. The Comprehensive Services team will then follow the procedures described above.

Once all relevant information is obtained, a meeting will be held with the Comprehensive Services team, Site Supervisor, parent, and teacher to ensure teaching staff have the training to carry out the action plan for the child and to review the following:

- Asthma Action Plan from the doctor.
- Medication form (See Form CSB213) completed by parent.
- Inhaled Medication – Nebulizer Consent forms (See Form CSB219a) completed by the parent for each teacher/staff administering the medication.

Copies of the Asthma Action Plan will be kept by the center staff, parent, and in the child's main file. If the plan indicates medication is used routinely or necessary "as needed," then CSB must have medication on site before the child can attend class.

Until complete physician's instructions are provided, medications to treat asthma symptoms will be given according to the prescription labels. Medication will be dispensed outside of center hours whenever possible.

When asthma symptoms occur during center hours, the teaching staff will call the parent to alert them about the child's condition. The child will be sent home if the asthma symptoms interfere with the child's ability to fully participate in the program. In the event that the parent cannot be contacted, the teaching staff will call 911 (if the asthma appears life threatening).

#### 6. Training of Caregivers to Administer Medication

Any caregiver who administers medications shall be trained to:

- Read and understand the Asthma Action Plan, the Medication Form and the Inhaled Medication-Consent Form;
- Check that the name of the child on the medication and the child receiving the medication are the same;
- Read and understand the label/prescription directions in relation to the measured dose, frequency, and other circumstances relative to administration (such as in relation to meals);
- Administer the medication according to the prescribed methods and the prescribed dose;
- Observe and report any side effects from medications;
- Document the administration of each dose by the time and the amount given;
- Store and handle medication appropriately;
- Record changes in child's behavior and help parents communicate observations to their provider;
- Demonstrate ability to comply with medication policy.

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##### 7. Inhaled Medications

An Inhaled Medication-Consent Form (See LIC 9166 and CSB Form CSB219a) must be filled out and signed by the parent before staff administers inhaled medications. A copy of the completed form must be kept in the child's file. A separate form must be filled out for each person (staff member) who administers inhaled medication to the child. This requirement includes all inhaled medications.

##### 8. Sun Protection Policy

Sun protection routines in childhood can establish lifelong preventive habits. At CSB, shade is provided at all sites, infants under six months of age are not exposed to direct sunlight, children are encouraged to wear light colored, loose fitting clothing that covers as much skin as possible, parents are encouraged to apply sunscreen to their child's exposed skin as part of their school drop off routine and following the procedure for the over-the-counter medications sunscreen provided by the parent will be applied by teaching staff. Drinking water is available to children during outdoor play.

##### N. Incomplete Health Records

The Site Supervisor or Comprehensive Services team will notify parents and teaching staff if a child is to be excluded from the classroom due to incomplete health records.

Exclusions due to unmet health requirements: Children must be excluded for immunizations that are not up-to-date or a physical or TB clearance that is not received within 30 days of enrollment. Parents are allowed a onetime extension beyond the 30 day requirement for a physical exam with proof of an appointment on file however this extension does not apply to the TB clearance. Children excluded for unmet health requirements are permitted up to three days of excused absences. After that, a Notice of Action (as applicable) will be issued for termination from the program.

Parents will be informed during enrollment and at Parent Conferences that the health requirements are the following: up-to-date immunizations, physical and dental exams, and required TB Clearance. Parents will be assisted in identifying and accessing a source of care and a Case Management will take place as needed to make every possible effort to meet the health requirements for the child. If, after these notifications and assistance, the child has not obtained the needed services, the parents will be informed that they need to schedule an appointment that day and notify the Site Supervisor or Comprehensive Services Team of the appointment date and time.

When the parent has no phone, contact will be made by the Site Supervisor or Comprehensive Services team through the center. The center staff will be asked to have the parent contact the Site Supervisor or Comprehensive Services team the same day. In all cases, teachers will be notified and asked to reinforce the request made by the Site Supervisor or Comprehensive Services Team regarding health requirements.

Children may be excluded from the program for incomplete initial physical exam, incomplete immunizations, and lack of a TB Clearance only.

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For all other health requirements that are incomplete, the Comprehensive Services Team will request updated information from the parent with a Health Records Update Form (See Form CSB242). As needed, case management will take place with the site staff, Comprehensive Services and parents and a plan will be implemented.

##### O. Health and Safety Training for Center Staff

The Site Supervisor of each center must ensure that each of his/her staff members has current CPR / First Aid Certification in the following: Adult / Child/Infant CPR Training (good for one year from date of issue), and First Aid Training (good for three years from date of issue). Staff can be sent to training via a request by the Site Supervisor to the Training Coordinator. The Site Supervisor is responsible for maintaining the personnel records of staff at his/her site to ensure that staff is certified in CPR / First Aid at all times. CPR / First Aid certified staff must be available at all times when children are present at the facility, or when children are offsite for facility activities.

In addition to the CPR / First Aid training, one staff person or Director at each day care center must have at least 15 hours in preventive health practices. This training must include, but is not limited to, pediatric cardiopulmonary resuscitation; pediatric first aid; recognition, management, and prevention of infectious diseases, including immunizations; and prevention of childhood injuries. The training may include sanitary food handling, child nutrition, emergency preparedness and evacuation, caring for children with disabilities and identification and reporting of signs and symptoms of child abuse. The supervisor makes requests for such training to the Personnel Unit.

##### P. Posting of Documents (Health Emergency Procedures)

CSB conforms to all Federal, State, and local regulations by posting or having on file at each facility: mandated notices, licenses, and permits.

Site Supervisors and teachers are required to post mandated facility compliance documents on bulletin boards, which are attractive, neat, updated, and highly visible. Other required posted materials include: Dental Emergencies, Choking, CPR/First Aid, Evacuation Routes, and Emergency Numbers (posted near phone).

The Site Supervisor is responsible for routinely monitoring bulletin boards and classroom files for compliance with this standard. The Comprehensive Services Managers/Assistant Directors are responsible for monitoring all compliance documents.

##### Q. Pet Protocol

Animals can bring joy to the classroom while offering children the opportunity to be responsible for another living creature.

When an animal is being considered for inclusion in the classroom, child and staff allergies and fears must be considered. The animal must be tame and classroom staff must agree to accept responsibility for the care of the pet. Assistant Director's approval must be obtained.

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Turtles and reptiles are not allowed in the classroom because they are potential carriers of salmonella bacteria.

Before the animal is included in the classroom, children will be instructed on the proper care and handling of the animal and the importance of proper hand washing.

When the animal arrives in the classroom, the animal must be provided an appropriate habitat and space with opportunities to exercise, appropriate temperature, and all other natural conditions and activities.

A Pet Care Plan must be posted to designate care needed to provide quality care to the animal. This Pet Care Plan will include details specific to that particular pet and will inform staff and parents about the pet, and noting the specifics required to provide quality care to the animal. The Pet Care Plan must include:

- Name of animal
- Description of the animal - example: rat - nocturnal, affectionate and playful pets
- Description of appropriate housing/cage/bedding and recommended cleaning pattern
- Description of food needed to provide a healthy diet including portion size and frequency
- Explanation of exercise needed
- Explanation of proper handling practices
- List of vaccines needed (if any), date when administered and future due dates
- The name and phone number of a veterinarian in case of emergency- Site Supervisors will be contacted for veterinarian visits approval.

A log must be posted for staff to initial and date as animal care and related duties are completed. The log must include:

- daily feeding (food and water) schedule
- daily exercise
- cage cleaning schedule

Accommodations must be made for:

- scheduling weekend, holiday, and vacation care
- maintaining care in the case of an emergency (natural disaster, animal illness, bites, and other similar situations)

Responsibility of the teaching staff:

- To review each child's Health History to identify children with allergies to specific animals.
- To complete the Pet Care Plan.
- To maintain the overall care of the animal.
- To initial the log noting responsibilities completed.

Responsibility of the Site Supervisor:

- Submit a request to the AD for classroom pet approval.
- To oversee the health and well being of children, staff and animals as they interact in the classroom.

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#### Responsibility of Assistant Director

- Provide pet approval for a classroom on an individual basis.

Any bites will be immediately reported to the Site Supervisor, the Comprehensive Services Health Manager and the Assistant Director.

#### R. Safety / Sanitation Procedures

##### 1. General Safety

- Facilities have available first-aid kit readily accessible/clearly marked for emergency use.
- Facilities are equipped with a fire extinguisher securely mounted and readily accessible.
- Employees are trained in the use and type of fire extinguishers available.
- All fire extinguishers are tagged, noting months/years/dates of inspections/annual maintenance, and identified use (class of fire).
- Facility exits are clearly marked with visible, approved EXIT signs. Aisles, hallways, and other exits are kept free of obstacles, including furniture and equipment.
- All materials and surfaces accessible to children, including toys, shall be free of toxic substances.
- Air fresheners will not be allowed in any space accessible to children and families.
- Baby walkers shall not be used or kept on the premises.
- Playground equipment shall be securely anchored to the ground unless it is portable by design.
- Equipment and furniture shall be maintained in a safe condition, free of sharp, loose or pointed parts.
- Equipment and furniture shall be age and size appropriate so as to allow children present to fully participate in planned activities.
- All items on shelves above three feet tall (plants, sculptures, books, and other items) shall be secured with museum putty, safety latches, barriers, or other similar items to prevent items from falling onto children.
- Open shelves and cabinets over three feet tall shall be free of heavy objects and
- Tall furniture over four feet tall shall be braced to the wall or floor.
- Cots are maintained in safe condition and bedding shall not be shared by different children without first laundering the bedding.
- Floor mats are constructed of foam at least  $\frac{3}{4}$  inch thick and covered with vinyl, with no exposed foam. Floor side must be marked so that it can be distinguished from the sleeping side.
- Aisles and trafficked areas are kept free of obstacles and obstructions, with empty food containers promptly removed. Cots shall be arranged so that each child has access to a walkway without having to walk on or over the cots or mats of other children.
- Safe stools/ladders are available and used for reaching shelved items.
- Employees are trained in the proper use of equipment that their duties require them to use. Employees who have not been trained in the proper use of equipment may not operate such equipment.
- Employees are required to be attentive to their tasks, especially when cooking or operating moving equipment.
- Smoking is prohibited in all areas.

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- All employees must consume food only in designated areas.
- All employees are required to adhere to procedures for kitchen sanitation and the cleaning schedule.
- Firearms and other weapons shall not be allowed on or stored on the premises of a child care center.

##### S. Safety Surveillance

###### 1. Identification and Correction

The Health and Safety Officer will conduct monthly inspections of the facility for hazards using the Health and Safety Checklist. The Site Supervisor will review the result of the site inspections and will arrange for correction of hazardous conditions identified. Written reports of the inspections and corrections will be kept in a designated binder on-site. Copies of monthly inspections and corrective action plans will be sent to Joanne Sanchez-Rosa.

###### 2. Escape Hazards

The Site Supervisor will maintain and review with the staff annually a list of potential high-risk locations/situations where a child might escape unnoticed from the group. Staff will use this list to plan increased supervision in these high-risk locations and situations. If such a high-risk escape hazard is identified between annual reviews, staff will take action immediately.

###### 3. Evacuation Hazards

The Site Supervisor will be responsible for establishing and updating a checklist of locations to be assessed during evacuation to assure complete surveillance of the building before and after evacuation is declared complete. The checklist will identify usual and likely-to-be-forgotten locations such as: under a cot, behind a sofa, in a toy bin, in a closet, kitchen, or toilet room.

###### 4. Injury Prevention

Whenever an injury occurs, a copy of a completed Incident/Accident Report form will be filed in an injury log. The injury log will be reviewed every three months by the Site Supervisor or Assistant Director to identify hazards in need of corrective action.

Staff and volunteers must be able to demonstrate safety procedures. Both staff and volunteers will review safety procedures with the Site Supervisor prior to working in the classroom. Emergency procedures, the Health and Safety Checklist, and playground safety shall be reviewed with each staff person and volunteer before any interaction with children may occur.

Child and parent activities must include safety awareness for the home and in the program. Videos, brochures, newsletter articles, and parent training will be used to foster safety awareness for the home and in the program.

##### T. First Aid Kits

All centers should have a first-aid kit and manual that is easily accessible (location should be marked by "First Aid Kit Here" signs available to staff and out of reach of children. The following items should be in the first-aid kit:



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- CPR Mask
- Disposable, nonporous gloves
- Scissors
- Tweezers
- Thermometer
- Bandage Tape
- Sterile gauze pads
- Flexible roller gauze
- Triangular Bandage
- Pins for triangular bandage
- Eye dressing (small cups)
- Pen/pencil and note pad
- Cold pack
- First aid guide
- Poison Control number

The Health and Safety Officer, using the Health and Safety Checklist, will inventory the First Aid Kit monthly. Orders for restocking the kits are placed with designated staff. The First Aid Kits are only to be used in an extreme emergency. Everyday health and safety supplies such as Band-Aids, cold packs and gloves are stocked separately and in abundance in designated locations within each center, inaccessible to children.

#### U. Preparing For Emergencies

Each classroom has a disaster preparedness plan in case of fire, earthquake, or other emergency. Children and staff must be prepared to execute the plan in the event of such emergency.

##### 1. Operations Procedure

Staff receives training on the disaster preparedness plan during their initial work orientation, and at subsequent staff development training. Such training is filed and documented with training records.

Fire drills are held at least once per month.

Earthquake preparedness drills are held at least once per month.

Shelter-in-Place drills are held once a month on the first Wednesday of each month.

All CSB centers post evacuation plans, and have documentation of successfully completing monthly fire and earthquake drills.

Documentation of earthquake and fire drills should be entered in the "Fire/ Earthquake Drill Report" for and the "Fire and Earthquake Drill Log" (SB116-Disaster Drill Report and CSB117-Disaster Drill Report Log)

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Classroom teachers provide an orientation to children on how to respond to an emergency as part of the ongoing curriculum.

Fire drill and earthquake preparedness orientations must take place by the second week of program opening for children and monthly thereafter.

Contra Costa County maintains an Office of Emergency Services (OES) Plan, which is activated during major disasters. The functions performed at the OES include gathering and evaluating damage information, determining emergency response priorities, obtaining necessary resources (materials, supplies, equipment, and personnel) and providing information to the news media. Community Services Bureau staff will provide information to the County OES on the status of the department's staff, buildings and equipment, including vehicles.

A verbal report to Community Care Licensing must be made within 24 hours and written report must be submitted to the licensing agency within seven days of the occurrence of any of the following events:

- Death of any child from any cause
- Any injury to any child requiring medical attention
- Any unusual incident or child absence which threatens the physical or emotional health or safety of any child
- Any suspected physical or psychological abuse of any child
- Epidemic outbreaks
- Poisonings
- Catastrophes
- Fires or explosions occurring in/on the premises

Reports must be made in writing to the funding sources as soon as possible after any of the above.

#### 2. Emergency Disaster / Earthquake Supplies

All sites have emergency/disaster supply containers that are easily accessible. The sealed containers hold the following items appropriate to the number of adults, children and infants at the site. The inventory with the expiration date of the contents is listed on the outside of the container.

First Aid Supplies	Food Bars	Formula	Formula Bottles	Bottle Bags	Bottle Nipples
Pliers	Crow bar	Water	Latex Free Gloves	Hand Sanitizer	Trash bags
Multi-purpose Tool	Shovel	Radio	Safety Goggles	Solar Blankets	Work Gloves
Gas Shut off Tool	Scissors	Dust Masks	Zip Lock bags	Masking Tape	Duct Tape
Fleece Blankets	Batteries	Whistles	Toilet Paper	Rope	Adult Vests
Germicidal Tablets	Wrench	Buckets	Flashlight	Soap	Cold Packs

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Antiseptic Wash	Hammer	Lanterns	Shovel	Eye Wash	Vinyl Tarp
Toilet Bags	Toilet Chemicals	Bucket Toilet Seats	Dust Masks	Hard Hat	

#### 3. Meal Delivery-Emergency

Each center should have the items listed below available when food cannot be transported to the centers due to unforeseen circumstances such as traffic, breakdown of van, or breakdown of equipment in kitchen. All of these food items should be stored and marked "Emergency Food". The requisite amount of milk (2½ gallons per classroom, per meal) and soymilk and lactaid (if needed for milk intolerances) are to be on hand at all times.

- Infant food:
  - meats, fruits and vegetables
  - dry cereal
  - formula
- Breakfast food:
  - dry cereal
  - canned fruit
  - milk
- Lunch food:
  - Sunbutter
  - string cheese ww crackers
  - 1 can of fruit and 1 can of vegetables
  - 2½ gallons milk
- Afternoon snack:
  - graham crackers
  - 2 gallons milk

#### V. Classroom Sanitation

##### 1. General Description

Each classroom is responsible for preparing the spray bottle of sanitizing solution on a daily basis. The proportions of bleach to water are: three quarters (¾) teaspoon of chlorine bleach to two (2) cups of water or one (1) tablespoon of chlorine bleach to one (1) quart of water. Classroom staff is instructed to spray each table lightly with the bleach solution, to wipe it with paper towels and air dry. This is to be done before and after each meal service. The bleach solution, as well as any other disinfectants, cleaning solutions, poisons and other items that could pose a danger to children, should be placed in a locked cabinet after each use to prevent children from reaching. Warning Signs and Mixture instruction posters should be posted on the cabinet door where the solution is stored (See CSB Forms for forms "Warning Sign Poster" and "Warning Mixture Instruction Poster" in English and Spanish).

Tabletops and eating surfaces must be cleaned/sanitized before and after each meal, counter tops are cleaned between preparation of different food items, and can openers are cleaned/sanitized after each use.

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Classroom staff is responsible for sanitizing toys weekly, as well as cleaning shelves and all areas of the classroom where toys are stored.

In classrooms that have kitchen equipment, the teaching staff will ensure that, on a weekly basis and as needed, the pantry is swept, and ovens and refrigerators are cleaned. The building service worker washes trashcans as needed.

#### 2. Classroom Sanitation in Infant Care Centers

Particular emphasis on classroom sanitation for infant centers is critically important in ensuring the health of the children and staff and in preventing the spread of communicable disease. Keep the classroom sanitized by adhering to these activities:

- All items used by pets and animals shall be kept out of the reach of infants.
- Before walking on surfaces that infants use specifically for play, adults and children shall remove, replace, or cover with clean foot coverings any shoes/socks they have worn outside of that play area.
- Each caregiver shall wash his/her hands with soap and water before each feeding and after each diaper change.
- Only dispenser soap, such as liquid or powder in an appropriate dispenser shall be used.
- Only disposable paper towels in an appropriate holder or dispenser shall be used for hand drying.
- Washing, cleaning and sanitizing requirements for areas used by staff with infants or for areas that infants have access to, are as follows:
  - Floors, except those carpeted, shall be vacuumed or swept and mopped with a disinfecting solution at least daily, or more often if necessary.
  - Carpeted floors and large throw rugs that cannot be washed shall be vacuumed at least daily and cleaned at least every six months, or more often if necessary.
  - Small rugs that can be washed shall be shaken or vacuumed at least daily and washed at least weekly, or more often if necessary.
  - Walls and portable partitions shall be washed with a disinfecting solution at least weekly, or more often if necessary.
  - The diaper-changing area, where residue is splashed from soiled diapers and items and surfaces are touched by staff during the diaper-changing process, shall be washed and disinfected after each diaper change. Such areas, items and surfaces shall include but not be limited to:
    - Walls and floors surrounding the immediate diaper-changing area.
    - Dispensers for lotion, soap and paper towels.
    - Countertops, sinks, drawers and cabinets.
    - Sinks used to wash infants, or to rinse soiled clothing or diapers shall be disinfected after each use.

Objects used by infants that have been placed in the child's mouth or that are otherwise contaminated by body secretion or excretion are either to be (a) washed by hand using water and detergent, then rinsed, sanitized, and air dried, or (b) washed in a mechanical dishwasher before use by another child. A container will be placed in the infant room to collect these objects which shall be washed and disinfected at least daily, or more often if necessary. Such objects shall include, but not be limited to, toys and blankets.

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Linens laundered by the center shall be washed and sanitized at least daily, or more often if necessary. Such linens shall include, but not be limited to, bedding, towels and washcloths used on or by infants.

A disinfecting solution, which shall be used after surfaces and objects have been cleaned with a detergent or other cleaner, shall be freshly prepared each day using 1/4 cup of bleach per gallon of water. Commercial disinfecting solutions, including one-step cleaning/disinfecting solutions, may be used in accordance with label directions.

**All disinfectants**, cleaning solutions and other hazardous materials shall be placed in a locked storage area.

#### W. Kitchen Sanitation

Effective cleaning and storage of equipment and utensils used for food preparation must be enforced. Cleaning/sanitizing may be done by spraying, by immersion dish washing machine, or by any other type of machine or device (if demonstrated thoroughly to cleanse/sanitize equipment and utensils). The dishwashing machine must reach a temperature of 165 degrees F (74 degrees C) during washing and 180 degrees F during rinsing.

All dishes and utensils used for food preparation, eating and drinking must be cleaned and sanitized after each use.

Pesticides and other similar toxic materials must not be stored in food storerooms, kitchen areas, food preparation areas, or areas where kitchen equipment or utensils are stored. Soaps, detergents, cleaning compounds or similar substances must be stored in areas separate from food supplies.

#### X. Food Safety and Sanitation

##### 1. Personal Hygiene, Food Service Staff and Classroom Staff

No person is allowed to work in a food service facility or a food serving area if he/she:

- Is infected with a communicable disease that can be transmitted by food
- Is a carrier of organisms that can cause disease
- Has a boil, infected wound, or acute respiratory infection.

Employees must thoroughly wash their hands and exposed portions of their arms with soap and warm water:

- Before starting work
- Before serving food
- During work
- After diapering
- After smoking
- After eating
- After drinking
- After using the toilet

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- As often as otherwise necessary

Employees must maintain a high degree of personal cleanliness, and conform to good hygienic practices.

Minor cuts or scrapes should be thoroughly cleaned, and covered with a clean bandage. If the affected area is on a hand, food service gloves should be worn until the area has healed.

Employees must not use tobacco in any form while engaged in food preparation or service, nor while in areas used for equipment washing, utensil washing, or food preparation. Employees may use tobacco only in designated areas.

Potentially hazardous food must be kept at an internal temperature below 40 degrees F or above 140 degrees F. For hot foods, the food is to be reheated to 165 degrees F.

Gloves are to be used when hand comes into contact with food such as when cutting food. Gloves do not need to be used when serving food with a utensil.

Each serving bowl on the table must have a separate spoon or other utensil.

Leftovers may not be sent home with children, staff, or adults - due to the hazards of bacterial growth.

Employees may not have snacks (coffee, soda, chips, candy, or other snack foods) in front of children.

To help maintain kitchen sanitation, all non-kitchen staff shall not enter the kitchen except as required for work duties.

#### 2. Policies for Food Sanitation / Safety

##### i. Mealtime Sanitation Procedures

Tables should be cleaned with the registered disinfectant/cleaner approved for food prep surfaces before and after meal times. Teachers and children must wash hands before setting table or sitting down at table. The assigned staff must take temperatures of foods before serving, and food must be warmed up to 165°F if below 140°F. Serving temperature and time temperature was taken must be recorded on transport sheet.

##### ii. Food Utensils, Dishes and Food Containers

Each center must return serving bowls and other tableware items daily to the Child Nutrition Central Kitchen for proper sanitation. All dishes, utensils, and food containers are the property of Contra Costa County Community Services Bureau, and should not be taken off the premises. All containers are to be returned to the Kitchen daily. All food and utensils are to be kept in their proper storage cabinet. Non-perishable food and food-related products are to be stored at least six inches off the ground at all times.

##### iii. Refrigerators

Each classroom has a refrigerator except in large centers with a separate kitchen. The thermometers inside the freezer and refrigerator must be checked daily. It is the Site Supervisor's responsibility to:

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- Order a new thermometer when needed.
- Ensure that perishable food items are cleared from the refrigerator.
- Ensure that the refrigerator is cleaned and sanitized.
- Make certain that no personal food is stored in refrigerators that hold CACFP food.

#### iv. Food storage

Canned fruit, fresh fruit and bread should be stored in the refrigerator for later use. Leftover milk and cold foods are to be rotated so they do not become outdated. Once milk is poured into small containers, it should not be poured back into the milk carton. All foods will be marked with their date of delivery. Opened food that must be stored is to be labeled with name and date of opening. All containers are to be labeled with name of food and date when packed.

#### v. Disposal of Leftover Food

Dangerous health problems can be caused by leftover foods being held at improper temperature. Teaching staff is required to dispose of all un-served cooked foods. At the end of each meal they are thrown into the garbage can.

- Food may not be kept after it has been put on the table for children.
- Leftover un-served food can never be taken home.
- Leftover fresh fruits, vegetables, cereals, breads and milk should be stored properly and used for snacks or breakfast. Dispose of unsafe perishables daily.
- The central kitchen will create a sample lunch plate and hold it for seven days. This food would be used for analysis in case of a food borne illness outbreak.

#### Y. Procedures for Using Transport Units

Insulated food cambros are insulated to keep hot food hot or cold food cold. Cambros are to be sanitized daily.

- Cambros are not to be stacked more than four high.
- Always open containers just before serving food.
- All food containers are to be rinsed before being returned to central kitchen.
- Food may not sit at room temperature in an open insulated food container.
- Each classroom has a food safety corner with a poster showing thermometer guidelines for food safety, a sanitizer formula, recalibration instructions, and glove labels with holders.

#### Z. Food for Infants

##### 1. General Description

Infants from birth through 11 months participating in the program will be offered an infant meal. Under the infant meal pattern, infant formula is a required component and, as such, must always be offered unless the infant's mother provides breast milk. CSB encourages breast-feeding. Infants and mothers benefit when infants are breastfed. Facilities are available for mothers to comfortably and discreetly breastfeed infants. Alternatively, staff can feed infants expressed breast milk left by their mothers.

The decision regarding which infant formula to feed a baby is one for the baby's doctor and parents to make together. CSB provides one house formula Enfamil with Lipil. If a parent declines the formula which the program provides, the parent must document this request using the form "Parent's Form for

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Declining a Provider's Formula" (See Form CSB428) and a list of iron-fortified formulas that do not require a medical statement in the Child and Adult Care Food Program should also be provided to parents. Parent will furnish a formula which meets the CACFP requirements for iron fortification and nutritional content, unless the doctor has prescribed a special formula. If the doctor-prescribed formula does not meet the CACFP requirements, parent and MD will need to complete a medical statement in addition to the declination form (See Form CSB4).

Infants are to be held while being fed, and never laid down to sleep with a bottle.

A baby's developmental readiness determines which foods should be provided, what texture the foods should be, and which feeding styles to use. Please refer to your training manual for complete guidelines.

#### 2. Feeding Infants

The introduction of solid foods is usually started between four and seven months of age, depending upon each child's nutritional and developmental needs. The decision to introduce solid foods should always be made in consultation with the parents. New foods are introduced one at a time, at least one week apart to make it easier to identify food allergies or intolerances. Children will be offered single-ingredient commercial baby food when appropriate.

As children grow older, they may prefer to hold their own bottles, and may do so while in an adult's arms or lap.

Dental problems, such as tooth decay, may result from children using bottles as pacifiers. For this reason, children are not allowed to carry bottles.

Cereal or any other solid food may not be served from a bottle. A spoon is to be used instead. Baby food may not be served from jars. Before feeding, remove the approximate amount of food that infant might consume from the jar and place into small dish. Do not put the baby food in a bottle. Babies fed such food in a bottle can choke and may not learn to eat foods properly.

If parents have chosen to decline provider's offered food and will furnish one or more food items that meet Child Nutrition Program (CNP) nutritional content requirements, the parent must document this using the Parent's Form for Declining a Provider's Food, (See Form CSB427) unless their doctor has prescribed special food. Any food items provided by the parent must be in compliance with local health codes. If the doctor's prescribed food item(s) does not meet the CNP requirements, the doctor will need to complete the back of the Parent's Form for Declining a Provider's Food, return the original to the Nutrition Office, and retain a copy in the child's file.

#### 3. Food to Avoid with Infants

Babies are at risk of choking on food due to their poor chewing and swallowing abilities. For a complete list of foods to avoid for infants and toddlers, please refer to the training manual, "FEEDING INFANTS: A Guide for Use in Child Nutrition Programs."



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##### AA. Food for Toddlers

Toddlers will be served food from the regular Child Nutrition Toddler menu. Foods should be served family style and prepared so they are easy to eat (small pieces, or thin slices, no bones).

##### BB. Potlucks

Potlucks have historically been an integral part of CSB. They have provided parents with an opportunity to share part of their family traditions, culture, personal hobbies, and strengths with other parents and staff in an economic and enriching manner. As the program has grown, concerns have been raised in relation to sanitation and safety. There is no regulation from either the state or county barring potlucks.

This is partly due to the common practice in our community of celebrations being built around a shared food experience, often with participants bringing their choice of food (at school, church, temple, family, community organization, etc). The food may be either homemade or purchased.

A potluck can be held during classroom events, as long as it does not interfere with children being served the food provided by Child Nutrition Services. Parents who choose to contribute food should be encouraged to bring foods that are economical, healthy and prepared in sanitary conditions. Cultural foods are encouraged. Parents may prepare a plate of potluck food for their own children only, but the child may not be served the food in lieu of the food provided by the program.

##### CC. Food for Children, Parent, Staff Meetings and Events

In March 1993, in an effort to reduce chronic disease, the Board of Supervisors adopted the Contra Costa County Food Policy developed by the Contra Costa County Food and Nutrition Policy Consortium, of which CSB is a member. The policy states that food provided at staff meetings, parties and other types of County social events should include choices that meet U.S. Dietary Guidelines. All foods served to people or provided through food assistance programs should reflect current standards of good nutrition.

In 2012, the Board of Supervisors and the Policy Council approved a Healthy Food & Beverage Policy. This policy states that Community Services Bureau recognizes frequent consumption of non-nutritious foods and beverages as a significant risk to the health of the children being served, and is taking a preventive approach. The role of CSB in serving families includes consistently modeling the behavior we wish to encourage. Therefore, at all CSB meetings, events, activities, or celebrations which include children:

- Sugar (or corn syrup) sweetened beverages and 100% fruit juice will not be served
- Foods containing large amounts of sugar and/or solid fats (candy, donuts, cakes, cookies, chips, etc.) will not be served

Instead, CSB will provide or require healthy alternatives such as:

- Unsweetened carbonated water (flavored or unflavored)
- Water, perhaps flavored with a slice of lemon or other fresh fruit (and preferably served in non-plastic containers)
- Non-fat or 1% milk (plain)
- Coffee and/or tea (for adults)
- Fresh fruit

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- Whole-grain snacks (crackers, etc.)
- Raw vegetables and dipping sauce

At all facilities directly operated by CSB, the CSB Healthy Food and Beverage policy will be implemented for any meal or special event that includes children.

##### DD. Nutrition Services

The Nutrition Office works with staff, professionals and parents to meet the nutritional needs of children with disabilities, and to help prevent disabilities that have a nutrition-related basis.

The Comprehensive Services Health, Disabilities and Mental Health Managers work with the Nutritionist to ensure that provisions to meet special needs are incorporated into the nutrition program.

Appropriate professionals are consulted on ways to assist Head Start staff and parents with regard to children having severe disabilities and/or problems with eating.

The Nutritionist will plan and implements activities to help children with disabilities participate at mealtime, and to help prevent nutrition-related disabilities.

##### EE. Food Defense

Security measures in the central kitchen area will be followed by limiting access to the food production area and storage area to authorized personnel only.

When not in use:

- Freezers will be kept locked at all times.
- Walk in refrigerators will be locked at all times.
- Storage room will be kept locked at all times.
- Food shipments will be accepted only if products are secured and sealed.
- Access to ice making equipment is controlled.
- Incoming food shipments are examined for potential tampering.

# POLICIES AND PROCEDURES

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## SECTION 3- FAMILY AND COMMUNITY PARTNERSHIPS

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#### **I. Family Partnership Building**

##### **A. Purpose and Methodology**

The family partnership building process begins at the first point of contact that the families have with CSB staff. This may occur through a phone call to the enrollment line, an intake appointment, or a walk-in at one of our centers. Staff members support families as co-partners by identifying the parents' strengths and providing resources to meet the family's needs. CSB support the program parents and acknowledges them as being their child's advocate and primary teacher. CSB provides opportunities for interactions to occur among parents and staff throughout the year to address their child's education and development. Staff meets with families to identify what their strengths and needs are and how our program can best support their families' situation. Through the availability of bilingual staff and Language Line Services for translation support, staff communicates with families in their primary language. They are informed upon enrollment that comprehensive services staff along with their child's teacher are available to provide support that is appropriate for their level of need and interest.

Family partnership building is further developed upon enrollment through the Family Partnership Agreement Process which includes: the Parent Volunteer Survey, Parent Interest Survey, the Family Partnership Agreement Assessments and the Family Goal Setting Process.

##### **B. Family Partnership Agreement**

###### **1. Family Assessment**

Comprehensive Services staff undertakes collaborative partnerships with individual families to develop a Family Partnership Agreement based on the family's readiness/willingness to participate. The process includes:

i. Completion of an initial Family Partnership Assessment of the family's strengths and needs identification takes place.

Identification of the family goals and steps to achieve the goal are identified, in order to support and strengthen the Family Assessment.

ii. If a family has a pre-existing plans/goal with another community agency, our comprehensive services staff or designated staff will work collaboratively with the family to support that pre-existing goal or identify a new one if needed. Our goal is to assist parents in achieving their goals and support them by providing resources that best meet their needs and circumstance.

Depending on the nature of the goal, CSB staff will work in conjunction with the other agency to identify and reduce barriers to achieving the set goal. Regular communication will be established through case management meetings if necessary to monitor progress. Staff will support the family in navigating through systems identified by the other agency to make sure that the family has proper supports in place.

The Family Partnership Agreement - Family Assessment is completed twice each program year. The first Family Partnership Agreement is completed within 90 days of enrollment (individually per family) and the second one (follow-up) is due by April 30<sup>th</sup>. Comprehensive Services staff and parents will work

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together and discuss various dimensions of the family's life (Income and Budget, Shelter, and other aspects), identify and respond to any immediate crisis. The key points of this conversation are objectively documented in CLOUDS. Using the Family Partnership Indicators, Comprehensive Services staff will assign one of five indicators to the dimension (thriving, safe, stable, vulnerable, or in-crisis).

#### 2. Goal Setting

Using the information gathered in the Family Partnership Assessment, Comprehensive Services staff assists parents in identifying and setting a goal in an area in which the indicator was less than stable. Using the family's own words in documenting goals and activities the goal is recorded in CLOUDS, Family Partnership Assessment Goal section, clearly stating the following:

- Areas of Strength
- Goal Category
- Goal Description
- Action Steps for what is needed to achieve goal(s) (The parent's responsibility for the action(s))
- Support Needed (Staff commitment to the action(s))
- When the goal will be completed (within the program year)
- Plan B (if something unexpected happens)

#### 3. Family Partnership Agreement Process:

##### i. Within 90 days of Enrollment

Comprehensive Services Clerks are responsible for the following:

- Complete 1st FPA with parents and enter all information accurately on CLOUDS. Staff document key words based on the indicators (strengths or concerns) for each area to validate reason for the selected indicator.
- Support and encourage parents to develop at least one goal that supports an area in which their indicator resulted below the "stable" rating. (All areas marked "in-crises" are given immediate support and follow-up. Comprehensive Services Manager for Parent, Family and Community Engagement is to be notified. All actions, resources, referrals and results of follow-up are documented in the assessment)
- Provide resources/referrals within two weeks.
- Schedule a follow-up appointment within one month with the parent/s appropriate to the resource given by contacting the family to determine if resources or referrals were appropriate and adequate for the family. (contact can be over the phone or in person)
- Document contact on Family Referrals and Services-Notifications in CLOUDS (enter dates and CS staff initials) indicating if the resource(s) met the family's needs and if the family was satisfied with the referral.
- If a family has no areas that indicate below "stable", assist the family to develop a goal that supports their child's educational goal or development. (Staff can refer families to their parent-teacher conference goals if needed)

##### ii. By April 30th

- Comprehensive Services Clerks are responsible for the following:
- Complete the second FPA, follow-up of the initial FPA with parents - Staff communicates with families to discuss and document any changes to the previous family assessment on CLOUDS

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- Follow-up on goal progress, Staff document on CLOUDS, the status of goal completion, if the goal changed, or if there were any barriers to completing the goal.
- Provide resources/referrals immediately for emergency, in- crisis or within two weeks for vulnerable needs.
- Schedule one month follow-up contact with families to determine if resources or referrals were appropriate and adequate for the family (contact can be over the phone or in person) and document as discussed above.
- Follow same procedures for Referrals and Services as the First Family Partnership Assessment if any indicator falls below “stable.”

#### iii. On an Ongoing Basis

Site Supervisors are responsible for the following:

- Review FPA's and goals of parents at the site
- Review CLOUDS custom report for Family Performance and Outcome by Measure by selecting your site.
- Review the family information by clicking on the number above the percentage for a particular ranking such as: “in-crisis”, etc. This will populate the family id, if needed click on the family ID and it brings up the Family data sheet with more information.
- Ensure families entered as “in-crisis” and “vulnerable” have received support. (either by site or Comprehensive Services staff)
- Should the family situation change and site staff are aware, notify comprehensive services staff to update Family Partnership Assessment if needed, and provide support or resources as needed to teaching staff to give to the parent or given to the parent directly.
- Provide Comprehensive Services staff with updates to Referrals and Services as parents inform so that CLOUDS is maintained accurate and support is provided as needed.

Comprehensive Services Assistant Managers are responsible for the following:

- Use CLOUDS to track Family Referrals.
- Ensure that adequate follow-up and resources were provided in a timely manner.
- Provide support and assistance to CS Clerk in obtaining resources if requested.
- Provide support and assistance to family when needed.
- Hold case management meetings for referrals that require multiple steps and planning.
- Hold case management meetings for families with two (2) or more areas indicated to be below “stable” or any one (1) area indicated to be “in-crisis”.
- Work with Comprehensive Services Clerks to ensure FPA tasks are completed within the timelines assigned.
- For Returning Children (unless family assessment updates are made sooner due to reported changes, follow the same steps above)

Comprehensive Services Clerks are responsible for the following:

- Complete the returning family's Family Partnership Agreement Assessment within 90 days (September 30th) of the second school year.
- Follow the same steps for completing the assessment and protocol for documentation, follow-up by April 30th as you would for newly enrolled families.

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- Follow the same steps for completing the returning family's Family Partnership Agreement Assessment and follow-up by May 31st as newly enrolled families.
- Follow the same steps for documenting Family Goal progress. Provide resource/referrals immediately for emergency, in-crisis or within two weeks for vulnerable needs.
- If the family has not completed their goal from the previous year and would like to continue working towards the same goal, staff is to document in the existing CLOUDS goal and change the "by when" date.

#### 4. Desired Outcomes of Family Partnership Process

- Families achieve an enhanced quality of life by engaging in a family partnership assessment process. Parents are provided community resources such as adult education classes, financial literacy assistance programs, employment counseling, school lunch programs, health resources, and other community services. Such efforts are coordinated with the Comprehensive Services staff via the Family Partnership Agreement process and through daily interaction with site or comprehensive services staff at the parent's discretion and need. By assisting families to identify their own supports and strengths, development of skills, tools, and resources, families are able to use this process in developing goals for their families after they leave the program.
- Families feel empowered and have gained life skills to be self sufficient by learning about and accessing community resources to support their family.
- Families' attainment of goals will be identified
- Families attain and accomplish pre-existing goals if identified

The Comprehensive Services staff provides guidance, support, and resources to the family, moving them toward successful completion of the family goal(s) and aspirations. Documentation of support can be found in CLOUDS, Family Referrals and Services, and the Family Case History.

When the family does not meet the timeline, the Comprehensive Services staff will provide additional support and guidance, by reviewing/discussing all obstacles which prevented the family from meeting the time line. Families have a choice to continue moving toward meeting their goal(s) or establishing a new goal. If a family chooses to set a new goal, Comprehensive Services staff will assist the family in identifying an area to set a goal, and follow the goal setting procedures as listed under Goal Setting. Comprehensive Services staff will provide support and resources for the family to work towards achieving the newly identified goal.

If after several attempts, a family refuses to participate in the assessment or goal development, staff document their attempts at explaining benefits of the process, and note that parent refused.

#### 5. Parent Volunteer Survey

During the placement appointment, Comprehensive Services staff asks parents to complete a Volunteer Survey (See Form CSB300). This survey includes ways for parents to be engaged at the site level such as: helping in the classroom, preparing materials, sharing talents. It also offers opportunities to volunteer



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on a larger scale such as: Policy Council, Nutrition Advisory Committee, Health Services Advisory Committee, and Interview Panels.

The following is the protocol for implementation and completion of the Volunteer Surveys:

i. Upon Enrollment

- Comprehensive Services Clerks are responsible for:
- Completing Volunteer Survey with Parent
- Completing Parent Interest Survey with Parent
- Input names of parents indicating interest in an Advisory Committee (Policy Council, Health Services, Interview Panel, Nutrition etc) into the Volunteers for Advisory Committees folder on the Shared drive.

ii. By September 30th

- **Site Supervisors are responsible for:**
- Compiling a list of site volunteers from Volunteer Survey results and
- Utilizing the list of volunteers when needed for parent meetings.
- **Comprehensive Services Assistant Managers are responsible for:**
- Working with Comprehensive Services Clerks to ensure Parent Interest Survey distribution and Volunteer Survey tasks are completed within the timeline.

iii. Ongoing

- Should parents indicate interest in volunteering at a later date, they can inform site staff or CS staff for volunteer opportunities. (Volunteer Interest Survey is used upon enrollment as a means to discuss various engagement opportunities; however, families can participate in a volunteer activity at any point of enrollment).

#### 6. Parent Interest Survey

The Parent Interest Survey is completed by Parents upon enrollment. Results of this survey allow staff to identify the collective results the parents' interests for training at the parent committee meetings, or resources provided on a site level interest. The list of the top ten results are kept in the Parent Meeting & Policy Council binder and can also be shared via written materials, newsletter articles, speakers, and other forms of media. The categories for topics include:

- Health / safety
- Nutrition
- Mental health
- Child development
- Parenting
- Literacy / adult education
- Employment / job training
- Community resources
- The following is the protocol for implementation, timeline, distribution, and follow up for the Parent Interest Survey (See Form CSB-300).
- Upon enrollment
- Comprehensive Services Clerks are responsible for the following:
- Completing the surveys with Parent
- Tallying the completed surveys

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- Providing site with top ten interests on Site Level Parent Training Form (See Form CSB-304).
- By October / November of each year
- Site Supervisors are responsible for the following:
- Present the top ten interest results at next parent meeting as scheduled.
- Work with parents to develop calendar/schedule for topic presentations.
- Request support from Comprehensive Services as needed in obtaining or identifying speakers
- Based on results of the Survey and Performance Standard requirements, parent education workshops are planned by Site Supervisors/Head Teachers, and Comprehensive Services team members throughout the school year.

##### C. Accessing Community Services and Resources

CSB collaborates and works in close partnership with several child and family services community agencies in a wide number of service areas such as: mental health, health, nutrition support, education programs, disabilities support services agencies, social services, local Food Banks, financial literacy education, asset development programs, and domestic violence support programs. Connecting families to community agencies, including the Local Education Agencies, helps families to:

- Support and coordinate the successful transitions for enrolled children and families with other agencies.
- Support communication and coordination of services between Head Start/Early Head Start staff, school principals, and staff from other family services agencies involved with the family through transitions, including joint transition meetings.
- Support parent's role as the primary teacher/advocate for their child's education and throughout life.
- Support families' interests and needs to encourage parent family and community engagement in the in the children's learning.

CSB provides many opportunities for staff interaction with families throughout the year. Encouraging parents to be actively engaged in their child's life is the foundation for parents to continue as advocates for their children beyond Head Start. Please refer to each service area for more on how staff can support parent opportunities for gaining access to community resources. Comprehensive Services and site staff also generate referrals as a response to a parent's request.

##### D. Supporting Families in Crisis-(Emergency and Crisis assistance)

When a family experiences a crisis, the stress disrupts the family's usual pattern of functioning and family well-being. Families sometimes find that their usual ways of coping or problem solving do not work; as a result, they feel vulnerable, anxious, and overwhelmed. Sensitivity and care is taken to assess the nature and scope of the crisis in order to work with the family to discuss the level of support that is adequate yet comfortable for the family.

- Comprehensive services and site staff will conduct a comprehensive review of the immediate crisis that the family has.
- Comprehensive Services staff will contact the Mental Health unit for support. Report the situation and advise of potential need for crisis intervention or consultation.
- Consult the Service Area Manager(s) most connected to the crisis as needed for case review assessment and ensure comprehensive services support has been considered, and track crisis

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until stabilized. The Parent, Family and Community Engagement Manager should also be notified regardless of the crisis area.

- Review the documentation of events in CLOUDS.

The role of Head Start staff is to recognize and assess the crisis situation, listen and provide assurance, and help the family use specialized resources in the broader community. Whether staff provide the needed assistance or intervention, or refer families to community resources, they are key sources of support to the family.

All situations defined as a family crisis by staff or parent will be assessed on a case by case basis. The Comprehensive Services Assistant Manager supporting the family's site will monitor the progress of events until the situation is stable. Document specialized services if applicable in CLOUDS.

#### E. Accessing Mental Health Services: Prevention Identification, Intervention, Program for Families

CSB supports the social-emotional health and well being of both the child and the family. Opportunities for parents are provided to discuss concerns regarding their child or family, and assess support/treatment options with CSB mental health unit clinicians. Goals of the mental health prevention program are to:

- Improve self-concept
- Build positive relationships
- Develop coping skills for problem-solving
- Manage stress

Case management meetings are offered to families as needed to identify and address child or family issues, so that Comprehensive Services staff can provide information or additional resources to the family. Staff can assist families in obtaining appropriate referrals to address needs or concerns.

Child Abuse Prevention training for parents is scheduled annually at the site level during parent meetings. Additional resources are available to site and parents upon request. Please refer to the Family Handbook for more information.

#### F. Community Resources

##### 1. Resource Guides

Several community resource guides are used by Comprehensive Services staff, including: "Surviving Parenthood," published by the Child Abuse Prevention Council (925-798-0546) and "Regional Guides" published by Contra Costa Crisis Center (925-939-1916 or 211.org). The "Street Sheet," published by Shelter, Inc. (925-335-0698) is widely used and provides an "at-a-glance" perspective of what resources are available to assist with basic needs. The "Street Sheet" is easy to reproduce, is available in English and Spanish, and is published for East, Central, and West Contra Costa County.

Other community resources lists that are frequently distributed to CSB staff and parents include: one stop Career Center monthly calendars, First 5 Center monthly calendars, Local Library calendars, Latina Center calendars, and Family Law workshops.

##### 2. Internet Database

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For individualized resources customized to fit particular needs, Comprehensive Services staff and other staff can access 211 Online Database (formerly known as CORD Contra Costa Online Resource Database) via the Internet at [www.crisis-center.org](http://www.crisis-center.org). This up-to-date system allows staff to search for resources by name, need, and geographical area. It has the capability of translating the resource information into 12 different languages and has a map feature allowing the user to create a map to and from the resource location. Parents are encouraged to use this resource from CSB computers, or if available, from their personal computer.

##### 3. Other Methods of Access

Parents are also given access to information about community services by posted information on parent bulletin boards at sites, in the classrooms, from resource booklets, pamphlets, CSB Family newsletters, and flyers distributed to parents at orientation and/or other parent meetings/trainings.

##### 4. Site Based Resource and Referrals

Site Supervisors, site staff, and comprehensive services staff assigned to each site, should always be the first contact if a family has a crisis.

Each Site Supervisor is provided with Street Sheets and Resource Guides for the appropriate region of the county to assist families in accessing frequently used or needed resources. Copies of these Resource Guides should be posted on the Site Parent Board and also be distributed to each family so that it is easily accessible should they need it at a later time. Additional copies for photocopying and updated versions can be found at <http://www.shelterincofccc.org/resources.html> and <http://www.crisis-center.org/infoaregional.html>. Resource boxes are also available at each site with additional resources and handouts that relate to topics from the Parent Interest Surveys. Each site has a wellness center (self help) that will assist those families that don't ask for resources directly. The wellness centers contain information in the areas of: CSB's health, disabilities, nutrition, mental health, and parent, family and community engagement. The wellness centers are updated by the comprehensive services team on a quarterly basis.

##### G. Services to Pregnant Women Enrolled in the Program

The same methods of access to resources and services as noted above are to be used with pregnant women enrolled in the program. In particular, Family Partnership Agreements will address:

- Early and continuing risk assessments, which include assessment for nutritional status as well as nutrition counseling and food assistance, if necessary.
- Health promotion and treatment, including medical and dental exams, on a schedule deemed appropriate by attending health care providers as early in the pregnancy as possible.
- Mental health interventions and follow-up, including substance abuse prevention and treatment services as needed.
- Pre-natal education on fetal development, labor and delivery, and postpartum recovery
- Benefits of breastfeeding and accommodation of breastfeeding in the program.
- Health staff will visit the newborn within two weeks after birth to ensure the well being of both mother and child.

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##### **II. Parent Engagement**

###### **A. General Description**

Parents are the first and best educators of their child. Parent Engagement in CSB is integrated in the classroom and in the administration. It is imperative that the parent becomes engaged with his/her child's educational program, and with all aspects of the program. Parents are encouraged to participate in policy-making groups at the center, agency, and grantee levels. Participation of parents is voluntary and is not required as a condition of the child's enrollment. Four ways have been designed to provide the parents and/or families of the program to actively participate in the following:

- Engage in decision-making process
- Engage as paid employees
- Engage as volunteers
- Engage as observers in their child's classroom.

Families can also expect to be offered the opportunity to be engaged in the program as equal partners in their child's education and learning in these ways and more:

- Attend an orientation to the program and the classroom to learn:
- Attend two Parent/Teacher conferences per year to learn:
- Attend Parent Meetings and parent trainings
- Participate as a Volunteer, staff, or observer
- Participate in the Male Involvement Program
- Participate in Policy Council and other advisory bodies
- Participate in the Family Partnership Assessments

###### **B. Engagement in the Decision-Making Process**

Participation in the process of making decisions about the nature and operation of the programs (as well as decision-making in the Contra Costa County Community Services Bureau Grantee-Operated Program and the Policy Council) occurs on two levels, which are:

1. Site Parent Committee Meetings: (comprised exclusively of the parents of children currently enrolled at each center or within a program option such as the Home-based option). This Committee deals with issues at the classroom, site or socialization level.

The Site Parent Committee carries out at minimum, the following responsibilities:

- Advise staff in developing and implementing local program policies, activities, and services (\*including but not limited to classroom curriculum and activities, and center-wide activities)
- Plan, conduct, and participate in informal as well as formal programs and activities for parents and staff (\*including but not limited to parent training, special events, and parent/child activities).
- Within the guidelines established by the governing body, Policy Council, or Policy Committee, participate in the recruitment and screening of Early Head Start and Head Start employees.

The following is the staff protocol for implementation of parent meetings as family engagement:

- September:

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- Comprehensive Services Clerks, Comprehensive Services Assistant Managers and CS Managers
    - Provide support at 1st parent meeting to establish Policy Council representative and Parent Committee officers
  - As needed:
    - Assist in providing resources for speakers at Parent Meeting upon request by Site Supervisor.
  - Monthly-week before meeting:
    - Site Parent Meeting Chair
    - Announce upcoming meeting
    - Prepare agenda, make copies, prepare minutes
    - Copy minutes from prior month
    - Post agenda on Parent Board
- Secure training/guest speakers (with Site Supervisor assistance).
- Monthly (Site Supervisor with the support of Comprehensive Services staff as needed):
    - Supports Site Parent Committee Meeting Chair with monthly duties assigned
    - Provides support for translation of minutes/agendas if needed.
    - Provides staff report for meeting.
    - Ensures parent meeting binder is current for school year with training tally, agendas, minutes, sign-in sheets and copies of handouts given to parents.
    - Attends Parent Meeting or provide staff support to parent officers.
    - Within school year
    - Site Supervisor with the support of Comprehensive Services staff as needed:
    - Ensures that required trainings such as Pedestrian Safety (By September 30th), Child Abuse Prevention (April) and Kindergarten Transition are provided at the site.

#### 2. Policy Council

The Policy Council operates in accordance with Internal Operational Procedures of the County Board of Supervisors, the Brown Act, Simplified Roberts Rules of Order, Head Start Revised Performance Standards, and Better Governance Ordinance. The Policy Council By Laws, which are reviewed and approved annually by the PC, contain detailed information including but not limited to the following:

- Purpose of the Policy Council and composition information
- Procedures for handling business
- Duties and Responsibilities of members
- Membership and Meeting information
- Standards of Conduct requirements
- For more information regarding the roles and responsibilities of the Policy Council, refer to the Program Governance section under Administration of the Policies and Procedures.

The following is the staff protocol for implementation of Policy Council as an opportunity for Parent Engagement:

i. Site Supervisors with the support of designated Comprehensive Services staff is responsible for the following:

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- October
  - Attend 1st Parent Meeting at each site where there is Head Start or Early Head Start enrolled families as assigned.
  - Assist in establishing site officers and Policy Council Rep(s). (Refer to resources and handouts available in Parent Involvement section of CSB forms that outline general duties of policy council representatives.)
  - Provide newly elected Policy Council Rep(s) with Policy Council Representative Changes (See Form CSB-327) form to complete.

Forward to clerk of the Policy Council.

ii. Site Policy Council Representative with the support of site staff:

- Monthly
- Ensures posting of upcoming Policy Council Agenda on Parent Board 96 hours before the Policy Council meeting.
- File Policy Council Agendas in site Parent Meeting Binder.
- Prepare monthly Site Report to present to Policy Council.
- Share and distribute flyers and information received at the Policy Council Meeting to parents at the monthly site committee meeting.
- Attend Policy Council meeting and take back information and resources to next Parent meeting at their site.

iii. Site Supervisor:

- Monthly-week of PC
- Confirm representation for site. If rep(s) cannot attend, secure an alternate.
- West Co. sites only: Confirm if Policy Council rep(s) needs transportation and inform Site Supervisor or designated staff to transportation for the respective month.
- Facilitate election of new Policy Council representative if replacement is needed.
- As needed
- If the elected Policy Council Representative is unable to fulfill his/her duties, he or she submits a letter of resignation to site or comprehensive services staff to be forwarded to the clerk or manager of PC.
- Site conducts election for replacement Policy Council representative at the next Parent Committee meeting.
- Provide new Policy Council representative with Policy Council Representative Changes (See Form CSB-327) form to complete and forward to the clerk of the Policy Council.

iv. Comprehensive Services Manager Assigned to Policy Council

Monthly-after PC:

- Provide Policy Council Summary to site for Policy Council representative to report at next parent meeting.
- Post minutes and agenda on EHSD public website in both English and Spanish.

#### C. Engagement in the Classroom as Paid Employees, Volunteers, or Observers

##### 1. As Paid Employees

Contra Costa County CSB defines “paid employees” as currently-enrolled parents who have qualified for an employee position.

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Preference will be given to parents of children formerly or currently enrolled in CSB's programs. Parents who become paid employees of Contra Costa County (other than substitutes who work less than 10 hours in a month in the program) may not participate on the Policy Council.

##### 2. As Volunteers

To be considered for volunteering, a currently enrolled parent must take part in an orientation about the program and the specific aspects of being a volunteer. Parents and family members are encouraged to participate in the classroom as frequently as their schedule permits. Please refer to the Volunteer Policy under Human Resources of the Policies and Procedures for more information on CSB Volunteer Policy.

If parents are unable to volunteer at the center, the following home activities are suggested:

- Helping children extend their experience in the classroom
- Helping children to use materials in different ways, providing children with appropriate work and strategies to help them solve problems
- Encouraging children to communicate with one another so that they can help themselves work out problems and explore alternatives
- Organizing, fixing, making toys or sewing/repair of dramatic play clothes
- Participating in story-telling activities with children
- Making observations of their child
- Making flannel board stories
- Going to the library to check out books for the classroom
- Translating written materials.

##### 3. As Observers

Parents of currently enrolled children may observe in their child's classroom or during the Home-based socialization time at any point during program operations.

Other persons may observe after obtaining permission from the Site Supervisor/Early Childhood Home Educator by indicating the purpose of the visit, and how long they plan to visit.

Parents and other family members have a responsibility to treat staff and other program participants with courtesy. Aggressive or abusive actions towards any staff members, parent, or another child, by the child or the child's parent is unacceptable and may result in a child/family being withdrawn from the program. If this should occur, CSB will work with the parent to provide resources for alternative placement.

##### 4. Male Involvement Program

CSB supports the engagement of both parents in their children's educational experience that will ultimately help the children to reach their full potential. Regardless of living arrangements, it is our goal to include both parents to the maximum extent possible in the family partnership process and have ongoing communication with the child's teacher as co-partners in their child's education and development.



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CSB makes fathers feel welcome and supported at our sites and offer activities that will be meaningful to both father and mother. The goal of male involvement is to provide fathers and other significant males with opportunities to improve their lives so that they can improve the lives of their children. Activities and support for fathers and engaged men are determined locally through communication with site or comprehensive services staff in a variety of ways such as: ongoing communication as a result of a parent-teacher conference, home visit, other means with a teacher or site supervisor, and fatherhood support groups (24/7 Dad).

##### D. The Role of Staff in Family Engagement

Staff members have a major role in providing opportunities for parents/families to become engaged. Site staff and Comprehensive Services staff (line and management) have the responsibility of ensuring that parents of children currently enrolled and/or family members have the opportunity to be engaged in all aspects of the program. CSB defines opportunity as the staff's willingness to assist families in removing barriers to their involvement.

1. Orientation: CSB staff ensures that parents have the opportunity to be engaged in the program by providing a Parent orientation at time of placement. Once a child is ready to be placed at a site, comprehensive services, or site staff meets with the family to complete the placement process. This includes the Parent Interest Survey and a review of the Family Handbook which provides an overview of our CSB program, family parent engagement opportunities, and its service models & areas. The Family Handbook is updated annually in conjunction with the annual review of CSB Policies and Procedures. Contents of the Handbook are limited to appropriate content regarding program information, school readiness, staff professional development, parent, family, and community engagement, health and safety requirements, nutrition information, social services and more.

Please refer to the current Family Handbook for more details.

Site staff and Early Childhood Home Educators work with parents to plan classroom activities, field trips, socializations and home-based activities. Planning with parents at the site level occurs at parent meetings and individually through parent conferences twice a year. Child care and transportation are planned and provided when needed to allow for maximum family engagement.

2. Family Engagement Task Force: Ensures agency-wide opportunities are communicated to all parents. Membership includes a staff representative from each area of the county, the Parent, Family and Community Engagement Manager, and at least one parent.

All centers are required to have a Parent Information Board, located in plain view of all parents visiting the facility. For centers with several buildings, a Parent Information Board should be included at each building. These boards are used to communicate with families and should contain current events, parent committee meeting agendas and minutes, Policy Council agendas and minutes, job announcements, special events, and parent engagement opportunities such as Male Involvement, Triple P (Positive Parenting Program), and community events. Materials should be posted in English and Spanish whenever possible.

CSB monitors both Delegate Agencies and subcontractors, and the directly operated program to determine the extent of parent engagement, giving technical assistance to programs as needed.

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##### E. Development of Activities for All Parents

Currently enrolled parents at the classroom and site levels will develop activities for families designed to meet the families' needs and interests.

Parent Interest surveys are distributed to enrolled families at enrollment and are tallied by Comprehensive Services staff by September 30th to determine interests and needs of parents at each site. Information from these surveys will be analyzed by staff, and will form the basis for development of activities and parent trainings that reflect the interests of the site. Parent Engagement requests found consistently across the program will be considered for agency-wide opportunities.

Parents should work in co-partnership with classroom staff, or with their Early Childhood Home Educators to design child development activities and special events. Parents and/or family members are encouraged to be in contact with classroom personnel on a regular basis.

Staff should assist parents define their own feelings about child rearing, as well as building partnerships with parents (to develop confidence and knowledge about their children's education). In turn, parents contribute their experiences and values to the program in a way that is comfortable for each parent. Various opportunities are made available throughout the year, and support is provided by both site and comprehensive services staff to assist each family to participate to the extent of their comfort, ability and availability.

##### F. Parent Education / Home Activities

Teachers provide parents with individualized home activities to reinforce their child's learning objectives. Home activities focus on the use of household items and emphasize a developmentally appropriate approach to working with preschoolers.

Home activities can be introduced to parents at site parent meetings, home visits/parent conferences, and daily conversations with parents. Home activity ideas offered to parents should be documented on the second Home Visit/Parent Conference form.

Each center has a Parent Lending Library/Wellness Center available to parents on a checkout basis. Books and pamphlets about Parenting, Health, Mental Health, Dental Care, Nutrition, Child Development, and Home Activities are all part of the library. For more information on Home Activities, refer to the Education section of the Policies and Procedures.

##### G. Parent Notification of Community Services Bureau Changes

Following is the Grantee's procedure for notification of parents of staff changes, new hires, substitutes, staff departures, and other applicable CSB staff movement:

- Classroom Substitute – the Site Supervisor, Teacher or Assistant Director will notify all parents in writing, of a change in or substitution of Site Supervisor or teaching staff at the site (or of any other change affecting their children's learning environment).

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- Hiring/Assignment/Departure of Staff – in writing and verbally, the Site Supervisor or Head Teacher notifies parents that a new employee is on-site.

##### H. Family Literacy

Family Literacy will be promoted on a group and individual family basis through information obtained in the Family Partnership Agreements, Parent Interest Surveys, parent/teacher home visits, parent conferences, center parent meetings, and from other parent contacts. Family Literacy is approached as a collaborative venture, wherein interagency agreements are established to streamline access to the services of a variety of community agencies. Examples of Family Literacy opportunities include:

- Reading Is Fundamental, where parents are trained in storytelling and then scheduled for story sessions in their child's classroom. At the end of each session, each child chooses a book to take home and keep as his/her own.
- Raising a Reader book bags
- Reading challenges
- Home activities

Comprehensive Services and site staff work consistently through the year to maintain effective working relationships with community agencies providing literacy support services. These may include, but are not limited to, United Way, Literacy Alliance, Libraries, ROP, RIF, Project Second Chance, CalWORKs, and Diablo Valley Literacy Council, or provide parents with resources for literacy services at their local library and more depending on the need and interest of families.

##### I. Parent and Family Engagement in Health, Nutrition, and Mental Health Education

The Family Partnership Agreement-Family Partnership Assessment utilizes a Family Development Matrix developed by the California Department of Community Services. This matrix specifically addresses health, nutrition and mental health education. By utilizing this matrix, staff gains the information they need to:

- Assist parents in establishing and utilizing a medical and dental home
- Encourage parents to be active participants in their child's health care
- Provide parents with the opportunity to learn the principles of preventive medical and dental health, health and safety education, and individualized health training specific to the child and/or family needs.

In addition to addressing education via the Family Partnership Agreement, there are two advisory groups that allow appropriate time/opportunity for maximum engagement in Health, and Nutrition:

- Health Services Advisory Committee: This committee is composed of staff, parents, and experts in the community on the topic of health, nutrition and mental health for pregnant women, children 0-5 years old, and their families. Members inform staff of current issues and practices so that the program can address them. Parents also have an opportunity to express their concerns regarding health-related issues affecting their family or their community by providing input to local community agencies regarding current health-related events, trends, service gaps. This group meets twice per year. Parents indicate interest on the Volunteer Survey that is completed at placement (See Form CSB-300)
- Nutrition Advisory Committee: This committee is composed of staff and parents. Members of this committee exchange information regarding the food service program. They may participate

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in cooking project demonstrations, and discuss and explore nutrition issues such as obesity, anemia, cancer, breastfeeding, and other topics of interest to the parent participants. This group meets twice a year. Parents indicate interest on the Volunteer Survey. (See Form CSB300)

##### J. Parent and Family Engagement in Community Advocacy

Through the encouragement of parent and family engagement at all levels, the program provides parents with important information that will empower them and serve as a practical resource to help them in their day-to-day lives.

One of the goals of parent and family engagement is to support and engage parents in their child's education and development. Information exchanged during the first and second parent-teacher conferences, through case management meetings, sharing of health screening results, and on-going communication with parents, staff are educating parents on the importance of seeking out support for the interest and well being of their child.

Through the Family Partnership Agreement Process, staff support and encourage families to develop goals, or support existing goals in order to support the growth and well being of their family.

Through the Policy Council, parents are provided an opportunity to extend their advocacy into the community as they are involved in the decision making process for their Head Start and Early Head Start Programs. They gain experience in a public meeting setting and will have knowledge of public meeting rules should they wish to advocate in their local public meetings. They are exposed to community resources and in turn become vital resources to other parents at their respective centers. The executive committee shares information about grass roots advocacy for the Head Start program and encourages parents to write letters to their elected officials supporting their Head Start program. This advocacy extends beyond supporting their own child which is what brought them to Head Start initially. It is vital that parents remain concerned and informed about issues that affect their lives and the lives of their children. Parents are encouraged to form their own opinions regarding issues and are provided with information on advocacy skills so that they can have a voice as well as leadership skills.

##### K. Parent and Family Engagement in Transition Activities

Helping each parent become an effective advocate is an important transitional strategy. One goal should be to help the parent learn about her/his rights, as stated in:

- Public Law 100476 - Individuals with Disabilities Act (IDEA)
- American With Disabilities Act (ADA)
- Public Law 93– 80 - The Family Educational Rights and Privacy Act (FERPA)
- Public Law 99-372 - Handicapped Children's Protection, Education Handicapped Act (EHA)

Parents should know their rights to ensure that they and their child(ren) are treated fairly. CSB staff may need to help parents develop some assertiveness skills. Parents need to know how to approach their child's teacher, and tactfully request that an arrangement is made to communicate regularly with the teacher. Modeling and role-playing are effective ways to help parents learn/practice discussions with teachers and administrators. This could be done individually or in small groups with other parents (some of whom may have had experience in working with teachers from other agencies). The focus

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should be positive assertion of the parent's rights. Staff should concentrate on the benefits that might result for the child if the parent continues an active role in the education of the child.

Parents are involved in transitions throughout the program to include: home to school, infant to toddler; toddler to preschool, preschool to kindergarten; routine transitions during class time; and transitions from the parking lot to the center. For more information on transitions, refer to the Education and Disabilities sections of the Policies and Procedures and the CSB Family Handbook.

##### L. Parent and Family Engagement in Home Visits

Head Start enrolled parents are encouraged to participate in two home visits during the program year. The first visit may occur at the time of placement and is intended to be an opportunity for the teacher to meet the child and family, and ensure that the child's entry into the program is successful. Comprehensive Services staff may accompany the teacher if necessary. This provides an opportunity for parents to share information about their child to the teacher.

Individual needs are also addressed at this time as well as completion of some required program documentation. The second visit occurs near the end of the program year and is intended to exchange information regarding progress the child has made, and to address any areas of concern before the child leaves the program or begins another year with the program.

Parents may decline the opportunity for a home visit at any time. While home visits are not required as a condition of the child's enrollment or participation in these program options, every effort must be made by program staff to explain the advantages of home visits. Home visits are, however, required for the Home-based option and in the Early Head Start program where staff must visit the newborn within two weeks of birth. For more information regarding these programs, refer to the Education section of the Policies and Procedures.

##### M. Parent Engagement in Recruiting and Interviewing Head Start and Early Head Start Employees

All parents are invited to participate in the recruiting and interviewing of EHS and HS employees. Parents are included as part of the interview panel for consideration of employment. Parents can be engaged by showing interest as a Policy Council member or by way of the Volunteer Survey that is done upon enrollment. A list of parents who are interested in being on interview panels is created at the beginning of each year. Training and orientation of the interview process is provided for all parents who wish to participate. For more information on staffing procedures, refer to the Human Resources section of the Policies and Procedures.

##### N. Parent's Appeal Rights

Parents have the right to receive a Notice of Action that informs them of their acceptance or denial of CSB services.

Parents have the right to appeal adverse actions.

The appeal process provides a written fourteen (14) day notice before the action becomes effective. Information regarding the appeal process is located on the back page of a Notice of Action.

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During the appeals process, CSB must not change the services to the family except for health or safety reasons. For more information, please refer to the Enrollment and Re-Enrollment section of the Policies and Procedures.

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#### **III. Community Partnerships**

##### **A. Description**

CSB takes an active role in community partnership building and advocacy to enhance the delivery of services to children and families. Based on a variety of information sources, such as the Community Assessment, Family Partnership Agreements, regulatory requirements and current legislation, program staff actively seeks out and enters into partnerships with various community entities and individuals to coordinate the access to resources and services to children, families, and staff. These partnerships, and the manner in which they are conducted, are documented by virtue of interagency agreements and memoranda of understanding, which clearly delineate the responsibilities of both parties, are updated regularly, and are responsive to the needs of children and families.

##### **B. Child Care Partnerships**

CSB engages several Community-Based Organizations on a contractual basis to provide child-care and development services to eligible families. Comprehensive Services Managers are assigned to these programs operated by our child care partners to provide support and technical assistance and to ensure compliance with federal and state regulations. Collaborative partnerships with child care agencies enhance the educational, health care, and social services to children and families throughout the county.

Providers of child care services include: First Baptist Church, West Contra Costa State Preschool Program, We Care Services for Children, Antioch Partnership, YMCA of the East Bay, Martinez Early Childhood Center, Concord Childcare, Richmond College Prep, Crossroads High School, Cambridge Community Center, Brighter Beginnings, and Cameron School.

##### **C. Partnerships with Agencies, Entities, and Individuals**

CSB partners with over a hundred community-based organizations including but not limited to:

- Health Services: Family, Maternal, Child Health Program (FMCH), Child Health and Disability Prevention Program (CHDP), Gurnick Academy for Medical Arts, Elks Vision, CAIR, Integrated Pest Management- Bed Bug Task Force, John Muir Child Safety Coalition, Give Kids a Smile Day, Children's Oral Health Program, Lead Prevention program, Communicable Disease program, Community Wellness & Prevention program.
- Child Welfare: County Child & Family Services (CCC EHSD-CFS)
- Mental Health: County Mental Health Program / MediCal Reimbursement, C.O.P.E. Family Services program (Triple-P program).
- Nutrition: Women, Infants and Children Nutrition Program (WIC), CCFP Roundtable, Solano & Contra Costa Food Bank, Healthy Families, Cooking Matters, CalFresh, BANPAC, UC Cooperative Extension (EFNEP).
- Disabilities: Regional Center, California Children's Services, and SELPA, Child Health and Disability Prevention.
- Family Support: Department of Child Support Services (DCCS), SparkPoint Center, County Probation.
- Child Abuse Prevention: Family Stress Center's Child Assault Prevention Program, Families Thrive.

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- Professional Associations: California Child Development Administrator's Association (CCDAA), National Association for the Education of Young Children (NAEYC), California AEYC, Contra Costa AEYC, Local Planning Council (LPC), National Head Start Association (NHSA), California Head Start Association (CHSA), and Region IX Head Start Association (RHSA).
- Educational Institutions: Contra Costa College District, UC Davis, UC Berkeley, and Cal State University East Bay.
- Other Supportive Services: Reading Is Fundamental, Supporting Father Involvement, Zero Tolerance for Domestic Violence, Raising A Reader and First 5 Commission.

In addition to partnering with agencies and entities to provide services to our children, families, and staff, CSB also conducts outreach to organizations for the purpose of securing volunteers to participate in program activities. Examples of this type of outreach include our work with the Volunteer Center, CalWORKs (work experience clients), Teens Link with the Community (teens fulfilling community services requirements in High School), and the Telephone Pioneers (retired Pacific Bell employees). Visiting experts are also recruited from the community to enhance training for children, staff, and families.

Groups of parents and professionals, recruited to participate on Advisory Committees (Health Services Advisory, Community Colleges, Budget, Bylaws, Education and Family Services, Nutrition, and Personnel Committees) ensure quality planning for needs/interests of children and families. These committees contribute parent and professional input to the planning and program implementation process and are recognized for the important role they play in community partnership building.



# POLICIES AND PROCEDURES

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## **I. Eligibility, Recruitment, Selection, and Attendance-ERSEA**

### **A. State Child Development Program**

The California Department of Education Child Development Division funds the state-funded portion of our program. The matrix, below, provides an overview of this program.

PY = Program Year

	CSPP		CCTR
Program type & hours of care	Part-day 3 – 3:59 hrs	Full-day  More than 4 hrs  Includes $\frac{3}{4}$ time and  Full-time	Full-day  Program  Includes $\frac{1}{2}$ , $\frac{3}{4}$  Time and full-time
Age of Child	3 or 4 by October 1 of PY *Continued summer enrollment allowable for K-eligible children until K start if requested and available		Zero – three (until eligible for CSPP)
% Preschoolers age 4 by October 1 of PY	50% of CSPP children at each site		N/A
Eligibility Requirement	2008 Eligibility regulations apply		
Maintaining Ongoing Eligibility	N/A Once initially Certified, child is “in” for the Remainder of the PY	All families must report changes to income & family size within 5 days for recertification of eligibility. Failure to meet ongoing eligibility results in termination of full-day services.	
		Family may choose to receive part-day services based on their initial eligibility or pay full fee for services.	N/A
Need Requirement	N/A	2008 Need regulations apply	
		Preschool children who attend only part of the week (e.g. M W F) or part of the day (11 – 5) can attend their class M-F during the “part-day preschool portion of the day” 8:30-12:00. All hours outside of this time must be supported by need.	
Maintaining Ongoing Need	N/A	All families must report changes to need within 5 day for recertification of need. Failure to meet ongoing need results in termination of full-day services.	
		Family may choose to receive part-day services or pay full fee	N/A

		for services.		
Family Fees Assessed	Yes	Program	Hours of Certified Care	Type of Fee Assessed
		CCTR part-day	3:59 hours a day or less	Part-Time
		CCTR ¾ day	4 to 6:29 hours a day	Part-Time
		CCTR Full-Day	6:30 to 10:29 hours a day	Full-Time
		CCTR Full-Day Plus	10:30 or more hours a day	Full-Time
		CSPP Part-Day	3:59 hours a day or less	Part-Time
		CSPP ¾ Day	4 to 6:29 hours a day	Part-Time
		CSPP Full-Day	6:30 to 10:29 hours a day	Full-Time
		CSPP Full-Day Plus	10:30 or more hours a day	Full-Time
		If family of a 3-5 yr old child has need for less than 4 hrs a day, try to place them in a part-day slot (family fees apply).		If family of 0-3 Yr old child has need for less than 4 hrs a day, the part-time fee applies.
Adjustment Factors	N/A	Time and special criteria adjustment factors apply. Time criteria are based on total number of hours in care (not just hours of need). CCTR toddler special criterion applies only until child is 36 months old regardless of type of class child is in. ¾ time – 4 to 6:29 hrs Full-time – 6:30 to 9:59 hrs Full-time Plus – 10 hrs or more		
Enrollment Priorities	Transfers (i.e. families of children already certified for care including toddlers leaving CCTR) CPS - CSB622 At-Risk Referral Homeless returning 4 yr olds regardless of income			Transfers CPS or “at risk” Homeless Eligible children Per income ranking

	eligible 4 yr olds* eligible 3 yr olds* over income 4 yr olds (part-day only) over income 3 yr olds (part-day only)  *Refer to 2009 Enrollment Priorities for State Preschool	
Over income waivers	15% of part-day slots allowed to be 10% over State income ceiling.	Not Allowed
Recertification for next PY	N/A Must do 2 <sup>nd</sup> "initial" application prior to next PY.	At least every 12 months When changes in income, family size or need. At the discretion of the site supervisor anytime during the program year.
Reporting	Revised 8501	9500

## B. Definitions

As used in the Program Requirements:

- Adjusted monthly income-The total countable income as defined below, minus verified child support payments paid by the parent whose child is receiving child development services, excluding the non-countable income listed below:
  - Earnings of a child under age 18 years;
  - Loans;
  - Grants or scholarships to students for educational purposes other than any balance available for living costs;
  - Food stamps or other food assistance;
  - Earned Income Tax Credit or tax refund;
  - GI Bill entitlements, hardship duty pay, hazardous duty pay, hostile fire pay, or imminent danger pay;
  - Adoption assistance payments;
  - Non-cash assistance or gifts;
  - All income of any individual counted in the family size that is collecting federal Supplemental Security Income (SSI) or State Supplemental Program (SSP) benefits;
  - Insurance or court settlements including pain and suffering and excluding lost wages and punitive damages;
  - Reimbursements for work-required expenses such as uniforms, mileage, or per diem expenses for food and lodging;
  - Business expenses for self-employed family members;
  - When there is no cash value to the employee, the portion of medical and/or dental insurance documented as paid by the employer and included in gross pay; and
  - Disaster relief grants or payments, except any portion for rental assistance or unemployment.
- Certify eligibility-The formal process the staff goes through to collect information and documentation to determine that the family and/or child meets the criteria for receipt of

subsidized child development services. The signature of the Site Supervisor on an application for services attests that the criteria have been met.

- Authorized representative-The person designated by the agency to certify eligibility for subsidized services. For CSB's program, this means the Site Supervisor (SS) for center-based programs or Assistant Director (Assistant Director) or designee for centers not having a Site Supervisor.
- Child Protective Services-Children receiving protective services through the local county welfare department as well as children identified by a legal, medical, social service agency or emergency shelter such as abused, neglected or exploited or at risk of abuse, neglect or exploitation.  
Children with disabilities-Children who have been determined to be eligible for special education or early intervention services in accordance with Part B or C of the Individuals with Disabilities Education Act (IDEA). These children have a current Individualized Education Plan or Individualized Family Service Plan..These children may be developmentally disabled, hearing impaired, deaf, speech impaired, visually impaired, seriously emotionally disturbed, physically impaired, have other health impairments such as: deaf-blind, multi-handicapped or specific learning disabilities, requiring the special attention of adults in a child development setting.  
Children, birth to three years, may be "at-risk" or with disabilities as defined by IDEA.
- Declaration-A written statement signed by a parent under penalty of perjury attesting that the contents of the statement are true and correct to the best of his or her knowledge.
- Displace families-To de-enroll families in order to reduce service levels due to insufficient funding or inability of CSB to operate one or more sites because of reasons beyond control of the department, such as floods or fire.
- Family-The parents and the children for whom the parents are responsible; who comprise the household in which the child receiving services is living. For purposes of income eligibility and family fee determination, when a child and his or her siblings are living in a family that does not include their biological or adoptive parent, "family" shall be considered the child and related siblings.
- Fee schedule-The Family Fee Schedule, issued by the department pursuant to Education Code section 8447(e). The fee schedule is used by child development staff to assess fees for families utilizing State child care and development services.
- Homeless-A person or family that lacks a fixed, regular, and adequate night-time residence and has a primary night time residence that is:
  - A supervised publicly or privately operated shelter, transitional housing, or homeless support program designed to provide temporary living accommodations or
  - A public or private place not designed for, or ordinarily used as, a regular sleeping accommodation for human beings.
- Income eligible-For the purpose of child care and development services that a family's adjusted monthly income is at or below 75 percent of the state median income, adjusted for family size.
- Income fluctuation-Income that varies due to:
  - Migrant, agricultural, or seasonal work;
  - Intermittent earnings or income, bonuses, commissions, lottery winnings, inheritance, back child support payment, or net proceeds from the sale of real property or stock;
  - Unpredictable days and hours of employment, overtime, or self-employment.
- Legally qualified professional-A person licensed under applicable laws and regulations of the State of California to perform legal, medical, health or social services for the general public.



- Parent-A biological parent, adoptive parent, stepparent, foster parent, caretaker relative, legal guardian, domestic partner of the parent, or any other adult living with a child who has responsibility for the care and welfare of the child.
- Parental Incapacity-The temporary or permanent inability of the child's parent(s) to provide care and supervision of the child(ren) for part of the day due to a physical or mental health condition.
- Recipients of Service-Families and/or children enrolled in a child care and development program subsidized by the California Department of Education.
- Self-Certification of Income-A declaration signed by the parent under penalty of perjury identifying:
  - To the extent known, the employer and date of hire and stating the rate and frequency of pay, total amount of income received for the preceding month(s), the type of work performed, and the hours and days worked, when an employer refuses or fails to provide requested employment information or when a request for documentation would adversely affect the parent's employment; or the amount and frequency of sources of income for which no documentation is possible.
- State median income-The most recent median income for California families as determined by the State Department of Finance.
- Total countable income-All income of the individuals counted in the family size that includes, but is not limited to, the following:
  - Gross wages or salary, advances, commissions, overtime, tips, bonuses, gambling or lottery winnings;
  - Wages for migrant, agricultural, or seasonal work;
  - Public cash assistance;
  - Gross income from self-employment less business expenses with the exception of wage draws;
  - Disability or unemployment compensation;
  - Workers compensation;
  - Spousal support, child support received from the former spouse or absent parent, or financial assistance for housing costs or car payments paid as part of or in addition to spousal or child support;
  - Survivor and retirement benefits;
  - Dividends, interest on bonds, income from estates or trusts, net rental income or royalties;
  - Rent for room within the family's residence;
  - Foster care grants, payments or clothing allowance for children placed through child welfare services;
  - Financial assistance received for the care of a child living with an adult who is not the child's biological or adoptive parent;
  - Veterans' pensions;
  - Pensions or annuities;
  - Inheritance;
  - Allowances for housing or automobiles provided as part of compensation;
  - Portion of student grants or scholarships not identified for educational purposes as tuition, books, or supplies;
  - Insurance or court settlements for lost wages or punitive damages;
  - Net proceeds from the sale of real property, stocks, or inherited property; or
  - Other enterprise for gain.

- Update the application-The process of revising the application for services between recertification. The application shall be revised by completing a 9600S form with the latest family information that documents the continued need and eligibility for child care and development services.

#### C. Child Age and Family Income Eligibility

The Community Services Bureau's program enrolls children according to Federal and State eligibility criteria. For the Head Start program, children are selected for service based primarily on the family income adjusted for family size, with lowest income families selected first. Children at risk of abuse or neglect are considered high priority. Within age groups, priority in the pre-school program is given to four-year-old children from the neediest families. Please refer to CSB's Selection Criteria found in the ERSEA folder on the Shared Drive for more information.

The Community Assessment is used to determine location of centers and program options to accommodate the areas of greatest need in the county.

Every year, parents/staff review and update placement of centers and program options, restructuring enrollment to best meet community needs as county demographics change.

#### D. Recruitment

##### 1. Strategies

CSB employs a variety of recruitment strategies to ensure that the neediest children from low-income families have access to services. Each year, a recruitment plan responsive to changes in communities served by CSB is developed and implemented. Various recruitment materials are developed and disseminated throughout the community. There are a variety of ways to access the program by referral or personal contact. Walk-ins are always welcome. Word of mouth, via CSB parents is the best method of recruitment. Staff from all content areas of the program conducts presentations to community-based entities wherein detailed information is provided to expedite access to our program by their clients. Articles and ads are published in local publications such as agency newsletters, websites, and social networking sites. For detailed strategies, see the Recruitment Plan in the ERSEA folder on the Shared Drive.

##### 2. Recruitment Policy

All staff, parents, Policy Council members and partners are responsible for giving out information in accordance with the annual Recruitment Plan.

All CSB Staff are responsible for:

- Phone calls: Hotlines are answered at regularly schedule intervals throughout the day by designated staff that log the entries and follow up on the Shared Drive. Staff that answers pre-registration hotlines is responsible for taking basic pre-registration information over the phone and entering it into CLOUDS.
- Walk-ins: All staff assist client in filling out CSB690-Waiting List Pre-Registration Form (See CSB Forms)
  - If client has brought in any documentation, such as pay stubs and/or birth certificate make copies and staple to the waitlist form.
  - Fill in all sections of the form.

- Put documents in a sealed envelope, with name and location of Comprehensive Services Clerk who supports the PRIMARY desired location of child care, as requested by the client. Mark CONFIDENTIAL on envelope.
- Place in Comprehensive Services box at site.
- Mail Received:
  - Route to appropriate person if mail came in self-addressed envelope.
  - If not, send to Comprehensive Services Clerk who supports that center or program.
- Faxes: All referral forms are sent to the ERSEA analyst, logged, and then forwarded to the appropriate office for follow up.

#### E. Selection Process

Children are selected from waiting lists that are maintained in CLOUDS for each Head Start classroom and Home-based program. After the agency receives the application material, children are ranked based on CSB's admission priorities. Ten percent of our placement slots are designated for children with disabilities and every effort is made to accommodate children with disabilities.

##### 1. Selection Criteria

To ensure that the neediest children from low-income families are selected for CSB's services, CSB implements its Selection Criteria/Admissions Priorities to prioritize neediest families, which is aligned with the state's priorities by a strong community need for child care for working families.

At least 10% of the total number of enrollment opportunities at CSB is designated for children with certified disabilities. Families of children with disabilities are asked to provide documentation from the doctor or a copy of the child's IFSP or IEP.

The Site Supervisor and other department managers insure that the selection criteria meet the state and federal regulations regarding selection of families and children to the program. The Selection Criteria/Admissions Priorities is updated and approved by the Director, Policy Council, and Board of Supervisors annually.

#### F. CLOUDS Waitlist

##### 1. Procedures for maintaining Eligible / Accepted Families on Waitlist

In Maintaining Eligible / Accepted Families, Comprehensive Service Clerks are responsible for:

- Taking basic pre-registration information over the phone or in person and enter into CLOUDS
- Conducting interviews
- Determining income eligibility based on family size
- Making copies of client documents e.g., pay stubs, birth certificate, immunization papers for the temporary file
- Creating, signing and dating income calculation sheet
- Establishing a temporary file for the child (CSB Eligibility/Enrollment checklist)
- Noting on child data sheet in CLOUDS as to the location of the temporary file

Temporary file should remain with the Comprehensive Services Clerk, who supports the PRIMARY desired location requested by the family, until file is ready to be reviewed by the Comprehensive Services Assistant Managers.

Note: Eligible/Accepted temporary files are retained by the Comprehensive Services Assistant Manager. Keep the files in a locked drawer or cabinet.

Collect the following information in the temporary file:

- Copy of the child's birth certificate or other age verification: for state funding programs collect birth certificates for all children in the family size; for Head Start/Early Head Start collect only the birth certificate(s) of the child(ren) to be enrolled.
- Documentation of Family Size (unborn can only be counted in family size for Early Head Start)
- Parents' income verification (e.g., pay stubs) or self-certification form, if applicable (signed & dated).
- Income calculation worksheet (signed & dated).
- Copies of the child's immunization records (not necessary to determine eligibility).
- Health history from CLOUDS (signed and dated).
- Child Care Data Collection Privacy Notice and Consent Form.
- Documentation of Disabilities, if applicable.
- Documentation of Homelessness, if applicable

Once file has been determined eligible by Comprehensive Services Assistant Manager:

- Review and update information on file. Review and update Child and Family Data sheets.
- Review Health History.
- Update Emergency Information (See Form CSB214)
- Flag file in the top right front corner of the file using the following sticker dot system:
- Blue Dot: Child with Disabilities
- Red Dot: Child with Health/Nutrition/Mental Health Concerns
- Yellow Dot: Child that transitioned from I/T to Preschool
- White Dot: Used to cover up any colored dot that is no longer applicable to the child.

Comprehensive Services Assistant Manager is Responsible for:

- Review temp file from Comprehensive Services Clerk.
- Verify family eligibility.
- Move child from Eligibility Waiting List to Eligible/Accepted Wait List in COPA once eligibility has been established.
- Retain possession of temporary file until requested by a Site Supervisor or other Comprehensive Services team member.
- Update Child Data sheet in CLOUDS to reflect location of temporary file.
- Assign task of transferring documents from temporary file to permanent child's file when Site Supervisor requests the file for potential enrollment/placement. Check files for flags and ensure proper dots are applied to file.
- Ensure flagged items are properly noted in CLOUDS.
- Keep file in a locked drawer or cabinet.
- Eligible/Accepted list in CLOUDS.
- Purge Eligible/Accepted list on CLOUDS record of over-age children
- Send purged list into CLOUDS archive as per the purge protocol.

## 2. Procedures for Purging Waitlist

The Comprehensive Services Clerks assigned to each site will maintain a current waiting list for those sites by following these steps:

- Document all contacts with families on the Family Data Sheet in CLOUDS.

- Make extra special effort via multiple methods to contact Head Start eligible families as some these families require extra outreach efforts. Document all steps taken.
- Send out no contact letters (See Form CSB613) to non-responsive families on or before the 15th of each month; send only one letter to each family; give the family ten working days to respond from date letter is sent.
- Document response/lack of response to the CSB613 on the Family Data Sheet.
- Prepare the “Waitlist Purge Request Form” (See Form CSB603) by the 5th of each month for the previous month’s activities (ex. requests from May will be due on June 5); include all families on purge form that have not responded to letters sent out as described in #2 of this protocol.
- Submit the “Waitlist Purge Request Form” (CSB603) to the Comprehensive Services Assistant Manager assigned to them.

The Comprehensive Services Assistant Manager will conduct the purge by following these steps:

- Review the “Waitlist Purge Request Form” (CSB603) prepared by the clerk.
- Review the Family Data Sheet for each child listed on the “Waitlist Purge Request Form” (CSB603).
- Purge the records that are appropriate by the 10th of each month.
- Shred any temporary files created for purged record.
- Communicate with the clerk regarding any purge that is not appropriate.
- Check to see if Family Services have been started and, if so, discontinuing services for those families scheduled to be purged.

## G. Enrollment and Re-Enrollment

### 1. General Enrollment Policy

Families find themselves in many situations and at times terminate their children’s enrollment, but then, later on, want to re-enroll their child. CSB encourage families to return to the program should their situation allow. When families wish to re-enroll they are placed back on the waiting list and ranked accordingly.

When children are enrolled in the Federal Head Start program, they remain eligible for services for the year they are enrolled and the following year regardless of changes in income. If children are enrolled for a third year in Head Start, the family income must be re-determined. When children are enrolled in the State Child Development program, they are recertified in accordance with the regulations to insure they remain eligible.

When children are enrolled in the Early Head Start program, they remain eligible for services until they are three years old regardless of income.

However, when EHS children reach their third birthday, they must re-apply to determine eligibility for Head Start preschool services.

When children are enrolled in part-day State Preschool, they remain eligible for continued services until the beginning of the next fiscal year regardless of income changes.

Part-day State Preschool children seeking a second year of services must demonstrate income and age eligibility for continued services but have priority in placement without regard to income ranking in accordance with the 2009 Enrollment Priorities guidance.

Once an infant or toddler is enrolled in a General Child Care program they remain income eligible for subsidized services only as long as the family income remains at or below 75% of the California median income.

When family income rises above 50% of the California median income, the General Child Care and State Preschool enrollees are assessed a Family Fee based on the California Family Fee Schedule.

## 2. Enrollment Placement

In placing a child at a center, Site Supervisors are responsible for the following:

- Review Eligible/Accepted List in /CLOUDS.
- Select the child with the highest priority ensuring that all Head Start eligible children have been placed as vacancies occur, before enrolling any child above the federal poverty guidelines.
- Secure file from the Comprehensive Services Assistant Manager via e-mail or phone call request using child's CLOUDS ID#.
- Review all sections of child's file for special needs or concerns and proper placement of dots and accuracy.
- Check for any flagged items that may need follow up or a parent signature.
- Coordinate/schedule Case Management Meeting with parent, Comprehensive Services Assistant Manager, and other staff as needed.
- Contact parent for enrollment (placement) appointment.
- Advise family to bring any documents that are needed to update file.
- When meeting with family:
  - Complete, date and sign new income information as needed and enter updated information on CLOUDS.
  - Print the 9600 form from CLOUDS to be signed and dated by Site Supervisor and parent.
  - Issue Notice of Action..
  - Update Emergency Information (See CSB Forms > 0600-Enrollment > Licensing Emergency ID/Information form). .
  - Complete Admission Agreement and hours of service contract..Complete Parent Handbook with parent.
  - Verify that the child's immunizations are up-to-date (Do not admit until record is up to date)..
  - Review health history and ensure appropriate referrals have been made..
  - Move child from Eligible/Accepted List and place into appropriate classroom and Program Model..
  - Double check CLOUDS record to ensure match between paper file and CLOUDS file..
  - Conduct final review of file for accuracy.

## H. Eligibility and Need Criteria and Documentation

### 1. Residency Requirements

To be eligible for child care and development services, the child must live in the State of California while services are being received.

Any evidence of a street address or post office address in California will be sufficient to establish residency. A person identified as homeless is exempted from this requirement and shall submit a declaration of intent to reside in California.

The determination of eligibility for child care and development services shall be without regard to the immigration status of the child or the child's parent(s), unless the child or the child's parent(s) are under a final order of deportation from the United States Department of Justice.

For the Head Start and Early Head Start, children/pregnant women must be residents of Contra Costa County, and reside in the CSB service area. CSB does not serve a portion of Concord that is commonly referred to as the Monument Corridor. The area falls within the 94520 zip code in Concord and is bounded by Clayton Road to the North, Galindo Street to the Northeast, South along Monument Boulevard to Cleopatra Drive, southeast to Interstate 680 and west to State Route 242. This area is operated by the Unity Council of Alameda County. All other portions of the county are served by CSB. If a family resides outside of Contra Costa County or in the Unity Council's service area, an authorized "Out of Service Area Enrollment Notification Form (CSB608) must be on file at CSB, with the agency with whom the family would ordinarily be served, and with the regional office.

## 2. Documentation of Need Based on Employment, Seeking Employment, Training Toward a Vocational Goal, Seeking Housing, and Incapacity

Families who are eligible for subsidized child care and development services based on income, public assistance, or homelessness must document that each parent in the family meets a need criterion. The need criteria are: vocational training leading directly to a recognized trade, para profession, or profession; employment or seeking employment; seeking permanent housing for family stability; and incapacitation.

Subsidized child care and development services shall only be available to the extent to which:

- The parent meets a need criterion that precludes the provision of care and supervision of the family's child for some of the day;
- There is no parent in the family capable of providing care for the family's child during the time care is requested; and Supervision of the family's child is not otherwise being provided by school or another person or entity.

## 3. Documentation of Employment

If the basis of need as stated on the application for services is employment of the parent, the documentation of the parent's employment shall include the days and hours of employment.

If the parent has an employer, the documentation of need based on employment shall consist of one of the following:

- The pay stubs provided to determine income eligibility that indicates the days and hours of employment;
- When the provided pay stubs do not indicate the days and hours of employment, staff shall verify the days and hours of employment by doing one of the following:
  - Secure an independent written statement from the employer;
  - Telephone the employer and maintain a record;
- If the provided pay stubs indicate the total hours of employment per pay period and if staff is satisfied that the pay stubs have been issued by the employer, specify on the application for services the days and hours of employment to correlate with the total hours of employment and the parent's need;

- If the variability of the parent's employment is unpredictable and precludes staff from verifying specific days and hours of employment or work week cycles, specify on the application for services that the parent is authorized for a variable schedule for the actual hours worked, identifying the maximum number of hours of need based on the week with the greatest number of hours within the preceding four weeks and the verification as noted above. Until such time as the employment pattern becomes predictable, need for services shall be updated at least every four months;
- If the employer refuses or is non-responsive in providing the requested information, record attempts to contact the employer, and specify and attest on the application for services to the reasonableness of the days and hours of employment based on the description of the employment and community practice; or
- If the parent asserts in a declaration signed under penalty of perjury that a request for employer documentation would adversely affect the parent's employment, on the application for services:
  - Attest to the reasonableness of the parent's assertion; and
  - Specify and attest to the reasonableness of the days and hours of employment based on the description of the employment and community practice.

When the employed parent does not have pay stubs or other record of wages from the employer and has provided a self-certification of income, staff shall assess the reasonableness of the days and hours of employment, based on the description of the employment and the documentation provided, and authorizes only the time determined to be reasonable.

If the parent is self-employed, the documentation of need based on employment shall consist of the following:

Parent provided information that includes:

- A declaration of need under penalty of perjury that includes a description of the employment and an estimate of the days and hours worked per week;
- To demonstrate the days and hours worked, a copy of one or more of the following: appointment logs, client receipts, job logs, mileage logs, a list of clients with contact information, or similar records; and
- As applicable, a copy of a business license, a workspace lease, or a workspace rental agreement.
- A statement by staff assessing the reasonableness of the total number of days and hours requested per week based on the description of the employment and the documentation provided. If the parent has unpredictable hours of employment, staff shall authorize the parent for a variable schedule not to exceed the number of hours determined to be needed per week. Need for services for unpredictable hours shall be updated at least every four months. If staff has been unable to verify need based on the documentation provided, staff shall take additional action to verify self-employment that includes any one or more of the following:
  - If the self-employment occurs in a rented space, contacting the parent's lessor or other person holding the right of possession to verify the parent's renting of the space;
  - If the self-employment occurs in variable locations, independently verifying this information by contacting one or more clients whose names and contact information have been voluntarily provided by the parent; or
  - Making other reasonable contacts or requests to determine the amount of time for self-employment.
  - If staff is unable to make a reasonable assessment of the hours needed for self-employment after attempting to verify such hours and documenting the attempts, staff



may divide the parent's self-employment income by the applicable minimum wage. The resulting quotient shall be the maximum hours needed for employment per month.

The parent shall provide a release to enable the staff to obtain the information it deems necessary to support the parent's asserted days and hours worked per week.

If additional services are requested for travel time or sleep time to support employment, staff shall determine, as applicable, the time authorized for:

- Travel to and from the location at which services are provided and the place of employment, not to exceed half of the daily hours authorized for employment to a maximum of four hours per day; or
- Sleep, if the parent is employed anytime between 10:00 p.m. and 6:00 a.m., not to exceed the number of hours authorized for employment and travel between those hours.

#### 4. Documentation of Employment in the Home or a Licensed Family Day Care Home

If the parent's employment is in the family's home or on property that includes the family's home, the parent must provide justification for requesting subsidized child care and development services based on the type of work being done and its requirements, the age of the family's child for whom services are sought, and, if the child is more than five years old, the specific child care needs. Staff shall determine and document whether the parent's employment and the identified child care needs preclude the supervision of the family's child.

If the parent is a licensed family day care home provider or an individual license-exempt, the parent is not eligible for subsidized services during the parent's business hours because the parent's employment does not preclude the supervision of the family's child.

If the parent is employed as an assistant in a licensed large family day care home, and is requesting services for the family's child in the same family day care home, the parent shall provide documentation that substantiates all of the following:

- A copy of the family day care home license indicating it is licensed as a large family day care home;
- A signed statement from the licensee stating that the parent is the assistant, pursuant to the staffing ratio requirement of California Code of Regulations, title 22, section 102416.5(c);
- Proof that the parent's fingerprints are associated with that licensed family day care home as its assistant, which staff may verify with the local community care licensing office; and
- Payroll deductions withheld for the assistant by the licensee, which may be a pay stub.

#### 5. Documentation of Seeking Employment

If the basis of need as stated on the application for services is seeking employment, the parent's period of eligibility for child care and development services is limited to 60 working days during the contract period. Services shall occur on no more than five days per week and for less than 30 hours per week. The period of eligibility shall start on the day authorized by staff and extend for consecutive working days.

Documentation of seeking employment shall include a written parental declaration signed under penalty of perjury stating that the parent is seeking employment. The declaration shall include the parent's plan

to secure, change, or increase employment and shall identify a general description of when services will be necessary.

Staff shall determine the number of working days available for seeking employment and the child care schedule, which may be a variable schedule, based on the documentation. During the period of authorization and if necessary to verify need, staff may request that the parent provide, no more than once a week, a description of the activities he or she has undertaken during the previous week to seek employment and, as appropriate, may require additional documentation.

If the Governor declares a state of emergency and if the factual basis for the Governor's declaration indicate that opportunities for employment have temporarily diminished to such a degree that parents cannot be reasonably expected to find employment within 60 working days of diligent searching, the State Superintendent of Public Instruction (SSPI) may investigate to determine whether the 60-working-days limitation should be suspended. If the SSPI determines that it is in the public interest to do so, he or she may, by order, suspend the 60-working-days limitation on eligibility during the period of the emergency or for a lesser time. The scope of the suspension, including the geographic areas and the persons affected, and its duration, shall be no more than necessary to respond to the emergency as determined in the SSPI's investigation, and shall be specifically described in the SSPI's order. If a parent's services for seeking employment were exhausted after an emergency was declared and before the SSPI suspends the eligibility limitation, staff may re-authorize services for seeking employment in accordance with the conditions specified in the SSPI's order.

If the parent has concurrently received services based on employment or vocational training for at least 20 working days while receiving services for seeking employment, eligibility for seeking employment may be extended for an additional 20 working days. For such a parent, services for this purpose shall not exceed 80 working days during the contract period.

If services for this purpose are discontinued, the number of working days remaining in the period of eligibility shall be available for a subsequent period of eligibility during the contract period.

The working days used to determine the period of eligibility shall include the consecutive Mondays through Fridays, excluding any federal holidays.

## 6. Documentation of Training toward Vocation Goals

### i. General Procedures

If the basis of need as stated on the application for services is vocational training leading directly to a recognized trade, para-profession, or profession, child care and development services shall be limited to whichever expires first:

- Six years from the initiation of services; or
- Twenty four semester units, or its equivalent, after the attainment of a Bachelor's Degree.

The parent shall provide documentation of the days and hours of vocational training to include:

- A statement of the parent's vocational goal;
- The name of the training institution that is providing the vocational training;
- The dates that current quarter, semester, or training period, as applicable, will begin and end;
- A current class schedule that is either an electronic print-out from the training institution of the parent's current class schedule or, if unavailable, a document that includes all of the following:
  - The classes in which the parent is currently enrolled;

- The days of the week and times of day of the classes; and
- The signature or stamp of the training institution's registrar.
- The anticipated completion date of all required training activities to meet the vocational goal; and
- Upon completion of a quarter, semester, or training period, as applicable, a report card, a transcript, or, if the training institution does not use formal letter grades, other records to document that the parent is making progress toward the attainment of the vocational goal.

A parent shall report any change in his or her class schedule related to the days and times of any class, including a withdrawal from a class, within five calendar days of requesting the change from the institution.

Services may be provided for classes related to the General Education Development (GED) test or English language acquisition if such courses support the attainment of the parent's vocational goal.

On-line or televised instructional classes that are unit bearing classes from an accredited training institution shall be counted as class time at one hour a week for each unit. The parent shall provide a copy of the syllabus or other class documentation and, as applicable, the Web address of the on-line program. The accrediting body of the training institution shall be among those recognized by the United States Department of Education.

Continuation of services based on training is contingent upon making adequate progress. To make progress each quarter, semester, or training period, as applicable, the parent shall, in the college classes, technical school, or apprenticeship for which subsidized care is provided:

- In a graded program, earn a 2.0 grade point average; or
- In a non-graded program, pass the program's requirements in at least 50 percent of the classes or meet the training institution's standard for making adequate progress.

The first time the parent does not meet the condition of making adequate progress, the parent may continue to receive services for one additional quarter, semester, or training period, as applicable, to improve the parent's progress. At the conclusion of that session, the parent shall, in the classes for which subsidized care was provided, have made adequate progress. If the parent has not made adequate progress, services for this purpose shall be:

- Terminated; and
- Available to the parent, to the extent provided by subdivision (a), after six months from the date of termination.

No later than ten calendar days after the training institution's release of progress reports for the quarter, semester, or vocational training period, as applicable, the parent shall provide staff with a copy of the parent's official progress report. As deemed appropriate, staff may require the parent to:

- Have an official copy of a progress report sent directly from the training institution to staff; or
- Provide a release, as may be required by the training institution, to enable staff to verify the parent's progress with the institution.

A parent may change his or her vocational goal, but services shall be limited to the time or units remaining from the initiation of the provision of services for vocational training.

Staff shall determine the days and hours needed per week, and whether the parent is making progress, based on the documentation. Staff may request that the parent provide a publication from the training institution describing the classes required to complete the parent's vocational goal.

If additional services are requested for study time or travel time to support the vocational training, staff shall determine, as appropriate, the amount of services needed for:

- Travel to and from the location at which services are provided and the training location, not to exceed half of the weekly hours authorized for training to a maximum of four hours per day; or
- Study time, including study time for on-line and televised instructional classes, according to the following:
  - Two hours per week per academic unit in which the parent is enrolled;
  - On a case-by-case basis and as may be confirmed with the class instructor, additional time not to exceed one hour per week per academic unit in which the parent is enrolled; and
  - On a case-by-case basis, no more than the number of class hours per week for non-academic or non-unit bearing training.

The service limitations specified above shall not apply to a parent who demonstrates he or she is:

- As of June 27, 2008, receiving services for vocational training and has attained a Bachelor's Degree;
- Receiving services from a program operating pursuant to Education Code section 66060;
- Attending vocational training when the parent has been deemed eligible for rehabilitation services by the California Department of Rehabilitation; or
- Attending retraining services available through the Employment Development Department of the State or its staffs due to a business closure or mass layoff.

#### ii. School Breaks for Parents Training Toward a Vocational Goal

Caregivers whose certified need is Training Toward a Vocational Goal, do not have a certified need for full-day State Child Development Services during their school/training breaks (winter, spring, summer or fall.) and days school is not in session (teacher in-service and other holidays). These days are non-contract days and the child is not allowed to attend full-day State Child Development Services or use Best Interest Days on these days. To promote continuity of care, the caregiver and site supervisor may determine that the child should remain in services during these days if possible and would therefore either assess a full fee or select program model for which the child is eligible. CCTR only toddlers cannot take advantage of this second option and may not attend during these days as they are not age eligible for any other program model. For all other children the following protocols should be followed:

- FP/HS and FPL/HS preschool children may attend full-day under PP/HS or PPL/HS with approval of Request for Change from FP to PP/TB form (See Forms CSB607).
- FP and FPL preschool children may attend ½ day during the preschool portion of the day under PP or PPL only with approval of Request for Change from FP to PP/TB form (See Form CSB607).

If any of the above actions are taken, the program model in CLOUDS must be changed by wait listing the child and re-enrolling under the new program model for the duration of the school/training break days. Sign-in sheets, monthly 9400s, and other required documents described in the Request to Change from FP to PP Protocol must also reflect this program model change. If/when the child is moved back to their original funding model; these same changes must be made and reflected on the appropriate documentation.

## 7. Documentation of Parental Incapacity

If the basis of need as stated on the application for services is parental incapacity, child care and development services shall not exceed 50 hours per week.

Documentation shall include a release signed by the incapacitated parent authorizing a legally qualified health professional to disclose information necessary to establish that the parent meets the definition of incapacity, and needs services.

The documentation of incapacitation provided by the legally qualified health professional shall include:

- A statement that the parent is incapacitated, that the parent is incapable of providing care and supervision for the child for part of the day, and, if the parent is physically incapacitated, that identifies the extent to which the parent is incapable of providing care and supervision;
- The days and hours per week that services are recommended to accommodate the incapacitation, taking into account the age of the child and the care needs. This may include time for the parent's regularly scheduled medical or mental health appointments;
- The probable duration of the incapacitation; and
- The name, business address, telephone number, professional license number, and signature of the legally qualified health professional who is rendering the opinion of incapacitation and, if applicable, the name of the health organization with which the professional is associated.

Staff may contact the legally qualified health professional for verification, clarification, or completion of the provided statement.

Staff shall determine the days and hours of service based on the recommendation of the health professional and consistent with the provisions of this article.

## 8. Documentation of Seeking Permanent Housing

If the basis of need as stated on the application for services is seeking permanent housing for family stability, the parent's period of eligibility for child care and development services is limited to 60-working-days during the contract period. Services shall occur on no more than five days per week and for less than 30 hours per week. The period of eligibility shall start on the day authorized by staff and extend for consecutive working days.

Documentation of seeking permanent housing shall include a written parental declaration signed under penalty of perjury that the family is seeking permanent housing. The declaration shall include the parent's search plan to secure a fixed, regular, and adequate residence and shall identify a general description of when services will be necessary. If the family is residing in a shelter, services may also be provided while the parent attends appointments or activities necessary to comply with the shelter participation requirements.

Staff shall determine the number of weeks available for seeking permanent housing and the child care schedule, which may be a variable schedule, based on the documentation. During the period of authorization and if necessary to verify need, staff may request that the parent provide, no more than once a week, either a declaration signed under penalty of perjury describing the activities the parent has undertaken during the previous week to seek permanent housing or a signed statement from the shelter, transitional housing agency, or homeless support program regarding the parent's search progress to date.

If the parent does not expect to secure housing prior to the end of the eligibility period:

- The parent may request an extension in a declaration of need signed under penalty of perjury that includes an update of the parent's search plan and either a description of the activities undertaken during the previous week to seek permanent housing or a signed statement from the shelter, transitional housing agency, or homeless support program indicating the parent's continued need for services; and
- The staff may authorize an extension of search eligibility for up to 20 additional working days.

If services for this purpose are discontinued, the number of working days remaining in the period of eligibility shall be available for a subsequent period of eligibility during the contract period.

The working days used to determine the period of eligibility shall include the consecutive Mondays through Fridays, excluding any federal holidays.

## 9. Documentation of Child Protective Services

### i. General Procedures

CSB Head Start is committed to providing child development services for all eligible and pregnant women who are currently involved in the child welfare system and Children and Family Services (CFS) for the purpose of improving young children's access to and continuity of comprehensive, high quality early care and education services. The partnership between CSB and CFS ensures that staff understands the complex (social, emotional, developmental and physical) needs of this vulnerable population. This partnership is in compliance with the administration for children and families' information memorandum acyf-cb-im-11-01 issued January 31, 2011.

If eligibility and need is based on a child/family's involvement in the child welfare system/child protective services (CPS/CFS), the basic data file must contain a written referral-Form CSB622, dated within the six (6) months immediately preceding the date of application for services, from a legal, medical, social service agency or emergency shelter. The written referral must include either:

- A statement from the local county welfare department, child protective services (CPS/CFS) unit certifying that the child is receiving child protective services and that the child care and development services are a necessary component of the child protective services plan, or
- A statement by a legally qualified professional that the child is at risk of abuse or neglect and the child care and development services are needed to reduce or eliminate risk, and
- The probable duration of the child protective service plan or the at-risk situation, and
- The name, address, telephone number and signature of the legally qualified professional who is making the referral.

### ii. Children and Family Service Referrals

Families may be referred to CSB for enrollment from Children and Family Services (CFS), if child care is deemed a necessary piece of the service plan. CSB will review the referral to determine a family's eligibility for Head Start, Early Head Start, Center Based, Stage II and CAPP programs. Based on eligibility and need requirements the referral will be forwarded to the appropriate program, taking into consideration parental choice. Once the referral is received by the appropriate unit, the family will be contacted to determine eligibility. If the family is eligible and meets all necessary requirements, they may be enrolled in the program provided there is space. If there is no space or funding available in any of CSB's programs, the ERSEA Manager will forward the referral to an outside agency for potential

enrollment. At this time staff will notify the referring individual whether or not the family was enrolled or referred to an outside agency.

#### I. Certification of Eligibility

The Site Supervisor or the Assistant Director is authorized to certify eligibility prior to initial enrollment and at the time of re-certification. The authorized representatives must certify each family's/child's eligibility for childcare and development services after reviewing the completed application and documentation contained in a basic data file that is established and maintained at the site.

All data is uploaded to a central computerized database by Site Supervisors or Comprehensive Services team members.

Prior to enrollment, Site Supervisor/Assistant Director certifies eligibility by completion of the following forms:

- **Application for Childcare and Development Services**  
Prior to enrollment, parents may contact Site Supervisors, Assistant Directors, Comprehensive Services team members, and teachers at any sites in Contra Costa County to obtain an application for services. Or they may call one of the enrollment hotline numbers to place themselves on a waiting list.
- **Notice of Action, Application for Services**  
At the time the Site Supervisor certifies or recertifies eligibility of a family/child for child care and development services, he/she shall inform the family of the family's responsibility to notify the staff within five calendar days of any changes in family income, family size, or the need for services.

This information is noted on the application of service and Site Supervisor/Comprehensive Services Manager must review the contents and, if needed, provide an explanation of what the "Declaration" means.

When a child's residence alternates between the homes of separated or divorced parents, eligibility, need and fees should be determined separately for each household in which the child is residing during the time child development services are needed (i.e., separate certifications and service agreements). For example, a child may be subsidized during part of the week and full cost the rest of the week.

#### J. Re-certification for General Child Care Services and Full Day State preschool

After initial certification and enrollment, the Site Supervisor must verify need and eligibility and re-certify each family/child as follows:

- Families receiving services because the child is at risk of abuse, neglect or exploitation must be re-certified at least once every three (3) months.
- Families receiving services because of actual abuse, neglect or exploitation must be re-certified at least every twelve (12) months.
  - The time of re-certification, the Site Supervisor must document that the family is participating in a protective services plan in accordance with the requirements of their local county welfare department, child protective services unit to alleviate the circumstances causing the abuse, neglect or exploitation.

All other families must be re-certified at least once each contract period and at intervals not to exceed twelve (12) months.

#### K. Re-Certification for Part-Day State Preschool Children

Part-day State Preschool families must be certified at the beginning of service using the most recent income documentation and may be certified up to 120 days old before the services' start date.

After a first year of service, a family must reapply to determine income and age eligibility before a child can be considered for enrollment for a second year. These returning children have placement priority without regard to income ranking as described in the 2009 Enrollment Priorities guidance.

#### L. Re-Certification for Head Start and Early Head Start Children

CSB certifies Head Start children into the program based on family income eligibility at the time of enrollment using the federal income guidelines.

Once a child is enrolled, that child does not need to be re-certified even if the family income rises above the federal poverty level for the first year of enrollment and the following year. Re-certification is only required for a child entering a third year of Head Start.

Early Head Start children must be re-certified for eligibility when they transition to a Head Start program for preschool age children.

#### M. General Recertification / Re-Enrollment Procedures

##### 1. Recertification Procedures

During the recertification process, Site Supervisors are responsible for the following:

- Track families needing to be recertified using Recertification Tracking Calendar.
- Notify families 30 days prior to enrollment expiration to bring updated eligibility documentation.
- Collect recertification or re-enrollment documentation.
- Complete new 9600 on CLOUDS at face-to-face interview with parent.
- Complete new income calculation sheet (signed and dated).
- Update reason for needing child care and application type on the child data sheet (See "eligibility information" on the child data sheet).
- Proceed with certification procedures as listed above if family is still income eligible.
- Issue Notice of Action, certifying continuation, changes or termination of services. (Note: adverse action requires a 14-day written notification, 19-days if mailed).
- Drop file on CLOUDS on the last day of service and prepare paper file for storage. The Children's file folders are to be re-used.
- Update CLOUDS record as needed.
- Maintain files of terminated children in locked location at site for one year until after program audit in October or November.
- Send dropped and files of terminated clients to central location after completion of program audit.

##### 2. Re-Enrollment Process

During the re-enrollment process, Site Supervisors in collaboration with Comprehensive Services are responsible for the following:

- In June, identify children for roll-over.
- In July, place roll-over children into appropriate classrooms and Program Model, from Eligible/Accepted list in CLOUDS.



- For previously enrolled Part-day State Preschool child requesting re-enrollment, follow guidelines for completely new 9600 application with all new documentation:
- If a child's CLOUDS record was archived within the program year, request Comprehensive Services Manager to reactivate child's CLOUDS record and place child back on to Eligibility Wait List.
- Follow approved guidelines for selecting children.

#### N. Updating the Application

The Site Supervisor must update the family's application for General Child Care and Full-day State Preschool to document continued need and eligibility and determine any change to fee assessment, if applicable, within thirty (30) days whenever there is a change in family size, income, public assistance status or need.

Form 9600S will be used for application updates between re-certifications.

#### O. Contents of Basic Data File

Site Supervisors / Comprehensive Services staff must establish and maintain a basic data file for each family receiving childcare and development services. The basic data file must contain a signed application for services with:

- The parent's(s) full name(s), address(es) and telephone number(s).
- The names, gender and birth dates of all children under the age of eighteen (18) counted in the family size whether or not they are served by the program.
- The number of hours of service each day for each child.
- The names of other family members in the household related by blood, marriage or adoption.
- The reason for needing childcare and development services, if applicable.
- Employment or training information for parent(s) including name and address of employer(s) or training institution(s) and days and hours of employment or training, if applicable..
- Eligibility status..
- Family size income, if applicable..
- The parent's signature and date..
- The signature of the Site Supervisor/Assistant Director certifying the eligibility and date of signature.
- A notation on when the first services begin..
- A notation of the last day services were received.

The data file must also contain, as applicable:

- Documentation of income eligibility, including an income calculation worksheet.
- Documentation of employment.
- Documentation of seeking employment.
- Documentation of training.
- Documentation of parental incapacity.
- Documentation of child's disabilities.
- Documentation of homelessness.
- Documentation of seeking permanent housing for family stability.
- Written referral from a legally qualified professional from a legal, medical, or social services agency, or emergency shelter for children at risk of abuse, neglect, or exploitation..

- Written referral from a county welfare department, child welfare services worker, certifying that the child is receiving protective services and the family requires child care and development services as part of the case plan..
- If the parent of the child was on cash assistance, the date the parental cash aid was terminated.
- A signed Child Care Data Collection Privacy Notice and Consent Form CD 9600A shall be included..
- Notice of Action (as stated above in detail) and/or Recipient of Services.
- All child health and current emergency information required by California Code of Regulations, title 22, Social Security, Division 12, Community Care Facilities Licensing Regulations.

#### 1. Documentation and Determination of Family Size

A parent shall provide the names of the parents and the names, gender and birthdates of the children identified in the family. This information shall be documented on a confidential application for child care and development services and used to determine family size. The parent shall provide supporting documentation regarding the number of children and parents in the family.

The number of children shall be documented by providing at least one of the following documents, as applicable for the state funded program\*:

- Birth certificates.
- Court orders regarding child custody.
- Adoption documents.
- Records of Foster Care placements.
- School or medical records.
- County welfare department records; or
- Other reliable documentation indicating the relationship of the child to the parent.

\*Federally funded programs require documentation for the child to be enrolled, only. In state funded programs, when only one parent has signed the application and the information provided pursuant to subdivision (a)(1) indicates the child(ren) in the family has another parent whose name does not appear on the application, then the presence or absence of that parent shall be documented by providing any one of the following documents, as applicable:

- Records of marriage, divorce, domestic partnership or legal separation.
- Court-ordered child custody arrangements.
- Evidence that the parent signing the application is receiving child support payments from that person, has filed for child support with the appropriate local agency, or has executed documents with that agency declining to file for child support.
- Rental receipts or agreements, contracts, utility bills or other documents for the residence of the absent parent: or
- Any other documentation, excluding a self-declaration, to confirm the presence or absence of a parent of a child in the family.

If, due to the recent departure of a parent from the family, the remaining applicant parent cannot provide any documentation, the applicant parent may submit a self-declaration signed under penalty of perjury explaining the absence of that parent from the family.

Within six months of applying or reporting this change in family size, the parent must provide documentation as noted above.

If the information provided by the parent is insufficient, staff shall request any additional documentation necessary to verify the family composition and family size.

For income eligibility and family fee purposes, when a child and his or her siblings are living in a family that does not include their biological or adoptive parent, only the child and related siblings shall be counted to determine family size. In these cases, the adult(s) must meet a need criterion.

## 2. Documentation of Income Eligibility

The parent is responsible for providing documentation of the family's total countable income and the staff is required to verify the information, as described below

The parent(s) shall document total countable income for all the individuals counted in the family size as follows:

i. If the parent is employed, provide:

- A release authorizing the staff to contact the employer(s), to the extent known, that includes the employer's name, address, telephone number, and usual business hours, and
- All payroll check stubs, a letter from the employer delivered to CSB independent of the employee, or other record of wages issued by the employer for the month preceding the initial certification, an update of the application, or the recertification that establishes eligibility for services.

When the employer refuses or fails to provide requested documentation or when a request for documentation would adversely affect the parent's employment, provide other means of verification that may include a list of clients and amounts paid, the most recently signed and completed tax returns, quarterly estimated tax statements, or other records of income to support the reported income, along with a self-certification of income.

ii. If the parent is self-employed, provide a combination of documentation necessary to establish current income eligibility for at least the month preceding the initial certification, an update of the application, or the recertification that establishes eligibility for services. Documentation shall consist of as many of the following types of documentation as necessary to determine income:

- A letter from the source of the income,
- A copy of the most recently signed and completed tax return with a statement of current estimated income for tax purposes, or
- Other business records, such as ledgers, receipts, or business logs.

Parents shall provide copies of the documentation of all non-wage income, self-certification of any income for which no documentation is possible, and any verified child support payments.

Staff:

Staff shall retain copies of the documentation of total countable income and adjusted monthly income in the family data file.

When the parent is employed, staff shall, as applicable, verify the parent's salary/wage; rate(s) of pay; potential for overtime, tips or additional compensation; hours and days of work; variability of hours and days of work; pay periods and frequency of pay, start date for the employee. If the employer refuses or

is non-responsive in providing requested information or a request for employer documentation would adversely affect the parent's employment, and if the information provided by a self-employed parent is inconsistent with the staff's knowledge or community practice, shall request clarification in the self-certification of income, additional income information or a reasonable basis for concluding that the employer exists.

When the parent is self-employed, staff shall obtain and make a record of independent verification regarding the cost for services provided by the parent that may be obtained by contacting clients, reviewing bank statements, or confirming the information in the parent's advertisements or website.

If the income cannot be independently verified, the staff shall assess whether the reported income is reasonable or consistent with the community practice for this employment.

Staff may request additional documentation to verify total countable income to the extent that the information provided by the parent or the employer is insufficient to make a reasonable assessment of income eligibility.

To establish eligibility, staff shall, by signing the application for services, certify to the staff's reasonable belief that the income documentation obtained and, if applicable, the self-certification, support the reported income, are reliable and are consistent with all other family information and the staff's knowledge, if applicable, of this type of employment or employer.

If the family is receiving child care and development services because the child(ren) is/are at risk of abuse, neglect, or exploitation or receiving child protective services and the written referral specifies that it is necessary to exempt the family from paying a fee, then the parent will not be required to provide documentation of total countable income.

If the basis of eligibility is a current aid recipient, the staff shall obtain verification from CalWIN.

### 3. Calculation of Income

#### i. General Procedures for calculating income

Staff calculates total countable income based on income information reflecting the family's current and on-going income using an income calculation worksheet that specifies the frequency and amount of the payroll check stubs provided by the parent and all other sources of countable income.

When income fluctuates because of:

- Agricultural work, by averaging income from the 12 months preceding the initial certification, an update of the application, or the recertification that establishes eligibility for services.
- Intermittent income, by averaging the intermittent income from the preceding 12 months by dividing by 12 and add this amount to the other countable income.
- Unpredictable income, by averaging the income from at least three consecutive months and no more than 12 months preceding the initial certification, an update of the application, or the recertification that establishes eligibility for services.

#### ii. Over-Income Families-General Description

Both the State and Federal program allow over-income families meeting strict criteria. NO CHILD SHALL BE CONSIDERED FOR ENROLLMENT WITH AN INCOME ABOVE THE FEDERAL POVERTY GUIDELINE UNTIL ALL FAMILIES AT OR BELOW THE FEDERAL POVERTY GUIDELINES HAVE BEEN ENROLLED. To this end, it is critical that the recruitment plan be fully implemented and that extra efforts are made to assist income eligible families in completing the application to establish eligibility and be placed in the program expeditiously. After these efforts have been conducted, documented and certified, a request to waive the income guidelines may be made. The waiver form (See Forms > CSB606) includes a certification statement on the back of the form where the outreach efforts are documented. A simple statement that “the waitlist has been exhausted” is never acceptable.

### iii. Over-Income Protocols

When enrolling over-income families, the Site Supervisor or Manager is responsible for:

- Completing the over income waiver (CSB606).
- Submitting completed waiver to Assistant Director/Partner Analyst for approval.
- Placing original Assistant Director approved waiver in child’s file

The Assistant Director/Partner Analyst is responsible for:

- Receiving form and ensuring that all possible outreach has been conducted to ensure that there are no income eligible children to enroll.
- Reviewing the aggregate waiver list on Shared Drive to ensure that their cluster has not exceeded the 10% unlimited over income designated primarily for children with an IEP or IFSP but for other cases as determined appropriate by the AS or 35% limited over income enrollment for the Head Start and Early Head Start program, or the 15% limited over income for the part day preschool (PP) or the part day family literacy program (PPL).
- Signing form
- Forwarding the original to Site Supervisor/Mgr. for placement in file.
- Forwarding a copy of approved waiver to Division Manager (ERSEA).

The Division Manager (ERSEA) is responsible for:

- Receiving copies of approved over income waivers from Assistant Directors/Partner Analyst.
- Logging each waiver on database on shared drive.
- Providing alerts to each Assistant Director/Partner Analyst that are nearing their over income allowance.
- Analyzing placement of over income slots to inform recruitment and slot planning processes.
- Periodically purging the list as children transition out of the program.

### 4. Documentation of the Child’s Exceptional Needs (known as Children with Disabilities at CSB).

The family data file shall contain documentation of the child’s exceptional needs if the staff is claiming adjustment factors. The documentation of exceptional needs shall include:

- A copy of the portion of the active individual family service plan (IFSP) or the individualized education program (IEP) that includes the information as specified in Education Code section 56026 and California Code of Regulations, title 5, sections 3030 and 3031; and
- A statement signed by a legally qualified professional that:
  - The child requires the special attention of adults in a child care setting; and
  - Includes the name, address, license number, and telephone number of the legally qualified professional who is rendering the opinion.

### P. Admission Policies and Procedures

Children are admitted into the program based on need and family income adjusted for family size.

Highest priority goes to children with need for protective services and/or having lowest income.

When a parent seeks services, the Site Supervisor/Assistant Director or Comprehensive Services Team member collects family information from the Waiting List Pre-Registration form (CSB690). The child is placed on CLOUDS upon applying for child care services.

As openings become available, names are drawn by rank from the CLOUDS waitlist for the various program options in accordance with the approved selection criteria/admission priorities.

If multiple families have the same rank, the family waiting the longest period of time is selected first. CSB makes available 10% of its federally funded spaces for children with disabilities and gives priority for its unlimited over income allotment to these children (also 10% of its funded slots).

Children will not be denied when a family needs less than full-time services.

Families who have been recruited for admissions to the program will be required to complete an application and provide supporting documentation. These documents must be of the current year, verification of income, shots, and birth certification of the child applying for enrollment.

Letters informing the family of acceptance or denial for services must be sent once certification is complete. The family has the right to dispute the denial of services by providing additional information to prove eligibility to receive services. Re-Certification may happen anytime the family's situation changes and requests that new documentation be reviewed. Any changes must be reported by the family within 5 days.

#### Q. General Admission Procedure

When an opening occurs in the center, the Site Supervisor will call the parent with the highest rank on the CLOUDS eligible list for an appointment for processing eligibility documents, noting any change of income and need for service. At this time, the parent receives an official Notice of Action (NOA) approving or disapproving state funded services. The NOA provides information outlining the parent's due process rights in a statement on the back of the NOA. Parents wishing to appeal an agency decision must follow the procedure carefully or void the right to appeal. Following the timelines is essential. Parents applying for a Head Start only slot sign the Admissions Agreement and Application but do not receive an NOA.

#### R. Children's Enrollment File

The Federal Regulations and the State of California require children's centers to maintain a file on each enrolled child including the following information:

- Birth Certificate to verify birth, age of child, gender and parents names. Information on date of admission, termination and re-enrollment.
- Names, addresses and phone numbers of parents and other relatives and/or friend that may be contacted in case of emergency.
- A Health History is completed by the parent to collect information on child's general health.

This and much more information is collected during one-on-one parent meetings, while assisting the parent to complete the enrollment packet and assisting the parent with health needs of the child or issues of the parent and household. Information must be updated and data entered into CLOUDS as it is received.

## S. Due Process Requirements

### 1. Notice of Action, Application for Services

The Site Supervisor's decision to approve or deny services shall be communicated to the applicant through a written statement referred to as a Notice of Action, Application for Services. The Site Supervisor shall maintain copies of the Notice of Action, Application for Services in the basic data file. The Notice of Action, Application for Services shall include: (1) the applicant's name and address; (2) the Site Supervisor's name and address or the name and telephone number of the CSB authorized representative who made the decision; (3) the date of the notice; (4) the method of distribution of the notice.

If services are approved, the notice shall also contain: (1) basis of eligibility; (2) daily fee, if applicable; (3) duration of the eligibility; (4) names of children approved to receive services; and (5) the hours of service approved for each day.

If the services are denied, the notice shall contain: (1) the basis of denial and (2) instructions for the parent(s) on how to request a hearing if they do not agree with the Site Supervisor's decision in accordance with procedures specified below.

### 2. Notice of Action, Recipient of Services

If, upon re-certification or update of the application, CSB determines that the need or eligibility requirements are no longer being met, or the fee amount of service needs to be modified, the Site Supervisor will notify the family through a written Notice of Action, Recipient of Services. The Site Supervisor will maintain copies of all Notice of Action, Recipient of Services in the family's basic file. The Notice of Action, Recipient of Services will include: (1) the type of action being taken; (2) The effective date of action; (3) the name and address of recipient; (4) the name and address of CSB; (5) the name and telephone number of the CSB authorized representative who is taking the action; (6) the date of notice is mailed or given to the recipient; (7) the method of distribution to the recipient; (8) a description of the action; (9) a statement of the reason(s) for the changes; (10) a statement of the reason(s) for termination, if applicable; and (11) instructions for the parent(s) on how to request a hearing if they do not agree with the Site Supervisor decisions.

### 3. Approval or Denial of Child Care and Development Services

The Site Supervisor will mail or deliver a completed Notice of Action, Application for Services to the parents within thirty (30) calendar days from the date the application is signed by the parent(s).

### 4. Changes Affecting Service

The Site Supervisor will complete a Notice of Action, Recipient of Services when changes are made to the service agreement. Such changes may include, but are not limited to, an increase in parent fees, an increase or decrease in the amount of services, or termination of service.

The Site Supervisor will mail or deliver the Notice of Action to the parents at least fourteen (14) calendar days before the effective date of the intended action.

To promote the continuity of child care and development services, a family that no longer meets a particular program's income, eligibility or need criteria may have their services continued if the Site Supervisor is able to transfer that family's enrollment to another program for which the family continues to be eligible prior to the date of termination of services. The transfer of enrollment may be to another

program within the same administrative agency or to another agency that administers state or federally funded childcare and development programs within that county.

#### T. Alternative Placement for Children

When terminating children from the state funded portion of the program, Site Supervisors are responsible for the following:

- Issue Notice of Action 14 days prior to termination date.
- Explain to parents their appeal rights.
- If parent does not appeal termination:
- Enter information regarding reason for ending services in CLOUDS Child Data Sheet. Date and initial comments.
- Change enrollment status in CLOUDS.
- Discontinue services on Family Data Sheet.
- Determine if child may return within the program year. If so, place child back on Eligible/Accepted List. If not, archive the CLOUDS record.
- Assist the family in finding an alternate placement for the child.
- If parent appeals termination, send appeal notice to Assistant Director and continue to serve child until informed to move forward with termination.

Head Start children that are deemed inappropriate for their current setting are always afforded an opportunity in another program option as space is available. If the parent is ineligible for Head Start or our state funded programs, they are to be referred to a partner site and/or to the county's resource and referral agency, Contra Costa Child Care Council (925-676-KIDS).

#### U. Client's Request for a Hearing and Procedures

If a parent in the state funded program disagrees with an action, the parent(s) may file a written request for a hearing with the Site Supervisor within fourteen (14) calendar days of the date the Notice of Action was received.

Upon the filing of a request for hearing, the intended action shall be suspended until the review process has been completed. The review process is complete when the appeal process has been exhausted or when the parent(s) abandons the appeal process.

Within ten (10) calendar days following the receipt of the request for a hearing, the Site Supervisor will notify the parent(s) of the time and place of the hearing. The time and place of the hearing will, to the extent possible, be convenient for the parent(s).

An Assistant Director, who will be referred to as "the hearing officer" will conduct the hearing. The hearing officer will be at a staff level higher in authority than the staff person who made the contested decision.

The parent(s) or parent's authorized representative is required to attend the hearing. If the parent or the parent's authorized representative fails to appear at the hearing, the parent will be deemed to have abandoned his or her appeal. Only persons directly affected by the hearing will be allowed to attend the hearing.



The Assistant Director will arrange for the presence of an interpreter at the hearing, if one is requested by the parent(s).

The Assistant Director will explain to the parent(s) the legal, regulatory, or policy basis for the intended action.

During the hearing, the parent(s) will have an opportunity to explain the reason(s) they believe the Site Supervisor's decision was incorrect. The Site Supervisor will present any material facts omitted by the parent(s).

The Assistant Director will mail or deliver to the parent(s) a written decision within ten (10) days after the hearing.

#### V. Appeal Procedure for CDD Review

If the parent disagrees with the written decision from the Site Supervisor, the parent has fourteen (14) calendar days in which to appeal to the CDD. If the parent(s) do(es) not submit an appeal request to the CDD within fourteen (14) calendar days, the parents' appeal process will be deemed abandoned and the Site Supervisor may implement the intended action.

The parent(s) will specify in the appeal request the reason(s) why he/she believes the Site Supervisor's decision was incorrect.

The parents must submit a copy of CSB's Notice of Action with the appeal request.

Upon receipt of the appeal request, the CDD may request copies of the basic data file and other relevant materials from CSB. The CDD may also conduct any investigations, interviews or mediation necessary to resolve the appeal.

The decision of the CDD will be mailed or delivered to the parent(s) and the Site Supervisor within thirty (30) calendar days after receipt of the appeal request.

#### W. CSB Compliance with CDD Decision

CSB will comply with the decision of the CDD immediately upon receipt thereof.

CSB will be reimbursed for childcare and development services delivered to the family during the appeal process.

If the Site Supervisor's determination that a family is ineligible is upheld by the State, services to the family will cease upon receipt by the Site Supervisor of the State's decision.

#### X. Retention of Enrollment Records

Delegate Agencies, the Grantee-Operated Program, and sub-contractor retain copies of official enrollment application forms, which contain certification data for each child enrolled during the program year for 5 years.

Copies of enrollment records serve as a primary source document for audit purposes.

Cooperation with local Contra Costa County welfare offices is encouraged for recruiting eligible children into the program.

#### Y. Enrolled But Waiting For Transfer Protocol

When staff has a child/family that wants to transfer sites:

- Comprehensive Services staff and site staff who learn about a family wanting to transfer communicate via email to all applicable SSs, CSAMs & Partners (as known or Partner CSAM) the need for a transfer. Make additional calls as necessary.
- Clearly and fully document the transfer in the case file on CLOUDS.
- Clearly and fully explain to the family about any changes they may experience as a result of a possible program model change at time of transfer to other center (ex: part-day to full-day - family must now show need)

When staff are searching to fill an open slot:

- Notify CSAM immediately upon determination that a slot will become available.
- CSAM check notes for any children that are enrolled but waiting for a slot.
- CSAM of current center reviews files for pending issues prior to transfer and communicates any issues to receiving CSAM. Transfer file to new center's Site Supervisor or designee.
- Site Supervisor completes 9600S and NOA. Also, collect any additional documentation required for program model change (see Eligibility and Need Criteria Documentation Checklists)
- Site Supervisor enrolls the child from CLOUDS.

#### Z. Transfer of Child with Disabilities or of Child Receiving Mental Health Services

When a child with disabilities or receiving mental health services transfers to another CSB site, communication is vital. The Comprehensive Services team member is responsible for notifying the Site Supervisor/Head Teacher and CS/Disabilities/Mental Health Manager in writing. Notification is to be sent before the child begins at another site so that necessary arrangements or accommodations can be made.

The Site Supervisor/Head Teacher will inform the appropriate teacher of the transfer. The Comprehensive Services team member and the CS/Mental Health Manager will complete this process within two weeks of notification of an opening.

#### AA. CSPP Full-day to Part-Day or Tuition Based Approval Process

##### 1. General Description

In the event that a family loses eligibility or need for services during the program year, CSB has the discretion to offer families the option to receive services part-day (less than 4 hours per day) or pay a fee for full-day services (Tuition Based) rather than terminate services. Part-day services could be offered in the child's same class or in another class during the "pre-school portion of the day" (8:30 – 12:00) as available. Whenever possible, the child will be allowed to stay in their current classroom.

CSB fiscal unit tracks CDE earnings monthly, and notifies program staff if the risk of under earning develops. If under earning is a risk, ADs cease to approve all moves to part-day until risk subsides according to reports from fiscal unit.

##### 2. Action Guidance for Staff

###### i. Full-day or $\frac{3}{4}$ time to Part-day

- Site Supervisor determines family no longer meets eligibility or need criteria (for more than 4 hours of care) and issues NOA for termination of full-day (or ¾ time) services effective 14 or 19 days as appropriate.
- The below process must be complete no later than the effective date of action noted on the NOA.
- Site Supervisor ensures that each class is fully enrolled morning and afternoon through enrollment and certified hours of care.
- Site Supervisor determines if part-day services are available during the preschool portion of the day (8:30 – 12:00).
- If available, the Site Supervisor and family determine if part-day services are desirable and appropriate.
- If desired by the family and appropriate, Site Supervisor completes approval form CSB607 (See CSB Forms).
- If part-day services are unavailable, not desired by the family or inappropriate, Site Supervisor terminates the child and closes the file.
- AD approves or denies CSB607 request, maintains original for her records and returns a copy to the site.
- If approved, Site Supervisor files copy in student file, updates CLOUDS (waitlist & re-enroll with new program model), and updates student file including the following and moves the child to part-day services on date on or after AD approval date and no later than effective date of NOA terminating full-day (or ¾ time) services.
  - Completed 9600S – update program model at least and hours of care, and other information as applicable
  - Income and family size remain as they were at original enrollment unless documentation of current income or family size benefits the family.
  - NOA stating change to part-day services - effective date is same as effective date for termination of full-day services (or before if desired by the parent).
  - Update CLOUDS hours of care.
  - Update CLOUDS program model (while retaining previous enrollment history), reason for needing care (if applicable), program option (if applicable) to “part-day center-based”, and any other appropriate updates.
  - Site Supervisor ensures child is reflected on appropriate 9400s for appropriate number of days during the month of the move.

ii. Full-day or ¾ time to Tuition Based (TB)

- Site Supervisor determines family no longer meets eligibility or need criteria (for more than 4 hours of care) and issues NOA for termination of full-day (or ¾ time) services effective 14 or 19 days as appropriate.
- Site Supervisor ensures that each class is fully enrolled morning and afternoon through enrollment and hours of care.
- Site Supervisor determines if TB services are available.
- If available, Site Supervisor and family determine if TB services are desirable and appropriate.
- If desired by the family and appropriate, Site Supervisor completes approval form CSB607 (See CSB Forms).
- AD approves or denies request, maintains original for her records and returns a copy to the site.

- If approved, Site Supervisor closes file and CLOUDS, completes all applicable paperwork and required forms, including an NOA stating termination of services and moves the child to TB services on first day after the end of the 14 to 19 day NOA waiting period.
- Site Supervisor ensures child is reflected on 9400 for only the appropriate number of days during the month until the date the move to TB services was effective.
- See section at end of this manual for Tuition Based services policies and procedures.

#### BB. Withdrawal of Child from the Program

When the teaching staff learns that a child has terminated services, they should note the “last day attended” on the child's application (9600) and the sign in/out sheet. They must also notify the CSAM immediately upon knowledge of a pending vacancy. Whenever possible, the reason for the withdrawal should be ascertained and recorded. The child's termination date in CLOUDS is the first date the child does not attend so that attendance data can be captured for the last day of attendance.

Parents who wish to reinstate must meet Title V Regulations. If the parents are successful in meeting the Title V Regulations, the parent must complete all required paperwork and provide income documentation.

The following are some reasons that a child might be placed back on the waiting list (please see Parent Handbook for a complete listing):

- A pattern of unexcused absences - Poor attendance / sporadic attendance is defined as three or more unexcused absences. When this occurs, the teacher calls the Site Supervisor, who makes personal contact with the parent as soon as they realized a child has not attended and the parent has not called. If multiple service needs are disclosed by a parent, he/she should be offered Case Management services in order to create a plan to correct the absenteeism. Every effort is made to assist parents in removing barriers to attendance.
- Parent's failure to comply with rules/regulations, resulting in danger to the health / safety of children / staff – (Must be approved by the Assistant Director)
- Parent's failure to comply with health requirements as mandated by Community Care Licensing.
- Extreme behavior problems in a child that may be harmful to the child or others (This must be based on a joint assessment by the CS / Disabilities / Mental Health Manager, and the Site Supervisor.)
- For General Childcare, a change in income or need eligibility status such that the family is no longer eligible for care.

When a child has been terminated from the program, the Site Supervisor will then call the Assistant Director, CSAM and teacher, notifying them of a new child replacing the terminated child. The Site Supervisor will call the parent of the terminated child, informing him/her that the child has been put back on the waiting list. If a terminated child is brought to school, the parent should be told to speak to the Site Supervisor.

#### CC. Attendance Expectations

##### 1. General Description

CSB children are expected to attend classes daily. Regular attendance is strictly enforced, and each center maintains documentation of all attendance/absenteeism activities. Upon registration, parents are oriented about enrollment/attendance policies.

Each parent receives a copy of the attendance policies, and the importance of regular attendance is stressed to them. Re-orientation of the enrollment/attendance policies occurs at the beginning of classes, and ongoing reminders are communicated as needed.

## 2. Unexcused Absences

After a child has been absent for two consecutive days, the center staff must contact the child's parents to determine the cause of the absence and to clarify the attendance policy.

After two days of unexcused absences from the center, the parent is contacted inquiring about the absences and clarifying the attendance policy.

After four consecutive unexcused absences, a conference with parents is called. Parents are informed that failure to attend the conference may result in their child being terminated from the program and placed onto the waiting list.

After ten consecutive or intermittent days of unexcused absences, the child is dropped from the active program and is put back onto the waiting list. (Children absent due to illness are counted in the Average Daily Attendance criteria.)

Site supervisor will check attendance sheets daily or at least three times a week to ensure attendance policies are implemented.

## DD. Attendance Accounting

### 1. General Description

Accounting for attendance is completed daily by the classroom teacher. Attendance is entered into CLOUDS weekly, and reports are utilized to ensure that each center maintains 85% monthly attendance for all federally funded slots. If the monthly attendance rate falls below 85%, the Site Supervisor will be notified by the ERSEA analyst and will utilize the CLOUDS absence reports to analyze the reasons and develop a corrective action plan that they submit to the Assistant Director and the ERSEA Analyst.

### 2. Procedure

Centers maintain attendance binders for each class as the primary source document for billing the funding source, for licensing and for audit purposes. This will be phased out when CLOUDS has approval by the California Department of Education.

Parents or their designee must sign children in and out of the centers daily and note the time of drop off and pick up.

A code is used consistently throughout the entire program to mark Present, Excused Absence, and Unexcused Absence. Absences are marked with an "A" and given the excuse provided by the parent in the comment section of the sign-in sheet. The teacher determines if the absence is excused in accordance with the excused and unexcused absence policies included herein. When absences are excused, the "A" is enclosed in a circle.

At the end of the month, the teacher reviews each attendance record and totals the days of attendance, excused and unexcused absences, and signs and dates the sheet before sending it to the Site Supervisor.

Parents are required to give the reason for a child's absence when the child returns to school and to sign the comment to authenticate it. On occasions where the child has not returned to school, the Site Supervisor fills in and signs the reason for absence after contacting the parent.

Attendance records are reviewed by the Site Supervisor and coded by program type and special need of the child where applicable.

Attendance sheets are alphabetized and collated according to special categories.

The Site Supervisor in programs funded by the State produces computerized reports for the various programs at the center. The report is entitled the CD 9400.

- The Site Supervisor completes and signs each page of the CD 9400s signifying that the entries match the children's attendance sheets.
- The Site Supervisor forwards the signed CD 9400s and attendance sheets to the Assistant Director for review.
- The Assistant Director reviews and signs off on the CD 9400s then submits the CD 9400s with attached attendance sheets to the Enrollment/Attendance Cluster Clerk by the 4<sup>th</sup> work day of each month for the preceding month.
- The Enrollment/Attendance Cluster Clerk reviews and signs off on the CD 9400s then submits the finalized CD 9400s to the Administration Office (Business Systems Clerk) by the 6<sup>th</sup> work day of each month.
- The Business Systems Clerk collects all the CD 9400s then reviews, signs and submits the CDFS 9500s and the CDFS8501 to the Fiscal Department by the 10<sup>th</sup> working day of each month.
- The Business Systems Assistant Manager prepares the CD 801A report and submits it electronically to the State CDMIS website by the 20<sup>th</sup> of every month for the preceding month.
- The Fiscal Department reviews the submitted CDFS 9500s and the CDFS 8501 then submits finalized report to the California Department of Education by the 20<sup>th</sup> of the month for each quarter.

### 3. Excused Absences

- Illness: Absences may be excused for illness of the child, parent, or any sibling. Illness absences lasting 3 or more consecutive days may require appropriate medical professional documentation.
- Family Emergency: Absences due to family emergencies may be considered excused absences. The reason for the family emergency must be specified in the sign in and out sheets. Any of the following reasons can be considered family emergencies:
  - Death of a family member.
  - Immediate need for medical health treatment of anyone in the family unit.
  - Any incident caused by a situation which results in the family having their normal schedule disrupted to the extent that the parent cannot safely accompany their child to the site (i.e., theft, fire, flood, arrest and/or incarceration of a parent, or any other similar situations)
- If regular means of transportation to school is disrupted, and no alternative, i.e. public transportation is available.
- Any other situation at the discretion of the site supervisor.
- Best Interest Days (BID): Absences may be excused for the "best interest of the child" which would include time for a child to be with a parent or relative (i.e. vacation or visitation with non-custodial parent, a court-mandated visit, or participating in cultural or religious holidays). Other

requests for BID are at the discretion of the Site Supervisor. BID absences are limited to ten (10) days per program year per child, with the exception of children who are recipients of protective services or are at risk of abuse or neglect. Proof of such services must be documented in the child's data file. The reason for the "Best Interest Day" must be specified in the sign in and out sheets.

- Exclusion due to unmet health requirements: Children must be excused for immunizations that are not up-to-date or a physical or TB clearance that is not received within 30 days of enrollment. Parents are allowed one extension beyond the 30 day requirement with proof of an appointment on file. Children are permitted up to three days of excused absences. After that, a Notice of Action (as applicable) will be issued for termination from the program.

#### EE. Title XXII Requirements for All Children

Record of "up to date" immunizations must be on file before children can attend. A complete physical examination by the child's physician is required within 30 days of admission. A form is provided at the intake interview for use by the family physician. An immunization record authorized by a Medical Doctor or a Registered Nurse must be shown. The Site Supervisor or Comprehensive Services staff will review and file a copy at the time of enrollment. Immunizations must be kept current while the child is attending the centers. The Site Supervisor or Comprehensive Services staff member notifies parents when immunizations are due. Children whose immunizations are not kept up to date will be excluded from the center until they are brought up-to-date, unless there is a medical waiver on file.

Although TB clearance must be obtained within thirty days of admission, the physical must also have indicated the result of the TB screening on the child's record.

Children may be eligible for a free physical through the Child Health Disability Prevention Program. Parents should be encouraged to discuss this option with the Site Supervisor or Comprehensive Services staff member.

Enrollment information is kept confidential from all but: (1) authorized program staff, (2) California Department of Education program evaluators (3) authorized public officials. Information will not be released without parental permission, except as mentioned above.

Children with disabilities are accepted by the centers when CSB is able to obtain appropriate documentation to determine the child's needs. CSB will work with the family to make all reasonable accommodations for the child. CSB complies with ADA and IDEA.

#### FF. Fees for Non-Head Start and Early Head Start Funded Programs

##### 1. Purpose

The purpose of these procedures is to document the process of billing, collecting, and depositing of childcare fees in accordance with County policies and the State's Funding Terms and Conditions related to child development programs.

##### 2. County Administrative Bulletins

Community Services Bureau shall comply with the requirements set forth in Administrative Bulletin Number 205 regarding cash collections procedures.

##### 3. Fee Assessment

i. CSB shall use the current fee schedule prepared and issued by California Department of Education for child care programs funded by the State. If more than one child in a family is participating in the state

funded program the family's fee shall be assessed and collected based on the child who is enrolled for the longest period in a day. If the children are located at different child care centers, the fee shall be collected by the center in which the child who is enrolled the longest period in the day is enrolled.

For Fee for Service Program (Tuition Based), CSB shall use the monthly rate approved by the County Board of Supervisors.

#### ii. Exclusions from Fee Assessment

- The exclusions shall apply only to State-funded child care programs.
- No fees shall be collected from families with an income level that, in relation to family size, is less than the first entry in the fee schedule.
- Families receiving services because the child is at risk of abuse, neglect, or exploitation, may be exempt from paying fees for up to three months if the referral prepared by a legally qualified professional from a legal, medical, or social services agency, or emergency shelter specifies that it is necessary to exempt the family from paying a fee. The cumulative period of time that a family may be exempt from paying a fee for this reason shall not exceed 12 months.
- Families receiving services because the child is receiving protective services may be exempt from paying fees for up to 12 months if the referral prepared by the county welfare department, child welfare services worker specifies that it is necessary to exempt the family from paying a fee. The cumulative period of time that a family may be exempt from paying a fee for this reason shall not exceed 12 months.
- In accordance with the State's Management Bulletin 09-18, all families that currently receive a CalWORKS grant on behalf of the children will not be assessed a fee. Former CalWORKS grant recipients are not included in this exemption.

#### iii. Credit for Fees Paid to Other Service Providers

This section shall apply only to State-funded child care programs.

- When CSB cannot meet all of the family's needs for child care for which eligibility and need have been established, CSB shall grant a fee credit equal to the amount paid to the other provider(s) of these childcare and development services. CSB shall apply the fee credit to the family's subsequent fee billing period. The family shall not be allowed to carry over the fee credit beyond the family's subsequent fee billing period.
- CSB shall obtain copies of receipts or cancelled checks for the other child care and development services from the parent. The copies of the receipts or cancelled checks and a complete and signed CSB Fees Rendered Form shall be maintained in the parent's fee assessment records.
- The copies of the receipts or cancelled checks and a complete and signed CSB Fees Rendered Form are due by the first day of the month. Fees due shall be considered delinquent if this documentation and any remaining fees owed are not collected within seven (7) calendar days.
- Copies of the receipt or cancelled check shall include the following: name of the other service provider, amount of payment, date of receipt or payment, the period of child care services covered by the payment, name of the parent, and name of the child who received childcare from the other service provider.

#### GG. Billing Procedures

Child care fees are paid in advance. One week before the end of each month, each Center shall submit to the Fiscal Unit a Billing Worksheet that contains following information:

- Name of the parent or guardian



- Name of the child enrolled
- Funding category of the program where the child is enrolled in.
- Total number of school days in the billing month
- Daily rate determined by the Site Supervisor based on State's fee schedule (for child development contracts) or county approved rate (for fee for service program)
- Total amount assessed
- Collections made in prior month
- Comment section for effective date of the daily rate, last date the child will attend the day care, and other pertinent information that affects the calculation of monthly billing.

No adjustments shall be made for excused or unexcused absences. The parent or guardian shall pay the total amount billed if the child is absent regardless of the reason during the billing month.

Periodic review of billing information – Assistant Directors shall reconcile or perform independent review from the participant's files to the billing report to ensure all parent fees are billed correctly.

Fiscal staff shall input the information from the Billing Worksheet to QuickBooks in order to generate the Monthly Invoice and Statement for the following month. The Invoice and Account Statement shall be sent to the Site Supervisor for distribution to fee paying parents by the first of the following month.

Child care fees are due by the first of the month. They shall be considered delinquent if not paid within seven (7) calendar days.

If account is delinquent at the close of business on the seventh calendar day, a Notice of Action shall be issued to inform the family of the following:

- The total amount of unpaid fees
- The fee rate
- The period of delinquency

That services shall be terminated fourteen (14) to nineteen (19) calendar days (depending on method of issuance) from the date of the Notice of Action unless all delinquent fees are paid and/or documentation of credit for fees paid to other service providers is collected before the end of the 14-19 day waiting period. The 14 day period pertains to NOAs that are hand delivered to the parent; the 19 day period pertains to NOAs that are delivered to the parent via the US Postal Service.

If the family is unable to pay their fee the program shall accept a reasonable plan from the parents for payment of delinquent fees. The plan must be developed before the end of the 14-19 day waiting period and shall not exceed 4 months to repay the full amount of delinquent fees. The center shall continue to provide services to the child provided the parents make a minimum "good faith" payment of at least 10% of the total delinquent fees at the time the plan is developed, pay their full assessed monthly fees when due and comply with the provisions of the repayment plan. The Delinquent Child Care Fee Repayment Plan Form can be printed from MyCSD under 0600 Enrollment of Electronic Forms.

- Agency staff shall submit the repayment plan to their Assistant Director or Partner Agency Director for approval before finalizing the plan. Once approved, the originals of the termination

NOA and repayment plan shall be filed in the family file and copies shall immediately be provided to CSB Fiscal and the center's Assistant Director or Partner Agency Director.

- Upon termination of services from non-payment of delinquent fees, staff shall make this indication in CLOUDS, and the family shall be ineligible for childcare services until all delinquent fees are paid.

Center staff shall make reasonable attempts to collect unpaid fees from terminated families through letters and phone calls.

- Attempts shall be documented and copies of letters shall be maintained in the family's file
- If unpaid fees are collected, staff shall send the collected fees, the pre-numbered receipt and a copy of the termination NOA to CSB Fiscal.
- If unpaid fees have not successfully been collected after making several attempts to do so staff shall send to CSB Fiscal copies of the termination NOA and letters and case notes regarding attempts to collect.
- All attempts to collect unpaid fees must be made within 45 days of termination.
- Documentation of attempts and the termination NOA are due to CSB Fiscal not more than 45 days after termination.

#### HH. Fee Collection Procedures

- Each center shall collect checks, money order or cashier check from the parents. Cash is not acceptable mode of payment. A designated center staff shall issue signed receipt to the parent for the amount collected. At CSB centers this person must be a county employee, and may not be temporary staff. The designated staff shall be accountable for the money received and such money shall be stored in a locked cash box placed in a secured area of the center.
- Center staff shall process all collected fees immediately. At least once weekly, or if fee collections exceed \$50, the designated staff shall deposit the money to the County Wells Fargo Bank account. Immediately following the deposit designated staff shall submit a copy of the receipt(s) issued to the parent(s), a copy of the Deposit Slip and Original Bank Receipt to the Fiscal Unit.
- Fiscal staff shall check copies of Receipts to make sure that total amount agrees to Deposit Slip and Bank Receipt amounts.
- Fiscal staff shall enter the payment information to QuickBooks in order to update parent accounts. Receipts shall be stamped "Posted" and filed in numeric order by Center.
- Fiscal staff shall code the collected family fees accordingly and input the data in the county's Electronic Deposit Permit system.
- Fiscal staff shall file the Deposit Slip, Bank Receipt and print out of Validated Deposit Permit in the Deposit binder.

#### II. Receipts/Banking Procedures

The S-Receipts issued to parents shall be in quadruplicate (4 copies).

- Take the hard cardboard piece from inside the back cover of the book to use between the series of S-receipts.
- Give the original S-receipt (yellow copy) to the parent and send the duplicate (white) copy of the S-receipt to the Fiscal Unit with the duplicate (pink) deposit slip and original (white) bank receipt (the transaction record).
- The golden copy of the S-receipt shall be put in the parent's file at the site.

- The pink copy of the S-receipt shall stay in the S-receipt book and the entire book shall be sent to the Fiscal Unit when a new S-receipt booklet is needed.
- The original (yellow), white and golden copies shall be sent to the Fiscal Unit even if an error is made that resulted in the voiding of the S-receipt. Write "VOID" across it. The voided S-receipt must be signed and dated by the Site Supervisor. The reason for the void must also be written on the S-receipt.
- For credit for fees paid to other service providers, the center staff shall send to CSB Fiscal a copy of the receipt or cancelled check paid by the parent to the other child care service provider. The Site Supervisor shall attach these receipts or cancelled checks to the signed Fees Rendered Form and submit to CSB Fiscal Unit. The Fees Rendered Form can be printed from MyCSD under 0600 Enrollment of Electronic Forms. The form should be properly filled out and the credit amount should be equal to and no more than the amount paid to the other provider and shall not exceed the parent fees billed during the month.

#### JJ. Confidentiality of Records

The use or disclosure of all information pertaining to the child and his/her family will be restricted to purposes directly connected with the administration of the program. The Site Supervisor will permit the review of the basic data file by the child's parent(s) or parent's authorized representative, upon request and at a reasonable times and places.

## **II. Staffing Requirements**

### **A. Program Director**

Community Services Bureau operates at two (2) or more sites; therefore CSB will employ Program Directors that have administrative and programmatic responsibility for the program. The Program Directors will meet the California Department of Education requirements.

The California Child Development Division (CDD) may waive the qualifications for program Director upon a finding of one of the following:

- The applicant is making satisfactory progress toward securing a permit issued by the Commission on Teacher Credentialing authorizing supervision of a childcare and development program operating in two (2) or more sites or fulfilling the qualifications for program Directors in severely handicapped programs.
- The place of employment is so remote from institutions offering the necessary course work as to make continuing education impracticable, and the contracting agency Director has made a diligent search but has been unable to hire a more qualified applicant.
- Any other reason established by the rules of the Superintendent of Public Instruction.

### **B. Site Supervisor**

At each site, there will be a person designated as the Site Supervisor who has operational program responsibility for the program. A Site Supervisor will meet the requirements established by the California Title V Regulations and the California Commission on Teacher Credentialing.

The CDD will grant a waiver of this requirement upon the program's demonstration of the existence of compelling need. Factors the CDD will consider in determining compelling need are as follows: (1) evidence that the program's recruitment efforts have been successful in obtaining qualified applicants; (2) evidence of the program's inability to offer competitive salaries; and/or (3) evidence of potential or current staff's lack of reasonable access to training resources which offer required course work.

### **C. Teacher**

Master Teachers, Teachers and Associate Teachers will meet California Title V Regulations as listed on the California Teacher Credentialing Permit Matrix and the Early Head Start and Head Start degree requirements as specified by the Head Start Act of 2007.

### **D. Applicability of Staffing Requirements**

CSB is not subject to regulations under CCR, Title V, and the laws upon which those regulations are enforced if subsidized children comprise less than a majority of the enrollment at a given center. If there are no facilities in the area to meet the special needs of particular children, then the CDD may, upon request, waive its regulations in the area for staffing and ratios for programs in which subsidized children comprise a majority of the enrollment.

### **E. Staffing Ratios for Site Supervisors or Teachers**

CSB Site Supervisors shall maintain at least the following minimum ratios in all centers:

- Infants (birth to 18 months old) – 1:3 Adult to Children; 1:18 Teacher to Children (with no more than eight infants in a group)
- Toddlers (18 months to 36 months old) – 1:4 Adults to Children; 1:16 Teachers to Children (with no more than eight toddlers in a group)

- Preschool (36 months to kindergarten enrollment) – 1:8 Adults to Children; 1:24 Teacher to Children

Compliance with these ratios shall be determined based on actual attendance.

Whenever groups of children of two age categories are co-mingled and the younger age group exceeds 50% of the number of children present, the ratios for the entire group must meet the ratios required for the younger age group. If the younger age group does not exceed 50% of the total number of the children present, the teacher-child and adult-child ratios shall be computed separately from each group. Except as otherwise provided in Title 22 California Code of Regulations, Community Care Licensing Standards, the program may exceed teacher-child and adult-child ratios by 15% for a period of time not to exceed 120 minutes in any one day.

#### F. Comprehensive Services

The program is supported at all times by the following personnel:

- A health services content area expert who is trained and experienced in public health, nursing, health education, maternal and child health, or health administration. Additionally, when a health procedure must only be by a licensed / certified health professional, the agency will ensure that this requirement is met.
- A nutrition services content area expert who is a registered dietician or nutritionist.
- A mental health services content area expert who is a licensed or certified mental health professional with experience and expertise in serving young children and their families.
- A parent, family and community engagement content expert who is trained and experienced in field(s) related to social, human, or family services and who is skilled in assisting parents of young children in advocating and decision making for their families.
- A disabilities services content area expert who is trained and experienced in securing and individualizing needed services for children with disabilities.

### III. Business Systems

## A. Overview

The Business Systems Unit supports the operation of CSB programs by ensuring that CSB has:

- Safe, secure facilities.
- Technology and related services to effectively manage work.
- Safe transportation for travel as necessary and available.
- Grant writing leadership and support.
- Ongoing monitoring, planning, and communication systems.
- Equipment and supplies necessary to operate a quality program; and
- Forums for sharing ideas and implementing continuous improvement.

## B. Facilities

### 1. Physical Environment and Facilities

Both the CSB and their designated contractors shall endeavor to operate offices and childcare centers that are free of exposure from toxins such as cigarette smoke, pesticides, herbicides, lead, and other air pollutants as well as contaminants from the soil and the water.

Smoking is not permitted under any circumstances on the premises of the centers and is posted as such. Anyone found bringing in a lighted cigarette or cigar shall be directed to immediately leave the office/center until the item has been safely extinguished outside of the building.

No center or office shall be sprayed with herbicides or pesticides when children or staff is present. Each center has a thermostat that must maintain a minimum of 68 degrees F. and a maximum of 85 degrees F.

All plumbing fixtures must be sanitary, safe and in working condition at all times, including hot and cold water availability (a minimum of 105 degrees F. and not to exceed 120 degrees F) and may not serve more than 15 children.

#### i. Children's Centers-Outdoor Environment

The outdoor space must be safe and free from hazards at all times. Each morning, before the children go outside, the Site Supervisor or designee must assess the entire outside area including the sandbox, climbing area, playground surfacing, fences and any other area in use by the children to ensure compliance with state and federal health and safety requirements. This is done by using the "Outdoor Health and Safety Checklist".

If there are hazards on the playground, the Site Supervisor must:

- Assess what needs to be done immediately to fix the hazard. If he/she is unable to fix the situation immediately, he/she must make alternate space for the children until the situation is fixed.
- Report the hazard to his/her immediate supervisor.
- Complete a Facility Work Request after receiving approval from the Site Supervisor.
- In centers with infants, toddlers and preschoolers, the age groups must be kept separated at all times.

#### ii. Children's Centers-Indoor Environment

The indoor space must meet applicable state and federal regulations at all times. Each morning, the opening staff member(s) must conduct an indoor health and safety check to ensure the facility is ready for children.

### iii. Infants Environment

The indoor and outdoor spaces for infants must be separate from areas for children of differing ages. Inside it can be a separate room or separated by moveable walls or partitions that have correct square footage in each area. The moveable walls or partitions must be at least four feet high, made of sound absorbing material and designed to minimize injury to infants.

The calculation of the indoor space does not include the space used by cribs. The sleeping area must be physically separate from the activity area. This can be accomplished by having a separate room or with the partitions described above.

## 2. Building Security/Alarms and Maintenance

### i. Building Closure

Procedures are established at each site based on whether they have an Electronic Access System and/or Building Security Alarm. Each site is responsible for developing and enforcing a building opening and closing procedure. The Site Supervisor or senior staff member is responsible to see that all appropriate staff are informed and trained on the procedure to lock the building and arm the alarm (if applicable). Information on how to contact the alarm company and who to contact for after hour emergencies is posted at the alarm panel.

### ii. Building Security Alarms

Building security alarms are turned on by assigned staff when leaving the site at the end of the day and turned off at the beginning of the day. If there are problems with arming or disarming the system, staff call the alarm monitoring company at the phone number shown at the arming station. If assistance cannot be provided over the phone, an alarm technician will be sent to the site. If error codes are present but the system is functioning, staff submit an electronic work order to Facilities stating the error code.

The Security system performs a self test and displays a trouble code for any required maintenance on a daily basis. An emergency contact list is provided to the alarm monitoring company of staff to contact in case of an alarm being triggered after hours.

### iii. Fire and carbon monoxide monitoring systems

Fire and carbon monoxide monitoring systems are tested annually by the local fire authority and inspection reports are kept on site. Any identified deficiencies must be repaired and pass re-inspection. Repair work orders are submitted electronically to Facilities by the Site Supervisor along with a copy of the Fire Inspection Report on the day of the inspection.

Trouble codes are sent from the alarm system to the monitoring company which alerts the fire department. When an alarm sounds staff evacuate the building to the designated evacuation area and wait for emergency personnel.

### iv. Exterior door alarms

Exterior door alarms are located at the top of the door and are to remain active in the “On” position at all times. Alarms can be over-ridden by use of a key to turn the alarm to the “Off” position to open the door for transition to and from a classroom.

The Site Supervisor will submit a work order to Facilities the same day as problems occur, for example the alarm not sounding when the door is opened without turning the key to the “Off” position. The exterior doors alarms are battery operated and beep when a battery becomes weak. Facilities Building Services Workers will replace batteries within 24-hours of receiving a work order request notifying them of a low battery alert.

The Safety Officer performs a test of exterior door alarms as part of the monthly health and safety checklist and all problems are reported to Facilities immediately through submission of an electronic work order request.

#### v. Alarmed Push Bars on Half-doors

Alarmed push bars on half-doors are located in building entrances and must be armed at all times. The Safety Officer tests all half-doors in the facility as part of the monthly health and safety checklist and all problems are reported to Facilities immediately through submission of an electronic work order request. The Site Supervisor will submit a work order the same day as problems occur, for example by the alarm not sounding when a door is opened when pressing on the bar, or if the alarm does not reset after the door is closed. A half door that is armed will show a red light on the alarm panel. No light or a green light indicates the alarm is not set. To activate the alarm: the key is turned to the off/green light position, staff waits 30 seconds, and then turns to the on/red light position. Keys to the doors are to be kept out of the reach of children at all times and in a discrete location from visitors. Staff is to demonstrate proficiency in arming the system. Facilities staff will review and provide training on arming the doors upon request.

Centers with alarmed push bars on playground gates are to include the testing of the gates in the monthly Health and Safety checklist. Playground gates do not have alarm panels with lights and are armed at all times.

#### vi. Electronic Access Card Systems

Electronic access card systems on exterior entry doors maintain the security of the facilities by limiting access. Staff is issued electronic access cards to sites that work like electronic keys. Exterior doors remain locked from the outside while allowing staff access with their electronic card. The cards are also printed with staff names and photos to be used as identification cards. If an electronic access card is lost or stolen it will be promptly deactivated to maintain the security of the facility. Repairs to access card systems are rarely needed and are made when issues are reported by the Site Supervisor to the Facilities unit through an electronic work order request.

#### vii. Keys

Keys for entry to Community Services Bureau buildings will be furnished by Business Systems per request of Site Supervisor or employee’s supervisor.

At time of issuance of keys, the employee will be requested to sign in copy of the Portable Media/Access Policy and key sign out sheet.



Upon receiving access to any of the site keys, the staff member is responsible for safe keeping the key and its use as well as to ensure that all building doors are secured prior to leaving the building. Keys are not to be loaned or made available to others and any lost or stolen keys should be reported to Business Systems immediately.

For more information, refer to Portable Media/Access Device Policy.

#### viii. AiPhone (Video/intercom) Systems

AiPhone systems are used at some sites to allow staff to easily allow access to families while keeping the facility secure. Visitors to a center press the buzzer outside the entrance and are greeted over the intercom. When they are visually identified the door is unlocked.

#### ix. Video Surveillance Systems

Video surveillance systems operate 24 hours a day 7 days a week. The Site Supervisor monitors the surveillance cameras daily and confirms cameras are directed to show a clear unobstructed view of the classrooms, entrances, and playgrounds. Any obstructions to the view or misdirected cameras are reported to Facilities through an electronic work order request by the site supervisor the same day as they occur. The Facilities staff will check the video feed from their location and report the problem immediately to General Services. The facilities unit will work with General Services to make any necessary repairs within 24 hours of the reported problem.

Requests for video footage are made to Facilities by the Site Supervisor or senior management staff through an electronic work order request. Requests must be made as soon as possible as the system retains footage for only a few days to a week.

### 3. Acquiring Space

The Policy Council must be consulted on the location of space acquired for the program's use. Space acquired must meet all applicable local ordinances for both classroom and office use. Additionally, all space acquired for classroom use must meet all state and federal regulations. Negotiation of leases is delegated to Contra Costa County Lease Management, and lease costs must be within budgeted amounts designated for such expenditures. Lease Management prepares/finalizes all leases for the Assistant Director's signature. Also, the Business Systems Manager or Division Manager must approve/sign all leases negotiated for CSB.

### 4. Use of County Facilities

The use of county facilities is covered by the following regulations:

- Use of County building space by private organizations is regulated by inter-agency agreement.
- Departmental officials may make arrangements for posting official announcements on County bulletin boards through the General Services Department. Use of County bulletin boards by private organizations for advertising, except as provided by ordinance for employee organizations, is prohibited.
- CSB program managers are responsible for County facilities and property used by employees under their jurisdiction. While controlling and administering use of space/facilities, managers must see that employees do not introduce material which others would find objectionable / offensive for reasons such as different social, political, religious, or moral beliefs.
- Solicitation of contributions and sale of merchandise within County buildings except for purposes authorized by the Board of Supervisors is prohibited.
- Restrooms and lounge facilities are provided for employee use.

- CSB classrooms and offices are not to be used as lunch or coffee rooms.
- All facilities serving children must meet applicable state and federal regulations pertaining to health, safety, and developmentally appropriate practice.

#### 5. Document Posting

Before classes begin each program year, the Site Supervisor obtains and assures the proper posting or filing of the following documents at each facility and/or classroom:

- Evacuation Plan
- Fire / Earthquake Drill Schedule
- Emergency Guidelines for Illness and Accident First Aid Manual
- Emergency phone numbers for fire, police, paramedics, nearest emergency hospital, poison control center, physician, and administrative office
- Parents' Rights Form
- Children's Rights Form
- No Smoking signs
- Employee Safety Policy Statement
- Current license
- Any other document mandated by the state or federal government.
- Note: Children's contact numbers are never to be posted.

#### 6. Safety Officer

For each building which houses CSB personnel, a safety officer has been designated. General responsibilities of safety officers are to:

- Complete monthly health and safety checklist.
- Instruct co-workers in emergency procedures.
- Assume control during an emergency.
- Keep track of persons assigned to each building.
- Know the conditions under which a building should be evacuated.
- Know what procedures/equipment is available for the evacuation of handicapped persons.
- Know the location of all primary and alternate building exits and know direct routes to each exit.
- After evacuating a building, search to make certain all individuals have left.
- When emergency responders arrive, report to them any injured person requiring special attention.
- Call roll at the evacuation assembly area and report missing persons to emergency responders.
- Know the location of all fire alarms and fire extinguishers.
- Know how to operate fire extinguishers.
- Know the location of all first aid and emergency kits.
- Know first aid and CPR.

#### C. Use of Technology

CSB utilizes a variety of technology throughout the bureau and is supported by the Contra Costa County Department of Information Technology.

#### 1. Business Systems Re-engineering Committee (BARC)

BARC is comprised of a cross-section of staff with the following charter: to create business systems that maximize automation and efficiency by using streamlined processes that eliminate duplication,

maximize output, and lend themselves to order resulting in easily and readily accessible information that drives quality programming.

## 2. Child Location Observation Utilization Data System (CLOUDS)

CSB uses CLOUDS as its management information system. Staff are required to keep the system up-to-date in accordance with their respective roles in the organization. These roles are detailed in these policies and procedures in each service area. In addition, teachers are responsible for ensuring that parents sign their child in and out electronically. Manual systems are in place for back-up purposes.

### i. User Support

CLOUDS user manuals are posed on the CSB intranet and in the Shared Drive ([S:\CLOUDS](#)) that detail how to use the system. In addition, training is provided in an ongoing fashion via user groups. New staff are assigned a mentor user to orient them to the system.

### ii. Ongoing System Enhancements

All system enhancements must be requested via the content area expert for the respective portion of the system. Content area experts formally request the enhancement to be placed in the project queue via the CSB Resource Center on the CSB intranet. Enhancement requests must include attachments with screen shots and indicate the level of priority with a justification for the priority level. The Business Systems Manager will evaluate all requests and notify requestor of final decision regarding placement in the project queue. As enhancements are developed, content area experts are required to test them and then to inform staff regarding proper usage of enhancement. User manuals will be updated with finalized enhancements by the vendor.

## D. Equipment and Supplies

### 1. Procedures for Ordering Materials - Employees and Supervisors

#### i. General Description

An employee or supervisor has alternatives for obtaining non-emergency material or services. These are:

- Office Supplies - Approved ordering staff at each location prepare an on-line order form. CSB has an approved shopping list of discounted items that should be utilized whenever possible. Items can be added from the general catalog if they are not on the approved list. The completed order is sent electronically to the Assistant Director for approval and submission to the office supply company. Ordering staff can track their order progress on-line.
- Classroom Supplies – Requests for classroom supplies are sent from the Site Supervisor to their Assistant Director for approval. The designated Assistant Director orders classroom supplies for all sites.
- Health / Janitorial Supplies – All health and janitorial supplies may be ordered on an on-line Supply Order Form. Supply orders should be completed on a monthly basis by the Site Supervisor and are approved by the Assistant Director. The order is then sent electronically to the Purchasing Unit for processing.
- Open Purchase Order - The County has established a number of Open Purchase Orders (POs) with vendors in the area authorizing certain persons to pick up material and charge it to the CSB account.

If you wish to order materials from these vendors, submit a purchase requisition to your supervisor for approval of the Assistant Director. If approved, it will be forwarded to a person authorized to purchase

material under the Open PO by credit card or other arrangement. If an order is over \$5,000 it must be signed by the Division Manager.

After the purchase is made, the requisition and the vendor's receipt will be forwarded to the CSB Accounts Payable Unit. When the bill is received, the Accounts Payable Clerk will match it to the approved requisition and receipt prior to payment. CSB has established Open Purchase Orders with many vendors. A current list can be obtained from Fiscal. If you are making a large number of purchases from a vendor that does not have an Open PO you may request that one be established by contacting the purchasing clerk.

CSB Requisition - If there is no Open PO available for the material required, you must submit an approved CSB purchase requisition to your division's purchasing clerk. After a purchase is made, the requisition and packing receipt must be forwarded as soon as possible to CSB Accounts Payable Unit. When the bill is received the Accounts Payable Clerk will match it to the approved requisition and receipt for payment.

#### ii. Purchasing Procedures - Purchasing Clerks

Purchasing clerks are located in the CSB Administrative Office and are responsible for processing all department requisitions. Once the purchasing clerk receives a CSB requisition he/she has several options of procurement methods depending on the situation. Below is a description of the methods available to the purchasing clerk.

- Warrant Request - CSB can normally use a Warrant Request to purchase items with a total cost under \$500. This form needs to be signed by the requester and an authorized manager. This procedure is faster than a purchase order as it does not need to be processed by County Purchasing.
- CSB cannot use a Warrant Request to purchase any item that can be purchased using an open purchase agreement. In addition, the following items cannot be purchased using a warrant request:
  - Furniture
  - Printing Services
  - Appliances
  - Professional Services
  - Cellular Telephones
  - Building Related Charges
- County Requisition (Form REQ) - For vendors not having an Open PO, or not qualifying for a Warrant Request, items are purchased using an approved Purchase Order. The purchasing clerk completes a County Requisition form based on the submitted requisition form and forwards it to the General Services Purchasing Division for preparation of a Purchase Order.

There is no dollar limit for a Purchase Order however it can be an extensive process as it may have to go through the County's procurement process and involve soliciting competitive bids and awarding of the contract to the lowest qualified bidder depending on the dollar amount of the proposed contract.

It should be noted that, when time is critical, CSB might ask the Purchasing Division for a PO number. If they agree, CSB is allowed to make the purchase without the normal process.

- Equipment Definition / purchase of equipment must adhere to both Grantee policies and guidelines outline in the Contra Costa County Head Start Administrative Manual. (For local purposes, "equipment" is defined as any purchase costing \$5,000 or more.) Any equipment/equipment purchase not identified in the annual grant (or subsequent applications)

must receive Policy Council, Regional, and Executive Director's approval. Such requests must be made prior to the end of the Head Start fiscal year (by December 31<sup>st</sup> of each year). Equipment funded in part or wholly through CA Department of Education must have prior approval on any single item of \$5,000.

- Supplies  
Supplies purchased for CSB programs must be deemed necessary and appropriate by the Bureau Director. (The process for expenditures of funds for supplies is outlined in the procurement procedure on file in the fiscal office. It must be followed.) All expenditures of funds must be approved by the Program Director.

## 2. CSB Equipment, Toys, Materials, and Furniture

### i. General Description

CSB sites must provide clean sheets and blankets for children's use at naptime to be washed each week or as needed. If there are not sufficient sheets and blankets, the Site Supervisor must notify the Assistant Director immediately.

All play structures and equipment used by the children must meet the following requirements:

- Age and developmentally appropriate.
- Maintained in good condition.
- In sufficient quantity to allow full participation.
- Free of health and safety hazards.
- Free of toxic substances.
- If any material in the environment does not meet the above standards, it must be removed immediately or deemed off limits to the children until it can be safely removed.

### ii. Infant Furniture

The infant equipment and furniture, inside and outside, must be developmentally appropriate and include cribs, cots or mats, changing tables and other necessary equipment. The type, height, and size of all furniture and equipment must be age appropriate. There must be a variety of age appropriate washable toys and equipment.

CSB does not use swings, playpens, walkers or high chairs. Walkers may not be kept on the premises. Equipment that is assembled when purchased must not be modified, and if assembly is needed, it must be assembled according to the manufacturer's instructions.

Supplies containing toxic materials or substances shall not be purchased and used on the centers. All equipment and furniture must be maintained in good repair and safe condition and disinfected after each use. Equipment must be safe and must not have sharp points or edges or splinters, or be made of small parts that can be swallowed.

Toilets and hand washing sinks must be in close proximity to the activity areas.

Infant changing tables must:

- Have a padded surface no less than one-inch thick and be covered with washable vinyl or plastic
- Have raised sides at least three inches high
- Be maintained in good repair and safe condition
- While in use, be placed within arm's reach of a sink

- Not be located in the kitchen/food-preparation area

Toy storage containers must meet the following requirements:

- Lids and the hardware used to hinge lids on boxes or chests must be removed
- All edges and corners must be rounded and padded
- The container must be well ventilated
- The container must be lockable
- The container must be maintained in good repair and safe condition
- Metal and wood boxes must not have sharp or splintery surfaces

Pacifiers must have a shield or guard large enough that the child cannot choke. Rattles must be large enough that they cannot become lodged in the infant's throat and constructed so that they will not separate into small pieces.

It is recommended that all infant sites comply with the US Consumer Product Safety Commission advice for the selection and safe use of children's toys. Avoid toys with small parts. Look for the age recommendation on labels. Toys should be suited to the skills, abilities and interests of children.

### iii. Infant Napping Equipment

Each crib, mat or cot must be occupied by no more than one infant at a time.

For each infant who is unable to climb out of a crib, a standard size crib meeting the following requirements is provided:

- Slats must be no more than 2 and 3/8 inches apart.
- Tiered cribs are not allowed.
- Cribs must not limit the ability of the staff to see the infant.
- Cribs must not limit the infant's ability to stand upright.
- The mattress must be at its lowest position .
- Cribs will have stationary sides.

Crib mattresses must be:

- Covered with vinyl or similar moisture resistant material.
- Wiped with disinfectant daily when soiled or wet.
- Maintained in a safe condition with no exposed foam, batting or coils.
- Bumper pads must not be used at CSB facilities.

Each infant must have his/her own bedding used solely for him/her. It must be replaced when wet or soiled or when it is to be occupied by another infant.

Bedding must be changed daily or more often if required, and placed in a container that is inaccessible to children.

Floor mats or cots must be provided for all infants who have the ability to climb out of a crib.

Cribs, mats or cots must be arranged so that the staff can reach each infant without having to step over or reach over any other infant. Placement must not hinder going in and out of the nap area.

## 3. Use of County Communication Services

### i. General Description

Communication services are provided for the use of County employees for work-related communications. For example:

- The telephone system is provided for the use of Contra Costa County employees in the conduct of their assigned duties. (See [EHSD & CSB Internet/Email/IT Standard Usage Policies](#))
- Contra Costa County provides a message service (to forward written material and small packages among various County facilities on a regular route and time schedule). Each work site served posts the time of pickup and delivery; this service is to be used where available. (Supervisors have further information regarding this program.)
- The Contra Costa County General Services Department provides a centralized United States Postal Service operation. All mail must be processed through this Center- except for emergency situations. Materials to be mailed may be submitted through Messenger Service.
- The department pays for all postage charges, but receives reduced costs for bulk and ZIP code mailings. Contra Costa County's Postal Service is provided for office use of County staff. It is not to be used for personal benefit of employees or the public. (Supervisors may be contacted for rules and Regulations regarding United States Postal Services.)
- Fax machines are available for Contra Costa County use. Telephone numbers for fax machines are listed in the Inter-Office Telephone Directory. CSB implemented the use of E-fax, faxes received and sent by email, and paperless faxing through copiers to switch to paperless faxing.

#### ii. Portable Communication Devices

Smart phones, tablets, laptops and wireless modems (collectively referred to as portable communication devices) are utilized by CSB to allow management personnel to stay in communication when away from their primary office, when traveling on business, and in emergency situations. Portable communication devices are county property and are covered under the same requirements as other county property. This includes:

- Employees are responsible for the security of communication devices and are to report lost, damaged or malfunctioning devices to their supervisor as soon as possible after discovery.
- Employees are responsible to ensure the confidentiality and security of information contained on or obtained through communication devices.
- All communication on the device is considered county business and as such is not considered personal or private.
- Voice messages, text messages, e-mails, photos and other methods of communication or storage of information can be reviewed at any time by appropriate county personnel. This includes call, data and text logs.
- Communication devices are to be used for county business only. Inappropriate use of county property, including the personal use of communication devices that cause excess use charges to be incurred whether reimbursed or not, can result in loss of privileges to use county property.
- Communication devices are to be used only by the county employee they are assigned to. If devices are to be used by more than one authorized employee they will be assigned to specified employees for a defined time period before reassignment to other employees. (Sites make assignments on the Equipment Check-out Log).
- Use of a device for texting while driving, whether in a county vehicle or personal vehicle on county business, is prohibited by state law. Phone calls made or received while driving are strongly discouraged, but are allowed only if possible with the safe use of hands-free devices.
- CSB is required to submit reports on the use of the devices to DoIT and the CAO. The reports will contain information specific to each device, including any use of a device that caused additional charges to be incurred, and confirmation of reimbursement of those charges.

- As with all county property, each communication device (including accessories) is to be returned upon change of position or separation of employment.

## E. Vehicle Usage Policy

### 1. General Procedures

CSB maintains vehicles for use by authorized personnel in order to conduct official County business. Policies on the use and operation of vehicles on County business also apply to driving personal vehicles while on County business. Vehicles are reserved through designated clerical staff or vehicle reservation calendars. In an effort to ensure that CSB vehicles are kept in top condition, the following procedures must be followed.

- County vehicles can only be used by authorized employees.
- Authorized drivers must have a valid California Drivers license.
- Authorized drivers are to immediately notify their supervisor of any change in the status of their California Drivers license.
- County vehicles are to be used only for authorized county business.
- Drivers are responsible for safe driving, including parking in a well-lit area, and locking the vehicle at all times.
- Drivers are to be courteous and practice defensive driving and fuel conserving practices.
- Authorized drivers are to observe all traffic rules and regulations.
- Car pooling in county vehicles is strongly encouraged when multiple employees are attending the same business function.
- Employees are prohibited from carrying unauthorized riders while on county business.
- Moving, parking and toll violations are the personal responsibility of the driver.
- No smoking is allowed in county vehicles.
- While the vehicle is in operation no eating or drinking is allowed.
- Cell phones and other hand held devices are not to be used while operating a vehicle.
- All persons driving or riding in a vehicle are to be properly secured with the use of seat belts or other approved restraint systems.
- Vehicles are to be returned free of trash or other debris.
- Car seats and other cargo should be secured in the cargo area of the vehicle so that they will not become projectiles in case of a sudden stop or accident.
- Drivers are to wear appropriate footwear, no backless or loose sandals.
- Vehicles are to be returned with a minimum of a half tank of fuel.
- County vehicles are to be fueled regularly at the County Fleet station or other approved facilities.
- The County credit card is to be used exclusively for purchasing gasoline at authorized fueling centers. (See list of centers and addresses in the vehicle binder fuel tab.)
- If the credit card is lost it must be reported immediately to avoid fraudulent use.
- County vehicles will be serviced at the Waterbird Fleet station except in after-hour emergencies.
- CSB does not use Fleet loaner vehicles. Contact the Facilities clerk for possible temporary use of another CSB vehicle if necessary.
- County vehicles are not to be taken to a personal residence without Sr. Management approval.
- Vehicle binders and keys are to be returned punctually after vehicle use.

It is CSB policy to use a county vehicle when one is available in lieu of using a personal vehicle. If a county vehicle is available it must be utilized unless a supervisor determines that the use of a personal



vehicle is justified. Justification for the use of a personal vehicle is documented by the supervisor's signature on the request for reimbursement of travel expenses.

## 2. Accident and Maintenance/Repair Reporting

Drivers are to report any accident or service need the same day as occurred. All accidents MUST be reported and the proper paperwork completed and submitted to Risk Management within 24 hours of the accident. Any unusual sound, odor, low fuel, maintenance light or other indication that the vehicle is malfunctioning or may need service is to be reported to the clerk when returning the vehicle binder.

## 3. Child Passenger Safety Procedures

A child will be transported in county vehicles only if the child is fastened in an approved developmentally appropriate safety seat, seat belt, or harness appropriate to the child's weight, and the restraint is installed and used in accordance with the manufacturers' instructions for the car seat and the motor vehicle. Each child must have an individual seat belt and be positioned in the vehicle in accordance with the requirements for the safe use of air bags.

Age and size appropriate vehicle child restraint systems shall be used for children 8 years, 80 pounds. Vehicle restraint systems should be secured in the back seats only. Infants shall ride facing the back of the car until they have reached one year of age or weigh over 20 pounds. A booster child safety seat shall be used when the child has outgrown the convertible child safety seat. A vehicle seat belt can only be used when the child is over 8 years, 80 pounds. The seat belt only fits properly when the lap belt lies low and tight across the child's hips (not the abdomen) and the shoulder belt lies flat across the shoulder, away from the neck and face. Never tuck the shoulder belt under the child's arm or behind the child's back. The child's knees should bend easily over the edge of the vehicle seat.

Staff transporting children must be aware of the following:

- The rear of vehicle is the only place for a child to ride.
- Staff should use the diagram of seating plan when placing children in vehicle.
- Lap-belt only positions can only use the 5-point harness car seats.
- Shoulder and lap belt position close to sliding door should be last position to seat child.
- The car seat and seat belts should be checked before each use to make sure they are in correctly and that the belt straps are not twisted.
- Empty car or booster seats should be strapped in with the seat belt system or stowed in the cargo area away from passengers.
- No loose items should be on floor.

The following are child passenger safety basics for each type of car seat:

- Rear-Facing
  - Must ride rear facing until at-least 1 year AND at-least 20 pounds
  - Do not bundle or swaddle; no heavy clothing
  - Harnesses at or BELOW shoulder level
  - Harnesses snug and flat across infant
  - Retainer clip at armpit level
  - Must ride at 45° angle of recline
  - Seat secured tightly to vehicle with less than 1 inch of movement side-to-side and forward
- Forward-Facing
  - Toddlers over 1 year and 20 pounds but generally weighing less than 40 pounds ride either in convertible or forward facing seat in the forward facing position

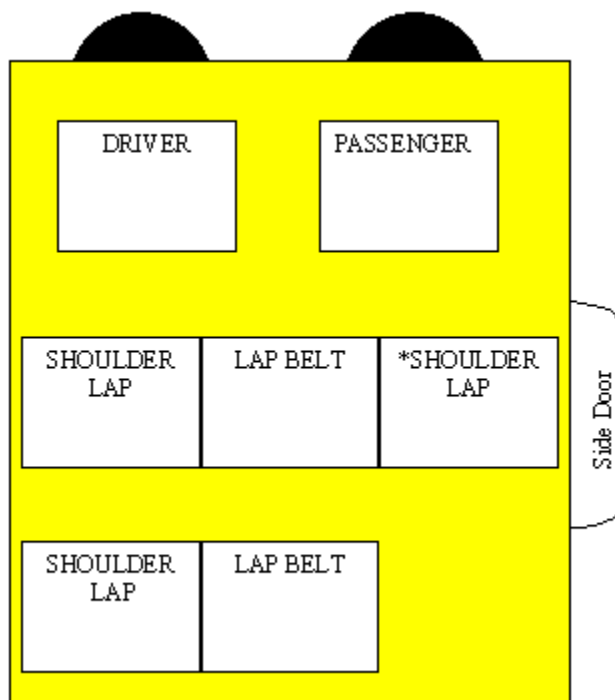
- No heavy clothing
- Harnesses ABOVE shoulder level AND in reinforced slots
- Harnesses snug and flat across infant
- Retainer clip at armpit level
- Generally ride fully upright
- Seat secured tightly to vehicle with less than 1" of movement side-to-side and forward
- Top tether in use when available and appropriate
- Belt Positioning Boosters
  - For children who have outgrown the car seat but do not yet fit the adult lap/shoulder belt
  - Lap belt crosses pelvis or top of thighs
  - Shoulder belt crosses chest
  - Middle of child's head is below the top of the vehicle seat or booster

#### F. Transportation

While CSB does not provide direct transportation services to and from the centers each day, the Site Supervisor or Comprehensive Services team member must assess the needs of each family upon enrollment and attempt to make reasonable effort to assist if the family is in need of transportation services to the center.

Transportation services are offered for the following:

- To / from socialization activities
- To / from Policy Council Meetings
- To / from field trip locations



- Lap Belts – use only 5-point Harness Seats. No Boosters
- Shoulder Lap with Star (\*) is the last Shoulder Harness to fill
- No loose items in the vehicle
- Unused car or booster seats are strapped in or removed from the passenger area of the vehicle.



# POLICIES AND PROCEDURES

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## SECTION 5-ALTERNATIVE PAYMENT PROGRAM

**2013-2014**

Policy Council Approved:  
Board of Supervisors Approved:

2013-2014  
Policies and Procedures  
Section 5: Alternative Payment Program

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### Section 5: Alternative Payment Program

#### I. Program Overview

The purpose of this program is to provide subsidized child care for eligible children and families living in Contra Costa County and to provide a wide range of child care choices for parents. The CalWORKS Stage II Child Care program is limited to those parents who are in receipt of or have received CalWORKS cash assistance within the last twenty four (24) months. Our California Alternative Payment Program (CAPP) assists families referred by Children and Family Services and low-income families. Both of these programs support families in their child care decisions and make timely payments to their chosen child care providers.

Children can be served from birth up to age 13, or up to age 21 if special needs are proven with appropriate documentation.

The CSB Stage II/CAPP program administers subsidized child care through a vendor approach, providing full or partial payments for child care of eligible families. These programs are designed to maximize parental choice in selecting child care. Parents may select child care services from licensed centers and preschools, licensed family child care homes, licensed-exempt out of home providers, or licensed-exempt in-home providers. Subsidized child care does NOT pay for private schooling.

CSB operates in accordance with all applicable state and federal laws governing human service agencies. These policies may change periodically as directed by the California Department of Education (CDE). Addendums will be issued to parents and providers as regulations change.

#### A. How to Qualify for Services

##### 1. General Description

There are various ways that families can qualify for our programs. The two distinctly funded programs administered are Stage II and CAPP.

- Stage II – Parents in receipt of CalWORKS assistance payments and former CalWORKS parents (those having received CalWORKS within twenty four (24) months from the date of application for child care supportive services) may be eligible for subsidized child care services. There are various stages of funding in this program and each has its own priorities and limitations. It will be the responsibility of the Child Care Assistant Manager to work with the parent to determine the appropriate stage for child care services.
- CAPP (California Alternative Payment Program) – Families may be eligible for CAPP funding based on need and eligibility criteria (such as low income working families), with 1st priority for those children currently receiving child protective services, or those children who are considered at risk of abuse, neglect or exploitation by a legally qualified professional.

##### 2. Application

Applications for the Stage II/CAPP Child Care Unit require the completed application forms found in the Child Care Application packet. Parents must provide all requested information and documentation to determine initial eligibility.

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##### 3. Eligibility and Need

i. Eligibility is determined at the time of enrollment, or within six (6) months of the date of transfer from CalWORKS Stage I to Stage II. Families are required to provide their Child Care Assistant Manager the appropriate documentation to prove their eligibility for child care for at least one of the following criteria:

- Gross wages/salaries from employment
- Tips
- Overtime pay
- Cash assistance (TANF/Cash Aid)
- Student loans
- Disability compensation
- Unemployment compensation
- Spousal and/or child support received
- Foster/Guardianship assistance

Parents will be required to provide supporting documentation for all total countable income. For example:

- Payroll check stubs
- Letter from employer
- Most recent tax returns
- Bank statements
- Cash aid documents

ii. The family is homeless and provides a written referral from a local shelter, or legally qualified professional from a medical or social service agency, or submits a written parental declaration that the family is homeless and a statement describing the family's current living situation.

iii. Child is referred by Child Protective Services (CPS) with a written referral by the county welfare department indicating the child is currently receiving CPS services and child care is a necessary piece of the service plan. The referral must include the contact information for the social worker and the duration of the CPS service plan. These referrals must be dated within 6 months of receiving the child care application.

iv. Child is deemed At-Risk of abuse/neglect and provides a written statement by a legally qualified professional indicating child care is needed to reduce the risk. The statement must include the professionals contact information and probable duration of the situation.

v. Family is transferred from Stage I to Stage II by the county welfare department. Parent will be asked to provide documents for recertification within 6 months of the transfer effective date.

4. Family Size - Upon completion of your initial application for services, you will need to provide supporting documentation for all children and adults listed in the family. The family members may be documented by the following:

- Birth certificates
- Court ordered child custody agreements

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- Adoption records
- Foster care placement records
- School or medical records
- County welfare department records
- Any other document proving relationship between the parent and the child
- In the absence of a second parent, documentation must be provided to support the absence. This documentation may be any one of the following:
  - Records of marriage, divorce, separation
  - Court ordered child custody documents
  - Evidence of child support
  - Rental agreements
  - Any other documentation to verify the presence or absence of the 2nd parent
  - The Child Care Assistant Manager may require further documentation at any time to prove the absence of the 2nd parent.
  - Only in the instance when the absence of a parent is a recent departure from the family, may the remaining applicant submit a self-declaration under penalty of perjury explaining the absence. The remaining applicant has from six (6) months of applying, or reporting the change in family size, to provide one of the previously listed documents to support the absence of the 2nd parent.

5. Service Need - Families who are income eligible to receive subsidized child care must also have, at minimum, one of the following services needs to become enrolled or continue with current service. All parents/guardians listed in the family size must have a service need. (Hours of care provided to the family will be determined by the family's need for services.)

i. Child Protective Services (CPS) – Families may be eligible for child care services if the child is referred by CPS and parent provides a written referral by the county welfare department indicating the child is currently receiving CPS services and child care is a necessary piece of the service plan. The referral must include the contact information for the social worker and the duration of the CPS service plan. These referrals must be dated within 6 months of receiving the child care application.

ii. At-Risk – Families may be eligible for child care services if the child is deemed at-risk of abuse/neglect and parent provides a written statement by a legally qualified professional indicating child care is needed to reduce the risk. The statement must include the professionals contact information and probable duration of the situation.

iii. Parental Incapacity – Families may be eligible for child care services if the parent(s) are physically or mentally unable to provide care for their children. To qualify for child care services under this need, the parent would have to submit documentation from legally qualified health professional releasing information to verify the parent meets the definition of incapacity, as defined in the California Title 5 Regulations. The documentation must include the extent of which the parent is unable to provide care, the days and hours care is recommended and the health professionals contact information.



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iv. Employment – Families may receive child care services during the time they are working and traveling to and from work. To qualify for child care services under this need parents would need to submit the following documentation:

- An employment verification form – signed by the parents employer stating the days and hours worked by the parent
- One month's worth of current and consecutive pay stubs
- If parent is paid in cash by their employer, parent will provide a letter from the employer verifying the following:
  - Employers contact information, including the employer tax identification number
  - Date of hire
  - Days and hours of employment
  - Pay rate or gross monthly income
  - Other potential income (i.e. tips, overtime)
  - Statement declaring employee is paid in cash only
- If the parent is self-employed, the parent will provide the following:
  - A declaration under penalty of perjury that includes a description of the nature of their employment and an estimated number of days and hours worked per week
  - Copies of appointment logs, client receipts and/or mileage logs
  - Copy of their business license if available, or workspace rental agreement
  - List of clients with contact information

**\*\* Note:** Parents employed by child care centers, or assisting family care home providers may receive services, but those parents who are licensed providers registered with Community Care licensing are not eligible to receive child care services for their child(ren).

v. Training Towards Vocational Goal – Families may be eligible for child care services if the parent(s) are enrolled in a program that will directly lead to a recognized trade or profession. There is a six (6) year limitation for services under this need and the parent must continually make adequate progress towards their goal. Regardless of the length of time a parent needs to complete their training, child care services must not exceed the six (6) year time limit. To qualify for child care under this need, parents must submit the following documentation:

- Training Verification Form to be signed by registrar (or designee of program). This form includes such information as name and location of school/training institute, days and hours of class/training schedule, vocational goal of parent, etc.
- A copy of the current class schedule if available in electronic print, if not this information may be indicated on the verification form listed above.
- The anticipated completion date of all required courses/trainings to meet the vocational goal of the parent.

vi. Actively seeking employment – Each parent in the home may qualify for child care services during the time they are actively seeking employment. Services must not exceed sixty (60) working days within a fiscal year (July 1st through June 30th) and are limited to less than thirty (30) hours of child care per week. Parents seeking employment will be required to submit a self declaration under penalty of perjury that they are looking for employment. This declaration will include their plan to secure/change

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employment and a general description of the child care hours necessary during this time. The Child Care Assistant Manager may request verification of the job search and/or interviews at any time.

vii. Seeking permanent housing – Families receiving services through the CAPP program may be eligible for child care if they are trying to secure permanent housing to stabilize the family. Services must not exceed sixty (60) working days within a fiscal year (July 1st through June 30th) and are limited to less than thirty (30) hours of child care per week. The parents will be required to submit a self declaration under penalty of perjury that describes their plan to secure adequate housing for the family and a general description of the child care hours necessary during this time.

\*\* Child Care Assistant Managers may require further documentation to prove a families need for services at any time.

#### B. Share of Costs

##### 1. Family fees

Some families may be required to pay a portion of their child care costs, this is called the “family fee”. These fees are paid by the parent directly to their child care provider. Family fees are determined using the “Family Fee Schedule” provided by the California Department of Education (CDE). The following determines a parent’s family fee:

- Family’s gross monthly income
- Family size
- The child who uses the most hours of care
- Whether child care services are part-time (less than 6 hours a day) or full-time (greater than 6 hours per day)

Based on the above criteria the Child Care Assistant Manager will issue a notice of action to the parent informing them of the changes to their Child Care Agreement. An informational copy will be sent to the provider.

The parent and provider work out a payment schedule and declare on the monthly attendance sheet that the fees have been paid for the month of services rendered. The provider shall issue a receipt of family fees paid to the parent.

##### 2. Co-Payments

If the parent chooses a provider who charges more than the maximum amount CSB can reimburse, the parent will be responsible to pay the difference directly to the provider. This difference is referred to as a “co-payment”. The maximum amount CSB can reimburse is determined by the California Department of Education (CDE) income ceiling guidelines and it will be the provider’s responsibility to collect payment from the parent if desired.

#### C. Selection Process

There are various ways that families may be selected to participate in one of our programs. Families are enrolled based on the following (all enrollments are subject to availability of funding):

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#### 1. Children and Family Service Referrals

Families may be referred to CSB for enrollment from Children and Family Services (CFS), if child care is deemed a necessary piece of the service plan. CSB will review the referral to determine a family's eligibility for Head Start, Early Head Start, Center Based, Stage II and CAPP programs. Based on eligibility and need requirements the referral will be forwarded to the appropriate program, taking into consideration parental choice. Once the referral is received by the Stage II/CAPP Unit the family will be contacted to determine eligibility. If the family is Stage II eligible and meets all necessary requirements, they may be enrolled under Stage II funding. If the family is not Stage II eligible, but staff verifies the availability of CAPP funding and the family meets all necessary requirements, they may be enrolled under CAPP funding. If the family does not meet the necessary requirements for either program, or there is no program funding available at the time of referral, the Unit Manager will forward the referral to an outside agency for potential enrollment. At this time staff will notify the referring individual whether or not the family was enrolled or referred to an outside agency.

#### 2. Eligibility Lists

Families may be enrolled through a countywide eligibility list if available, or through an eligibility list maintained by CSB for families wanting to participate in subsidized child care. These lists rank families on their income and family size to ensure the most eligible family is being served at the time of enrollment. (All families with CPS, or at-risk referrals, will be enrolled as 1st priority.)

#### 3. Stage I transfers

Families may be transferred to Stage II child care services from the Stage I child care unit upon discontinuance of cash assistance or when families have been considered stable by their previous child care worker (Families may be enrolled directly into Stage II funding if the family is deemed Stage II eligible).

#### D. Enrollment process

For those families transferred from CalWORKS Stage I to our Stage II child care unit, a Welcome Packet will be mailed to the parent explaining that the transfer has occurred. The packet will contain information regarding contact information for the family's new Child Care Assistant Manager, their Child Care Agreement(s), the Participation Handbook, attendance forms, etc. An additional copy will be sent to the child care provider on file for that family as well.

Based on the availability of funding, all other families will be notified by phone if they are selected to participate in our program. For those families referred by Children and Family Services or for those deemed At-Risk, we will contact the referring individual to verify the child's need and begin communication regarding enrollment to better support the needs of the family.

The family will be offered an appointment to begin the enrollment process. At the time of appointment, the parent will be required to bring documentation that may include, but is not limited to, the following:

- Birth Certificates for all children counted in the family size
- One month current/consecutive paycheck stubs
- Verification of employment, vocational training, or parental incapacity
- Child Support documentation

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- Immunization records for non-school age children
- If applicable, IEP/IFSP for children with special needs
- Any other income or verification documentation as requested by the Child Care Assistant Manager to determine the families need and eligibility for services.

During the enrollment appointment, the parent will be asked to complete an application for child care services. The information must be completed by the parent(s), signed, dated and then verified and signed off by the Child Care Assistant Manager.

Once services are approved the Child Care Assistant Manager will issue the parent and provider a Notice of Action (NOA) indicating the certification is completed. The parent and provider will receive the Child Care Agreement(s) and be asked to sign and return to the Child Care Assistant Manager for services to begin. These agreements will outline the days and times that child care has been approved and whether or not there is a family fee/co-payment due to the provider. Each time there is a change to the schedule, increase in provider rates, change in family information, or at time of recertification, a NOA and updated Child Care Agreement will be issued to both the parent and provider.

#### E. Maintaining Enrollment

##### 1. Recertification

Parents are required to recertify their services once every six (6) to twelve (12) months, or more frequent depending on their need for services. The Child Care Assistant Manager will issue the parent(s) a Recertification Packet to be completed within a specified amount of time. Failure to complete the recertification packet by the due date indicated may result in termination of services.

##### 2. Reporting Changes

It is the parent's responsibility to report any changes to their family size, income, need for services, address, contact phone numbers, or any other information with regards to their need and eligibility within five (5) days of the change. Failure to notify the Child Care Assistant Manager of any change within the five (5) days following the change may result in termination of services.

##### 3. Fee Payment/Repayment Plans

All family fees are to be collected by the child care provider. Due dates for these fees will be agreed upon by the parent and provider, and payment will be acknowledged on the monthly attendance form. It is the provider's responsibility to collect all fees from the parent and notify the Child Care Assistant Manager if fees have not been paid. Upon receipt of notification that the parent has outstanding fees due to the provider, the Child Care Assistant Manager will issue a NOA for Delinquent Family Fees and the parent will have nineteen (19) days to pay the debt owed to the provider, or agree to a reasonable repayment plan signed off by both the parent and provider. If the provider notifies the Child Care Assistant Manager that the parent is failing to comply with the repayment plan, the family will be terminated from the program.

#### F. Alternative Payment Program Policies and Procedures

By abiding to the policies and procedures outlined in the Participation Handbook, parents may retain their child care services as long as they are eligible to participate. Any violation of the program regulations may result in termination from the program.

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### Section 5: Alternative Payment Program

#### **II. Alternative Payment Program Parent Policies and Procedures**

##### **A. Attendance Policies**

##### **1. General Description**

Payment for services is based upon the attendance of children enrolled in the Child Care Program. The Child Care Program pays for “excused” absences, which include, but are not limited to child’s illness, parent illness, doctor’s appointments, or a family emergency. In order to be reimbursed for excused absences, parent must specify the type of illness, or reason for absence and then sign his/her full signature after the reason. This does not apply to child care in which the provider charges an hourly rate or has a drop-in rate.

##### **2. Excused Absences**

Providers must be sure that parents state the specific reason for absence of the child(ren) on the attendance sheet and sign with a full signature. (This does not apply to child care in which the provider charges and hourly rate or has a drop-in daily rate.) The parent will be required to submit written documentation, with the monthly attendance sheet, justifying a child’s absence exceeding 3 or more consecutive days. The following are excused absences:

- **Illness:**
  - Child Illness: parent must note specific illness for the child
  - Parent Illness
  - Quarantine of child or parent
  - Dental, doctor, or therapy appointment (for child, parent, or sibling)
- **Family Emergency:**
  - Parent must note explanation of family emergency. May include, but is not limited to, death, funeral, sibling illness, close of work or training facility due to natural disaster, etc.
- **Parental Jury Duty:**
  - Parent must provide legal documentation
- **Court Ordered Visitations:**
  - Parent must provide legal documentation
- **Best Interest Days:**
  - Children are allowed up to ten (10) Best Interest Days per fiscal year for other excused absences. These would include time for a child to be with a parent or relative (i.e. vacation, visitation from a non-custodial parent/family member or participation in cultural or religious holidays). The reason for the Best Interest Day must be specified on the attendance sheet. CSB will not pay for unexcused absences or more than ten (10) Best Interest Days. The provider may charge and obtain payment directly from the parent for these absences.

##### **3. Unexcused Absences**

CSB will not pay for unexcused absences. The provider must notify the Child Care Assistant Manager if a child is absent for more than three (3) consecutive days and the parent has not contacted the provider with the reason for the absence. Failure to report the unexcused absences will result in non-reimbursement for those absences after the child’s last day of attendance, including any payment for two (2) week notice to terminate.

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The provider may charge the parent and obtain payment directly from the parent for these absences. It is the parent's responsibility to pay any charges for unexcused absences to the provider. The following are possible examples of absences that would not be considered excused and for which the provider will not be paid by CSB:

- Absences without documentation
- Provider was NOT available to provide child care (includes when the provider is sick, etc.)
- Any Best Interest Days over ten (10) per fiscal year

The provider must notify CSB if a parent withdraws from care without advance notice or if provider has knowledge of a change of parental or family status including change of address, income, employment and/or marital status.

#### B. Limited Term Service Leave (LTSL)

**\*\*Only applies to non-CalWORKS subsidized families.**

If the family temporarily does not have a need for subsidized child care, they may submit a written request for a temporary leave from services. CSB may grant the family a limited term service leave for no more than twelve (12) consecutive weeks, except when the parent is on a maternity or medical related leave of absence from his/her employment or vocational training.

Maternity leave, or medical limited term service leave, shall not exceed sixteen (16) consecutive weeks in duration. During this time no child care services shall be provided nor be claimed for reimbursement. Parents will be required to provide documentation from their physician prior to going on leave and again when released.

At the time of authorized reinstatement, when the service leave ends, CSB cannot pay another registration or other new provider charges.

**\*\*It is important to remember that providers do not have to hold child care spaces throughout the leave and parents may need to seek a new child care provider(s) upon their return from leave. Also, parental reinstatement on to CSB's program will depend on funding availability.**

#### C. Confidentiality

The use or disclosure of information about the child and his/her family is limited to purposes directly connected with administering the program. When helping parents/families move to another subsidized program, information about the parent/family may be exchanged and the other program or provider is then bound by these same confidentiality guidelines. Parents or their authorized representatives may review the case file upon request and at the time and place considered reasonable by CSB. (Parents may only review the forms or other documentation/information that they have provided CSB and are in their own case file.)

CSB will provide child care services to help support families and children in need. In providing these child care services, CSB is promoting independence, personal responsibility and self-sufficiency on the part of the parent(s).

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#### Section 5: Alternative Payment Program

All parents will be treated with dignity and respect. The Child Care Assistant Manager will work with the parent to develop the best plan for the family.

##### D. Grievance Procedures

All parents and providers are encouraged to first speak with the Child Care Assistant Managers to attempt to resolve any issues that may arise. If the issue is not resolved to the parents/providers satisfaction the parent/provider may file a written request to be submitted to the supervisor of the staff in question.

The supervisor will review the complaint and meet with the parent/provider by phone, or by appointment, to discuss the issue within ten (10) calendar days of receiving the complaint. If the parent/provider still feels dissatisfied, they may submit a written request for the issue to be elevated to staff at least one level higher than the staff person who made the contested decision. The parent/provider will be contacted within ten (10) calendar days of receiving the complaint and given an opportunity to present their concerns. The decision at this level will be final.

##### E. Uniform Complaint Policy

It is the intent of the Community Services Bureau to fully comply with all applicable state and federal laws and regulations.

Individuals, agencies, organizations, students and interested third parties have the right to file a complaint regarding Community Services alleged violations of federal and/or state laws. This includes allegations of unlawful discrimination (ED Code Sections 200 and 220 and Government Code Section 11135) in any program or activity funded directly by the State or receiving federal or state financial assistance.

Complaints must be signed and filed in writing with:

The California State Department of Education  
Child Development Division  
Complaint Coordinator  
1430 N Street, Suite 3410  
Sacramento, CA, 95814

If the complaint is not satisfied with the final written decision of the California Department of Education, remedies may be available in federal or state court. The complainant should seek the advice of an attorney of his/her choosing in this event.

A complainant filing a written complaint alleging violations of prohibited discrimination may also pursue civil law remedies, including, but not limited to, injunctions, restraining order, or other remedies or orders.

##### F. Zero Tolerance

CSB prohibits inappropriate behavior towards staff, or in the presence of families, children or providers on the program. Such use of abusive/foul language, intimidating actions (including belligerent emails

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and voicemails), physical harassment, destruction of property, threats to staff, etc., will be documented and may lead to termination from the program.

##### G. Termination Policies

###### 1. Reasons for Terminations

Child Care services may be terminated for any, but not limited to, the following reasons:

- Failure to maintain required need and/or eligibility for the program with which the family is enrolled
- Failure to inform the Child Care Assistant Manager within five (5) days of changes that affect the families need and/or eligibility to retain services
- Failure to recertify in a timely manner
- Failure to pay family fee or co-payment
- Failure to make payments to licensed exempt in-home providers in a timely manner
- Failure to use services for sixty (60) consecutive days, or two (2) consecutive months
- Violation of the Zero Tolerance policy towards staff
- Failure to comply with the State mandates requirements of the program
- Family's income exceeds the state income ceiling
- Children are no longer age appropriate for the program with which they are enrolled, and family cannot provide required documentation to maintain services past that age (i.e. IEP, verification of non-traditional hours)
- Failure to maintain a 2.0 GPA if services are based on a vocational training need
- Failure to abide by attendance policies and reimbursement guidelines

###### 2. Appeal Process

All terminations will be documented by a Notice of Action (NOA). The Child Care Assistant Manager will issue a NOA to the parent and send an informational copy to the provider(s). If a parent disagrees with an action taken by CSB, the parent may file an appeal request for a hearing with Employment and Human Services Department Appeals Unit:

Office of Appeals Coordinator  
400 Ellinwood Way  
Pleasant Hill, CA 94523  
(925) 677-2900

If the parent disagrees with the written decision of the hearing, the parent can appeal the decision to the Child Development Division of the California Department of Education within 14days.



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#### III. Provider Participation

##### A. General Requirements- Parental Choice

CSB policies provide for parental choice in selecting a child care provider. Parents are responsible for selecting the child care provider and the type of care, which they feel best, meets the needs of the family and meets enrollment requirements. Parents also have the right to change providers while they are participating in the child care program. Parents may choose the following types of care:

- **Licensed Child Care Centers/Licensed Family Child Care Homes**  
Child care centers and family child care homes are all licensed by the California Department of Social Services Community Care Licensing division, which ensures all standards of health and safety criteria are being met. These programs will be required to submit and comply with the following:
  - A copy of their current license
  - A copy of their current policies, rules and rates
  - Provide services to all eligible children on a non-discriminatory basis, giving equal treatment and access to services without regard to race, color, creed, religion, sex, national origin, or any other category that is prohibited by law
  - Providers must report observed and/or suspected child abuse to the local police departments and/or Children and Family Services and refrain from all forms of punishment, cruelty, and/or physical/corporal punishment
  - Providers must maintain confidential child and family records and other information with the exception of authorized disclosures to CSB staff or other authorized State or Federal agency staff in accordance with the law
  - Allow CSB to visit licensed facilities if requested
  - Provide care for children only during the period authorized
  - Enter into Child Care Provider Agreement with CSB as an independent contractor and in no way be considered an employee of the CSB or any of its funding sources
  - Hold CSB harmless for any damages to person(s), or property, which arise out of the delivery of services under agreement with CSB
  - Inform Child Care Assistant Manager if religious instruction is part of their child care program or curriculum. This will allow CSB to maximize the correct funding for the child care program.
- **Licensed-Exempt Out of Home Providers**  
Licensed-exempt providers are not licensed by the state of California. Parents are responsible for hiring, terminating services, and setting up the days and hours when care will be used. Licensed-exempt child care providers must be Trust line Registered. A Trustline registration means completing an application within fourteen (14) calendar days, which includes a health and safety self-certification and checklist and being fingerprinted through the Department of Justice (DOJ) and the Federal Bureau of Investigation (FBI).
- If the parent selects a grandparent, aunt or uncle of the children to provide care, they would be exempt from the Trustline registration.
- Within fourteen (14) calendar days of application, CSB is required to have on file:
  - of the provider's qualifications and experience
  - A health statement, including Tuberculosis clearance

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- A statement from the parent that he/she has interviewed and approve of the provider
- A California driver's license number or a valid California ID verifying the provider to be at least eighteen (18) years of age
- The exempt caregiver's name, address and a copy of their Social Security Card
- Names and ages of all other adults residing in the home where the child care is provided
- The address where the care is to be provided
- The hours and rates for the care
- All forms signed by both the parent and provider, as appropriate
- Licensed-Exempt In-Home Providers  
License-exempt In-home providers will be required to have the same documents on file as License-Exempt Out of home providers. In addition the following will be required for License-Exempt In-Home Providers:
  - A copy of a Worker's Compensation policy that the parent has taken out for the employee (care provider)
  - A copy of required documents the parent has filed indicating that they are the employer of record and will be withholding income tax, social security tax, and any additional withholdings from the provider's pay as required for the Internal Revenue Service, the Franchise Tax Board and Social Security Administration
  - In-Home child care providers must be assured California Minimum Wage. Effective January 2008, California Minimum Wage is \$8.00 per hour (subject to change as defined by the State of California. Adjustments to provider compensation must be made when those changes occur). In some cases, the highest amount CSB is authorized to pay for child care will not meet the minimum wage requirement. The parent, then, will be responsible to co-pay the provider the difference between what CSB can pay and California Minimum Wage to assure adequate compensation for the provider. The parent and provider will be asked to submit written documentation that they have agreed upon a payment plan to ensure minimum wage requirements are met.

#### B. Provider Rate Sheet

Providers shall submit a statement of their current rates to CSB. Rates must be the same for both subsidized and private pay families. If the provider charges more than the current Regional Market Rate allows CSB to pay, the parent will be responsible to pay the difference directly to the provider. If a provider offers any discount for siblings, the subsidized family will offered the same discount.

Providers must submit a written thirty (30) day advanced notice of any changes to their rates; all rate increases are subject to availability of funds. New rate increases will take effect thirty (30) days after receipt of notice. Providers may only change their rates once per fiscal year (July 1st – June 30th).

#### C. Attendance Sheet Policies

Providers are responsible for the accurate completion of the CSB attendance sheets (CCARE5). They are the provider's method of billing for payment and are the only form of documentation that will be accepted for reimbursing provider claims. CSB can only pay for childcare services, not private school tuition, educational fees, transportation, diapers, clothing items, or other expenses that are not part of the basic child care cost.

Below are criteria for accurate and reimbursable attendance sheets:

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- Only original attendance sheets will be accepted. Parents/Providers may request additional attendance sheets by calling the main office or their Child Care Assistant Manager. CSB will not reimburse copies of any attendance sheets.
- Attendance sheets must be filled out DAILY. The parent must sign their full name and record the actual in and out times for when the children are dropped off and picked up. (Do not round off the time, the actual time must be recorded.) If the attendance sheet appears to not have been filled out daily, it may result in non-payment.
- The provider must sign school age children in and out from school on the attendance sheet using the exact drop off/pick up times and by initialing where appropriate.
- The parent must fill in a reason explaining the child's absence from care and sign appropriately.
- The parent and provider must sign their full signatures on the back of the attendance sheet each month indicating the accuracy of the information on the form and acknowledgement of receipt of fees due the provider.
- Attendance sheets are to be completed in blue or black ink only. Should you make a mistake on the attendance form, simply cross out the error, initial it and write in the correct information. (We will not reimburse for corrections using correction tape.)

Complete and accurate attendance sheets are due by 5pm on the seventh (7th) day of each month following the month in which services were rendered. If the seventh (7th) day falls on a weekend, or holiday, attendance sheets will be due by 5pm on the next business day following the seventh (7th).

Payments for complete and accurate attendance sheets received by the seventh (7th) of the month we will be processed and mailed out by the end of the month they were received. Any attendance sheet submitted after the 5pm on the seventh (7th) day of the month will be processed and mailed the following month. (For example, an attendance sheet submitted on April 8th will not be processed and mailed until May.)

**\*\*Any attendance sheet submitted sixty (60) days after the month in which services were rendered, will not be reimbursed.**

#### D. Child Care Agreement

Upon approval for child care services the Child Care Assistant Manager will issue a NOA indicating initial approval for services and will be accompanied by a Child Care Agreement that will outline the schedule approved for services and will indicate if there is a Family Fee and/or Co-payment. The Child Care Agreements will be sent to both parent and, if applicable, the licensed provider. These certificates must be signed and returned to the Child Care Assistant Manager within ten (10) days of receipt acknowledging the approved schedule and rates for service provided.

#### E. Reimbursement

##### 1. Regional Market Rate (RMR)

Child Care is reimbursed up to 70% of the average ceiling rate as set by the California Department of Education for our county. This is referred to as the Regional Market Rate (RMR). (This rate is subject to change, if directed from the California Department of Education (CDE).)

Children attending less than thirty (30) hours of child care per week will be reimbursed at the part-time benefit ceiling and children attending thirty (30) hours or more will be reimbursed at the full time

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benefit ceiling. Those families that have variable schedules will be assessed by the Child Care Assistant Manager and assigned the most appropriate ceiling for their needs.

Should the parent chose a provider with a rate exceeding the allowable payment of the program, the parent must pay the difference with a co-payment. This is paid by the parent to the provider directly and not accounted for by CSB.

If the provider has a registration fee (licensed providers only) the rate for reimbursement will be determined by State guidelines and may be paid no more than once a year if the provider meets eligibility requirements.

##### F. Provider Days of Non-Operation

CSB will only pay for up to ten (10) days of non-operation (per fiscal year) to a licensed provider when the center, or family child care home, is closed if they fall on a contracted day. The provider contract MUST list the days of non-operation on the Provider Self Declaration form to be eligible to receive payment for them. Days of non-operation may include, but are not limited to the following:

- Holiday (i.e. New Year's Day, Christmas, Labor Day)
- Provider Vacation Days
- Staff Training/Development Days
- Multiple/Alternate Providers

CSB can only pay one provider per child for child care services. However, there are some exceptions:

If a family has needs that exceed the hours of operation of the first provider, the Child Care Assistant Manager will assess the families need status and approve multiple providers as necessary.

If a child's usual child care provider is closed, or if the child is sick and cannot attend the usual care, the parent may need to seek alternate child care. CSB will contract separately with the alternate provider for child care services. CSB can only pay an alternate for ten (10) days per fiscal year.

##### G. School Age Children

Providers will not be reimbursed for school age children care during instructional minutes, whether they are attending public or private schools.

##### H. Parents Rights to Change Providers/Providers Right to Terminate Services

Parents have the right to change their providers, up to twice annually, unless they can provide the Child Care Assistant Manager with reasonable concerns for more changes. CSB asks all parents to provide a written, or verbal, two (2) week notice to their licensed provider regarding the termination of care. The Child Care Assistant Manager will follow up with any notifications necessary. (\*\*License-exempt providers are only paid for time the child is in their care.)

Should the parent not give a two (2) week notice to the licensed provider, CSB will work with the licensed provider and offer any reimbursement as required by the licensed provider's established policies and procedures submitted with the initial approval of care.

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A licensed provider may terminate services with cause in adherence to his/her established policies and procedures and with a two (2) week advance notification to the parent and the Child Care Assistant Manager. Should a licensed provider terminate a family without notification, CSB will not reimburse any days past the child's last day of care.

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#### IV. Staff Roles and Responsibilities

##### A. Stage II/CAPP Unit Clerks

- Administrative Support to Unit Managers
  - Program Calendars
  - Form Revisions
  - Mass Mailings
  - Other clerical tasks as assigned by Assistant Managers
- Reimbursement Calculations
  - Collect, review and distribute incoming CCAREs to appropriate staff
  - Perform initial reimbursement calculations for Assistant Managers
- Incoming Phone Calls
  - Check and empty Stage II/CAPP Unit General Voicemail
  - Return all calls within 24 hours of retrieving the message
  - Answer and forward calls to appropriate staff member
- Mail Process
  - Log all mail on "Mail Log Sheet"
  - Forward mail to appropriate staff member
- Scanning Process/Document Record Keeping
  - Scan and Index all documents into Northwoods Compass database
- Stage I Transfers
  - Prepare and send Welcome Packets
  - Prepare Working Files
  - Coordinate with Unit Manager on case assignments
- Family Recertification's
  - Prepare and mail recertification packets
- Suite Support
  - Monitor office supplies
  - Monitor Postage Meter

##### B. Stage II/CAPP Unit Child Care Assistant Managers (CCAM)

- Case Management
  - Initial intake for new/transferred families
  - Verify documents
  - Coordinate with referring agencies about prior case information
  - Review selection of provider(s)
  - Monitor families need and eligibility
  - Family/Provider Correspondence as needed
  - Recertify families need/eligibility for services at minimum once annually
  - Termination procedures where appropriate
- Process Reimbursements
  - Review calculations
  - Process payments into CalWIN system for fiscal review/release
- Review and release payments to providers in CalWIN
- Monitoring/Audits/Reviews
  - Monthly monitoring of selected family files

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- Assist Unit Manager with fiscal and/or state audits and reviews of program
- Prepare family files as needed for reviews

##### C. Stage II/CAPP Unit Manager – (CSM)

- Reports
  - Monthly to Program Director
  - Monthly to fiscal
  - As needed to CDE
- Personnel
  - Supervise CAT Assignments
  - Supervise Field Intern Assignments
  - Supervise Clerks
  - Supervise Child Care Assistant Managers
- Program Handbook
  - Revisions per CDE regulations
  - Annual Update
- CDE Regulations
  - Monitor Management Bulletin Releases
  - Participate in CDE conference calls regarding program regulations
  - Review Title 5 and Education Codes as they pertain to program implementation
- Client/Provider Correspondence
- CCAM Support
- Clerk Support
- Stage I Transfer Process
  - Monitor incoming Stage I transfer process
  - Assign cases to CCAMs
  - Review potential cases to be transferred out
- Monitoring
  - Review monthly reimbursements
  - Monitor CCAM Caseloads
  - Review terminations
  - Monitor Unit calendar
  - Fiscal Audit
  - State Reviews
- Facility Support
  - Order office supplies for Suite
  - Design and Implement Emergency Plan
  - Submit requests for equipment/work orders
  - Maintain location binder

##### D. Stage II/CAPP Fiscal Support (Accountant III)

- Review and release payments to providers in CalWIN in the absence of Program staff
- Monitor program budgets
- Review and release payments for Maintenance of Effort contracts
- Submit to Sate CDE monthly Fiscal and Caseload reports on or before the 20<sup>th</sup> of each month

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- Submit year-end financial reports and schedules to External Auditors
- Correspond with Unit Manager/Program Manager (Administrative Services Assistant III responsible for AP/CAPP program)

E. Stage II/CAPP Program Manager (ASA III)

- Program Support
- State Correspondence
- Liaison with Appeals Unit
- Monthly Monitoring
- Contract initiation/renewal



CONTRA COSTA COUNTY EMPLOYMENT & HUMAN SERVICES DEPARTMENT  
COMMUNITY SERVICES BUREAU

# POLICIES AND PROCEDURES

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## SECTION 6-LOW-INCOME HOME ENERGY ASSISTANCE PROGRAM

**2013-2014**

Policy Council Approved:  
Board of Supervisors Approved:

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Section 6: Low Income Home Energy Assistance Program

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### Section 6: Low Income Home Energy Assistance Program

#### I. Introduction

##### A. Program Overview

The Low-Income Home Energy Assistance Program (LIHEAP) is a federally-funded program that assists low-income households with their heating and cooling needs, while helping protect the health and safety of the household.

##### B. Types of Assistance are Available

- **Bill Payment Assistance**  
LIHEAP may pay a portion of your energy bill in the form of a dual or single party warrant or a direct payment to a utility company. The amount of assistance is based on household income and size, energy cost, and funding availability.
- **Energy Crisis Assistance**  
LIHEAP funds are available to low-income households that are in a crisis situation; such as receiving a 48-hour disconnect notice, or service termination by a utility company.
- **Weatherization Assistance**  
The weatherization program provides services designed to reduce heating and cooling costs and improve the energy efficiency of a home, while safeguarding the health and safety of the household.

##### C. Service Center Locations

- **LIHEAP Assistance**  
Summit Center  
2530 Arnold Dr. Ste. 360  
Martinez, CA 94553  
Phone: 925 335-8900  
Fax: 925 335-8905
- **Weatherization Assistance**  
220-A Glacier Dr.  
Martinez, CA 94553  
Phone: 925-335-2100  
Fax: 925-335-2119

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### Section 6: Low Income Home Energy Assistance Program

#### II. LIHEAP Eligibility Guidelines

##### A. General Guidelines

- Families with children 5 years or younger living in the household.
- Families with elderly members (60 years or older) living in the household.
- Families who have permanent and/or temporary disabled members in the household, and proof of disability.
- Households who are new clients and have a high energy burden with very low to zero income.
- Utility bill must be \$300 or less in order to receive assistance.
- Repeat clients with no vulnerable population will receive negative points.
- Active Military and Veterans.
- Documents verifying legal status in the USA for applicant of the household.
- Copy of documentation verifying current total gross income for ALL household members.
- ID for person named on bill.

B. Credit Balances: If credit balance on client's account is more than double the monthly gas and electric charges; the client will have to re-apply when the credit balance has exhausted.

C. High Balances: HEAP or Fast Track payment must bring clients to zero balance. If the HEAP payment doesn't bring the balance to zero, the client must make a co-payment before our pledge can be made.

##### D. LIHEAP Questions to determine Eligibility:

- What City do you live in? (Contra Costa County residents only)
- What is the total of your PG&E?
- If over \$300, we will determine eligibility at their appointment and will have to make a payment depending on eligibility.
- Are there any children 5 years or younger?
  - If yes, birth certificates of children are required.
- Is there anyone in the household 60 years or older?
- If yes, verification of identification is required.
- Is there anyone in the household disabled?
- If yes, verification of disability can vary from State Disability, Social Security, workers comp., Paid Family Leave.
- Have you been helped in the past (new client)?
- If there an Active Military or Veteran in the household?
- Whose name is on the PG&E bill? Is that person over the age of 18? If so, please bring I.D. of the person.
- Current monthly whole utility bill (blue strip) and a 48hr notice or shut off (if applicable), income of all household members over the age of 18 for the past 30 days and legal status for the applicant.

Clients will have to make a payment depending on eligibility. Our payment will have to bring their account to zero or credit balance.

LIHEAP does not Guarantee Assistance.

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## Policies and Procedures

### Section 6: Low Income Home Energy Assistance Program

#### **III. Weatherization Referrals**

##### **A. General Description**

After the interview process is complete and the client is eligible for our assistance, we ask and offer weatherization for their homes. We ask if they are renting or owning their home. Weatherization will improve their home and make it more energy efficient. This could include windows, doors, caulking, weather stripping, heaters, water heaters, stoves, refrigerators and more. All home improvements are done at NO COST to landlords with eligible tenants, or eligible property owners.

##### **B. Weatherization for Rental Units**

If the client is renting they have to ask their landlord to fill out and sign the Energy Service Agreement for Rental Units and Post Weatherization Lead Forms. This is requesting permission to go in the home and do inspection for improvement. The Post Weatherization Lead Form is the only item not paid by the program and the cost is between \$200 and \$400. If the landlord does not wish to pay this they can select wish not to pay and sign the form.

##### **C. Weatherization for Home Owners**

If the client owns the home and has been determined eligible for services the client can fill out and sign the Energy Service Agreement for Owner and Post Weatherization Lead forms. This is giving the program authorization to inspect and improve their home to be more energy efficient. The Post Weatherization Lead Form is the only item not paid by the program and the cost is between \$200 and \$400. If the owner does not wish to pay this they can select wish not to pay and sign the form.

Include these forms with the LIHEAP Intake Application, Statement of Citizenship, current monthly utility bill, current monthly income, legal status, Energy Service Agreement and Post Weatherization Lead Forms.

After the forms are filled and signed include them with our LIHEAP application and fax them to the Weatherization office at (925) 335-2119. As soon as the Weatherization Program receives the fax they will contact the applicant for an appointment and start with improvements in their home.

This will ensure their home to be more energy efficient and save money on their utility bill.

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### Section 6: Low Income Home Energy Assistance Program

#### IV. Receiving and Processing Applications

##### A. Procedures for starting a client file:

- All documents are date stamped (date received)
- Have client fill out application (assist if needed)
- Ensure that client has brought all required documentation
- Ensure that the application is signed and dated
- Ensure that the citizenship form is filled out, signed and dated

##### B. Application and Documentation Review

##### 1. Check to see if all 5 documents are included in file folder and date stamped:

- Intake Application
- Statement of Citizenship Form
- Income for the past month
- Whole monthly utility bill (48hr notice also included if FT)
- Birth Certificate of the applicant or any children in the household under the age of 5.

##### 2. Intake Application:

- Has date stamp on entire paperwork.
- Application is signed and filled out completely.
- Social Security matches on the intake form and update on the Serv Traq N-1 database.

##### 3. Statement of Citizenship Form:

- Has name of applicant, place of birth and signature on form.

##### 4. Current Income:

- Show current monthly income for a month from the date stamped for everyone in the household.
- Total the Gross Income for the month.
- Income can include SSI, SSA, TANF (cash aid), unemployment, state disability, retirement, pension, and check stubs.

##### 5. Complete Monthly Utility Bill:

- Show whole current monthly utility bill from the date stamped.
- Also a 48hr notice or shut off included if Fast Track.
- The name, account number from page one and utility bill address from page 3 match the utility information on the application.

##### 6. Birth Certificate:

- Attach a certified birth certificate of applicant.
- Passport, naturalization form and green card are also acceptable.

##### 7. Complete the priority points sheet and calculate points.

##### 8. Complete Assurance 16 Activities form with appropriate action taken.

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### Section 6: Low Income Home Energy Assistance Program

#### **V. LIHEAP/Fast Track Complaint Procedure**

Any complaints are to be handled immediately by the intake clerk who received the complaint.

Complaints that cannot be resolved by the intake clerk in a reasonable amount of time, up to two weeks, are to be passed to the LIHEAP Assistant Manager.

Should the LIHEAP Assistant Manager be unable to resolve the complaint; it will be forwarded to the Program Manager.

Once a complaint has been resolved, a written dated account is to be made and filed in the complaint file.

#### **VI. Appeal Procedure**

##### **A. General Description**

Contra Costa County residents are entitled to apply for assistance from the Low Income Home Energy Assistance Program (LIHEAP) with their energy cost. The LIHEAP program is funded by the state and federal government, and is administered by the State Community Services and Development Department in Sacramento.

There are cases when a client is denied assistance. A client does, however, have the right to appeal that decision. State Regulation 22 CCR 100805 defines situations as appealable:

- If the application was not acted upon within 15 working days
- Unsatisfactory performance
- If you are denied LIHEAP services

##### **B. Appeal Procedure**

1. The client receives a letter denying LIHEAP services and the reason(s) why. If client disagrees with this decision the client may call the HEAP office and set up an appointment with the intake clerk for a file review to discuss the reasons for denial and to see if anything can be done to correct the information so that the application may be approved (This is not true in cases of families who are over income or who do not have a minimum of five priority points. If client makes too much money or does not have enough priority points there is nothing we can do.)

If the client is not satisfied after meeting with the Intake Clerk she/he will assist the client in completing an appeals form. If the client is not interested in filing an appeal at that time, has a total of ten working days after the date of meeting with the Intake Clerk to file a written appeal.

2. The client file and completed appeals form will then go to the Assistant Manager where he/she will review the information and either overrule the Intake Clerk's decision or agree with the current decision. Client is notified by letter within five (5) working days of the Assistant Manager's decision after the review.

3. The client file and completed appeals form will then go to the Program Manager where he/she will review the information and either overrule the Assistant Manager's decision or agree with the current

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### Section 6: Low Income Home Energy Assistance Program

decision. Then client is notified by letter within five (5) working days of the Program Manager's decision after his/her review.

At this point, if satisfaction is not reached, the client still has the option to appeal at the State level by contacting the Department of Community Services and Development in Sacramento, CA by writing to:

California Department of Community Services and Development

PO Box 1947

Sacramento, CA 95812

(916) 576-7109

(916) 263-1406



# POLICIES AND PROCEDURES

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## SECTION 7-WRITTEN SERVICE PLAN

**2013-2014**

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## VII. WRITTEN SERVICE PLAN

### A. 1304.20 CHILD HEALTH AND DEVELOPMENT SERVICES

Description	Perform Standards	P&P Manual	Responsibility	Outcome Measure	Date
<b><i>Child Health and Development Services</i></b> <b>1304.20</b>					
(a) Determining Child Health Status	1304.20(a)(1)(i) - 1304.20(a)(2)	Section 2 Pg. 5	CSAM	Child Health Status shall be determined for all children.	Within 90 days of enrollment
(b) Screening for Developmental Sensory and Behavioral Concerns	1304.20(b)(1) – 1304.20(b)(3)	Section 2 Page 13	CSAM and Teachers	All children will be screened.	Within 45 days of enrollment
(c) Extended Follow-up and Behavioral Treatment	1304.20(c)(1)&(2) – 1304.20(c)(5)	Section 2 Page 15	CSAM / MH Interns	All children benefit from extensive follow-up and treatment for all identified health needs.	Upon identification & ongoing
(d) Ongoing Care	1304.20(d)	Section 2 Page 3	CSAM	All children receive treatment at their medical home.	Ongoing
(e) Involving Parents	1304.20(e)(1) – 1304.20(e)(5)	Section 2 Pages 15-27	CSAM, Teachers and Site Supervisors	Parents are notified immediately when problems are suspected or identified and are familiarized with all services.	Ongoing
(f) Individualization of the Program	1304.20(f)(1) – 1304.20(f)(2)(iv)	Section 2 Page 56	All Staff/CS Managers	Services are individualized to meet the unique needs of each child & family.	Ongoing

## B. 1304.21 EDUCATION AND EARLY CHILDHOOD DEVELOPMENT

Description	Perform Standards	P&P Manual	Responsibility	Outcome Measure	Date
<b><i>Education and Early Childhood Development</i></b> <b>1304.21</b>					
(a) Child Development and Education Approach for All Children	1304.21(a)(1)(i) - 1304.21(a)(6)	Section 2 Page 61	CSM – Education	Approach to child development services is developmentally and linguistically appropriate and individualized to the child's unique needs and attributes.	Ongoing
(b) Child Development and Education Approaches for Infants and Toddlers	1304.21(b)(1)(i) – 1304.21(b)(3)(ii)	Section 2 Page 61	CSM – Infant/Toddler Education	The research-based Creative Curriculum for Infants, Toddlers and Twos is implemented for infants and toddlers and focuses on relationships. In addition caregiving is provided with a focus on the Program for Infant and Toddler Care policies.	Ongoing
(c) Child Development and Education for Preschoolers	1304.21(c)(1) – 1304.21(2)(2)	Section 2 Page 61	CSM – Pre-School Education	The research based Creative Curriculum for Preschool is implemented in the program. This curriculum is developmentally and linguistically appropriate.	Ongoing

## C. 1304.22 CHILD HEALTH AND SAFETY

Description	Perform Standards	P&P Manual	Responsibility	Outcome Measure	Date
<b><i>Child Health and safety</i></b> <b>1304.22</b>					
(a) Health Emergency Procedures	1304.22(a) - 1304.22(a)(5)	Section 2 Pages 92-95, 99, 104-105	Site Supervisors	Health Emergency Procedures are implemented	Daily
(b) Conditions of Short-Term Exclusion and Admittance	1304.22(b)(1) – 1304.22(b)(3)	Section 2 Pages 85-86,	Site Supervisors	Health checks and Sick Policy is implemented.	Daily

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(c) Medical Administration	1304.22(c) – 1304.22(c)(6)	Section 2 Pages 95-98	Designated Staff in the classroom	Medication is stored and administered correctly with consent.	Daily
(d) Injury Prevention	1304.22(d)(1)&(2)	Section 2 Pages 99, 101-102	All Staff/Health and Safety Officers	Health and Safety checks result in injury prevention	Daily and Monthly
(e) Hygiene	1304.22(e)(1)&(2) – 1304.22(e)(7)	Section 2 Page 87	All Staff	Staff, children and parents practice hygiene according to program standards.	Daily
(f) First Aid Kits	1304.22(f)(1) – 1304.22(f)(2)	Section 2 Page 103	Site Supervisors and CSM – Health Services	First Aid Kits are stocked at all times and readily available.	Daily

## D. 1304.23 CHILD NUTRITION

Description	Perform Standards	P&P Manual	Responsibility	Outcome Measure	Date
<b>Child Health and safety</b> <b>1304.22</b>					
(a) Identification of Nutritional Needs	1304.23(a) - 1304.23(a)(4)	Section 2 Page 78	CSAMs	Children with nutritional risk are identified.	Upon enrollment and within 45 days.
(b) Nutritional Services	1304.23(b)(1) – 1304.23(b)(4)	Section 2 Page 112	Registered Dietitian	Staff, families and children benefit from nutritional services.	Ongoing
(c) Meal Services	1304.23(c) – 1304.23(c)(7)	Section 2 Pages 66, 108-112	Food Services Manager	Children receive nutritious meals.	Daily
(d) Family Assistance With Nutrition	1304.23(d)	Section 2 Pages 79-82	CSAMs	Families receive nutrition education resources, and referrals to meet their needs.	Ongoing
(e) Food Safety and Sanitation	1304.23(e)(1) – 1304.23(e)(2)	Section 2 Page 108	Food Services Manager	All food is served in as safe and sanitary.	Daily

## E. 1304.24 CHILD MENTAL HEALTH

Description	Perform Standards	P&P Manual	Responsibility	Outcome Measure	Date
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<b>Child Mental Health</b>		<b>1304.24</b>			
(a) Mental Health Services	1304.24(a)(1)(i) - 1304.24(a)(3)(iv)	Section 2 Pages 24-25, section 3 Page 9	Mental Health Manager/Interns	Quality Mental Health Services are provided as appropriate	Daily

## F. 1304.40 FAMILY PARTNERSHIPS

Description	Perform Standards	P&P Manual	Responsibility	Outcome Measure	Date
<b>Family Partnerships</b> <b>1304.40</b>					
(a) Family Goal Setting	1304.40(a)(1) - 1304.40(a)(4)&(5)	Section 3 Page 4	CSAMs	Families are engaged in meaningful goal setting.	Ongoing
(b) Accessing Community Services and Resources	1304.40(b)(1) – 1304.40(b)(2)	Section 3 Page 8	CSAMs/Home Educators	Parents receive community services and resources appropriate to their needs and desires.	Ongoing
(c) Services to Pregnant Women Who Are Enrolled in Programs Serving Pregnant Women, Infants and Toddlers	1304.40(c)(1)(i),(ii)&(iii) – 1304.40(c)(3)	Section 3 Page 10	CSM – Infant/Toddler Programs	Pregnant women receive comprehensive services	Ongoing
(d) Parent Involvement – General	1304.40(d)(1) – 1304.40(d)(3)	Section 3 Page 11	CSM – Parent, Family and Community Engagement	Parents are engaged in all aspects of the program.	Ongoing
(e) Parent Involvement in Child Development and Education	1304.40(e)(1) – 1304.40(e)(5)	Section 2 Pages 70-71 Section 3 Pages 11, 16	Teachers/Home Educators	Parents are recognized as their child's primary educator and involved in all aspects of education services.	Ongoing
(f) Parent Involvement in Health, Nutrition, and Mental Health Education	1304.40(f)(1) – 1304.40(f)(4)(i),(ii)&(iii)	Section 3 Page 17	CSAMs/Home Educators	Parents are engaged in health, nutrition, and Mental Health Education.	Ongoing
(g) Parent Involvement Community Advocacy	1304.40(g)(1)&(2)	Section 3 Page 18	CSM – Parent, Family & Community Engagement	Parents are involved in advocacy efforts in their community.	Ongoing
(h) Parent Involvement in Transition Activities	1304.40(h)(1)-(4)	Section 2 Pages 58-60 Section 3 Page 18	Teachers/Home Educators	Parents are engaged in transition activities.	Ongoing
(i) Parent Involvement in Home Visits	1304.40(i)(1)-(3) – 1304.40(i)(4)&(5)	Section 2 Page 69-71 Section 3 Page 19	CSM – Home Based Services	Parents are involved in all home visits and socializations.	Ongoing



## G. COMMUNITY PARTNERSHIPS

Description	Perform Standards	P&P Manual	Responsibility	Outcome Measure	Date
<b><i>Community Partnerships</i></b> <b>1304.41</b>					
(a) Partnerships	1304.41(a)(1) - 1304.41(a)(4)	Section 3 Page 20	ASA III CSM – Parent, Family and Community Engagement	CSB engages in multiple formal and informal community partnerships that enhance services to children and families.	Ongoing
(b) Advisory Committees	1304.41(b)	Section 3 Page 21	CSM – Health and Registered Dietitian	Health Services Advisory Committee and Nutrition Advisory Committee are active.	Twice Annually
(c) Transition Services	1304.41(c)(1) – 1304.41(c)(3)	Section 3 Page 18	CSM – Education and Disabilities	Transitions into and out of EHS and HS are seamless and coordinated.	Ongoing



## H. 1304.50 PROGRAM DESIGN AND MANAGEMENT

Description	Perform Standards	P&P Manual	Responsibility	Outcome Measure	Date
<b>Program Design and Management 1304.50</b>					
(a) Policy Council, Policy Committee, and Parent Committee Structure	1304.50(a)(1) - 1304.50(a)(5)	Section 1 Pages 4-6	CSM – Policy Council	A formal structure of program governance provides parents and other community representatives with the authority and opportunity to participate in shared decision-making concerning program design and implementation.	Ongoing
(b) Policy Council Composition and Formation	1304.50(b)(1) – (b)(7)	Section 1 Pages 4-5	CSM – Policy Council	Policy groups are formed based on approved bylaws.	Ongoing
(c) Policy Council Responsibilities-General	1304.50(c)&(d)	Section 1 Pages 6-12	Head Start Director	Policy Groups are charge with the responsibilities as noted in Appendix A.	Ongoing
(d) The Policy Council or Policy Committee	1304.50(c)(d) – 1304.50(d)(2)(v)	Section 1 Pages 6-11	Head Start Director and Delegate Agency Director	Policy Council and the Local Policy Committee are engaged in policy decisions regarding the nature and operation of the program.	Ongoing
(e) Parent Committee	1304.50(e)(1),(2) &(3)	Section 1 Pages 5-6	Site Supervisor	Parent Committees are appropriately engaged and carry out their designated responsibilities.	Ongoing
(f) Policy Council, Policy Committee, and Parent Committee Reimbursement	1304.50(f)	Section 1 Pages 73-74	CSM – Policy Council	Reimbursements to parents are reasonable and provided timely for any travel, lodging, childcare and per diem expenses.	As requested
(g) Governing Body Responsibilities	1304.50(g)(1)&(2)	Section 1 Pages 4, 6-12	Head Start Director	Governing body is engaged in decision making as required.	Ongoing
(h) Internal Dispute Resolutions	1340.50(h)	Section 1 Pages 12-13	Head Start Director	Internal disputes are resolved in accordance with policy.	As needed

## I. 1304.51 MANAGEMENT SYSTEMS AND PROCEDURES

Description	Perform Standards	P&P Manual	Responsibility	Outcome Measure	Date
<b>Management System and Procedures 1304.51</b>					
(a) Program Planning	1304.51(a)(1)(i)-(iii) - 1304.51(a)(2)	Section 1 Pages 15-17	Directors & Assistant Directors	The program has an established, dynamic, and cohesive management system that support continuous improvement and foster commitment to providing the highest level of services to children and families.	Ongoing
(b) Communication – General	1304.51(b)	Section 1 Pages 17-25	Division Managers	Systems are in place to ensure a smooth flow of two-way communication with staff, parents, governing bodies, and delegate agency.	Ongoing
(c) Communication with Families	1304.51(c)(1)&(2)	Section 1 Pages 18-19	Site Supervisors	Communication with families is clear, concise, respectful, confidential and timely.	Ongoing
(d) Communications with Governing Bodies and Policy Groups	1304.51(d)	Section 1 Pages 19-20	Head Start Director	Communications with Governing Bodies and Policy Groups is of high quality, informational, educational and responsive.	Ongoing
(e) Communication Among Staff	1304.51(e)	Section 1 Page 18	Assistant Directors/Senior Managers	Quality outcomes for children and families are facilitated by various mechanisms for regular communication.	Daily
(f) Communication with Delegate Agencies	1304.51(f)	Section 1 Pages 19-20, 25	Analyst for Partners	Communication with the delegate is effective and timely.	Ongoing
(g) Record keeping Systems	1304.51(g)	Section 1 Pages 26-30	Business Systems Manager	Multiple record keeping systems are in place which provides accurate and timely information.	Ongoing
(h) Reporting System	1304.51(h)(1) –	Section 1	Division Managers	Efficient and effective reporting	Ongoing

	1304.51(h)(2)	Pages 18-26		systems are in place.	
(i) Program Self-Assessment Monitoring	1340.51(i)(1) – 1304.51(i)(3)	Section 1 Pages 39-40	Analyst	Self-Assessment is conducted to determine the program's effectiveness.	Annually

## J. 1304.52 HUMAN RESOURCES MANAGEMENT

Description	Perform Standards	P&P Manual	Responsibility	Outcome Measure	Date
<b>Human Resources Management 1304.52</b>					
(a) Organizational Structure	1304.52(a)(1) - 1304.52(a)(2)(i)&(iii)	Section 1 Page 41	Personnel Administrator	The organizational structure outlines how staff & functions are set up to meet the program's mission & goals. The structure also describes how Head Start fits into a larger agency.	Ongoing
(b) Staff Qualifications-General	1304.52(b)(1)&(2) – 1304.52(b)(4)	Section 1 Pages 51-52	Personnel Administrator	Staff and consultants have the knowledge, skills, and experience to perform.	When hired
(c) Early Head Start or Head Start Director Qualifications	1304.52(c)	Section 4 Page 44	Personnel Administrator	The Head Start Director has meets and exceeds the required qualifications.	When hired
(d) Qualifications of Content Area Experts	1304.52(d) – 1304.52(d)(8)	Section 4 page 45	Personnel Administrator	Content Area staff is qualified to fulfill their job responsibilities, including comprehensive services manager with disabilities expertise.	When hired
(e) Home Visitor Qualifications	1304.52(e)	Section 1 Page 51-52	Personnel Administrator	Home Visitors meet qualifications	When hired
(f) Infant and Toddler Staff Qualifications	1304.52(f)	Section 1 Pages 51-52	Personnel Administrator	Infant and Toddler Staff meet qualifications.	When hired
(g) Classroom Staffing and Home Visits	1304.52(g)(1) – 1304.52(g)(5)	Section 1 Page 52	Personnel Administrator	Staffing ratios and class sizes are maintained and home visits and home educator caseloads meet regulations.	Daily
(h) Standards of Conduct	1304.52(h)(1) –	Section 1	Personnel	All staff signs the Standards of	Upon hire and

	1304.52(h)(2)&(3)	Page 54	Administrator	Conduct Policy and adhere to standards.	annually thereafter
(i) Staff Performance Appraisals	1340.52(i)	Section 1 Pages 60-62	Supervisors	All staff receives their performance evaluation in a timely fashion.	Annually, or more often as needed
(j) Staff and Volunteer Health	1304.52(j)(1) – 1304.52(j)(3)	Section 1 Pages 62-63	Personnel Analyst and Site Supervisors	Staff and volunteers are in good health.	Established within 7 days of hire or when volunteering regularly
(k) Training and Development	1304.52(k)(1)-(3) – 1304.52(k)(4)	Section 1 Pages 65-70	Personnel Analyst	Training programs are required, & it is mandatory staff attend. Attendance is tracked.	Ongoing per training calendar

## K. 1304.53 FACILITIES, MATERIALS AND EQUIPMENT

Description	Perform Standards	P&P Manual	Responsibility	Outcome Measure	Date
<b>Facilities, Materials, and Equipment</b> <b>1304.53</b>					
(a) Head Start Physical Environment and Facilities	1304.53(a)(1) - 1304.53(a)(10)(xvii)	Section 4 Pages 46-49	Facilities Manager	Facilities meet state and local licensing requirements, are hazard free and safe.	Daily
(b) Head Start Equipment, Toys, Materials, and Furniture	1304.53(b)(1) – 1304.53(b)(3)	Section 4 Pages 53-55	Site Supervisor	Equipment, toys, materials and furniture are age and developmentally appropriate, in good repair, and hazard free.	Daily

## L. 1305 ELIGIBILITY, RECRUITMENT, SELECTION, ENROLLMENT, AND ATTENDANCE IN HEAD START

Description	Perform Standards	P&P Manual	Responsibility	Outcome Measure	Date
Determining Community Strengths and Needs	1305.3	Section 1 Pages 15-17	Analyst – Grants	A community assessment is conducted to determine strengths and needs.	Every three years and updated annually
Age of Children and Family Income Eligibility	1305.4	Section 4	CSAMs	Enrolled children meet age and	Ongoing

		Page 9		income requirements.	
Recruitment of Children	1305.5	Section4 Pages 9-10	Analyst – ERSEA	Recruitment Plan is fully implemented.	Ongoing
Selection Process	1305.6	Section4 Pages 9-10	CSAM	Children are selection according to approved selection criteria.	Ongoing
Enrollment and Re-enrollment	1305.7	Section4 Pages 12-13	Site Supervisor	Children are enrolled when vacancies occur and re-enrolled in accordance with policy.	Ongoing
Attendance	1305.8	Section4 Pages 36-38	Site Supervisor	Attendance is tracked, analyzed and corrective action plans are in place for centers below 85%.	Daily tracking monthly reporting
Policy on fees	1305.9	Section4 Pages 5, 39	Site Supervisor	No fees are charged for Head Start and Early Head Start Services.	Ongoing
Compliance	1305.10	Section 1 31 Section4 Page 9	Analyst – ERSEA	Agency is compliant with CFR 1305.	Ongoing

## M. 1306 HEAD START STAFFING REQUIREMENTS AND PROGRAM OPTIONS

Description	Perform Standards	P&P Manual	Responsibility	Outcome Measure	Date
<b>Head Start Staffing Requirements and Program Options</b>	<b>1306</b>				
<b>Subpart B – Head Start Program Staffing Requirements</b>	<b>1306.20-1306.23</b>				
Program Staffing Patterns	1306.20	Section 1 Pages 51-53 Section 4 Pages 44-45	Personnel Administrator	Program staffing patterns meet/exceed standards.	Daily
Staff Qualification Requirements	1306.21	Section 4 Pages 44-45	Personnel Administrator	Staff meets HS Act Requirements.	Daily
Volunteers	1306.22	Section 1 Pages 53, 62	CSM-Family & Community Partnership	Parents are active volunteers in the program	Daily
Training	1306.23	Section 1 Pages 63-67	Personnel Analyst	Staff is well trained.	Ongoing per T/TA plan
<b>Subpart C – Head Start Program Options</b>	<b>1306.30-1306.36</b>				
Provisions of Comprehensive Child Development Services	1306.30	Section 2 Pages 61-76	Head Start Director	All services meet local, State, and Federal regulations, involve parents, and involve community partners.	Daily
Choosing a Head Start Program Option	1306.31	Section 1 Page 15	Head Start Director	Head Start options are chosen to meeting the needs of the community, family, and child.	Ongoing
Center-based Program Option	1306.32	Section 2 Page 61	Assistant Directors	The center-based program is operated in accordance with the regulations.	Daily
Home-based Program Option	1306.33	Section 2 Pages 61, 70-71	Assistant Directors	The home-based program is operated in accordance with the regulations.	Daily
Combination Program Option	1306.34	N/A	N/A	N/A	N/A
Additional Head Start Program Option Variations	1306.35	Section 1 Page 15	Head Start Director	24-Waiver classrooms are operation with ACF/OHS approval.	Daily

Compliance Waiver	1306.36	N/A	N/A	N/A	N/A
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## N. 1308 DISABILITIES SERVICES

Description	Perform Standards	P&P Manual	Responsibility	Outcome Measure	Date
A. Subpart A General					
Purpose	1308.1 1308.2	Section 2 Pages 37-38	All Comprehensive Services Team	HS grantees and Delegates ensure that children with Disabilities enrolled in HS/EHS receive all the services to which they are entitled.	Ongoing
Definitions	1308.3	Section 2 Pages 38-39	All Comprehensive Services Team	Understanding Definitions related to Disabilities service area.	Ongoing
B. Subpart B Disabilities Service Plan					
Purpose and Scope	130.4	Section 2 Pages 37-42	Disabilities CSM	Development of Disabilities Service Plan to meet the special needs of children with disabilities and their parents.	Annually (July)
C. Subpart C Social Services					
Recruitment and Enrollment	1308.5 (a)(b)(c)(d)(e)(f)	Section 4 Page 10	All CSB Staff	The grantee and delegate has implemented plans to locate and recruit children with disabilities. Meet 10% enrollment of children with disabilities.	Ongoing
D. Subpart D Health Services					
Assessment of children	1308.6 (a)(b)(c)(d)(e)	Section 2 Pages 43, 52-54	All CS Team / Education Team	All children benefit from screenings and assessments. Children identified as needing further assessments are referred for further evaluations to LEA or RCEB.	Within 45 days of enrollment
Eligibility Criteria:					
Health Impairment	1308.7	Section 2 Page 50	All CS Team / Home Educator / Teachers	Disability CSM coordinates with Health, Mental Health, Nutrition, Family Services and Education Manager to ensure the needs of the	Ongoing
Emotional/behavioral disorders	1308.8	Section 2 Page 50			

Description	Perform Standards	P&P Manual	Responsibility	Outcome Measure	Date
Speech and language	1308.9	Section 2 Page 50		children with disabilities are met.	
Intellectual Disability	1308.10	Section 2 Page 50			
Hearing impairment including deafness	1308.11	Section 2 Page 50			
Orthopedic impairment	1308.12	Section 2 Page 50			
Visual impairment	1308.13	Section 2 Page 50-51			
Learning disabilities	1308.14	Section 2 Page 51			
Autism	1308.15	Section 2 Page 51			
Traumatic brain injury	1308.16	Section 2 Page 51			
Other impairments	1308.17	Section 2 Page 51			
Disabilities/health services coordination	1308.18	Section 2 Page 51	Disabilities CSM, Nutrition CSM and Health CSM	Disability CSM assures that the special needs of each child with disabilities are met.	Ongoing
E. Subpart E Education Services Performance Standards					
Developing individualized education program (IEP)	1308.19	Section 2 Pages 43-46	Disability CSM/ Family Services CSM / LEA / Education Team/ CS Team	Individualized services are provided to meet the unique needs of each child with disabilities and their families are met.	Ongoing
F. Subpart F Nutrition					
Nutrition Services	1308.20	Section 2 Page 54	Nutrition CSM/ Health CSM/ CS Team	Nutrition program provides identification, education, resources and referrals to serve children with disabilities.	Ongoing
G. Subpart G Parent involvement					



Description	Perform Standards	P&P Manual	Responsibility	Outcome Measure	Date
Parent participation and transition of children into Head Start and from Head Start to public school.	1308.21	Section 2 Page 58	Disability CSM/CSAM / Home Educator / Education Team	Transitions are provided for children transferring from: -EHS to HS -HS to kinder -Or to other related agencies	Ongoing

## O. 1310 HEAD START TRANSPORTATION

Description	Perform Standards	P&P Manual	Responsibility	Outcome Measure	Date
<b>Subpart B – Transportation Requirements 1310.10 – 1310.17</b>					
General	1310.10	Section 4 Page 59	CSAM	Agency does not provide transportation; families are connected with transportation resources as needed.	Ongoing
Child Restraint System	1310.11	Section 4 Page 57-59	CSM – Health Services	All children are secured in appropriate child restraint systems.	Any time a child is transported in a car or van.
Required use of School Buses or Allowable Alternate Vehicle	1310.12	N/A	N/A	N/A	N/A
Maintenance of Vehicles	1310.13	Section 4 Page 56-57	Facilities Manager	All vehicles are maintained in safe operating condition.	Daily
Inspection of New Vehicles at the Time of Delivery	1310.14	Section 4 Page 56-57	Facilities Manager	All new vehicles are inspected	Upon delivery
Operation of Vehicles	1310.15	Section 4 Page 56-57	N/A	N/A	N/A
Driver Qualifications	1310.16	Section 4 Page 56-57	Personnel Administrator	All staff driving county vehicles has a valid CDL.	Daily
Driver and Bus Monitor Training	1310.17	N/A	N/A	N/A	N/A
<b>Subpart C – Special Requirements 1310.20 – 1310.23</b>					
Trip Routing	1310.20	N/A	N/A	N/A	N/A
Safety Education	1310.21	Section 2 Page 65	CSM – Family and Community	All children and parents are provided with Pedestrian Safety Education.	Annually in Sept. and Ongoing for

			Partnerships		children
Children with Disabilities	1310.22	N/A	N/A	N/A	N/A
Coordinated Transportation	1310.23	N/A	N/A	N/A	N/A