



**RESOLUTION 2026-13**

**A RESOLUTION OF THE ESCAMBIA CHILDREN'S TRUST AUTHORIZING THE EXECUTIVE DIRECTOR TO AMEND ESCAMBIA CHILDREN'S TRUST POLICY MANUAL PART TWO, FUNDING COMMUNITY ORGANIZATIONS, CREATING A SUBSECTION 2.8, REGARDING PROGRAM QUALITY ASSURANCE AND CONTINUOUS PERFORMANCE IMPROVEMENT POLICY.**

**WHEREAS**, the ECT Board finds that the Escambia Children's Trust Policy Manual requires amendment from time to time to accurately reflect the policy of the Trust; and

**WHEREAS**, the proposed amendment to the policy manual serves a compelling public purpose.

**NOW, THEREFORE, BE IT RESOLVED BY THE ESCAMBIA CHILDREN'S TRUST OF ESCAMBIA COUNTY, FLORIDA:**

**Section 1: Recitals.** The foregoing recitals are true and correct and incorporated herein by reference.

**Section 2. Amendment.** Escambia Children's Trust Policy Manual Part Two, Funding Community Organizations, Section II, Policies Pertaining to the Award of Funding to Community Organizations, is hereby amended to create Subsection 2.8, Quality Assurance and Continuous Performance Improvement, as follows (words underlined are additions and words ~~stricken~~ are deletions):

**II. Policies Pertaining to the Award of Funding to Community Organizations**

...

**2.8 Quality Assurance and Continuous Performance Improvement**

1. Purpose.
  - a. The purpose of this policy is to establish Provider requirements for quality assurance, performance monitoring, and continuous improvement for all programs funded by the Escambia Children's Trust (ECT).
  - b. ECT is committed to ensuring that all funded programs deliver high-quality, outcome-driven services that align with the Trust's mission and demonstrate

measurable impact for children and families.

2. Policy Statement.

- a. All ECT-funded providers are required to participate in a comprehensive Quality Assurance and Continuous Performance Improvement process as defined in the ECT Quality Program Assurances Plan. This process occurs prior to funding determination and on a quarterly basis throughout the term of the agreement, if awarded.
- b. This process establishes standardized requirements for:
  - i. Program quality and service delivery
  - ii. Outcome measurement and data reporting
  - iii. Fiscal compliance and accountability
  - iv. Ongoing monitoring, evaluation, and audit
  - v. Continuous quality improvement and corrective action
- c. Participation in this process is a condition of and prerequisite to initial and continuing funding.

3. Framework for Quality and Performance.

- a. ECT utilizes a unified Quality Program Assurances framework that includes:
  - i. A Program Evaluation System with defined quality standards and performance measures
  - ii. Fiscal Compliance and Reimbursement requirements
  - iii. A Program Audit process
  - iv. A structured Program Improvement Plan (PIP) process
- b. These components work together to ensure accountability, transparency, and continuous improvement across all funded programs throughout the term of the funding agreement.

4. Requirements for Providers.

- a. Providers are required to:
  - i. Deliver services consistent with approved program design and scope;
  - ii. Collect, maintain, and report accurate data demonstrating program outcomes;
  - iii. Participate in monitoring activities, including site visits, data reviews, and audits;
  - iv. Engage in continuous quality improvement, including regular (at minimum quarterly) review of performance data to strengthen services; and
  - v. Respond to identified deficiencies through corrective action and improvement planning when required.
- b. Providers must comply with all requirements and standards outlined in the *ECT Quality Program Assurances Plan*, which is incorporated by reference into all funding agreements.

5. Performance Ratings and Improvement Requirements.

- a. ECT evaluates program performance using a standardized rating system based on defined quality and performance criteria as further outlined in the *ECT Quality Program Assurances Plan*.
  - i. Programs meeting or exceeding expectations will continue under standard monitoring.

- ii. Programs with identified gaps may receive technical assistance, coaching, or targeted support.
  - iii. Programs demonstrating significant deficiencies or non-compliance will be required to enter a Program Improvement Plan (PIP) with defined corrective actions and timelines.
- 6. Corrective Action and Accountability.
  - a. ECT utilizes a tiered performance improvement and corrective action process to address underperformance or non-compliance.
  - b. Depending on severity, this may include:
    - i. Written notices and required corrective actions
    - ii. Increased monitoring and technical assistance
    - iii. Formal Program Improvement Plans (PIP)
    - iv. Probationary status, funding restrictions, or contract action
  - c. ECT reserves the right to take immediate action when necessary to protect child safety, ensure compliance, or safeguard public funds.
- 7. Incorporation of Quality Program Assurances Plan.
  - a. The *ECT Quality Program Assurances Plan* serves as the governing document for all quality, performance, fiscal, and audit requirements.
  - b. All providers are responsible for understanding and complying with the full requirements outlined in that document, including:
    - i. Quality standards and evaluation criteria;
    - ii. Data collection and reporting requirements;
    - iii. Fiscal compliance expectations;
    - iv. Audit protocols; and
    - v. Program Improvement Plan (PIP) procedures.
- 8. Monitoring and Compliance.
  - a. ECT staff will monitor provider performance throughout the contract period.
  - b. Failure to comply with quality and performance requirements may result in:
    - i. Required corrective action
    - ii. Increased oversight
    - iii. Funding modifications
    - iv. Suspension or termination of the contract
- 9. Review and Updates.
  - a. This policy will be reviewed periodically and updated as necessary to align with best practices and updates to the *ECT Quality Program Assurances Plan*.

**Section 3. Severability.** If any section, subsection, paragraph, sentence, clause, phrase, or portion of this Policy is for any reason found void, invalid, unlawful, or unconstitutional by any court of competent jurisdiction, such portion shall be deemed a separate, distinct, independent, and severable provision such holding shall not affect the validity of the remaining portions of this Policy.

**Section 4. Inclusion in the Policy Manual.** It is the intention of the Escambia Children’s Trust that the provisions of this Policy shall become and be made a part of the Escambia Children’s Trust Policy Manual; and that the sections of this Policy may be renumbered or re-lettered in

order to accomplish such intentions.

**Section 5. Effective Date.** This Policy shall become effective upon the date approval is granted by the Escambia Children’s Trust.

DONE AND ENACTED this \_\_\_\_\_ day of April, 2026.

ATTEST:

By: \_\_\_\_\_  
Dr. Rex Northup, Chairman

By: \_\_\_\_\_  
Lindsey Cannon, Executive Director



## Escambia Children's Trust

### Quality Program Assurances

#### Plan

##### **Escambia Children's Trust Mission and Purpose:**

The Escambia Children's Trust (ECT) is a Children's Services Council (CSC) that was established to invest in the well-being of children by maximizing resources and ensuring accountability. CSCs do not deliver services; instead, they invest in community provider programs which can demonstrate measurable desired outcomes through a competitive review and accountability process.

ECT provides additional success-based investments in programs to meet the critical needs of our children with evidence-based proven expanded and new programs. ECT also has trained, experienced staff to help coach existing service providers and their staff in creating systems and processes to establish programmatic success metrics and capture the data required to measure and report successes.

ECT is at a significant advantage in that it provides a sustainable revenue stream with a ten (10) year life that is controlled by an Escambia County organization. Its funding comes directly to the Trust and is not dependent upon fluctuating annual governmental appropriations or the strength of the economy, which is particularly important in unstable times like these when contributions to service providers can drop while demand for services increase.

##### **ECT's Funding Focus:**

ECT's priorities were established by the Trust's governing board with recommendations from the public, following a comprehensive assessment of countywide needs by an independent evaluator. Generally, funding has been targeted to improve outcomes in areas in which Escambia County ranks lower than the state and/or nation overall. Of specific concern in Escambia County, compared to Florida, are these statistics:

- Higher rate of infant deaths and deaths of children ages 5-9.
- Higher percentage of low-birthweight babies.
- Lower rate of Gold Seal (accredited) childcare programs.
- Lower rate of kindergarten readiness.
- Higher overall juvenile arrest rate of children under 18.
- Lowest ranking on the state child well-being index since the index debuted in 2016; in 2019, and 2022, Escambia ranked #45 out of 67 Florida counties.

General areas have emerged based on critical needs and service gaps in Escambia County. These areas are **not listed in order of importance**. Final funding decisions would be made by the Trust governing board with public input.

- 1) **Children are Healthy**
- 2) **Children are Ready to Succeed in School and Life**
- 3) **Children are Safe and Protected from Abuse and Neglect**
- 4) **Children Have Supports to Help Them to Avoid Risky Behaviors**

The data presented in this indicator report card represents an important update to the Needs Assessment published by the Escambia Children's Trust in September 2022. An indicator report card tracks and reports on key metrics related to child wellbeing and the effectiveness of programs and initiatives aimed at improving outcomes for children and families in our community. Here's why that matters:

- ✓ **Accountability:** An indicator report card holds the Escambia Children's Trust and partner organizations accountable to the community for achieving results and making a positive impact. By transparently tracking and sharing outcomes data, we are demonstrating our commitment to continuous improvement and responsible stewardship of resources.
- ✓ **Identifying Gaps and Needs:** Comparing indicators to baselines and benchmarks helps identify areas where additional support or different approaches may be needed to address ongoing disparities and gaps in child wellbeing. This guides strategic planning and resource allocation.
- ✓ **Measuring Progress:** Tracking indicators over time reveals trends and whether initiatives are moving the needle on improving child and family outcomes. This feedback guides course corrections and enhancements to programs and services.
- ✓ **Informing the Community:** Sharing indicator data keeps the community informed about the wellbeing of our children and efforts underway to support them. This awareness is important for maintaining public trust and support.

State statute emphasizes the need for data and evidence of effectiveness to play a significant role in the allocation of CSC funding. All programs funded by the Trust will be expected to collect outcome data and share results with the public. Programs will be required to collect outcome data beyond simple counts of people served. For example, an after-school program that seeks to reduce crime rates and increase school performance will be expected to collect data from participants on police interactions, arrests and school activities such as absences, being tardy, discipline infractions, class participation, and academic performance. These findings could then be compared to similar students not in the program for evidence of effectiveness.

The Escambia Children's Trust administrative staff have experience in evaluation and measurement. They work directly with applicants and providers to ensure data and outcomes are tracked, and that all recipient organizations are continuously trained on evidence-based program evaluation methods. The staff will oversee evidence-based processes, including RFP proposal development aligned to accountability mechanisms, fiscal and program monitoring and data analysis.

A central goal of the Trust is to increase the ability of our provider community to use and collect evidence of program effectiveness. Technical assistance and training efforts will focus on helping local provider organizations develop outcome measures, collect and report data,

implement evaluation plans; and use this information to adjust and improve services continuously.

## Framework

The Escambia Children’s Trust (ECT) Quality Performance Assurance Plan establishes a unified framework for accountability, transparency, and continuous improvement across all ECT-funded programs. This plan outlines newly adopted and updated policies and procedures that govern program performance evaluation, fiscal compliance and reimbursement, and formal program audits. Together, these components ensure that public funds are managed responsibly and that funded programs deliver high-quality, outcome-driven services aligned with ECT’s mission to improve the well-being of children and families in Escambia County.

The **ECT Program Evaluation System** defines standardized quality expectations and performance measures used to assess program implementation, service delivery, and participant outcomes. Through structured site walkthroughs, data reviews, and ongoing monitoring, this system promotes evidence-based practices, equitable access to services, and continuous quality improvement. Evaluation results inform technical assistance, coaching, and corrective actions when necessary, ensuring programs are supported in meeting both contractual and community standards.

The **ECT Fiscal Compliance and Reimbursement Policies** establish clear requirements for financial management, documentation, and reimbursement of allowable costs. These policies are designed to safeguard public resources, support fiscal integrity, and align expenditures with approved program budgets and scopes of service. Fiscal compliance is assessed throughout the grant lifecycle and is directly linked to monitoring intensity, risk assessment, and program accountability.

The **ECT Program Site Audit** component serves as a formal review mechanism to verify compliance with contractual requirements, policies and procedures, site safety standards, fiscal practices, and human resource safeguards. Audit findings provide an additional layer of oversight and may trigger follow-up actions, corrective plans, or enhanced monitoring to address identified risks.

Collectively, this *Escambia Children’s Trust Quality Performance Assurance Plan* provides a comprehensive and integrated approach to program oversight. By aligning quality evaluation, fiscal accountability, and audit processes, ECT reinforces its commitment to responsible stewardship of public funds, strong provider partnerships, and measurable outcomes that positively impact children, youth, and families across Escambia County.

# Introduction to the Escambia Children’s Trust Quality Program Assurances Evaluation System

The **Escambia Children’s Trust (ECT) Quality Program Assurances Evaluation System** is designed to ensure that our programs across Escambia County deliver safe, enriching, and developmentally appropriate experiences that support the whole child. Rooted in evidence-based practices and community expectations, this system promotes continuous improvement and equitable access to quality services for all children and families.

The evaluation system is organized into **seven categories of quality standards**, each representing a core component of comprehensive child and family programming. Together, these standards provide a structured framework for assessing program performance, identifying strengths, and targeting areas for enhancement. The system emphasizes not only compliance, but also innovation, engagement, and meaningful outcomes that contribute to youth well-being and long-term success.

By integrating expectations related to program quality, staff capacity, curriculum, youth experience, attendance and dosage, family engagement, and data-driven improvement, the ECT Quality Program Assurances Evaluation System empowers providers to deliver high-impact programming. It also helps guide coaching, technical assistance, and resource allocation to ensure that programs demonstrating need to receive timely support.

Ultimately, this system serves as a collaborative tool—supporting providers, families, and community partners in advancing excellence in direct children services across Escambia County. Through shared commitment to these quality standards, the Escambia Children’s Trust strives to foster safe, engaging environments where all children can learn, thrive, and reach their full potential.

## Quality Program Assurances — Evaluation System Categories & Standards

The Escambia Children’s Trust Quality Program Assurances Evaluation System is organized into **seven key quality categories** that represent the **Key Performance Areas (KPAs)** for high-quality services for children and families. Together, these categories provide a comprehensive picture of how programs operate, engage youth, and support positive outcomes.

Each category or **KPA** focuses on a distinct aspect of program quality, ranging from the safety and structure of the learning environment to the ways programs engage families, use data, and continuously improve. The categories are designed to be clear, observable, and evidence-based, ensuring that evaluations are consistent, fair, and aligned with best practices.

Programs are assessed across all seven **KPAS** to identify strengths and highlight areas where additional support may be needed. This approach allows the Escambia Children’s Trust to promote accountability while also offering guidance, coaching, and resources to help programs strengthen quality and better serve children and families.

The following sections describe each category and outline the standards used to evaluate performance within that area.

## **1) Program Quality & Environment**

### **Description:**

Ensures the physical and organizational environment supports safety, positive youth experiences, and operational excellence. Spaces should be welcoming, developmentally appropriate, and conducive to learning.

### **Standards:**

- ✓ **Program has a clear vision and/or mission statement**
- ✓ **Site is clean, organized, and safe (e.g., no hazards, sanitized materials)**
- ✓ **Emergency protocols posted and accessible (fire drill, contacts, child safety measures and training documentation)**
- ✓ **Staff actively supervise all areas (indoors and outdoors)**
- ✓ **Physical space promotes engagement (centers, materials, flexible areas)**
- ✓ **Behavior management and positive reinforcement observed  
(Established Written Code of Conduct)**

## **2) Staff Qualifications & Training**

### **Description:**

Focuses on staff preparedness to deliver high-quality programming through professional qualifications, ongoing training, and informed instructional practices.

### **Standards:**

- ✓ **Staff-to-student ratio is compliant with licensing standards**
- ✓ **Staff have visible credentials/badges (Updated Background Screenings)**
- ✓ **Staff attended Professional Development (PD) sessions (check logs, quarterly reports or certificates)**
- ✓ **Staff implement strategies learned from training [e.g., Social Emotional Learning (SEL) practices, behavior guidance]**

### **3) Curriculum & Instructional Quality**

#### **Description:**

Assesses implementation of structured, intentional learning experiences that support academic, social, and enrichment goals.

#### **Standards:**

- ✓ **Lesson plans are posted or readily available**
- ✓ **Activities align with curriculum goals [literacy, math, arts, Science Technology Engineering and Mathematics (STEM), etc.]**
- ✓ **Activities are age-appropriate and incorporate differentiated lessons**
- ✓ **Youth are engaged and participating actively, contributing ideas, and completing tasks**
- ✓ **Youth reflect on their experience and able to share insights or feedback about the activity's purpose and/or outcomes**

## **4) Attendance & Dosage**

### **Description:**

Monitors enrollment, attendance, and time spent in programming to assess adequate exposure for meaningful participation and outcomes.

### **Standards:**

- ✓ **Attendance logs are current and accurately maintained**
- ✓ **Program tracks dosage (time per student per week/month); observed attendance complement historical attendance data/trends recorded in SAMIS**
- ✓ **High attendance rates ( $\geq 80\%$  of enrolled students attend 3+ days/week)**
- ✓ **Strategies used to boost consistent attendance (incentives, outreach)**

## **5) Youth Development & Outcomes**

### **Description:**

Ensures programs nurture the whole child by supporting social-emotional growth, leadership skills, and measurable academic or enrichment outcomes.

### **Standards:**

- ✓ **Staff are actively engaged (interact positively and respectfully with youth)**
- ✓ **Youth have opportunities for leadership, voice, and choice**
- ✓ **Evidence of SEL activities (journals, group circles, check-ins)**
- ✓ **Student work or projects are visible/displayed**
- ✓ **Youth outcomes are tracked (e.g., pre/post assessments, goal setting)**

## **6) Family & Community Engagement**

### **Description:**

Evaluates how programs build relationships with families and community partners to enrich programming and support student success.

### **Standards:**

- ✓ **Communication with families is regular and documented (newsletters, texts, calls, social media)**
- ✓ **Family events or workshops have been held this quarter/year**
- ✓ **Families are aware of program goals and offerings**
- ✓ **Community partners are engaged in programming (guest speakers, field trips, council meetings)**

## **7) Data Use & Continuous Improvement**

### **Description:**

Measures how programs track and use data to improve quality, inform decisions, and implement targeted supports.

### **Standards:**

- ✓ **Program staff review and reflect on data regularly (attendance, outcomes, feedback)**
- ✓ **Established program goals are measurable and posted or documented (staff aware of annual goals/objectives)**
- ✓ **Program data/metrics are recorded in SAMIS (Exhibit B, quarterly reports, etc.)**
- ✓ **Program has made adjustments based on data findings (attendance, expenditures, staff/participant retention, family involvement, etc.)**
- ✓ **Site leadership participates in coaching, monitoring meetings, mandatory provider meetings (ECT Monthly Meetings, ECT Quarterly Parade of Provider Meetings)**
- ✓ **Provider has complied with Media and Marketing Plan – ECT logo prominently on organization’s website; logo clearly visible on homepage or program-related landing page and should include an active hyperlink directing visitors to the official ECT website**

## Understanding the Program Rating Scale

The Escambia Children’s Trust uses a standardized rating scale to clearly and consistently evaluate the quality of all ECT funded programs. Each program is reviewed across seven key areas that reflect what research and community standards show are most important for safe, engaging, and effective programming for children and youth.

Programs earn points based on how well they meet each standard, with a maximum total score of **34 points**. These points are combined to produce an overall rating that shows how well a program is performing and where additional support may be helpful.

The rating scale is designed not only to measure performance, but also to guide **continuous improvement**. Programs with lower scores are not automatically penalized; instead, the results help identify specific areas where additional coaching, training, or resources can strengthen program quality.

### What the Ratings Mean

- **Exemplary** programs consistently demonstrate strong practices across all quality areas and serve as models of effective programming.
- **High Quality** programs meet most standards and show strong performance, with only minor opportunities for improvement.
- **Proficient** programs meet minimum expectations but may need additional support to strengthen consistency or deepen impact.
- **Emerging** programs partially meet standards and require targeted improvement in several areas.
- **Critical** programs do not meet basic quality expectations and require immediate attention and corrective action.

### How Low Performance Areas Are Addressed

When a program receives an **Emerging or Critical** rating, the Escambia Children’s Trust works collaboratively with the provider to develop an improvement plan. Recommended supports may include:

- Targeted coaching or technical assistance
- Required professional development or training
- Increased monitoring or follow-up visits
- An ECT Program Improvement Plan (PIP) with clear timelines and benchmarks

This approach ensures that the rating system is both **transparent and supportive**, helping families understand program quality while giving providers the tools they need to improve outcomes for children.

## Overall Rating Parameters (34 Possible Points)

Rating	Score Range (Points)	Description
Exemplary	31 – 34	Program consistently meets or exceeds all standards; high-quality implementation in all <b>Key Performance Areas</b> (KPA's).
High Quality	26 – 30	Program meets most standards with minor areas for improvement; strong implementation in most KPA's.
Proficient	21 – 25	Program meets minimum expectations; some areas require development or monitoring.
Emerging	17 – 20	Program partially meets standards; significant improvements needed in multiple KPA's.
Critical	0 – 16	Program fails to meet basic standards; immediate intervention is required.

- **1 point per item** on the checklist
- The **overall score** is the sum of points across all Key Program Areas (KPA's) (**maximum = 34**).
- This scale aligns with the Quality Assurance tiered support system: lower scores trigger more intensive coaching, interventions, and/or an ECT Program Improvement Plan (PIP).

## Performance Improvement Protocol

The Escambia Children’s Trust (ECT) utilizes a tiered corrective action and performance improvement process aligned with the Quality Program Assurances Evaluation System rating scale. This protocol ensures accountability for grant-funded programs while providing structured supports to address identified deficiencies and strengthen program implementation.

Corrective actions are based on a program’s overall rating and performance within specific Key Performance Areas (KPA’s). ECT reserves the right to apply corrective action(s) at any time when compliance concerns, health and safety risks, or material grant violations are identified, regardless of overall rating.

### Rating-Based Performance Improvement Levels

#### Exemplary (31–34 Points)

Programs rated Exemplary demonstrate consistent compliance with grant requirements and high-quality implementation across all KPAs.

##### Monitoring & Response:

- Standard monitoring schedule
- Recognition of effective practices, as applicable
- Optional participation in peer learning or best practice sharing

No corrective action is required.

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#### High Quality (26–30 Points)

Programs rated High Quality meet most grant requirements with minor opportunities for improvement.

##### Monitoring & Response:

- Standard monitoring schedule
- Written recommendations for continuous improvement
- Voluntary technical assistance, as requested

Formal corrective action is not required unless specific compliance issues are identified.

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### **Proficient (21–25 Points)**

Programs rated Proficient meet minimum grant requirements but show inconsistencies in one or more KPAs.

#### **Monitoring & Response:**

- Written improvement recommendations
- Targeted technical assistance or coaching
- Follow-up monitoring, as determined by ECT

Programs may be required to submit a brief improvement plan addressing identified gaps.

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### **Emerging (17–20 Points)**

Programs rated Emerging partially meet grant requirements and demonstrate significant deficiencies across multiple KPAs.

#### **Monitoring & Response:**

- Required Program Improvement Plan (PIP) submitted within **30 calendar days**
- Targeted technical assistance and/or required professional development
- Increased monitoring frequency, including follow-up site visits
- Documentation of progress toward corrective benchmarks

Failure to demonstrate improvement may result in escalated corrective actions.

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### **Critical (0–16 Points)**

Programs rated Critical fail to meet basic grant and quality standards and may pose risks to service quality, compliance, or child safety.

#### **Monitoring & Response:**

- Immediate Program Improvement Plan required within **15 calendar days**
- Intensive technical assistance and oversight
- Increased monitoring and reporting requirements
- Potential suspension, reduction, or reallocation of funds
- Possible probation or termination of grant agreement, in accordance with ECT policies

Immediate action is required to address any health, safety, or material compliance concerns.

## Introduction to the Escambia Children's Trust Quality Program Assurances Fiscal Compliance and Reimbursement Policy

The Escambia Children's Trust (ECT) Fiscal Guidelines establish the financial management standards and reimbursement requirements applicable to all funded programs. These guidelines are designed to ensure responsible stewardship of public funds, promote fiscal accountability, and support program sustainability while maintaining compliance with contractual, state, and federal requirements.

Fiscal compliance is a critical component of ECT's Quality Program Assurances framework. Programs are expected to maintain sound financial systems, internal controls, and documentation practices that accurately reflect allowable costs, services delivered, and reimbursement requests. Adherence to these guidelines helps ensure that program expenditures are reasonable, necessary, allocable, and directly aligned with approved budgets and scopes of service.

These Fiscal Guidelines apply throughout the full grant lifecycle, including pre-award readiness, contract execution, reimbursement processing, monitoring, and closeout. They outline expectations related to budgeting, accounting systems, payroll and personnel costs, attendance and dosage verification, reimbursement documentation, cash management, and fiscal record retention.

ECT utilizes these guidelines to assess fiscal capacity, determine risk levels, and guide monitoring activities. Programs that demonstrate consistent compliance may be subject to standard monitoring, while programs with identified gaps may receive technical assistance, increased oversight, or be required to implement a Program Improvement Plan.

The intent of these Fiscal Guidelines is not solely to enforce compliance, but to promote transparency, consistency, and collaboration between ECT and funded providers. By clearly defining fiscal expectations and reimbursement standards, ECT supports programs in strengthening financial practices, minimizing audit risk, and ensuring that resources are used effectively to benefit children and families.

Here is a **Provider Responsibilities** subsection that fits cleanly under the Fiscal Guidelines introduction and aligns with **grant agreements, reimbursement-based funding, and monitoring protocols**.

## Provider Responsibilities

Funded providers are responsible for maintaining fiscal systems, documentation, and practices that directly align with the Escambia Children’s Trust (ECT) Fiscal Compliance and Reimbursement Rubric. Provider performance in these areas informs fiscal risk assessments, monitoring intensity, and eligibility for continued funding.

Providers are expected to demonstrate compliance across the following rubric-aligned areas:

### 1. Fiscal Governance & Internal Controls

Providers must establish and implement board-approved fiscal policies and internal controls that ensure proper oversight and prevent misuse of funds. This includes segregation of duties, procurement standards, conflict of interest disclosures, and routine financial review processes.

*Aligned Rubric Area: Fiscal Governance & Internal Controls*

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### 2. Accounting System & Financial Management

Providers must maintain an accounting system capable of tracking program-specific revenues and expenditures, producing accurate financial reports, and supporting reimbursement verification. Records must be current, reconciled, and available for review upon request.

*Aligned Rubric Area: Accounting System & Financial Management*

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### 3. Budget Alignment & Cost Allowability

Providers are responsible for ensuring that all costs charged to ECT funds are allowable, reasonable, necessary, and allocable to the approved program budget. Shared costs must be supported by a cost allocation methodology, and budget variances must be approved in advance when required.

*Aligned Rubric Area: Budget Alignment & Cost Allowability*

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### 4. Reimbursement Submission Process

Providers must submit reimbursement requests in accordance with established timelines and procedures. Reimbursement of claims must be internally reviewed prior to submission and must accurately reflect actual, allowable expenditures incurred during the contract period.

## **5. Source Documentation & Fiscal Records**

Providers must maintain complete, organized source documentation supporting all reimbursement claims, including invoices, receipts, payroll records, and contracts. Documentation must clearly identify the program, funding source, dates of service, and cost categories.

*Aligned Rubric Area: Source Documentation & Records*

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## **6. Payroll & Personnel Costs**

Providers must ensure that payroll costs charged to the program are supported by timesheets or Personnel Activity reports and align with the approved staffing plan. Payroll taxes, fringe benefits, and personnel costs must be documented and compliant with grant requirements. Services paid for “staff” that receive a 1099 must be supported with an invoice from that worker and recorded under Professional Services/contract labor. All supporting documentation must include date and times worked.

*Aligned Rubric Area: Payroll & Personnel Costs*

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## **7. Attendance, Dosage & Billing Verification**

Providers must maintain accurate enrollment, attendance, and service dosage records that substantiate services delivered and align with reimbursement requests. Systems must be in place to prevent billing for ineligible participants, undelivered services, or duplicate funding.

*Aligned Rubric Area: Attendance, Dosage & Billing Verification*

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## **8. Cash Management & Reconciliation**

Providers must implement cash management procedures that ensure timely reconciliation of bank accounts, accurate recording of reimbursements, and appropriate handling of advance or delayed payments.

*Aligned Rubric Area: Cash Management & Reconciliation*

## **9. Monitoring, Audit & Corrective Action**

Providers must fully cooperate with ECT monitoring, audits, and desk reviews. Identified findings must be addressed through corrective actions or Program Improvement Plans within required timelines, with documentation demonstrating progress and resolution.

*Aligned Rubric Area: Monitoring, Audit & Corrective Action History*

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## **10. Child Welfare & Safety Fiscal Assurances**

Providers must ensure fiscal resources are allocated to support child safety, including background screenings, staff training, supervision ratios, and required insurance coverage. Fiscal decisions must not compromise the health, safety, or supervision of participating children.

*Aligned Rubric Area: Child Welfare & Safety Fiscal Assurances*

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## **Compliance & Impact on Ratings**

Failure to meet provider responsibilities in any rubric-aligned area may result in reduced fiscal compliance scores, increased monitoring, required corrective actions, or implementation of a Program Improvement Plan. Persistent or high-risk noncompliance may lead to escalation under ECT's progressive discipline framework, including funding restrictions or contract action.

## Overall Scoring Structure for Fiscal Compliance

Each category is scored **0–4 points**. Scores reflect **documentation, implementation, and risk level**.

Score	Rating	Definition
4	Exemplary	Fully compliant; documentation complete, accurate, timely; strong internal controls and proactive fiscal management.
3	High Quality	Compliant with core requirements; minor gaps exist but do not present fiscal or compliance risk.
2	Proficient	Some requirements met, but documentation or consistency is insufficient; improvement required.
1	Emerging	Significant compliance gaps; moderate fiscal or audit risk present.
0	Critical	Requirement not met or evidence not provided; high risk and unacceptable.

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## Rubric Categories & Indicators

### 1. Fiscal Governance & Internal Controls

**Assesses oversight, policies, and fraud prevention**

- **4:** Board-approved policies; segregation of duties documented and implemented; routine internal reviews.
  - **3:** Policies in place and generally followed; minor gaps in documentation or updates.
  - **2:** Some policies exist, but controls are inconsistently applied.
  - **1:** Policies incomplete or informal; limited oversight.
  - **0:** No fiscal policies or controls.
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### 2. Accounting System & Financial Management

**Assesses financial tracking and reporting capacity**

- **4:** System tracks program-level expenses; real-time reporting available; reconciliations current.
  - **3:** System adequate for reporting; reconciliations completed with minor delays.
  - **2:** Tracking exists but lacks clarity or consistency.
  - **1:** Manual or unreliable tracking methods.
  - **0:** No system capable of supporting grant reporting.
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### **3. Budget Alignment & Cost Allowability**

#### **Assesses allowability and budget compliance**

- **4:** All costs clearly allowable, allocable, and aligned; cost allocation documented.
  - **3:** Budget aligned; minor clarifications needed.
  - **2:** Some costs are unclear or inconsistently documented.
  - **1:** Budget frequently misaligned with expenditures.
  - **0:** No alignment with approved budget.
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### **4. Reimbursement Submission Process**

#### **Assesses timeliness and accuracy of reimbursement requests**

- **4:** Reimbursements submitted timely, accurately, internally reviewed, and complete.
  - **3:** Submissions timely with minor corrections needed.
  - **2:** Late or inconsistent submissions; documentation gaps.
  - **1:** Frequent errors or missed deadlines.
  - **0:** No formal reimbursement process.
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### **5. Source Documentation & Records**

#### **Asses documentation integrity**

- **4:** Complete, organized source documentation; easily verifiable.
  - **3:** Documentation adequate; minor missing items corrected upon request.
  - **2:** Documentation incomplete or inconsistently labeled.
  - **1:** Significant documentation is missing.
  - **0:** No supporting documentation available.
- 

### **6. Payroll & Personnel Costs (Reimbursement)**

#### **Assesses labor cost compliance**

- **4:** Payroll fully supported by timesheets/effort reports; aligns with staffing plan.
- **3:** Payroll compliant; minor documentation inconsistencies.
- **2:** Incomplete timesheets or effort reporting.
- **1:** Payroll charged without reliable support.
- **0:** Payroll documentation absent.

## **7. Attendance, Dosage & Billing Verification**

### **Assesses service verification and billing integrity**

- **4:** Attendance aligns with reimbursement; dosage documented; strong verification controls.
  - **3:** Alignment present; minor discrepancies resolved.
  - **2:** Attendance is inconsistently tracked or reconciled.
  - **1:** Significant discrepancies between attendance and billing.
  - **0:** No attendance or dosage records.
- 

## **8. Cash Management & Reconciliation**

### **Assesses cash handling and reconciliation practices**

- **4:** Cash managed effectively; reimbursements tracked; reconciliations current.
  - **3:** Adequate cash management with minor delays.
  - **2:** Cash flow issues impact reimbursement practices.
  - **1:** Reconciliation is irregular or incomplete.
  - **0:** No reconciliation process.
- 

## **9. Monitoring, Audit & Corrective Action History**

### **Assesses responsiveness to oversight**

- **4:** No unresolved findings; proactive corrective actions.
  - **3:** Prior issues resolved timely.
  - **2:** Some findings remain unresolved.
  - **1:** Repeat findings or slow responses.
  - **0:** Non-responsive to monitoring.
- 

## **10. Child Welfare & Safety Fiscal Assurances**

### **Assesses fiscal support for safe operations**

- **4:** Funds clearly allocated for safety, screening, training, and supervision.
- **3:** Safety costs budgeted; documentation adequate.
- **2:** Safety-related expenses are inconsistently documented.
- **1:** Insufficient allocation for safety needs.
- **0:** No evidence of safety-related fiscal planning.

## Scoring & Interpretation

<b>Total Points (40 Max)</b>	<b>Risk Level</b>	<b>Action</b>
34–40	Low Risk	Eligible for contracting; standard monitoring
26–33	Moderate Risk	Contracting with conditions or targeted TA
18–25	High Risk	Program Improvement Plan required
0–17	Critical Risk	Not eligible or subject to suspension/termination

---

## Summary of Fiscal Compliance and Provider Responsibilities Plan

The Fiscal Compliance and Provider Responsibilities Plan establish clear expectations for the responsible management of public funds across all funded programs. The plan outlines standardized fiscal requirements aligned with reimbursement-based funding, internal controls, documentation, attendance verification, and child safety protections. It is directly tied to ECT’s Fiscal Compliance and Reimbursement Rubric to ensure consistency, transparency, and accountability in how programs are reviewed and monitored.

Through this framework, providers are held to clearly defined standards across financial governance, accounting systems, budget alignment, reimbursement practices, payroll documentation, service verification, and audit responsiveness. The plan supports ECT’s risk-based monitoring approach by linking provider performance to fiscal scoring, monitoring intensity, and corrective action requirements when needed.

Overall, the plan promotes sound fiscal stewardship, protects children and public resources, and supports continuous quality improvement by clearly outlining provider responsibilities and the consequences of noncompliance, while maintaining a collaborative approach to technical assistance and program improvement.

# Introduction to the Escambia Children's Trust

## Quality Program Assurances

### Program Site Audit

The **Escambia Children's Trust (ECT) Program Site Audit** serves as a formal oversight mechanism to verify provider compliance with contractual requirements, established policies and procedures, and applicable quality, fiscal, and safety standards. The audit process is designed to ensure that ECT-funded programs operate with integrity, transparency, and accountability while safeguarding public funds and promoting safe, high-quality services for children and families.

The Program Site Audit provides a comprehensive review of program operations, including governance and policy adherence, site safety and participant protections, human resources practices, fiscal management, and documentation integrity. Audit activities may include on-site reviews, document examinations, staff interviews, and verification of data reported through ECT systems. Findings are documented using standardized tools to ensure consistency, objectivity, and fairness across all funded programs.

Site visits are a critical component of monitoring after-school and child-serving programs because they provide **direct, real-time verification** that policies, procedures, and safety practices are not only documented but actively implemented. While desk reviews assess paperwork, site visits validate **actual conditions, staff behavior, and child supervision**, which are essential to ensuring safe environments.

These visits are closely aligned with requirements set forth by the Florida Department of Children and Families (DCF), particularly in areas of:

- Child supervision and ratios
- Health and safety compliance
- Background screening and staff qualifications
- Mandatory reporting and child abuse prevention

Through site visits, monitoring staff can identify risks that may not be evident in documentation alone, including supervision lapses, environmental hazards, or noncompliance with child protection standards. This proactive oversight supports **early intervention**, reduces liability, and ensures programs are operating in accordance with **child welfare laws and DCF licensing or regulatory expectations**.

Ultimately, site visits protect:

- **Children’s health and safety**
- **Program integrity**
- **Public trust and funding accountability**

The ECT Program Site Audit is not intended solely as a compliance exercise, but as a component of ECT’s broader Quality Performance Assurance framework. By integrating audit findings with program evaluation and fiscal compliance processes, ECT supports continuous improvement, responsible stewardship of public resources, and consistent delivery of safe, effective, and outcome-focused services across Escambia County.

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## Program Site Audit Checklist Categories

I reviewed your site visit questionnaire and reorganized it into **aligned categories suitable for the ECT Quality Program Assurances Plan**, while also reflecting typical **DCF afterschool program site criteria domains** (health & safety, supervision, administration, training, and documentation).

Below is a **clean, structured framework** you can directly plug into your Quality Assurance Plan, monitoring tools, or reporting dashboards.

---

# ECT Quality Program Assurances Plan – Recommended Categories

## 1. Health, Safety & Physical Environment (DCF Core: Facility Safety & Compliance)

(39 Points – Facility Safety Inspection: Interior & Exterior)

### Subcategories:

- **Building Safety & Maintenance**
  - Doors, exits, lighting, HVAC, wiring, ceilings
  - Furniture stability, anchored shelves, equipment condition
- **Hazard Prevention**
  - Trip hazards, extension cords, wet floors, debris
- **Environmental Conditions**
  - Temperature control, ventilation, cleanliness
- **Restroom & Sanitation Conditions**
- **Outdoor Safety**
  - Playground equipment, gates, supervision, debris-free areas

### Purpose in QA Plan:

Ensures compliance with DCF minimum health and safety standards and reduces liability risk.

---

## 2. Supervision & Operational Oversight (DCF Core: Active Supervision & Ratios)

(Embedded Across Facility + Exterior Items)

### Subcategories:

- Active supervision (indoor/outdoor)

- Sign-in/sign-out accountability
- Child-to-staff visibility and engagement

**Purpose:**

Directly tied to **child safety, incident prevention, and licensing compliance.**

---

### **3. Emergency Preparedness & Risk Management (DCF Core: Emergency Planning)**

**(Key Safety Items + Documentation)**

**Subcategories:**

- Emergency plans (written and posted)
- Evacuation routes
- Fire inspections and extinguishers
- Emergency drills (documentation)
- Smoke/CO detectors
- Access to communication (phones)

**Purpose:**

Measures readiness for crisis situations and alignment with **DCF emergency preparedness requirements.**

---

### **4. Health & Medical Safety (DCF Core: Health Services & First Aid)**

**(Facility + Forms + File Requirements)**

**Subcategories:**

- First aid kits (facility + vehicles)
- CPR/First Aid certified staff
- Medication storage and administration
- Health records and PHI separation
- Sanitary practices

**Purpose:**

Protects children with medical needs and ensures compliance with **health-related DCF regulations.**

---

### **5. Transportation Safety & Compliance (DCF Core: Transportation Standards)**

**(Dedicated Safety + Documentation Section)**

**Subcategories:**

- Vehicle inspections
- Driver qualifications and records
- Transportation training (DCF)
- Vehicle alarms (SB 252 compliance)
- Front-to-back checks
- Emergency equipment in vehicles

**Purpose:**

High-risk category tied to **child safety during transport and state compliance mandates.**

---

**6. Program Policies & Governance (DCF Core: Administrative & Operational Policies)**

**(15 Points – Policy Requirements)**

**Subcategories:**

- Enrollment & attendance policies
- Background screening
- Behavior management
- Incident reporting
- Drug-free workplace
- Hiring and recruitment
- Medication administration
- Emergency policies (lost child, intruder, fire, etc.)

**Purpose:**

Ensures programs operate with **clear, compliant, and enforceable policies.**

---

**7. Documentation & Forms Compliance (DCF Core: Recordkeeping & Audit Readiness)**

**(23 Points – Form Requirements)**

**Subcategories:**

- Enrollment and attendance forms
- Incident and behavior reports
- Transportation forms
- Training verification forms

- Health and medication forms

**Purpose:**

Supports **audit readiness, accountability, and data integrity.**

---

## **8. Participant File Management (DCF Core: Child Records Compliance)**

### **(Participant + PHI File Requirements)**

**Subcategories:**

- Secure storage (locked access)
- Enrollment and consent documentation
- Incident and behavior documentation
- Health records (separately secured)

**Purpose:**

Protects **confidentiality and legal compliance (HIPAA/DCF expectations).**

## **9. Staff & Volunteer Qualifications and Training (DCF Core: Personnel Requirements)**

### **(22 Points – Staff Files + Training)**

**Subcategories:**

- Background screening (Level II)
- Credentials and job descriptions
- Required DCF training certifications:
  - CANN, AMAP, HSAN, RNRF, SAPR, UDAP
- Internal training:
  - Supervision
  - inspections
  - incident reporting
  - behavior management
- CPR/First Aid certification

**Purpose:**

Ensures staff are **qualified, trained, and compliant with DCF licensing standards.**

## **10. Continuous Quality Improvement & Branding Compliance**

### **(ECT-Specific Enhancements)**

#### **Subcategories:**

- ECT logo visibility
- Alignment with ECT standards
- Use of data for improvement plans

#### **Purpose:**

Connects site performance to **ECT funding expectations and continuous improvement efforts.**

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## Program Site Audit –Summary

The Program Site Audit is a standardized compliance and quality assurance instrument utilized by the Escambia Children’s Trust (ECT) to evaluate funded afterschool programs against Florida Department of Children and Families (DCF) requirements. The audit applies a **120-point scoring framework** with defined performance tiers (Critical to Exemplary) to ensure consistent, objective assessment across providers.

The tool measures compliance across core domains including **health and safety, supervision, emergency preparedness, transportation, governance, documentation, and staff qualifications**. Data collected through site visits, documentation reviews, and direct observation are used to validate adherence to regulatory standards and contractual obligations.

Audit results are used to:

- Identify **compliance deficiencies and risk levels**
- Trigger **corrective actions and Program Improvement Plans (PIPs)**
- Inform **funding decisions and ongoing contract monitoring**
- Support **system-wide quality assurance and accountability**

This process ensures that all ECT-funded programs maintain **safe environments, qualified staff, and compliant operations**, while advancing continuous quality improvement across the network.

**Escambia Children’s Trust**  
**Quality Program Assurances**  
**Program Improvement Plan**  
**(PIP)**

The Escambia Children’s Trust (ECT) Quality Assurances **Program Improvement Plan (PIP)** is a structured and integrated corrective action framework designed to address identified deficiencies in program quality, fiscal compliance, and operational accountability across all ECT-funded programs. The PIP serves as a formal mechanism to support improvement, protect public funds, and ensure that services delivered to children and families meet established ECT standards and contractual requirements.

The Program Improvement Plan is directly informed by findings from three core oversight functions: the ECT Quality Program Assurances Evaluation System, the ECT Fiscal Compliance and Reimbursement Procedures Policy, and the ECT Program Audit. Together, these systems provide a comprehensive view of program performance by assessing service quality and outcomes, fiscal integrity and reimbursement accuracy, and compliance with operational, safety, and contractual standards. When results from any of these processes indicate underperformance, non-compliance, or elevated risk, the PIP is used to formally document required corrective actions and improvement strategies.

The PIP outlines specific, measurable, and time-bound actions that providers must implement to address identified gaps. Corrective actions may relate to program design and delivery, staffing and training, data collection and reporting, fiscal management and documentation, reimbursement practices, or audit findings related to site safety, human resources, or internal controls. The plan establishes clear expectations, responsible parties, documentation requirements, and timelines for achieving compliance and demonstrating improvement.

While the PIP is an accountability tool, it is grounded in ECT’s commitment to continuous quality improvement and provider support. ECT works collaboratively with funded programs by offering technical assistance, coaching, targeted monitoring, and guidance throughout the improvement process. The level of oversight and intervention is aligned with the severity and persistence of identified issues, using a tiered approach to protect children, families, and public resources while supporting provider success.

Through the integration of evaluation, fiscal compliance, and audit processes, the Quality Assurances Program Improvement Plan ensures consistency, transparency, and fairness in corrective actions. It reinforces ECT’s responsibility as a steward of public funds and affirms its commitment to strengthening program quality, improving outcomes, and maintaining public trust across all funded services.

Programs receiving an **Exemplary** or **High Quality** rating demonstrate strong alignment with quality standards and typically do not require a Program Improvement Plan. These programs may receive recommendations for continuous improvement but remain on a standard monitoring schedule.

Programs rated **Proficient** meet minimum expectations but may show inconsistencies across one or more components. In these cases, ECT may require targeted improvement actions to strengthen implementation and prevent performance decline. The PIP serves as a proactive tool to support continued progress and sustainability.

Programs receiving an **Emerging** rating are required to enter the Program Improvement Plan process. These programs partially meet standards and require structured, time-bound actions to address identified gaps across multiple areas. The PIP outlines specific strategies, timelines, and documentation requirements to support measurable improvement and progress toward compliance.

Programs rated **Critical** require immediate and intensive intervention. A Program Improvement Plan is mandatory and may be paired with enhanced monitoring, temporary suspension, or other corrective measures. In these cases, the PIP establishes clear expectations for urgent corrective action and determines whether the program can return to acceptable performance levels or whether further contractual action is necessary.

Across all applicable rating levels, the Program Improvement Plan is grounded in a **transparent and collaborative improvement model**. Programs are informed of their rating, the evidence supporting identified concerns, and the specific actions required for improvement. ECT works in partnership with providers by offering technical assistance, coaching, and monitoring support to promote successful implementation.

The Program Improvement Plan reflects ECT's commitment to accountability, continuous quality improvement, and responsible stewardship of public funds. By aligning improvement expectations directly to program ratings, the PIP ensures clarity, consistency, and fairness while supporting providers in delivering high-quality services to children and families.

## **I. Progressive Discipline Process for Funded Programs**

The Escambia Children’s Trust (ECT) utilizes a progressive discipline process to address non-compliance, underperformance, or failure to meet Quality Program Assurances standards. This process is designed to promote accountability, encourage corrective action, and protect the effective use of public funds, while providing programs with reasonable opportunities to improve.

Progressive discipline consists of **three escalating levels**, applied based on the severity, frequency, and impact of identified issues. ECT reserves the right to bypass levels when immediate action is required to protect child safety, fiscal integrity, or contractual compliance.

### **A. Level 1: Notice of Concern and Improvement Support**

*(Least Severe)*

**Purpose:**

To formally notify the program of minor or initial deficiencies and provide guidance for improvement.

**Triggers may include:**

- Minor compliance issues
- Isolated performance gaps
- Inconsistencies in documentation, reporting, or implementation
- First-time findings during monitoring or evaluation

**Actions may include:**

- Written Notice of Concern
- Required corrective actions or improvement recommendations
- Targeted technical assistance or coaching
- Follow-up monitoring or documentation review

**Expected Outcome:**

Program addresses identified issues within established timelines and returns to full compliance without further escalation.

## **B. Level 2: Formal Corrective Action and Enhanced Monitoring**

### **Purpose:**

To address significant or repeated deficiencies that impact program quality, compliance, or outcomes.

### **Triggers may include:**

- Failure to resolve Level 1 concerns
- Multiple deficiencies across Key Performance Areas (KPAs)
- Emerging or borderline Critical evaluation ratings
- Ongoing data, attendance, or reporting issues

### **Actions may include:**

- Required Program Improvement Plan (PIP) with defined timelines
- Increased monitoring frequency (desk reviews and/or site visits)
- Required professional development or training
- Probationary status or conditional funding continuation

### **Expected Outcome:**

Program demonstrates measurable progress and sustained improvement aligned with ECT standards.

### **C. Level 3: Severe Corrective Action, Suspension, or Contract Termination**

*(Most Severe)*

**Purpose:**

To address serious, unresolved, or high-risk issues that threaten child safety, compliance, or public trust.

**Triggers may include:**

- Failure to implement or complete a required PIP
- Persistent non-compliance after Level 2 intervention
- Critical evaluation rating
- Health or safety violations
- Fraud, misuse of funds, or material contract violations
- Loss of licensure or operational capacity

**Actions may include:**

- Immediate corrective directives
- Temporary suspension of services and/or funding
- Accelerated monitoring or audits
- Reduction or reallocation of funds
- Termination or non-renewal of the grant agreement

**Expected Outcome:**

Resolution of issues through reinstatement under strict conditions or orderly termination of the contractual relationship.

## II. Program Improvement Plan Template

*Escambia Children's Trust – Quality Program Assurances*

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### Program Information

- **Program Name:**
  - **Provider Organization:**
  - **Grant/Funding Cycle:**
  - **Site Location(s):**
  - **Overall Rating:**  Exemplary  High Quality  Proficient  Emerging  Critical
  - **Program Improvement Plan Submission Due Date:**
  - **PIP Review Period:**
- 

### Purpose of the Program Improvement Plan

This Program Improvement Plan (PIP) is required for programs identified as **Emerging or Critical**, or for any program with significant deficiencies identified during monitoring. The PIP outlines specific actions the program will take to address areas of non-compliance or underperformance, strengthen implementation, and align with ECT Quality Program Assurances standards.

All corrective actions must be **measurable, time-bound, and supported by documentation.**

## Quality Area 1: Program Quality & Environment

### Identified Issue(s):

Policies  Staffing  Licensing  Organizational Structure or Administrative Oversight  
 Emergency Procedures  Environment Setup  Facility Safety)

### Corrective Action(s):

- Action Step:
- Responsible Staff:
- Timeline for Completion:
- Evidence of Completion (e.g., updated policies, licenses, staff records):

### ECT Support (if applicable):

Technical Assistance  Policy Review  Training  Monitoring Visit

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## Quality Area 2: Staff Qualifications & Training

### Identified Issue(s):

Supervision  Staff badges  Professional Development  Strategies Implementation )

### Corrective Action(s):

- Action Step:
- Responsible Staff:
- Timeline for Completion:
- Evidence of Completion (e.g., safety checklist, photos, drills, inspection reports):

### ECT Support (if applicable):

Site Walkthrough  Safety Training  Corrective Guidance

## Quality Area 3: Program Design & Instructional Quality

### Identified Issue(s):

Lesson plans  Activities align with curriculum goals  Youth engagement  Participant feedback)

### Corrective Action(s):

- Action Step:
- Responsible Staff:
- Timeline for Completion:
- Evidence of Completion (e.g., lesson plans, schedules, curriculum materials):

### ECT Support (if applicable):

Coaching  Curriculum Alignment  Instructional Support

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## Quality Area 4: Attendance & Dosage/Development

### Identified Issue(s):

Attendance Tracking  Consistent Participation  Dosage Targets  Attendance strategies)

### Corrective Action(s):

- Action Step:
- Responsible Staff:
- Timeline for Completion:
- Evidence of Completion (e.g., observation notes, youth feedback, activity artifacts):

### ECT Support (if applicable):

Engagement Coaching  Staff Training  Observation & Feedback

## Quality Area 5: Youth Development and Outcomes

### Identified Issue(s):

Staff are actively engaged  Youth have opportunities for leadership, voice, and choice  
 Evidence of Social Emotional Learning (SEL)  Student work/projects are visible  Youth outcomes are tracked)

### Corrective Action(s):

- Action Step:
- Responsible Staff:
- Timeline for Completion:
- Evidence of Completion (e.g., attendance logs, data reports, outreach plans):

### ECT Support (if applicable):

Data Review  Attendance Strategy Support  Monitoring

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## Quality Area 6: Family & Community Engagement

### Identified Issue(s):

Communication  Family Participation  Families aware of program goals  Partners )

### Corrective Action(s):

- Action Step:
- Responsible Staff:
- Timeline for Completion:
- Evidence of Completion (e.g., newsletters, sign-in sheets, partnership MOUs):

### ECT Support (if applicable):

Engagement Strategy Support  Communication Tools  Best Practice Sharing

## Quality Area 7: Data Collection, Reporting & Continuous Improvement

### Identified Issue(s):

Staff awareness of goals  Timely Reporting in SAMIS  Use of Data for Improvement  
 Site leadership participates in coaching, monitoring meetings  Compliance with Media and Marketing Plan  Program has made adjustments based on data findings)

### Corrective Action(s):

- Action Step:
- Responsible Staff:
- Timeline for Completion:
- Evidence of Completion (e.g., submitted reports, data dashboards, CQI plans):

### ECT Support (if applicable):

Data Training  Reporting Assistance  Follow-up Review

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## Monitoring & Follow-Up

- **Follow-Up Review Date(s):**
  - **Monitoring Method:**  
 Desk Review  Site Visit  Data Review  Documentation Check
  - **Expected Outcome:**  
Program demonstrates measurable improvement and compliance with ECT standards.
- 

## Acknowledgement & Signatures

By signing below, the provider acknowledges responsibility for implementing the corrective actions outlined in this plan within the specified timelines.

**Provider Representative Name & Title:**

**Signature:**

**Date:**

**ECT Representative Name & Title:**

**Signature:**

**Date:**

### **III. Emergency Circumstances and Contract Action Provision**

Notwithstanding the standard corrective action and performance improvement processes outlined in this document, the Escambia Children’s Trust (ECT) reserves the right to **temporarily suspend services, modify monitoring requirements, or terminate a contract** when emergency circumstances arise that significantly impact a provider’s ability to operate safely, compliantly, or in accordance with grant requirements.

Emergency circumstances may include, but are not limited to:

- Public health emergencies or natural disasters
- Facility closures due to safety concerns or damage
- Sudden loss of licensure or required approvals
- Immediate health, safety, or welfare risks to children or staff
- Fraud, misuse of funds, or material grant violations
- Organizational dissolution or loss of operational capacity

In such cases, ECT may implement immediate actions without following the standard corrective action timeline in order to protect children, families, public funds, and community interests. Actions may include:

- Temporary suspension of program operations or funding
- Accelerated monitoring or reporting requirements
- Modification or waiver of certain performance expectations, as appropriate
- Termination or non-renewal of the grant agreement, in accordance with applicable policies and contractual terms

When feasible, ECT will notify the provider in writing of the nature of the emergency action and any conditions required for reinstatement or resolution. Providers may be afforded the opportunity to submit documentation or corrective information once the emergency condition has stabilized, at ECT’s discretion.

This provision ensures ECT maintains the flexibility necessary to respond to urgent or unforeseen circumstances while continuing to uphold its commitment to child safety, accountability, and responsible stewardship of public funds.

## **IV. Temporary Suspension and Reinstatement Process**

The Escambia Children's Trust (ECT) may initiate a temporary suspension of program operations or funding when emergency or extraordinary circumstances compromise a provider's ability to operate safely, compliantly, or in alignment with grant requirements. This process balances **child safety, fiscal stewardship, and operational flexibility**, while providing a clear pathway for reinstatement when appropriate.

### **1. Grounds for Temporary Suspension**

ECT may impose a temporary suspension when one or more of the following conditions are identified:

- Immediate health or safety risks to children, youth, or staff
- Loss or suspension of required licensure, certifications, or approvals
- Facility closure due to damage, unsafe conditions, or emergency orders
- Verified misuse of funds, fraud, or material grant violations
- Inability to deliver contracted services due to staffing, operational, or organizational failure
- Public health emergencies, natural disasters, or other force majeure events

Temporary suspension may occur **with or without prior corrective action**, depending on the urgency and severity of the issue.

### **2. Notice of Temporary Suspension**

When a temporary suspension is initiated, ECT will provide written notice to the provider that includes:

- Reason(s) for the suspension
- Effective date of suspension
- Scope of suspension (e.g., funding, enrollment, service delivery)
- Conditions required for reinstatement, if applicable
- Reporting or documentation expectations during the suspension period

In urgent situations, verbal notification may be provided initially, followed by written confirmation.

### **3. Suspension Period Requirements**

During the suspension period, the provider may be required to:

- Cease all or specified program activities funded by ECT
- Secure and maintain required documentation and records
- Submit corrective documentation or a remediation plan

- Cooperate with monitoring, audits, or site reviews
- Maintain communication with ECT regarding status updates

Funding disbursements may be paused or adjusted during the suspension period.

#### **4. Reinstatement Eligibility and Request**

A provider may be considered for reinstatement when the conditions leading to suspension have been resolved or sufficiently mitigated. To request reinstatement, the provider must submit written documentation demonstrating:

- Resolution of the identified issue(s)
- Restoration of compliance with applicable standards and grant requirements
- Implementation of safeguards to prevent recurrence
- Updated policies, licenses, staffing records, or facility approvals, as applicable

ECT reserves the right to require a site visit, desk review, or additional verification prior to reinstatement.

#### **5. Reinstatement Review and Determination**

ECT will review the reinstatement request and determine whether the provider:

- Is eligible for full reinstatement
- Requires conditional reinstatement with enhanced monitoring
- Remains suspended pending additional corrective action
- Is subject to contract termination or non-renewal

Reinstatement decisions will be communicated in writing and may include:

- Revised performance expectations or timelines
- Increased monitoring or reporting frequency
- Probationary status for a defined period

#### **6. Failure to Meet Reinstatement Conditions**

If a provider fails to meet reinstatement conditions within the timeframe established by ECT, the Trust may:

- Extend the suspension period
- Reduce or reallocate funding
- Initiate termination of the grant agreement
- Decline future funding eligibility

These actions will be taken in accordance with ECT policies and contractual provisions.

## **7. Discretion and Authority**

ECT retains sole discretion in determining when a temporary suspension is warranted and whether reinstatement is appropriate. Nothing in this process limits ECT's authority to take immediate action to protect children, ensure compliance, or safeguard public funds.

## **8. Purpose of the Process**

This Temporary Suspension and Reinstatement Process is intended to provide clarity, consistency, and fairness while allowing ECT to respond effectively to emergency or extraordinary circumstances. The process reinforces ECT's commitment to safety, accountability, and the continuity of high-quality services whenever possible.

# **Program Improvement Plan Summary**

The Escambia Children's Trust (ECT) Quality Assurances Program Improvement Plan (PIP) is a structured, tiered corrective action framework used to address program performance deficiencies, fiscal non-compliance, and operational risks identified through ECT's evaluation, fiscal monitoring, and audit processes. The PIP supports accountability while promoting continuous quality improvement and responsible stewardship of public funds.

The PIP is triggered when a program receives an Emerging or Critical rating under the ECT Quality Program Assurances Evaluation System, demonstrates significant fiscal compliance issues, or fails to meet contractual, safety, or audit standards. It may also be applied to Proficient programs when persistent gaps or elevated risk factors are identified. Corrective actions are aligned with documented findings and are designed to be specific, measurable, and time-bound.

Through the PIP, providers are required to implement targeted corrective actions addressing identified deficiencies across program quality, staffing, attendance and outcomes, data reporting, fiscal management, reimbursement practices, and audit findings. ECT establishes clear expectations for improvement, assigns timelines, and defines required documentation to verify progress and resolution. Monitoring intensity and technical assistance are scaled based on the severity and persistence of identified issues.

ECT administers the PIP using a progressive discipline and risk-based oversight approach. Programs demonstrating timely and sustained improvement may return to standard monitoring, while programs that fail to meet improvement benchmarks may be subject to enhanced monitoring, funding restrictions, temporary suspension, or contract termination in accordance with ECT policies.

Overall, the Program Improvement Plan reinforces ECT's commitment to transparency, fairness, and continuous improvement. By integrating quality evaluation, fiscal compliance, and audit findings into a single improvement framework, the PIP ensures that funded programs are supported in delivering safe, compliant, and high-quality services that achieve measurable outcomes for children and families in Escambia County.

## Overall Summary of the ECT Quality Program Assurances Plan

The *Escambia Children's Trust (ECT) Quality Program Assurances Plan* establishes a comprehensive, integrated system for monitoring, evaluating, and strengthening the performance, fiscal integrity, and operational compliance of all ECT-funded programs. The plan solidifies ECT's commitment to accountability, transparency, continuous quality improvement, and responsible stewardship of public funds while ensuring that funded services deliver safe, effective, and outcome-focused support to children and families across Escambia County.

The *ECT Quality Program Assurances Plan* is built upon four interconnected components: the *ECT Quality Program Assurances Evaluation System*, the *ECT Fiscal Compliance and Reimbursement Procedures*, the *ECT Program Site Audit*, and the *ECT Program Improvement Plan (PIP)*. Together, these components provide a unified framework that assesses program quality and outcomes, verifies fiscal compliance and reimbursement accuracy, ensures adherence to contractual and safety requirements, and establishes a structured response when performance or compliance deficiencies are identified.

The *Evaluation System* defines clear quality standards and performance expectations across key program areas, including program environment, staffing, instructional quality, attendance and dosage, youth development and outcomes, family engagement, and data use. Evaluation results inform technical assistance, guide monitoring efforts, and determine when corrective actions are necessary to support program improvement and sustainability.

The *Fiscal Compliance and Reimbursement Procedures* establish standardized financial management and documentation requirements aligned with ECT's reimbursement-based funding model. These procedures ensure that public funds are used appropriately, costs are allowable and verifiable, and financial systems support transparency, audit readiness, and long-term program stability. Fiscal performance directly informs risk assessment, monitoring intensity, and corrective action decisions.

The *Program Site Audit* serves as an independent verification mechanism that assesses compliance with contractual obligations, policies and procedures, site safety, human resources practices, and fiscal controls. Audit findings provide an additional layer of oversight and are integrated into ECT's risk-based monitoring and corrective action framework.

When deficiencies are identified through evaluation, fiscal monitoring, or audit activities, the Program Improvement Plan provides a structured, tiered corrective action process. The PIP outlines specific, measurable, and time-bound actions required to restore compliance, strengthen implementation, and mitigate risk, while offering technical assistance and support tailored to the severity of identified issues.

Collectively, the ECT Quality Program Assurances Plan ensures consistency, fairness, and alignment across all oversight functions. By linking quality expectations, fiscal accountability, audit verification, and corrective action into a single system, ECT reinforces public trust, protects

children and families, and supports funded providers in delivering high-quality services that achieve measurable and lasting outcomes for the community.

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# Escambia Children's Trust Quality Program Assurances Plan

*A Framework for Accountability,  
Transparency, and Continuous Improvement*

1

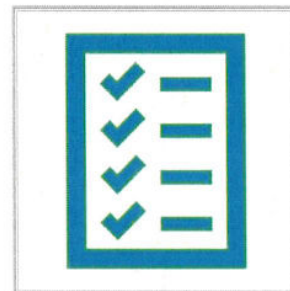
## Overview and Purpose

**Unified Framework** - Establishes standardized quality expectations, fiscal compliance, and formal program audits for all ECT-funded programs.

**Core Goal:** To ensure public funds are managed responsibly and funded programs deliver high-quality, outcome-driven services.

**Focus Areas:**

- Children are Healthy
- Children are Ready to Succeed in School and Life
- Children are Safe and Protected
- Children Have Supports to Avoid Risky Behaviors



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## Quality Evaluation System

- ❖ **Objective:** Standardizes quality expectations to assess program implementation and participant outcomes
- ❖ **Seven Key Performance Areas (KPA's):**
  1. **Program Quality & Environment:** Safe, welcoming, and developmentally appropriate spaces.
  2. **Staff Qualifications & Training:** Preparedness through credentials and ongoing professional development.
  3. **Curriculum & Instructional Quality:** Intentional learning experiences aligned with goals.
  4. **Attendance & Dosage:** Monitoring enrollment and time spent in programming.
  5. **Youth Development & Outcomes:** Supporting social-emotional growth and measurable progress.
  6. **Family & Community Engagement:** Building relationships to support student success.
  7. **Data Use & Continuous Improvement:** Using data to inform decisions and improve quality.



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## Program Rating Scale

**Structure:** Programs earn points across the seven KPAs, with a maximum of **34 points**.

### Rating Tiers:

**Exemplary (31–34):** Consistently exceeds all standards.

**High Quality (26–30):** Meets most standards with minor areas for improvement.

**Proficient (21–25):** Meets minimum expectations; some development needed.

**Emerging (17–20):** Partially meets standards; significant improvements required.

**Critical (0–16):** Fails to meet basic standards; immediate intervention required.

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## Fiscal Compliance & Reimbursement

- ❖ **Purpose:** Establishes financial management standards to safeguard public resources and ensure expenditures align with approved budgets.
- ❖ **Key Provider Responsibilities:**
  - ✓ **Fiscal Governance:** Board-approved policies and internal controls.
  - ✓ **Accounting Systems:** Capacity to track program-specific revenues and expenditures.
  - ✓ **Budget Alignment:** Ensuring all costs are allowable, reasonable, and necessary.
  - ✓ **Source Documentation:** Maintaining organized records (invoices, payroll, receipts) to support claims.
  - ✓ **Verification:** Accurate attendance and dosage records to substantiate billing.



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## Program Site Audit

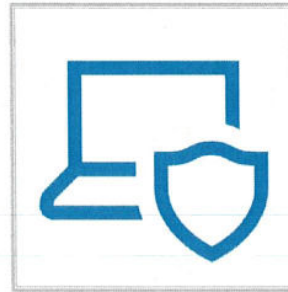
- ❖ **Overview:** Formal oversight to verify compliance with contractual, safety, and operational standards.
- ✓ **Health & Safety:** Facility inspections (interior/exterior) and hazard prevention.
- ✓ **Supervision:** Real-time verification of child-to-staff ratios and active supervision.
- ✓ **Emergency Preparedness:** Review of written plans, evacuation routes, and drills.
- ✓ **Staff Qualifications:** Verification of background screenings and required training certifications.
- ✓ **Alignment:** Closely follows Florida Department of Children and Families (DCF) criteria.



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## Performance Improvement Protocol

- ❖ **Tiered Corrective Action:** Response levels are triggered by program ratings.
- ❖ **Improvement Supports**
  - ✓ **Proficient/High Quality:** Written recommendations and voluntary technical assistance.
  - ✓ **Emerging: Mandatory Program Improvement Plan (PIP)** submitted within 30 days and increased monitoring
  - ✓ **Critical:** Immediate PIP required within 15 days; potential funding suspension or contract termination.
  - ✓ **Goal:** To address deficiencies while offering tailored coaching and technical support.



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## Summary of Impact

**Accountability:** Transparently tracks outcomes to demonstrate responsible stewardship of resources.

**Community Trust:** Keeps the public informed about child well-being and program effectiveness.

**Continuous Excellence:** Moves beyond simple compliance to foster safe, high-impact environments where all children can reach their potential.

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# QUALITY PROGRAM ASSURANCES PRE-AWARD RISK ASSESSMENT TOOL

## ESCAMBIA CHILDREN'S TRUST QUALITY PROGRAM ASSURANCES PROVIDER VETTING CHECKLIST & SCORING RUBRIC

*Aligned to ECT Quality Program Assurances*

### **Scoring Overview**

Maximum Total Score: **36 points**

### **Overall Risk Rating & Contract Recommendation**

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#### **High Compliance**

**Score Range:** 31–36

**Risk Description:** Demonstrates strong fiscal and programmatic capacity with thorough, well-organized documentation. Presents minimal compliance concerns.

**Pre-Contract Recommendation:** Fully eligible for contracting under standard monitoring procedures.

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#### **Moderate Compliance**

**Score Range:** 24–30

**Risk Description:** Meets core compliance standards but shows minor, manageable gaps that can be addressed through routine oversight.

**Pre-Contract Recommendation:** Proceed with contracting with specified conditions. ECT may need to provide technical support and guidance on standard reporting expectations.

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#### **Low Compliance**

**Score Range:** 0–23

**Risk Description:** Indicates elevated operational risk due to significant deficiencies identified through the vetting checklist, particularly in fiscal management, human resources, and/or programmatic systems.

**Pre-Contract Recommendation:** Contracting should occur only after a formal corrective action plan is completed and approved prior to contract execution with ECT. Once programming begins, the project should receive increased monitoring and oversight.

**Total Vetting Score** Total Points (0–36): \_\_\_\_\_



# QUALITY PROGRAM ASSURANCES PRE-AWARD RISK ASSESSMENT TOOL

## Quality Area 1: Governance & Organizational Capacity

*(Aligns to Program Administration & Compliance)*

### Checklist

- Legal status verified (nonprofit or business registration)
- Board roster and governance structure (if applicable)
- Conflict of Interest policy
- Financial oversight policy and procedures
- Leadership roles and decision-making authority policies and procedures

Score:  0  1  2  3  4  5

## Quality Area 2: Health, Safety & Learning Environment

*(Aligns to Health, Safety & Supervision Standards)*

### Checklist

- Facility readiness (licensed or compliant space) DCF School Age Handbook
- Emergency response procedures (fire drills, active shooter, inclement weather)
- Supervision and line-of-sight policies and procedures
- Incident and injury response plan policy and reporting procedures
- Safe entry/exit and sign-in procedures

Score:  0  1  2  3  4  5

## Quality Area 3: Staffing & Human Resources

*(Aligns to Staffing, Training & Professional Standards)*

### Checklist

- Job descriptions for all roles and professional credentials of key staff
- Hiring and screening procedures
- Background screening and Drug Free Workplace policies and procedures
- Motor Vehicle eligibility check (CDL and/or appropriate transportation license)
- Staff supervision structure
- Nepotism Policies

Score:  0  1  2  3  4  5  6



# QUALITY PROGRAM ASSURANCES PRE-AWARD RISK ASSESSMENT TOOL

## Quality Area 4: Child Welfare & Protection

*(Aligns to Youth Safety & Well-Being)*

### Checklist

- Child abuse prevention policy
- Mandatory reporting procedures
- Boundaries and conduct policy
- Prohibited practices policy
- Staff acknowledgements completed

Score:  0  1  2  3  4  5

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## Quality Area 5: Program Design & Engagement

*(Aligns to Program Design & Instructional Quality)*

### Checklist

- Program model clearly defined
- Daily schedule aligned to age group
- Youth engagement strategies identified
- Activities aligned to stated outcomes
- Materials and curriculum identified

Score:  0  1  2  3  4  5

## Quality Area 6: Attendance, Dosage & Access

*(Aligns to Attendance & Participation Standards)*

### Checklist

- Attendance tracking system
- Dosage expectations defined
- Enrollment and capacity aligned to staffing
- Youth retention strategies
- Accessibility considerations addressed

Score:  0  1  2  3  4  5



# QUALITY PROGRAM ASSURANCES PRE-AWARD RISK ASSESSMENT TOOL

## Quality Area 7: Data, Reporting & Continuous Improvement

*(Aligns to Accountability & Outcomes)*

### Checklist

- Data collection tools identified
- Reporting processes defined
- Data accuracy and timelines addressed
- Use of data for improvement described
- Staff responsible for data identified

Score:  0  1  2  3  4  5

# Escambia Children’s Trust (ECT)

## Policy: Quality Assurance and Performance Improvement

**Policy Number:**

**Effective Date:** April 7, 2026

**Approved By:** Escambia Children’s Trust Board of Directors

**Responsible Department:** Programs and Evaluation

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### I. Purpose

The purpose of this policy is to establish expectations for quality assurance, performance monitoring, and continuous improvement for all programs funded by the Escambia Children’s Trust (ECT).

ECT is committed to ensuring that all funded programs deliver **high-quality, outcome-driven services** that align with the Trust’s mission and demonstrate measurable impact for children and families.

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### II. Policy Statement

All ECT-funded providers are required to participate in a **comprehensive Quality and Performance Improvement process** as defined in the *ECT Quality Program Assurances Plan*.

This process establishes standardized expectations for:

- Program quality and service delivery
- Outcome measurement and data reporting
- Fiscal compliance and accountability
- Ongoing monitoring, evaluation, and audit
- Continuous quality improvement and corrective action

Participation in this process is a **condition of funding**.

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### III. Framework for Quality and Performance

ECT utilizes a unified Quality Program Assurances framework that includes:

- A **Program Evaluation System** with defined quality standards and performance measures
- **Fiscal Compliance and Reimbursement requirements**
- A **Program Audit process**
- A structured **Program Improvement Plan (PIP)** process

These components work together to ensure accountability, transparency, and continuous improvement across all funded programs.

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#### **IV. Provider Expectations**

Providers are expected to:

1. **Deliver services consistent with approved program design and scope**
2. **Collect, maintain, and report accurate data** demonstrating program outcomes
3. **Participate in monitoring activities**, including site visits, data reviews, and audits
4. **Engage in continuous quality improvement**, using data and feedback to strengthen services
5. **Respond to identified deficiencies** through corrective action and improvement planning when required

Providers must comply with all requirements and standards outlined in the *ECT Quality Program Assurances Plan*, which is incorporated by reference into all funding agreements.

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#### **V. Performance Ratings and Improvement Requirements**

ECT evaluates program performance using a **standardized rating system** based on defined quality and performance criteria as further outlined in the *ECT Quality Program Assurances Plan*.

- Programs meeting or exceeding expectations will continue under standard monitoring.
  - Programs with identified gaps may receive **technical assistance, coaching, or targeted support**.
  - Programs demonstrating significant deficiencies or non-compliance will be required to enter a **Program Improvement Plan (PIP)** with defined corrective actions and timelines.
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#### **VI. Corrective Action and Accountability**

ECT utilizes a **tiered performance improvement and corrective action process** to address underperformance or non-compliance.

Depending on severity, this may include:

- Written notices and required corrective actions
- Increased monitoring and technical assistance
- Formal Program Improvement Plans (PIP)
- Probationary status, funding restrictions, or contract action

ECT reserves the right to take **immediate action** when necessary to protect child safety, ensure compliance, or safeguard public funds.

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## **VII. Incorporation of Quality Program Assurances Plan**

The *ECT Quality Program Assurances Plan* serves as the **governing document** for all quality, performance, fiscal, and audit expectations.

All providers are responsible for understanding and complying with the full requirements outlined in that document, including:

- Quality standards and evaluation criteria
  - Data collection and reporting requirements
  - Fiscal compliance expectations
  - Audit protocols
  - Program Improvement Plan (PIP) procedures
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## **VIII. Monitoring and Compliance**

ECT staff will monitor provider performance throughout the contract period.

Failure to comply with quality and performance expectations may result in:

- Required corrective action
  - Increased oversight
  - Funding modifications
  - Suspension or termination of the contract
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## **IX. Review and Updates**

This policy will be reviewed periodically and updated as necessary to align with best practices and updates to the *ECT Quality Program Assurances Plan*.