

2012 PIR Changes as of June 1, 2012

Please note: Many items have been renumbered to accommodate the addition and deletion of items from last year's PIR, as reflected in the PIR 2012 Survey form. Those changes have not been detailed below, as they are merely cosmetic and require no changes to be made by programs. This document highlights only those items that require action by programs prior to generating a final PIR (Output) report prior to the **August 31, 2012 deadline**, or have the potential to be confusing.

It is not unheard of for Head Start to make changes in between the "final" version (which came out 6/1/12) and the due date for PIR. ATI will be monitoring the website in case any last-minute changes are made, and will inform you as soon as possible if any come up.

Also, items that are marked as slated for deletion are no longer required by the PIR, but may still be information your program would like to track. If that is the case, please make arrangements to print or otherwise note the data and create a form for your use to which you may transfer that data manually (or by creating a copy of a form with data preserved) prior to the deletion of those items, which will happen in the fall. You will always have access to last year's PIR Report via Galileo, as well.

And finally, just a reminder for combination HS/EHS programs: You are required to generate separate reports for HS and EHS, but there is only a single PIR-AGENCY INFORMATION form. Combo programs will need to run one report, then change any fields on that PIR-AGENCY form that may not have the same information between HS and EHS prior to running the other. This ONLY affects the PIR-AGENCY form; all other forms have filters built in to funnel the information to the appropriate output. (Programs that have separate agencies in Galileo for HS and EHS need not be concerned with this.)

PIR-AGENCY INFORMATION

A.2c: A choice was added to the question on Funded Enrollment for Early Head Start (EHS) programs: "Funded Enrollment from the Maternal, Infant, and Early Childhood Home Visiting (MIECHV) Grant Program." For all programs, the two existing choices were renamed for clarity. The previous choice "ACF Funded Enrollment" was renamed "Head Start/Early Head Start Funded Enrollment, as identified on NOA." The previous choice "Non-ACF Funded Enrollment" was renamed "Funded Enrollment from non-federal sources, i.e. state, local, private" [A.2].

A.2a. HS/EHS Funded Enrollment, as identified on FAA	<input type="text"/>
A.2b. Funded Enrollment from non-federal sources, i.e., state, local, private	<input type="text"/>
NEW A.2c. Funded Enrollment from the MIECHV Grant Program, for EHS services	<input type="text"/>

A.30: A new heading (which is an old section reinstated this year in the 3/22/12 update) for Record Keeping has been added to this form and the headings reordered to retain numerical order as much as possible.

****NEW** Record Keeping**

Management Information Systems

A.30. Does your program use a management information system to track enrollees, program services, characteristics of families, and information on program staff?

A.30a(1). Enter name/title of primary tool first

A.30a(2). Primary tool locally designed?

A.30a(3). Is primary tool web-based?

A.30b(1). Enter name/title of other MIS tool

A.30b(2). Other MIS tool locally designed?

A.30b(3). Is other MIS tool web-based?

A.30c(1). Enter name/title of other MIS tool

A.30c(2). Other MIS tool locally designed?

A.30c(3). Is other MIS tool web-based?

New comment sections (Under "Enrollment & Program Options" heading):

- B.29 Comments on ECD managers/coordinators shared by HS and EHS
- C.3d.1(1-2) Pregnant women's health care other than those listed

****NEW** B.29. Comments on education & child development managers/coordinators shared by HS and EHS programs**

****NEW** C.3d.1(1-2). Specify pregnant women's health care other than those listed in C.3a-d.**

C.33-34: A new set of questions (different questions for different educational settings) asks if programs use staff-child observation tools to assess quality, and if so, to provide the name/title of such tools. This question is free-response; i.e. each program will type an answer).

****NEW** C.33. Does the program use staff-child interaction observation tools to assess quality?**

****NEW** C.34a(1). If yes, interaction tool(s) used by the program for CENTER-BASED settings**

****NEW** C.34a(2). Is the tool named in C.34a(1) locally designed?**

****NEW** C.34b(1). If yes, interaction tool(s) used by the program for HOME-BASED settings**

****NEW** C.34b(2). Is the tool named in C.34b(1) locally designed?**

****NEW** C.34c(1). If yes, interaction tool(s) used by the program for FAMILY CHILD CARE settings**

****NEW** C.34c(2). Is the tool named in C.34c(1) locally designed?**

Under "Other Information" heading

C.8b and C.8b.8: Specify reason that children who needed treatment for health issues didn't receive it, and if one of those don't apply, select #8 and specify in the following memo box.

****NEW** C.8b.** Specify the primary reason that children who needed treatment didn't receive it. Check one PRIMARY reason (specify any OTHER reason in the general "Other," C.8b.8, below)

[Select an item]

[Select an item]

1. No health insurance
2. No pediatric care in local area
3. Medicaid not accepted by health provider
4. Parents did not keep/make appointment
5. Children left the program before their appointment date
6. Appointment scheduled for future date
7. No transportation
8. Other (please specify below)

****NEW** C.8b.8.** Specify primary reason other than those given why children who needed medical treatment, for chronic conditions diagnosed by a health care professional since last year's PIR was reported, did not receive it

C.19: For the question addressing primary reasons why children needing dental treatment did not receive that treatment, a new choice was added: "No transportation."

C.19b. Specify the primary reason that children who needed treatment (C.17a.) did not receive it. Additional reasons should be entered in the general "Comments" section.

****NEW** 8.** No transportation

C.58: A new question under Collaboration Agreements asks about agreements with child welfare agencies.

****NEW** C.58.** Does the program have formal collaboration agreements with child welfare agencies?

Yes

****NEW** C.58a.** If yes, the number of formal agreements in which the program is currently participating

20125

PIR-STAFF INFORMATION

There is a new "Position" option this year—Education & Child Development Manager/Coordinator. Please update this selection if you have a staff member in this position.

Position ****NEW**** Education & Child Development Manage

The child development staff qualifications tables were changed. Programs will now report home-based visitors, home-based visitor supervisors, family child care providers, and family child care specialists in a separate table with new categories of qualifications [B.9]. Programs will continue to report classroom teachers and assistant teachers in the previous categories pertaining to early childhood education and related degrees [B.5 and B.8]. Definitions of all staff positions are now included. The child development supervisor position is discontinued.

B.9: This is the new credentials and continuing education section for home-based and FCC. It's a little tricky because the checkbox required to calculate B.9e answers (where staff member doesn't have any of the credentials listed in B.9) appears first. This was done so that if the staff member was in that situation it could be noted easily, and also for ease of calculating non-credentialed staff who were enrolled in a credential program.

****NEW** B.9e.** This staff member doesn't have the qualifications listed in B.9a-d (below). (If this is true, but staff member is enrolled in a degree or credential program, please ALSO select the appropriate program in the next item below, options e1-4)

****NEW** B.9. HOME-BASED AND FCC Child Development Staff Credentials**

[Select an item]

[Select an item]

- a1. Advanced degree/licensed-Social work/Licensed clinical social work
- a2. Advanced degree/licensed-Marriage and family therapy/Licensed m
- a3. Advanced degree/licensed-Psychology
- a4. Advanced degree/licensed-Sociology
- a5. Advanced degree/licensed-Human services (incl. related areas such
- a6. Advanced degree/licensed-Nursing plus Nurse Practitioner (NP) lice
- a7. Advanced degree/licensed-Early childhood education
- a8. Other (please specify on item B.9a.8(1) on the PIR-Agency Info forr
- b1. Baccalaureate degree-Social Work
- b2. Baccalaureate degree-Psychology
- b3. Baccalaureate degree-Sociology
- b4. Baccalaureate degree-Human services (including related areas such
- b5. Baccalaureate degree-Nursing plus Registered Nurse (RN) license
- b6. Baccalaureate degree-Early childhood education
- b7. Other (please specify on item B.9b.7(1) on the PIR-Agency info forr
- c1. Associate degree-Social Work
- c2. Associate degree-Psychology
- c3. Associate degree-Sociology
- c4. Associate degree-Human services (incl. related areas such as child

Please note, however, that if you checked box B.9e, please take care to to select an e.1-4 answer option for any non-credentialed staff who are working towards one of the credentials listed.

****NEW** B.9. HOME-BASED AND FCC Child Development Staff Credentials**

e1. None of the credentials above-Enrolled in an a

e1. None of the credentials above-Enrolled in an advanced degree or

e2. None of the credentials above-Enrolled in a baccalaureate degree

e3. None of the credentials above-Enrolled in an associate degree

e4. None of the credentials above-Enrolled in studies leading to a no

B.28-29 A new position (and section) for Education & Child Development (ECD) Managers/Coordinators has been added this year, along with questions about their credentials and continuing education. The position has been added to the "Position" item (as mentioned above), and 2 new items have been added for credentials and continuing education, as shown below.

****NEW** B.28 EDUCATION & CHILD DEVELOPMENT MANAGEMENT Staff Credentials**

[Select an item]

[Select an item]

- a. An advanced degree in early childhood education, or an advanced degree in any field & coursework=a major relating to ECE with preschool teac
- b. A baccalaureate degree in early childhood education, or a baccalaureate degree in any field & coursework=a major relating to ECE with prescho
- c. An associate degree in early childhood education, or an associate degree in any field & coursework=a major relating to ECE with preschool teac
- d. A Child Development Associate (CDA) credential or state-awarded preschool, infant/toddler, family child care or home-based certification, crede
- e. None of the qualifications listed in B.28a-d

****NEW** B.28(c1, d1, e1). Continuing Education: This ECD manager/coordinator**

[Select an item]

[Select an item]

- c1. Has an associate degree selected in item B.28 above, and is enrolled in a baccalaureate degree in ECE, or a bacc
- d1. Has a CDA or other certification, credential, or licensure meeting or exceeding CDA selected in item B.28 above, i
- e1. Has e. (no credential) selected in item B.28 above, and is enrolled in a baccalaureate degree in ECE, or a baccala

PIR-CHILD INFORMATION

After items A.12, there are 2 new enrollment information checkboxes, for children receiving services via Migrant/seasonal HS programs, and to indicate child's enrollment status at the end of the program year. The second box needs to be checked for all children in Galileo who were still enrolled at the end of the year, because other items filter on that particular status* (which is a bit unusual; usually, PIR counts all kids who received services during the year, regardless of whether they're still with the program).

****NEW** This child received services via a Migrant/Seasonal HS program**

****NEW** Check this box if this child is still enrolled at the end of the program year**

C.1(1-2) For the question on primary health insurance for children, choices were consolidated. Previously programs were asked to report about Medicaid, CHIP, and Medicaid expansion programs separately. A child enrolled in any of these programs would now be counted in the new, consolidated choice: "Number enrolled in Medicaid and/or CHIP."

Health Insurance

****Please Note: Items in this section require data to be reported at 2 points during the year--at the time of enrollment AND at the end of the enrollment year. Please return to this area at the end of the operating period to update the information.**

*C.1(1). Health Insurance (at Enrollment)

*C.1(2). Health Insurance (end of enrollment year)

c. Private Health Insurance

[Select an item]

****NEW** a. Medicaid and/or CHIP**
 (TO BE DELETED) a. Medicaid
 (TO BE DELETED) b. Child Health Insurance Program (CHIP)
 (TO BE DELETED) c. CHIP/Medicaid Program if state operates Medicaid expansion
 b. State-only funded insurance
 c. Private Health Insurance
 d. Other Health Insurance [Explain on C.1d.1 (col. 1 or 2) on the PIR-AGENCY form.]
 C.2(1). This child has no health insurance.

C.8: The number of children up-to-date on a schedule of age-appropriate preventive and primary health care according to the relevant state's EPSDT schedule is now asked "At enrollment" and "At end of enrollment."

Medical Services

This child has received no medical services.

****NEW** C.8(1). This child is up-to-date on a schedule of age-appropriate preventive and primary health care according to your state's EPSDT schedule for well child care at Enrollment** June 23 2010

****NEW** C.8(2). This child is up-to-date on a schedule of age-appropriate preventive and primary health care according to your state's EPSDT schedule for well child care at END of enrollment year** NA NA NA

C.8a. This child has been diagnosed with a chronic condition needing medical treatment since last year's PIR was reported.

C.8a.1. This child has received/ is receiving treatment [must check both previous boxes also, and specify condition(s) below.]

****NEW** C.8b. Specify the primary reason that children who needed medical treatment, for any chronic condition diagnosed by a health care professional since last year's PIR was reported, did not receive it**

[Select an item]

[Select an item]

1. No health insurance
2. No pediatric care available in local area
3. Medicaid not accepted by health provider
4. Parents did not keep/make appointment
5. Child left program before their appointment date
6. Appointment is scheduled for future date
7. No transportation
8. Other (please specify in item C.8(B) on the PIR-Agency Info form)

Also, programs will now report a primary reason that a child did not receive needed medical treatment, as part of the question regarding medical treatment for chronic conditions newly diagnosed since last year's PIR [C.8.b]. Please note that while this data is collected for each child, the PIR actually pulls the answer from this question from the PIR-AGENCY INFORMATION form, because only a single PRIMARY reason can be selected to cover all the children your program. We recommend that you run a Data Checker report (for entered data, with settings as shown below) on the PIR-CHILD INFORMATION form. With the options broken out, you will be able to determine what the most common cause was for all children in your agency, and that is the option you should enter on the PIR-AGENCY INFORMATION, to be included on the final PIR output report.

Report Filters

Form Type Child

Super Agency Kristie's Testing Super Agency

Agency Kristie's PIR District--Nobody put anything here!

Center [All Centers]

Class [Select a class]

Form PIR-CHILD INFORMATION

Enrollment Status All Children

Treat boolean (checkbox) items under same heading as a single item

Break out option choices into separate items

Only show items where information is missing

Find missing data

Find entered data

Find Data As Of This Date 6/12/2012

For the question addressing medical treatment received for specific chronic conditions diagnosed by a health care professional, "Overweight" is no longer included [C.9], because a new section has been added to deal directly with BMI.

C.10: A new question asks Head Start programs and Migrant programs (for preschool children only) to report on the BMI category of each child, using the Centers for Disease Control and Prevention (CDC) BMI-age-for-growth charts. The possible categories are underweight, healthy weight, overweight, and obese. This question is asked of all children at enrollment. Programs should measure children's height and weight at enrollment in order to calculate Body Mass Index (BMI) and reference the appropriate BMI age-for-growth chart. Instructions and definitions are provided for this new question.

****NEW** Body Mass Index (BMI)**

***C.10. Weight Status (First)**

[Select an item]

[Select an item]

- a. Underweight (<5th percentile)
- b. Normal (5th percentile to <85th percentile)
- c. Overweight (85th percentile to <95th percentile)
- d. Obese (= to or >95th percentile)

This data is collected by Galileo on the Merlin Health & Developmental Services form, in the screening section, under "Growth Assessment 1st-4th", for the first Height/Weight screening. If you are not currently using this form, you will need to at least fill out that section for it to calculate on the PIR. (You will notice that that item has been marked C.10 to denote that it is a PIR question; ATI tries to make our Merlin forms talk to each other and do double duty as much as possible.)

Growth Assessment (1st-4th)

*Height and Weight Screen Date (First)

NA NA NA

Chronological Age (First) (auto-calculated upon saving)

*Weight (in pounds) (First)

*Height (in inches) (First)

BMI (First) (auto-calculated upon saving)

Select weight status based on BMI. Please reference [CDC Growth Charts](#).

*C.10. Weight Status (First)

a. Underweight (<5th percentile)
[Select an item]
a. Underweight (<5th percentile)
b. Normal (5th percentile to <85th percentile)
c. Overweight (85th percentile to <95th percentile)
d. Obese (= to or >95th percentile)

C.13: The sub-section on immunization services for children includes a new question on the number of children who meet their state’s guidelines for an exemption from immunizations.

****NEW** C.13(1). This child met state guidelines for an exemption from immunizations at Enrollment**

****NEW** C.13(2). This child met state guidelines for an exemption from immunizations at END of enrollment year**

C.27(1-2): For the question on preschool primary disabilities, the choices were renamed to reflect the current definitions and regulations in the Individuals with Disabilities Education Act (IDEA). Also, “Multiple disabilities, including deaf-blind” had previously been one choice. Per current IDEA practice, there are now two separate choices: “Multiple disabilities, excluding deaf-blind” and “Deaf-blind.”

C.27(1). Child is determined to have this disability (primary only)

C.27(2). Child is receiving special services for this disability (primary only)

b. Emotional Disturbance
[Select an item]
a. Health Impairment
b. Emotional Disturbance
c. Speech or Language Impairment
d. Intellectual Disability
e. Hearing Impairment including Deafness
f. Orthopedic Impairment
g. Visual Impairment including Blindness
h. Specific Learning Disability
i. Autism
j. Traumatic Brain Injury
k. Non-Categorical/Developmental Delay
****NEW** l. Multiple Disabilities (excluding Deaf-Blind)**
****NEW** m. Deaf-Blind**
n/a

A.18-22: The question on Turnover was revised to include sub-questions on Transition that were previously asked in Section C. **The new question** on Transition and Turnover has different variations for Head Start preschool programs, Early Head Start programs, and Migrant and Seasonal Head Start programs.

Rearranged A.18-23 to be above C. items

*Also, please note that for item A.18b, the child must be enrolled at the end of the program year and headed for kindergarten next fall to have this item checked. If the child left the program prior to the end of the program year, do not check this box.

Other Information

A.18, 19, 22. This child left program after classes or home visits began and did not re-enroll.

A.18a, 19a, 22a. This child was enrolled less than 45 days.

CLARIFICATION: For item A.18b, the child must be enrolled at the end of the kindergarten next fall to have this item checked. If the child left the program program year, do not check this box.

A.18b. This child is ENROLLED in HS AT THE END OF THIS PROGRAM YEAR and is projected to enter kindergarten next year. (HS A.12 must also be checked above .)

****NEW**** A.19b. This infant/toddler left the EHS program during the program year because s/he aged out of EHS. (EHS A.12 & A.19 must also be checked above .)

A.19b.1. This infant/toddler aged out of EHS and entered a Head Start program. (EHS A.12, A.19, and A.19b must also be checked above .)

A.19b.2. This infant/toddler aged out of EHS and entered another early childhood program (EHS A.12, A.19, and A.19b must also be checked above.)

****NEW**** A.19b.3. This infant/toddler aged out of EHS and did NOT enter another early childhood program (EHS A.12, A.19, and A.19b must also be checked above.)

****NEW**** A.22b. This child was enrolled in the Migrant program and aged out, i.e., left the program in order to attend kindergarten. ("This child received services via a Migrant/Seasonal HS Program" box must also be checked above.)

A.23. Program received a child care subsidy for this child.

C.52-53: New questions ask the number of enrolled children in foster care at any point during the program year [C.52] and the number of enrolled children who were referred by a child welfare agency [C.53].

****NEW**** C.52. This child was in foster care at any point during the program year

****NEW**** C.53. This child was referred to HS/EHS services by a child welfare agency (regardless of whether that child was in foster care)

PIR-PREGNANT WOMAN

A.20: There's a new section for Pregnant Woman turnover, covering children born to EHS pregnant mothers while the mothers were enrolled in the program, and the children's subsequent enrollment (or not) in EHS themselves. (Women who were not enrolled themselves in EHS services when they gave birth who then enrolled their infants in EHS should NOT be included in turnover totals.)

****NEW**** A.20. This pregnant woman left the program after receiving EHS services but before the birth of her infant and did not re-enroll

****NEW**** A.21. This pregnant woman was receiving EHS services at the time her infant was born

****NEW**** A.21a. A.21 is checked above, and this woman's infant was subsequently enrolled in EHS

C.3-4(2): Types of primary health insurance were added to the question on pregnant women's health insurance [C.3]. Pregnant women's insurance information is now collected at the end of the enrollment year as well as the beginning.

Health Services

****Please Note: Items in this section require data to be reported at 2 points during the year--at the time of enrollment AND at the end of the enrollment year. Please return to this area at the end of the operating period to update the information.**

C.3(1). This pregnant woman has at least one type of health insurance at time of enrollment.

****NEW** C.3(1).** Health Insurance (at Enrollment)

****NEW** C.3(2).** This pregnant woman has at least one type of health insurance at end of enrollment year

****NEW** C.3(2).** Health Insurance (end of enrollment year)

C.4(1). This pregnant woman has no health insurance at the time of enrollment.

****NEW** C.4(2).** This pregnant woman has no health insurance at end of enrollment year

C.14a-b: Prenatal and postpartum health care services have been split into 2 separate items this year.

****NEW** C.14a.** Received prenatal health care

****NEW** C.14b.** Received postpartum health care.

PIR-FAMILY INFORMATION

C.38: A new question asks the number of families with at least one parent/guardian in the United States military [C.38]. This is under the "Employment" section.

****NEW** C.38.** This family has at least one parent/guardian who is a member of the United States military

C.42: A new question asks the total number of families receiving services under the Supplemental Nutrition Assistance Program (SNAP), formerly referred to as Food Stamps. (Please note that the date field is merely for programs' convenience in monitoring families' enrollment in the program; it is not required for the PIR, and it is your choice whether or not you wish to use the date fields.)

****NEW** C.42.** This family is receiving services under the Supplemental Nutrition Assistance Program (SNAP), formerly referred to as Food Stamps

C.46: The question on family services received now separates "substance abuse prevention" and "substance abuse treatment" into two separate choices. Previously they had been combined.

C.46. Family Services received by this family through HS/EHS

a. Emergency/crisis intervention

b. Housing assistance

c. Mental health services

d. English as second language (ESL) training

e. Adult education (GED programs, college selection)

f. Job training

****NEW** g.** Substance abuse prevention

****NEW** h.** Substance abuse treatment

i. Child abuse and neglect services

j. Domestic violence services

k. Child support assistance

l. Health education

m. Assistance to families of incarcerated individuals

n. Parenting education

o. Relationship/marriage education