

Parent Aware Rating Tool

Quality Documentation Packet for Family Child Care Providers

Please use this packet to submit documentation for the Parent Aware Rating Tool Process.

Date: _____

Business name:

List all persons named on your license:

Name of your lead provider, if applicable (see definition, below):

Definition of "lead provider":
The highest qualified person working with the children at least half time (20 hours/weekly, or at least 50 percent of the program's operating hours if it is a part-day family child care program).

Primary contact name and address:

_____	_____
First name	Last name
_____	_____
Address	City, State, ZIP
Business phone number: _____ Cell or other: _____	
E-mail address of license holder: _____	

Return this form along with requested documentation to your resource specialist.

Form #QP-01F



A. Business information

1. Please provide the following licensing information:

1a. Child care license number: _____

Note that the Minnesota Department of Human Services, Licensing Division, will be contacted to verify licensing information.

1b. Have you received a maltreatment determination in the past year?

- No
 Yes

If Yes, please describe the circumstances: _____

Note that programs that have received maltreatment determinations in the past year are not eligible to receive more than one star through Parent Aware.

1c. Have you received a negative action in the past six months? Negative actions include: Temporary Immediate Suspension, Suspension, Conditional License and Fines.

- No
 Yes

If Yes, please describe the circumstances: _____

Note that programs that have received a negative action in the past six months are not eligible to receive more than 1 star through Parent Aware.

2. Are you accredited?

- No
 In process of becoming accredited or re-accredited

2a. If in process, with which accrediting body are you working? _____

2b. If in process, when do you anticipate achieving accreditation? _____

- Yes

If Yes, do not complete this form. Instead request a Quality Documentation Packet for accredited programs from the Parent Aware office.

3. How many hours each week does your program operate? _____

3a. Does your program operate year-round?

- No
 Yes

If No, how many weeks do you operate annually? _____

4. What age groups of children do you serve?

- Infants
 Toddlers
 Preschooler

5. Which service delivery models does your program provide?

- Part-day preschool

If part-day, how many hours per week does an individual child attend the program: _____

- Full-day child care
 Both

6. Complete a philosophy statement:

Philosophy Statement Form

Use this form to submit your program's philosophy statement. The statement you submit will be provided for families along with your rating when it is posted on the Parent Aware Web site. Write your program's philosophy statement in the space below, or attach it to this form.

The purpose of a philosophy statement is to provide information about:

- The ways in which your program is unique
- The learning activities and play spaces in your program

Limit 150 words.

(Your program name) _____ helps children learn and develop by:

If you use a specific curriculum or approach, complete this sentence:

We use the _____ (circle one: curriculum / approach) to plan for and support children's early learning in our program.

Our program is unique... (example: we offer loving care that focuses on the child's needs.)

Contact name _____

7. Complete the health and safety checklist:

Health and Safety Checklist

Health and safety policies

Child care programs may voluntarily adopt health and safety practices that exceed Minnesota licensing requirements. Check all that apply.

- Your policy or procedure for checking children in and out of your program includes checking IDs of anyone you do not recognize who is picking up children and verifies that with written authorization you have on file of those who may pick up particular children.

- Your child care health consultant has received training that aligns with the National Child Care Health and Safety Standards.

The publication, *Caring for Our Children, National Health and Safety Performance Standards: Guidelines for Out-of-Home Child Care Programs, Second Edition*, is a compilation of standards for child care health and safety endorsed and published by the American Academy of Pediatrics, the American Health Association, and the U.S. Department of Health and Human Services, Maternal and Child Health Bureau.

Visit <http://nrc.uchsc.edu/CFOC/index.html> for more information.

B. Family partnerships

1. Do you have a formal process for collecting feedback from the families you serve?
 No
 Yes
2. Do you have a written plan for how family feedback will be used?
 No
 Yes
3. Do you have strategies for communicating with families?
 No
 Yes
4. Do you have a formal intake process?
 No
 Yes
5. Do you share information with parents about preschool screening?
 No
 Yes
6. Do you provide written plans for children transitioning between milestones (for example a plan for toilet learning or transitioning from a bottle to a cup) and transitioning to kindergarten (such as lesson plans or field trips that help prepare children for kindergarten)?
 No
 Yes
7. Do you have a formal process for communicating about transitions with families?
 No
 Yes

C. Teaching materials and strategies

Infants and toddlers (ages 0-3)

1. Do you use a curriculum for infants and toddlers?

- No (skip to Section C, Number 2)
- Yes

1a. Which of the following best describes your curriculum or daily activities for infants and toddlers?

Choose only one option.

- I use daily activities aligned with the Early Childhood Indicator of Progress.
- I use a bundle of commercially available, published curriculum.
- I use an approach, such as Montessori or Project Approach.
- I use a locally-developed curriculum.
- I use the following approved commercially available, published curriculum:
 - Creative Curriculum for Infants and Toddlers*
 - HighScope for Infants and Toddlers*
 - Program for Infant and Toddler Care (PITC)*
 - HighReach Learning*
 - North American Montessori Center (NAMC) 0 - 3*

1b. Have you and all others listed on your license who work 20 plus hours per week in the program, received at least eight hours of training on use of the curriculum or approach used for infants and toddlers? *Note that training must have occurred at least 3 weeks before the submission deadline for your program's cohort.*

- No
- Yes

Preschool-age children (ages 3 – 5 yrs):

2. Do you use a curriculum for preschool-age children?

- No (skip to Section D)
- Yes

2a. Which of the following best describes your curriculum or daily activities for preschool-age children?

Choose only one option:

- I use daily activities aligned with the Early Childhood Indicators of Progress.
- I use a bundle of commercially available, published curriculum.
- I use an approach, such as Montessori or Project Approach.
- I use a locally developed curriculum, or
 - I use the approved locally developed Project Early Kindergarten (PEK) Curriculum for Family Child Care
- I use the Montessori approach, and I have earned a Montessori teaching certificate
- I use the following approved commercially available, published curriculum:
 - Creative Curriculum for Preschoolers*
 - High/Scope for Preschoolers*
 - Opening the World of Learning*
 - Sprouts*
 - Core Knowledge*
 - High Reach*

2b. Have you and all others listed on your license who work 20 plus hours per week in the program, received at least eight hours of training on use of the curriculum or approach used in your program for preschool-age children? *Note that training must have occurred at least 3 weeks before the submission deadline for your program's cohort.*

- No
- Yes

D. Tracking learning

Infants and toddlers (ages 0-3)

1. Do you track children's learning at least twice per year?
 - No (skip to Section D, Number 4)
 - Yes

- 1a. Which of the following best describes your approach to tracking children's learning?
 - I use the following approved commercially available, published instructional child assessment tool:
 - Creative Curriculum for Infants, Toddlers & Twos: Developmental Continuum Assessment Toolkit*
 - High/Scope Child Observation Record (COR) for Infants and Toddlers*
 - The Ounce Scale*

 - I use an instructional child assessment tool that is not currently included on the approved list

 - I use an informal method for tracking children's learning

- 1b. Have you and all others listed on your license who work 20 plus hours per week in the program, received at least eight hours training on use of the instructional child assessment used for infants and toddlers? *Note that training must have occurred at least 3 weeks before the submission deadline for your program's cohort.*
 - No
 - Yes

2. Do you share assessment results with families in your program?
 - No
 - Yes

3. Do you use the results from these assessments to design goals for individual children and to guide instruction?
 - No
 - Yes

Preschool-age children (ages 3-5)

4. Do you track children's learning at least twice per year?

- No (skip to the next section)
- Yes

4a. Which of the following best describes your approach to tracking children's learning?

- I use the following approved commercially available, published instructional child assessment tool(s):
 - Creative Curriculum for Preschool: Developmental Continuum Assessment Tool for Ages 3 - 5*
 - High/Scope Preschool Child Observation Record (COR), Second Edition*
 - The Work Sampling Checklist, Preschool 3 and 4*
- I use an instructional child assessment tool that is not currently included on the approved list
- I use an informal method for tracking children's learning

4b. Have you and all others listed on your license who work 20 plus hours per week in the program, received at least eight hours of training on use of the instructional child assessment tool used in your program for preschool-age children? *Note that training must have occurred at least 3 weeks before the submission deadline for your program's cohort.*

- No
- Yes

5. Does your program share assessment results with families?

- No
- Yes

6. Does your program use the results from these assessments to design goals for individual children and to guide instruction?

- No
- Yes

E. Training and education

1. Do you work at least half time (20 hours or at least 50 percent of the program's operating hours if it is a part-day child care program)?

- No
 Yes

1a. If you answered yes, do you have a professional development plan?

- No
 Yes

2. Does anyone else whose name is on your family child care license work at least half time (20 hours or at least 50 percent of the program's operating hours if it is a part-day family child care program)?

- No

If No, you do not need to ask this person to complete the practitioner application with the Minnesota Registry.

- Yes

2a. If you answered yes for question 2, does the other person on your license have a professional development plan?

- No
 Yes

3. Teacher training and education

Documentation of training and education is collected by the Minnesota Center for Professional Development Registry (<http://www.mncpd.org/registry.html>). The Registry staff will establish the step in the Career Lattice (http://www.mncpd.org/career_lattice.html) achieved by you and/or the appropriate individuals in your program. Points will be awarded based on the step(s) achieved on the Career Lattice.

Training Worksheet

Provide the following information for each person listed on your license, who works 20 plus hours per week in the program. Note that you must have at least eight hours of training in the curriculum used and at least eight hours of training in the assessment used in order to receive points for these items.

<p>Name:</p> <p>Position:</p> <p>Step on the Career Lattice:</p> <p>Curriculum training:</p> <p><input type="checkbox"/> Has not received training</p> <p><input type="checkbox"/> Has received training</p> <p>Name of curriculum:</p> <p>Assessment training:</p> <p><input type="checkbox"/> Has not received training</p> <p><input type="checkbox"/> Has received training</p> <p>Name of assessment:</p>	<p>Name:</p> <p>Position:</p> <p>Step on the Career Lattice:</p> <p>Curriculum training:</p> <p><input type="checkbox"/> Has not received training</p> <p><input type="checkbox"/> Has received training</p> <p>Name of curriculum:</p> <p>Assessment training:</p> <p><input type="checkbox"/> Has not received training</p> <p><input type="checkbox"/> Has received training</p> <p>Name of assessment:</p>
<p>Name:</p> <p>Position:</p> <p>Step on the Career Lattice:</p> <p>Curriculum training:</p> <p><input type="checkbox"/> Has not received training</p> <p><input type="checkbox"/> Has received training</p> <p>Name of curriculum:</p> <p>Assessment training:</p> <p><input type="checkbox"/> Has not received training</p> <p><input type="checkbox"/> Has received training</p> <p>Name of assessment:</p>	<p>Name:</p> <p>Position:</p> <p>Step on the Career Lattice:</p> <p>Curriculum training:</p> <p><input type="checkbox"/> Has not received training</p> <p><input type="checkbox"/> Has received training</p> <p>Name of curriculum:</p> <p>Assessment training:</p> <p><input type="checkbox"/> Has not received training</p> <p><input type="checkbox"/> Has received training</p> <p>Name of assessment:</p>

F. Certification

By signing this form, you, the applicant, certify that the information provided is true, correct and reliable for purposes of assessing your star rating for Parent Aware. You understand that the submission of inaccurate or misleading information may be grounds for elimination of a star rating.

Signature: _____ Printed name: _____

Title: _____ Date: _____