



## Nevada Ready! B-5 Alignment: Program Standards Report

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## Importance of Program Standards Alignment

States vary significantly in the way they define quality rating and improvement system (QRIS) standards, and the types of standards that they include (e.g., classroom assessment, administrative practices) influence the potential relationship between the ratings and quality and/or the ratings and child outcomes (Fox, McCullough, Caronongan, & Herrmann, 2019). When considering alignment issues for QRIS, the method of the collection (self-report, verified, observed) for standards impacts whether a standard is deemed credible or valid by various stakeholders. The method of collection can also impact whether a program pursues verification of specific quality indicators if some indicators are easier to verify than others. An analysis of the indicators used by multiple states participating in the Race to the Top-Early Learning Challenge showed that many relied on self-reported information, document reviews, and administrative data (Kirby et al., 2017). QRIS standards should include requirements for program staff to have the knowledge and skills (as outlined in the state workforce standards) needed to effectively support children's development and learning (as outlined in the state learning standards) and provide high-quality learning environments.

Program standards should include incremental progression to the highest level of program quality as defined by a state. States also must consider the impact of changing the QRIS standards, which may happen when states conduct alignment and revisions. On one hand, changes that are too frequent can confuse participants and the general public, but lengthy periods without revisions can result in the QRIS no longer reflecting the state's data, most current research, and evidence-based practices (National Center on Early Childhood Quality Assurance, 2019).

## The Charge

SRI partnered with the Nevada Department of Education to strengthen and align standards related to learning and development for young children, early childhood program quality and workforce standards for professionals working with your children through Nevada's Preschool Development Grant Birth-5. This document summarizes work and recommendations related to the workforce standards. SRI International was tasked with convening a work group to review and assess the status of alignment of between the three NV Silver State Stars models and to propose revisions to the QRIS to address alignment issues.

We convened two hybrid in-person and online work group meetings and one online work group jointly with the Learning Standards and Workforce Standards groups to discuss the alignment and provide input on revisions to and recommendations regarding the program standards. See Appendix A for a list of work group members and their attendance at each meeting. We collaborated with the Nevada Department of Education (NDE) and a steering committee throughout the stakeholder engagement and planning process to seek guidance and inform planning efforts. See Appendix B for a list of steering committee members and their attendance

at each meeting. Additionally, SRI's Denise Mauzy worked with Emily Champlin, QRIS Administrator at NDE, to discuss meeting agendas, access QRIS data, test our understanding of the Silver State Stars processes and requirements, and explore findings from analyses.

In addition to assessing alignment within the learning standards, the work groups considered alignment of the learning standards to the workforce and program standards. As displayed in Exhibit 1, the three standards areas are related in that program standards include references to both the workforce and learning standards and the workforce standards reference the learning standards.

*Exhibit 1. Relationships among Nevada early childhood standards*



After reviewing the literature, Nevada's standards, and selected state reports, SRI developed the Nevada Ready! B-3

Alignment Framework to guide work group planning, facilitation, and decision making as teams pursue alignment and revision goals. It was used to determine the appropriateness, rigor, alignment, and consistency of each standards area. Each work group reviewed their portion of the framework at first work group meeting in October 2019. Additionally, SRI reported updates to the work group on status of alignment in December 2019. The Nevada Ready! Standards Alignment Framework for Learning Standards (Exhibit 2) is below.

*Exhibit 2. Nevada Ready! Standards Alignment Framework: Program Standards*

<b>Component of Alignment:</b>	<b>Program Standards</b>
Appropriate Standards	1. Silver State Star models and requirements are appropriate to different program settings (type, size, and location of program) and include appropriate policies and procedures for accountability and monitoring.
Rigorous Standards	2. Silver State Stars levels reflect a progression of quality programming and the highest-level star rating (5 stars) is truly high quality. 3. Silver State Stars' criteria require increasing levels of participation, assessment, and professionalism. 4. Silver State Stars' quality indicators utilized to earn higher star ratings require increasing levels of written policies and procedures, administration and staff development, health and safety supports, and family and community partnerships.
Aligned Standards	5. Silver State Stars' criteria build on and incorporate child care licensure and program accreditation in a manner that provides an appropriate progression in quality.
Consistent Standards	6. Silver State Stars' models and requirements are comparable to other state QRIS and national guidance for QRIS. 7. Silver State Stars' models incorporate other nationally accepted program standards/requirements (e.g., Head Start Program Performance Standards).

## National Trends for QRIS

The Quality Compendium includes a wealth of information about QRIS across the nation. As of fall 2019, 41 states plus DC had at least one well-developed quality initiative resulting in 44 total initiatives with full QRIS profiles. Across the nation, QRIS vary in how they are structured, the areas addressed, and what criteria are included. The following are summary data queried from the compendium (Build Initiative, 2019):

- QRIS Structure: In general, the structure of QRIS models fall within three types.
  - QRIS models are based on cumulative points earned. This category represents 16% (n=7) of QRIS models.
  - QRIS models are based on block requirements: All criteria in a level must be met in each area to progress to the next level. This category represents 43% (n=19) of QRIS models.
  - QRIS models are based on a hybrid. Hybrid models may be structured to include blocks at early levels and points at later levels, or largely a point system with some specific requirements, or a mix of block and points at all levels. This category represents 41% (n=18) of QRIS models.
- QRIS Levels: The number of levels a program can earn varies across the nation, although five QRIS levels is by far the most popular. Data indicate that 13.6% (n=6) of QRIS include three levels, 25% (n=11) of QRIS include four levels, 56.8% (n=25) of QRIS include five levels, and 4.5% of QRIS (n=6) of QRIS include six levels.
- Child Care Licensure: In approximately half of states, child care licensure is equivalent to the first QRIS level for centers (56%) and family child care (44%).
- Accreditation: Half (50%) of states include program accreditation by specified accrediting entities in their requirements in some way. Accreditation programs may participate in an alternate QRIS rating process (e.g., automatic score based on status or fewer criteria may be required to achieve the score). Or, accreditation status may contribute to a QRIS rating process in some other way.

Given the prevalence of QRIS across the nation and the variation in standards and criteria, a lot of attention is focused on changes in QRIS over time. One such change is a shift in the focus from rating and improvement to continuous quality improvement. As policymakers seek to make the shift from a rating and improvement focus to that of continuous quality improvement, the following tips were developed to support planning (Orangesquare, 2016):

- Use the latest research and relevant feedback.
- Be brave—streamlining standards will require hard choices.
- Focus on the goal of continuous quality improvement rather than on a rating.



- Simplify always—claim success when your quality improvement standards can be explained on a two-sided, 8.5×11 sheet.
- Make it easy for providers to join now, and to stay engaged in the future.
- Lessen the administrative burden wherever possible.
- Make it easy to track providers' progress to-date, and to plan for the future.
- Build a comprehensive marketing communication strategy early in the process.
- Make sure your quality improvement system has a brand identity that makes sense and reflects your environment.

## Overview of the NV Silver State Stars

The mission of the Silver State Stars is to establish a standard to measure and improve the quality of early childhood programs and educate families, providers, and the community. NDE identifies three overall goals in the Silver State Stars Logic Model. (See Appendix C for the Nevada Silver State Stars Logic Model)

1. Continuous improvement in quality of early childhood education (ECE) programs
2. Children with exposure to high-quality ECE settings are ready for kindergarten and proficient at reading and math by grade 3
3. Families supported in preparing their child to reach their full potential

## Development of the NV Silver State Stars

Nevada began planning for the Silver State Stars in 2008 and launched a pilot project in 2009 to gather information and evaluate the criteria and design. The pilot was limited to 30 licensed child care centers in Southern Nevada (chosen via random drawing) over a three-year period. Revisions were made to the criteria and associated processes following the pilot. In July 2012, the Division of Welfare and Supportive Services, Office of Early Learning and Development (OELD) officially launched the Silver State Stars QRIS in Southern Nevada and in July 2013 launched it statewide. Nevada Silver State Stars moved to the Office of Early Learning and Development (ELD) in the Nevada Department of Education when it was created by Governor Sandoval through Executive Order #2013-16 in June 2014. Currently, Silver State Stars includes models for centers, family child care programs, and school-based programs or local education agencies (LEAs).

## Participation in NV Silver State Stars

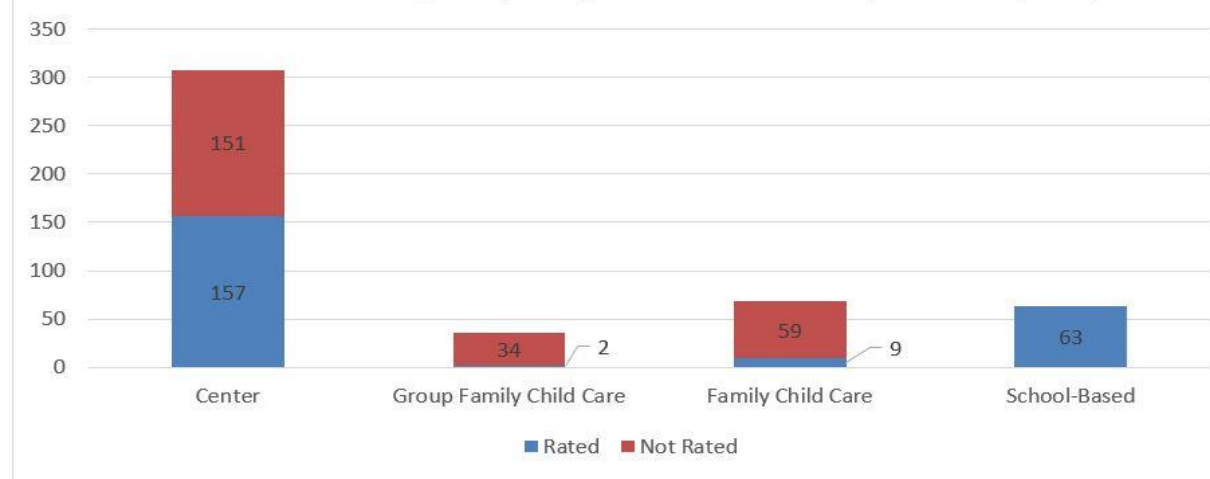
As of fall 2019, 231 programs were rated, representing 51% of centers (157/308), 6% of the group family child care (2/34), and 15% of family child care programs (9/68). It is unknown what percentage of LEAs the 63 programs represent due to how these programs are tracked. See Exhibit 3 for an overview of rated and not rated programs by type. Exhibit 4 provides an overview

of rating status of programs, including 38 programs that were in the process of being rated, by type.

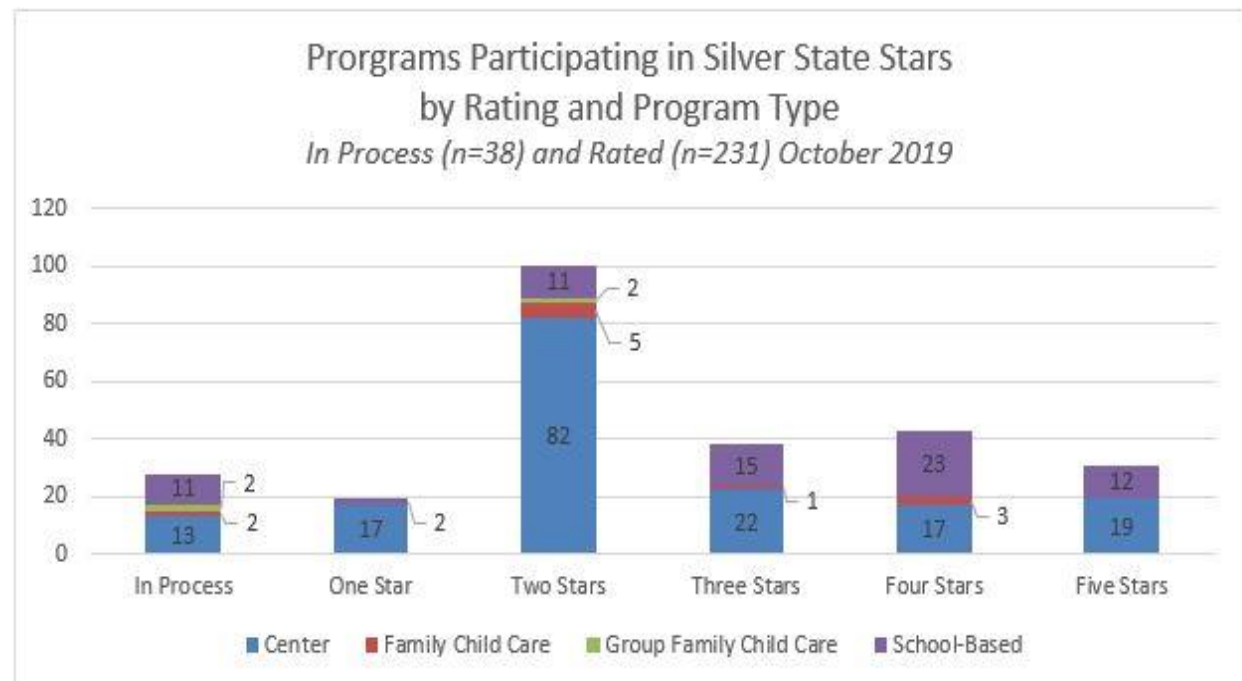
*Exhibit 3. Programs participating in Silver State Stars by rating*

**Exhibit 3. Rated and not rated programs by type**

*Based on 9/19 Licensing Data (n=412) and 10/19 QRIS Participation Data (n=231)*



*Exhibit 4. Programs participating in Silver State Stars by rating*



## **Overview of NV Silver State Stars Models**

The Silver State Stars models (center, family child care and LEA) outline requirements for programs to earn between one and five stars. These hybrid models include blocks of required criteria and a point system based on categories of quality indicators or federal indicators. Exhibit 5 includes an overview of the required criteria and the categories of indicators (centers and family child care) or federal indicators (LEA) where points can be earned.

While the center and family child care models most closely align, it should be noted that there are differences in the category names and where the indicators of quality are placed within these categories. The LEA model required criteria vary significantly from the other two models to account for the structure of school districts and personnel requirements.

The center and family child care models include 95 and 96 indicators respectively. The LEA model includes 13 indicators. (See Exhibit 6 for an overview of the number of indicators by model and categories.) The LEA model only includes the federal requirements in the indicators, resulting in significantly fewer indicators. However, it should be noted that these indicators are written differently from the indicators for the other two models in that the LEA model indicators tend to have a focus on overall practices (e.g., 15 clock hours of training for all lead teachers in specific areas) rather than the more discreet indicators included in the center and family child care models (e.g., 50% of teaching staff have two clock hours of training on early childhood mental health). Therefore, it should not be assumed that the LEA model requires less in the indicators. The indicators are simply written differently. Federal Indicators are organized where they align to the categories of indicators for the center and family child care models.

Exhibit 5. Silver State Stars required criteria and indicators by model

Exhibit 5. Silver State Stars required criteria and indicators by model

	Center	Family Child Care	LEA
Required	Program Structure	Program Structure	NA
	Ratio	NA—Addressed by Licensing	(included in Federal Indicators—10 to 1 Ratio)
	Child Screening	Child Screening	NA
	ERS Cut Scores	ERS Cut Scores	ERS Cut Scores
	Director Career Ladder	Director Career Ladder	NA
	Application Supports	Application Supports	NA
	NA	NA	CLASS Cut Scores
Categories of Indicators	<u>Policies &amp; Procedures</u> (Policies related to staffing and supervision, professional development, child assessment, inclusion, health and safety)  (Practices related to compensation, benefits, staff engagement in program improvement, staff development, curriculum, inclusion)	<u>Professional &amp; Business Practices</u> (Policies related to health and safety, staffing and supervision, professional development, child assessment, inclusion)  (Practices related to professional contributions, program admin, staff development, staff engagement in program improvement, curriculum, families and communities, inclusion, child assessment, program participation in other projects)	<b>Federal Quality Indicators</b>  Class Size of No More than 20, Full Day Program, Inclusion of Children with Disabilities, Curriculum and Standards, Individualized Accommodations and Supports, Monitoring Child Progress, P-3 Implementation  Teacher Qualification for Lead Teachers, High Quality Professional Development for Lead Teachers, High Quality Professional Development for 75% of Instructional Assistants or Aids  Health and Safety Standards  On-Site or Accessible Comprehensive Services for Children
	<u>Administration &amp; Staff Development</u> (Education, training, professional contributions, space requirements for staff, supervision, participation in other projects)	<u>Developmental Learning Activities</u> (Education, training, professional contributions, program assessment and improvement, curriculum, families and communities)	
	<u>Health &amp; Safety</u> (Program participation in other projects, program improvement, health practices, child screening, nutrition practices, emergency preparedness practices, space requirements for sick children)	<u>Safety &amp; Health</u> (Program participation in other projects, program improvement, health practices, child screening, nutrition practices, emergency preparedness practices)	
	<u>Family &amp; Community Partners</u> (Families communication and engagement, transition, inclusion practices, community resources and engagement, advisory board)	<u>Relationships &amp; Environments</u> (Families communication and engagement, transition, inclusion practices, community resources and engagement)	

Exhibit 6. Number of indicators by model

Model	Number of Indicators
Center	95
Policies & Procedures	25
Administration & Staff Development	24
Health & Safety	24
Family & Community Partners	22
Family Child Care	96
Professional & Business Practices	24
Developmental Learning Activities	23
Safety & Health	22
Relationships & Environments	27
LEA	13

## Approach to Assessing Alignment and Revisions

SRI used the Program Standards Alignment Framework (see Exhibit 2) to guide the assessment of alignment and revision process. While SRI staff were able to assess many aspects of alignment by reviewing national standards, research, other states' approaches, and relying on our staff expertise, it was critical to engage the work group in the discussion about rigor. Given that the Silver State Stars was developed through a stakeholder engagement and pilot process, it was important to understand stakeholders' perspectives about why indicators were included, perceptions about how the indicators are functioning within the QRIS to-date, and possible revisions to align to national standards while accounting for the current NV context.

Our approach to discussions around rigor included eight steps (see exhibit 7).

1. Identify Common Topics of Quality within Models: Given the differences in the models (see Exhibit 5) and placement of indicators within topics, it was necessary to identify common standards areas across the models and code the 300 indicators so groups could review similar topics across the three models at once.
2. Align Indicators with those Topics: SRI coded the indicators by the following topics.
  - a. Child Screening and Assessment
  - b. Curriculum
  - c. Communication
  - d. Community Partners
  - e. Family Events
  - f. Program Policies
    - i. Families
    - ii. Children
    - iii. General, Program Set Up, Resources
    - iv. Staff, Staff Supervision, Compensation and Benefits
  - g. Learning Standards
  - h. Staff Qualifications
  - i. Director Qualifications
  - j. Professional Development
  - k. Professionalism
  - l. Health
  - m. Mental Health
  - n. Nutrition
  - o. Safety
  - p. Program Assessment and Improvement

3. Consider Level of Effort and Impact on Quality of Each Indicator: Given that indicators are weighted equally in the models, it was important to deconstruct indicators and consider the level of effort that may be required by staff to implement an indicator and its overall impact on quality. Work group members completed this activity during the October 2019 meeting.
4. Review How Often Indicators are Used for the Ratings: Given the number of indicators within each category (see Exhibit 6) and that programs only have to meet 4, 8, or 12 to meet level 2, 3, and 4 thresholds for scoring, it was important to understand how often the indicators were verified and used in scoring. The frequency counts were needed to better understand how individual indicators were performing as it provided insight into feasibility for programs to meet the indicator and which types of indicators were most likely to be verified. Some indicators were present more often than others. Additionally, there were indicators that were never used. (See Appendix D for frequency of indicators submitted to the portfolio system for potential verification.)
5. Discuss the Implications: Work group members discussed the frequencies of indicators while also considering their levels of effort and impact during the October 2019 meeting.
6. Review Progression of Quality Indicators Within Domains: SRI reviewed the indicators to determine if indicators scaffold to build toward higher levels of quality. SRI determined that the indicators were *not* built to scaffold in an intentional way to lead to higher levels of quality.
7. Complete Analyses: Combination of Indicators Used for Ratings: SRI staff analyzed the data looking for patterns in combinations of indicators used for higher scores. Patterns were found in the LEA model; however, no patterns were found for the center and family child care models. It is not surprising that patterns were found in the LEA model given that there are 13 indicators and programs must verify 4, 6, 8 or 10 to meet scoring requirements for Levels 2, 3, 4, and 5 respectively. Additionally, it is not surprising that no patterns were found for the center and family child care models given the volume of indicators and number required to verify for each level.
8. Discuss Findings: Work group members discussed these findings and worked on recommendations to the indicators to better scaffold requirements and support a progression of quality.

Exhibit 7. Approach to assessing alignment and revisions



## Status of Program Standards Alignment

Throughout the process, SRI staff updated The Nevada Ready! Standards Alignment Framework for Program Standards (Exhibit 2) to include the status of alignment based on review of the literature, best practices, work group discussions, and results of data analysis. Exhibit 8 lists each component of alignment and overall alignment designation (positive alignment, mixed alignment, and not aligned). Additionally, Exhibit 8 lists each of the criteria reviewed and includes examples that inform the overall designation. Each example is coded for positive alignment (+), not aligned (-), or mixed alignment (+/-).

Exhibit 8. Summary status of alignment: Program Standards

Component of Quality	Status	Notes
<b>Appropriate Standards</b>	Mixed Alignment	1. Silver State Star models and requirements are appropriate to different program settings (type, size, and location of program) and include appropriate policies and procedures for accountability and monitoring. <ul style="list-style-type: none"> <li>a. Specific models developed for centers, homes, and district led pre-K programs. (+)</li> <li>b. Some topics are overrepresented in the quality indicators within categories, while other topics are underrepresented. (-)</li> <li>c. There is confusion among stakeholders about whether some indicators within the center and family child care models are duplicative of licensing. While a review by NDE evidences they are not, some indicators are only incrementally different from the licensing standards. (-)</li> <li>d. QRIS includes appropriate policies and procedures for accountability and monitoring. (+)</li> </ul>



<b>Rigorous Standards</b>	Mixed Alignment	<ol style="list-style-type: none"> <li>1. Silver State Stars levels reflect a progression of quality programming and the highest-level star rating (5 stars) is truly high quality.               <ol style="list-style-type: none"> <li>a. The LEA model thresholds for the CLASS align with the levels of quality and scoring guidance provided by the authors. (+)</li> <li>b. The LEA model thresholds for the ERS are higher than the Center and Home models. Additionally, the Center and Home models ERS requirement is 4.5 average, while an average score of 5 is often considered to be “high quality.” (-)</li> <li>c. Analysis of verification of quality indicator highlights that some quality indicators are overrepresented while others are rarely or never used. (See Appendix D;-)</li> </ol> </li> <li>2. Silver State Stars’ criteria require increasing levels of participation, assessment, and professionalism.               <ol style="list-style-type: none"> <li>a. Criteria scaffold for increasing levels of participation, assessment, and professionalism. (+)</li> </ol> </li> <li>3. Silver State Stars’ quality indicators utilized to earn higher star ratings require increasing levels of written policies and procedures, administration and staff development, health and safety supports, and family and community partnerships.               <ol style="list-style-type: none"> <li>a. All quality indicators within a category are weighted equally, regardless of the amount of effort required to complete the indicator and/or the resulting impact on quality. (-)</li> <li>b. The frequency of combinations of quality indicators used for verification did not result in any patterns for center and family child care. While patterns exist for LEAs, some indicators are actually required and not optional. Analyses suggest revisions are needed to ensure the rigor of the ratings. (-)</li> <li>c. The LEA model includes four federal indicators as optional that are required for federal funding. (-)</li> </ol> </li> </ol>
<b>Aligned Standards</b>	Aligned	<ol style="list-style-type: none"> <li>1. Silver State Stars’ criteria build on and incorporate child care licensure and program accreditation in a manner that provides an appropriate progression in quality.               <ol style="list-style-type: none"> <li>a. The models address the same domains of quality. (+)</li> <li>b. The level one requirement for center and family child care models is licensing. (+) Note: Please see 1c under Appropriate Standards as it relates to this area of alignment.</li> <li>c. Center and home models can only earn a 5-star rating if they are accredited or a Head Start grantee and meet other criteria. (+)</li> </ol> </li> </ol>



<b>Consistent Standards</b>	Mixed Alignment	<ol style="list-style-type: none"> <li>1. Silver State Stars' models and requirements are comparable to other states' QRIS and national guidance for QRIS. <ol style="list-style-type: none"> <li>a. In general, the topics/areas of practice addressed in the Silver State Stars are comparable to other QRIS and/or national guidance; however, the number of individual indicators (center and family child care) and the scoring system do not align with current recommendations to streamline criteria and focus on those items that support continuous quality improvement. (+/-)</li> </ol> </li> <li>2. Silver State Stars' models incorporate other nationally accepted program standards/requirements (e.g., Head Start Program Performance Standards). <ol style="list-style-type: none"> <li>a. Center and home models can only earn a 5-star rating if they are accredited or a Head Start grantee and meet other criteria. (+)</li> <li>b. Silver State Stars development and revision are informed by a logic model; however, it is not reviewed or updated on a regular basis. (+/-)</li> </ol> </li> </ol>
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## Recommendations

SRI offers recommendations for the NV Silver State Stars Advisory Committee's and the NDE's consideration based on the status of alignment. These recommendations are organized by the following categories: participation, model structure, indicators, data system, and data tracking and analysis.

### Participation

1. Develop recruitment strategies to increase participation by family child care programs.

### Model Structure

1. LEA Model
  - a. Move the indicators required for pre-K funding (lead teacher qualifications, ratio, instructional hours, inclusion) to the LEA required criteria.
  - b. Identify additional "state indicators" for programs to pursue continuous quality improvement to maintain the current number of indicators.
2. Center and Family Child Care Categories of Indicators and Placement of Indicators

- a. Consider renaming and organizing indicators to focus on key aspects of quality programming. For example, business and administrative practices, staff training and education, teaching and learning, and families and communities.
    - i. Currently, the categories imply a heavy emphasis on policies and procedures and administrative practices. However, those policies and procedures relate to specific policies around parent engagement, inclusion, curriculum, etc.
    - ii. No category solely addresses teaching and learning, and inclusion of those indicators in other larger categories decreases the chance that programs will focus on teaching and learning indicators.
    - iii. Note: This recommendation is not intended to remove areas of indicators such as health and safety. It is intended to help organize existing indicators into the larger aspects of quality programming.
  - b. Align the names of the categories across the center and family child care models.
3. Approach to Center and Family Child Care Model Indicators
- a. Reconsider the current approach to the indicators, balancing the need to provide flexibility for programs and support a pathway for continuous quality improvement. (See Appendix E for recommendations from work group members.)
    - i. Consider approach to indicators that have the highest impact on quality. For example, the current center model has two indicators for formal education for staff. Only 4% of centers verified that 75% of staff meets a career ladder of 2.1 and no centers verified that 50% of staff meets a 4.1. These data suggest that the indicator may not be appropriately levelled for programs. The work group members suggested the following revision (See Appendix E):
      1. Minimum placement on the career ladder is 2.1 for 25% of teaching staff.
      2. Minimum placement on the career ladder is 2.1 for 50% of teaching staff.
      3. Minimum placement on the career ladder is 2.1 for 75% of teaching staff.
      4. Minimum placement on the career ladder is 4.1 for 25% of teaching staff.
      5. Minimum placement on the career ladder is 4.1 for 50% of teaching staff.

6. Minimum placement on the career ladder is 4.1 for 75% of teaching staff.
- ii. Consider grouping similar indicators together and supporting increasing levels of completion. For example, the work group members suggested combining four training indicators into one:
 

All teaching staff have 12 clock hours in any of the following areas in the past two years: diversity; early childhood mental health; Environment Rating Scales; infant and toddler specific training; play-based learning; and/or inclusion.

Or, group the indicators together and scaffold the requirement. For the training example above, it could be scaffolded for the percent of staff required to complete the 12 hours.
- b. Consider Appropriateness of Inclusion of Indicators in Center and Family Child Care Models that Support Participation
    - i. The current models include several indicators designed to promote/reward participation in quality initiatives. While these initiatives support efforts to improve quality, they may better used as examples of verification. For example, participation of staff in TEACH could be used as verification that a program supports professional development and increased compensation. Additionally, TEACH is not available to all programs. SRI recommends NDE review all indicators that are designed to support/reward for participation and determine if they should remain as written, revised, removed but used as a verification for another indicator, or removed.
    - ii. When NDE deems that an indicator should be included to support/reward participation in another initiative, SRI recommends that NDE monitor how often programs use the indicator for scoring and discuss (with partners) continued inclusion of the indicator.
  - c. Scoring of Indicators
    - i. SRI recommends identifying any indicators are only applicable under certain circumstances and allowing those indicators to be marked as not applicable. Additionally, the minimum number of indicators for a category may need to be adjusted depending on the number of applicable indicators available for a program to earn. For example, the family child care model has indicators for staff that may not be applicable to many family child care programs. If sufficient indicators are not available for the family child program to earn a higher level of star, the requirement should

be adjusted. Note: SRI is **not** recommending that this approach is used for indicators that address children with special needs. We believe that programs should implement policies and procedures to support young children with special needs regardless of whether current enrollment includes children with special needs.

- ii. Depending on future revisions to the indicators, NDE may need to re-evaluate scoring for the indicators for the center and family and child care models. For example, consider adjusting the number of indicators required for each level in a category based on applicability of the indicators. Or, depending on the final number of indicators in each category, NDE might consider adjusting the scoring to a percentage of the total indicators in that category.
4. Center and Family Child Care Indicator Revisions: In general, SRI recommends that NDE consider reducing the number of center and family child care indicators so there are—fewer indicators that are more rigorous, substantive, and more closely linked to quality. SRI offers the following recommendations related to specific indicators or topics of indicators.
- d. Indicators Related to Formal Education of Staff: While SRI recognizes that education levels are low for many staff working in centers and family child care, we recommend the inclusion of more indicators that support a progression of formal education for staff. Note: The work group recommended a progression of formal education beginning earlier in the career lattice and beginning with a smaller percentage of staff who would need to meet the level. (See Appendix E.)
  - e. Indicators that Build on Licensing Recommendations: Consider eliminating indicators that are only incrementally different from current licensing requirements. If NDE does not wish to remove these indicators, revise indicators that are intended to build from licensing requirements (e.g., ratios, nutritional meals/snacks, provider availability to parents) to ensure that the new indicator is advanced enough that it offers a progression in health and safety standards and so that stakeholders no longer perceive it to be a duplication.
  - f. Naming Tools and/or Instruments: Review the indicators and eliminate reference to specific tools or instruments that are not widely available. Consider the intent of the original indicator and possible revisions. For example, centers and family child care have an indicator to develop a program improvement plan based on the PAS/BAS scores. There is discussion of whether these tools and the trainings to support these tools are

widely available. NDE could modify the indicator to read “based on an assessment of administrative practices” and the PAS/BAS could be used as one form of verification.

- g. Indicators that Require Use of Other Services: Review the indicators and identify those that require use of services that are not widely available. For example, the center and family child care models include an indicator for a health and safety assessment to be completed by a child care health consultant or nurse. Work group members indicate that there is only one consultant available in the state who works in Reno.
- h. Inclusion of Activities as Indicators that Can Support Larger Practices: Review indicators and identify those that are examples of larger practices. For example, the models include separate indicators for serving whole milk to children up to age two and serving one percent milk to children older than age two. However, indicators already exist for nutrition and meal planning, and for evaluation of menus. Provision of milk (as described) can be one aspect of verification of proper meal planning. If NDE wants to keep provision of milk as an indicator, SRI staff recommend combining the two items into one indicator as suggested by the work group in Appendix E. Another example is the inclusion of two indicators for each model focused on gardens. These indicators are examples of how nutrition and gardening can be included in lesson planning, and how parents can be involved in classroom activities. SRI suggests that these gardening activities be used as verification methods for other larger practices (i.e., incorporating nutrition and health in lesson planning, engaging families in classroom activities).

## **Data System**

Consider, as funding is available, enhancements to the current data systems to increase tracking and reporting capability. Specifically, SRI recommends the following:

1. Establish common IDs and coding to be used across all associated data systems.
  - a. Currently, data from the portfolio data system do not include license # or unique QRIS program ID that can easily be associated with the Branagh data system. As a result, it is difficult to analyze the frequency by which programs seek verification of an individual indicator.
  - b. Currently, the portfolio data system does not indicate which model a program is scored by. This is an issue when center-based programs include a pre-K classroom.
2. Update the Branagh system to include which indicators were verified in each category to comprise the points earned in that category.

- a. Currently, the data system only includes the sum of points earned in each category. Therefore, accurate tracking of verification of indicators is not possible.
3. Establish data linkages across the multiple data systems used to support and administer the Nevada Silver State Stars.

## **Data Tracking and Analysis**

Expand the scope of tracking, reporting, and evaluation. Specifically, SRI recommends the following:

1. Implement More Detailed Tracking and Report About Participation Rates Against Established Participation Goals
  - a. Currently, NDE tracks the number of program and the ratings by type and rating; however, data are not available about the total number of LEA programs.
  - b. Tracking and reporting that includes the percentage of programs participating (by state and counties) is recommended to highlight successes in recruitment and to identify where there are gaps.
  - c. SRI recommends analysis of those programs not currently participating in Silver State Stars to determine if there are commonalities among those who do not participate.
2. Track and analyze all individual criteria.
  - a. Currently, in depth analysis and tracking occurs for the ERS and CLASS scores.
  - b. The remaining criteria should be tracked and analyzed to determine what is potentially keeping programs from meeting the next level of required criteria and what supports could be put in place to support programs.
3. Track and analyze individual indicators.
  - a. Currently, NDE does not track or monitor the frequency by which indicators are used for scoring on the QRIS. Indicators should be tracked to monitor which indicators and combination of indicators are being used to earn points toward the overall rating. Additionally, NDE should identify high priority indicators (e.g, inclusion, curriculum planning aligned with Early Learning Guidelines [ELGs]) to monitor and develop strategies to support programs as they work to increase program quality.

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## Appendix A: Program Standards Work Group Roster and Meeting Attendance

Name	Role	Attended 10/17/19 Meeting	Attended 12/05/19 Meeting	Attended 1/15/20 Meeting
Ali Cooper	Small Blessings Christian Preschool, Director	X	X	X
Amanda Haboush Deloye	Nevada Institute for Children's Research and Policy, Associate Director			
Angela Triche	Sunrise Children's Foundation, ECAC Family and Community Engagement Co- chair	X		X
Anna Acosta	WNC Child Development Center			
Anna Severens	Nevada Department of Education, State PreK Administrator	X	X	X
Ashlee Naehu	KIDS FIRST, Director			
Brianna Cambra	The Children's Cabinet, Program Manager	X	X	X
Candice McDaniel	DHHS/DPBH/Bureau of Child, Family and Community Wellness, Health Bureau Chief			
Carol Luna	Immunize Nevada, Program Manager			
Carolyn Steele	Nye County School District, Learning Coordinator			
Chelli Smith	Southern Nevada RPDP, Director			
Cherish Morgan	Community Church Preschool , Director	X		
Cindy Gonzales	Sunrise Children's Foundation Early Head Start, Senior Manager of Education, Health and Nutrition			X
Crystal Baumbach	Next Generation Kids Language Academy, Director			
Daina Loeffler	NDE ECSE; Part B-619,			X
Danielle Holmes	The Children's Cabinet, Program Director	X	X	X
Diane Nicolet	TMCC-E.L.Cord Child Care Center, Director	X		X
Dione Gantt	The Children's Cabinet, QRIS Coach			
Elvira Weintraub	24 Yessi's Pre-k/ Little Genius Tots, Owner			
Emily Champlin	NDE OELD, QRIS Administrator	X	X	X
Evelyn Dryer	DPBH-Nevada Home Visiting, Program Manager, Nevada Home Visiting			
Evelyn Knight	Zoo'n Around Preschool LLC, Owner/ Director	X	X	X
Jeff Gelfer	University of Nevada, Las Vegas, Professor			
Jenna Weglarz- Ward	University of Nevada Las Vegas, Assistant Professor			



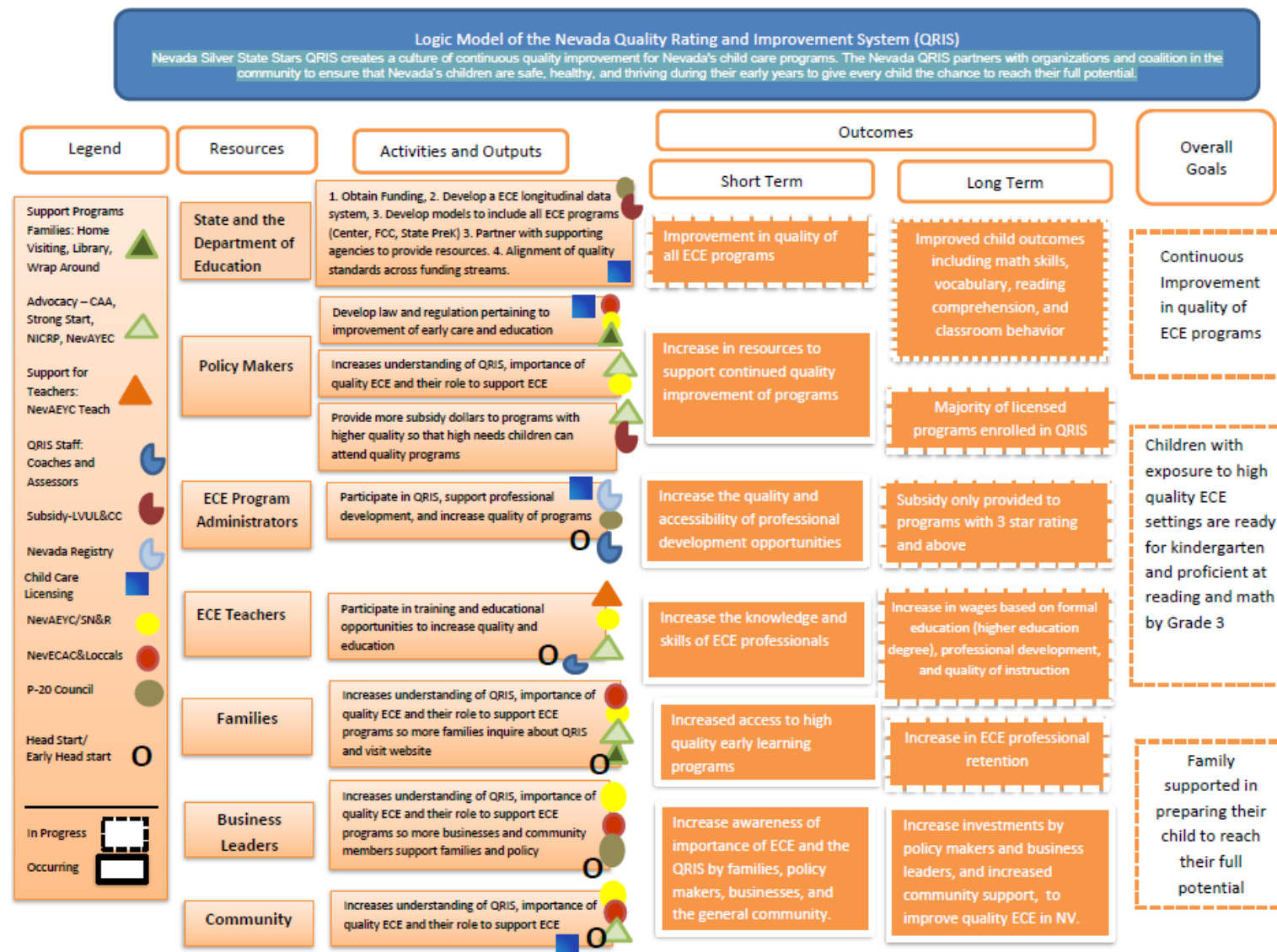
Jennifer Haynal	CCSD (Snyder #205), Principal	X		
Julie Houchins	United Way of Southern Nevada, Director of Early Education			
Kaitlin Lewallen	Nevada Department of Education, Education Programs Professional		X	X
Karyn Murray	Brookfield School, Director			
Kate McNabney	Children's Advocacy Alliance, School Readiness Policy Manager	X	X	X
Kimberly Jones	A Place to Grow Home Childcare and Preschool, Owner			
Latonyal Godfrey	The Children's Cabinet, FCC coach	X		
LeAn Shelton	UNR-CFRC EHS, Family and Community Partnerships Coordinator	X	X	X
Lela Arney	Pebbles Preschool, Director			
Linda Fitzgibbons		X		
Linda Pheasant	ECTA , ECE Program Teacher			
Lynette Fisherman	FallonTribe CCDF, Child Care Coordinator			
Mariama Grimes	The Public Education Foundation, Vice-President, Family and Community Engagement			
Mary Regan	Early Childhood Connection - Las Vegas Urban League, Child Care Resource & Referral Manager	X	X	X
Mia Pace	NDE, EPP		X	X
Mychelle Weart	NDE		X	X
Nicole Sailers	CCSD, Coordinator	X		X
Nina Anderson				
Patrice Gardner	Nevada Department of Education, Head Start State Collaborative Director / QRIS Supervisor	X	X	
Patti Oya	NDE, Director			
Phyllis Miranda-Castillo	Family Sunshine Learning Center, possible Future Founder	X		
Rachel McKinney	The Children's Cabinet; UNR-HDFS Instructor, QRIS Coordinator	X	X	X
Randi Glunt	Mission Possible Montessori School, Owner			
Rhonda Laughlin	Reno-Sparks Indian Colony Head Start, Head Start Manager	X	X	X
Robin Marx-Mackerley	University of Nevada Cooperative Extension , Instructor	X	X	
Robyn Markovic	SNRPDP, Early Literacy Trainer	X		
Sahydit Herrera				
Sara Abouelkomsan	QRIS Coach		X	X

Teresa Byington	Associate Professor at UNR			X
Tiffany Olivas	Nevada Department of Education OELD, Education and Information Officer	X	X	X
Traci Carbon	Humboldt County School District, Educator Effectiveness and Family Engagement Coordinator			
Tracie Van Winkle- Lansford	The Children's Cabinet, QRIS Coach		X	
Wendy Rowe	New Horizon Kids Quest Inc., District Manager			
Yvonne Jacob	Acelero Learning Clark County, Director of Education, Disabilities and Mental Health	X		X

## Appendix B: Steering Committee Roster and Meeting Attendance

Name	Role	Attended 10/08/19 Meeting	Attended 11/18/19 Meeting	Attended 12/16/20 Meeting	Attended 1/30/20 Meeting
Ali Cooper	Small Blessings Preschool	X	X	X	X
Anna Severens	NDE	X		X	X
Connie Flores	Child Care Licensing	X		X	X
Daina Loeffler	Early Childhood Special Education Programs Professional, 619 Coordinator	X	X	X	X
Emily Champlin	Education Programs Professional, QRIS Administration	X	X	X	
John Cregg	Program Director, T.E.A.C.H. Early Childhood NEVADA	X	X	X	X
Julie Houchins	ECE Director, United Way of Southern NV		X	X	
Kaitlin Lewallen	Education Programs Professional, Nevada Ready! State Pre-K	X	X	X	
Latisha Brown	Program Manager, DHHS, Childcare Licensing	X			
Marty Elquist	Children's Cabinet & ECAC Chair			X	X
Mychelle Weart	Office of Early Learning				X
Nicole Sailors	EC Coordinator	X		X	X
Patrice Gardner	Nevada Department of Education, Head Start State Collaborative Director / QRIS Supervisor			X	X
Shelly Nye	Program Director, Nevada Registry	X	X	X	X
Sherry Waugh	UNR, Director Early Head Start Provider	X	X	X	X
Teresa Byington	Associate Professor at UNR	X	X	X	X
Tiffany Olivas	Education Information Office, NDE	X	X		X
Tina Springmeyer	Child and Family Services Director, Washoe County School District		X	X	

## Appendix B: Nevada Silver State Stars Logic Model



## Appendix C Frequency of Indicators Submitted to Portfolio System for Use in Verification Process

SRI worked with Emily Champlin at NV Silver State Stars to access data on how often programs verified each indicator when pursuing star ratings. Data were only available in the portfolio data system which is used during the verification process. Therefore, SRI was unable to access data on those indicators that were used in the final scoring process for the programs. However, anecdotally, SRI learned that those majority of those indicators with supporting documentation uploaded into the portfolio system are eventually included the final scoring process. SRI analyzed the raw data to tabulate frequency counts for each indicator and the percent by which

Model	Indicator Area	#	Indicator	Frequency Count	# of Programs	Percent of Programs
Center	P&P	1A	Center is accredited by an approved accrediting body	2	71	3%
Center	P&P	1B	On-going child assessment includes at least one <b>informal</b> method such as observations, portfolios, or teachers' anecdotal records	12	71	17%
Center	P&P	1C	Center has an accurate policy regarding providing information to parents about how Brigance Screen III results will be reported and shared	27	71	38%
Center	P&P	1D	Classrooms have weekly or monthly curriculum planning calendars	24	71	34%
Center	P&P	1E	Classrooms have written lesson plans for teacher-directed activities for each age group. Lesson plans must include adaptations for children with special needs as applicable.	9	71	13%
Center	P&P	1F	Center has policy regarding expulsion and suspension that aligns with the Nevada Department of Education guidelines.	21	71	30%
Center	P&P	1G	Preschool lesson plans align with Nevada Pre-K Standards	10	71	14%
Center	P&P	1G1	Infant/Toddler lesson plans that align with Nevada Early Learning Guidelines	2	71	3%
Center	P&P	1H	Center has a compensation plan that provides for annual pay increases (i.e. cost of living raises)	9	71	13%
Center	P&P	1I	Center has a compensation plan that provides for increases based on merit, education, or performance	26	71	37%

Model	Indicator Area	#	Indicator	Frequency Count	# of Programs	Percent of Programs
Center	P&P	1J	Medical insurance is available to staff members	17	71	24%
Center	P&P	1K	Benefits (other than medical insurance) are provided to staff members	43	71	61%
Center	P&P	1L	Center has a written employee handbook with a signature page	47	71	66%
Center	P&P	1M	Center reimburses professional development expenses incurred by teaching staff	23	71	32%
Center	P&P	1N	Supervisor provides teaching staff with an annual written performance evaluation	29	71	41%
Center	P&P	1O	Center has a documentation system in place to support collaboration with specialist working with identified children	11	71	15%
Center	P&P	1P	Center has a written statement on the inclusion of children with special needs	26	71	37%
Center	P&P	1Q	Center obtains (with parental consent) an IFSP/IEP for each child enrolled with a diagnosed disability	13	71	18%
Center	P&P	1R	Center collaborates with outside agency and family before administrative withdrawal of any child with medical/behavioral issues	12	71	17%
Center	P&P	1S	Center has a written policy for procedures on reporting child abuse & neglect included in their parent handbook	39	71	55%
Center	P&P	1T	Center has a written health statement	42	71	59%
Center	P&P	1U	Center has a written physical activity statement	16	71	23%
Center	P&P	1V	Center holds monthly staff meetings	11	71	15%
Center	P&P	1W	Center has a documented procedure to receive staff feedback on program quality	5	71	7%
Center	P&P	1X	Staff feedback on program quality is used to develop a written plan for program improvement	2	71	3%
Center	Admin & Staff Dev	2A	Director has a minimum of 21 credits in management or business related courses	6	71	8%

Model	Indicator Area	#	Indicator	Frequency Count	# of Programs	Percent of Programs
Center	Admin & Staff Dev	2B	Director is a current member of a national early childhood professional organization	35	71	49%
Center	Admin & Staff Dev	2C	Director participates on an early childhood committee	11	71	15%
Center	Admin & Staff Dev	2D	Director has completed an approved Program Administration Scale (PAS) training	10	71	14%
Center	Admin & Staff Dev	2D1	Director has completed a leadership academy	10	71	14%
Center	Admin & Staff Dev	2E	All administrators and 75% of staff have completed one Core Knowledge Area (CKA) in The Nevada Registry professional development plans.	4	71	6%
Center	Admin & Staff Dev	2F	Center has a documented improvement plan based on a PAS self-assessment	1	71	1%
Center	Admin & Staff Dev	2G	Center is a current T.E.A.C.H. Early Childhood Nevada site	18	71	25%
Center	Admin & Staff Dev	2H	Center offers quarterly staff professional development activities	5	71	7%
Center	Admin & Staff Dev	2I	Minimum placement on the career ladder is 2.1 for 75% of teaching staff	3	71	4%
Center	Admin & Staff Dev	2J	Minimum placement on the career ladder is 4.1 for 50% of teaching staff		71	0%
Center	Admin & Staff Dev	2K	Work environment for staff includes a place for adults to take a break from children, an adult-sized bathroom, and a secure place for staff to secure their belongings	40	71	56%
Center	Admin & Staff Dev	2L	Work environment for staff includes a place for adults that is an administrative area for planning, separate from children's areas	43	71	61%
Center	Admin & Staff Dev	2M	Supervisor completes three observations per staff member per year	9	71	13%
Center	Admin & Staff Dev	2N	Supervisor provides teaching staff with written feedback based on observations of teacher's performance	5	71	7%
Center	Admin & Staff Dev	2O	50% of teaching staff are current members of a national early childhood professional organization	3	71	4%

Model	Indicator Area	#	Indicator	Frequency Count	# of Programs	Percent of Programs
Center	Admin & Staff Dev	2P	Center has a written policy that teaching staff complete a minimum of five additional hours of annual training above licensing requirements	19	71	27%
Center	Admin & Staff Dev	2Q	All administrators have two clock hours on the topic “ <i>early childhood mental health</i> ” received in the past two years	22	71	31%
Center	Admin & Staff Dev	2R	All administrators have two clock hours on the topic “ <i>inclusion</i> ” received in the past two years	31	71	44%
Center	Admin & Staff Dev	2S	All administrators have two clock hours on the topic “ <i>Diversity</i> ” received in the past two years	23	71	32%
Center	Admin & Staff Dev	2T	50% of all teaching staff have two clock hours on the topic “ <i>early childhood mental health</i> ” received in the past two years	14	71	20%
Center	Admin & Staff Dev	2U	50% of all teaching staff have two clock hours on the topic “ <i>inclusion</i> ” received in the past two years	10	71	14%
Center	Admin & Staff Dev	2V	50% of all teaching staff have two clock hours on the topic “ <i>Diversity</i> ” received in the past two years	7	71	10%
Center	Admin & Staff Dev	2W	50% of all teaching staff have two clock hours on the topic “ <i>Environment Rating Scales</i> ” received in the past two years	10	71	14%
Center	Health and Safety	3A	Center has an emergency preparedness kit	32	71	45%
Center	Health and Safety	3B	Center has a working garden that is used for lessons with children.	8	71	11%
Center	Health and Safety	3C	Administrator AND 50% of all teaching staff have advanced training for emergency preparedness or response to threatening incident.	12	71	17%
Center	Health and Safety	3D	Health and Safety Assessment is completed by a child care health consultant or nurse	4	71	6%



Model	Indicator Area	#	Indicator	Frequency Count	# of Programs	Percent of Programs
Center	Health and Safety	3E	Child Record Review is completed by a child care health consultant or nurse	2	71	3%
Center	Health and Safety	3F	Center has individualized health plans for children with medical concerns	12	71	17%
Center	Health and Safety	3G	Center provides care for sick children in a separate location, supervised by a medical practitioner.	1	71	1%
Center	Health and Safety	3H	Staff plan and implement daily developmentally appropriate physical activities for all children	16	71	23%
Center	Health and Safety	3I	Center has a documented improvement plan based on a nutrition and physical activity self-assessment checklist	7	71	10%
Center	Health and Safety	3J	Center is a registered Web IZ provider	39	71	55%
Center	Health and Safety	3K	The ASQ:SE-2 is used to screen children's social-emotional development	10	71	14%
Center	Health and Safety	3L	Children in need of developmental services are referred to the appropriate agency	14	71	20%
Center	Health and Safety	3M	Children in need of mental or behavioral health services are referred to the appropriate agency	14	71	20%
Center	Health and Safety	3N	Center has a behavior support team	5	71	7%
Center	Health and Safety	3O	Center has a documented improvement plan based on the Inventory of Practices for Promoting Social Emotional Competence	3	71	4%
Center	Health and Safety	3P	Center is an implementation site for the Nevada TACSEI Project	8	71	11%
Center	Health and Safety	3Q	Menus are evaluated by a nutritionist	4	71	6%
Center	Health and Safety	3R	Center is a Child and Adult Care Food Program (CACFP) sponsored site	8	71	11%
Center	Health and Safety	3S	Center supports breastfeeding by offering a designated location	16	71	23%

Model	Indicator Area	#	Indicator	Frequency Count	# of Programs	Percent of Programs
Center	Health and Safety	3T	Children up to two-years-old are served whole milk	26	71	37%
Center	Health and Safety	3U	Children two-years-old and older are served skim or 1% milk	29	71	41%
Center	Health and Safety	3V	Infant's teeth and gums are wiped with a disposable tissue after each feeding	6	71	8%
Center	Health and Safety	3W	Preschool children receive annual oral health education	25	71	35%
Center	Health and Safety	3X	All classrooms have a cleaning and sanitation schedule posted	33	71	46%
Center	Family and Community Partners	4A	Center collaborates with a community agency	13	71	18%
Center	Family and Community Partners	4B	Families are encouraged to tour center before enrolling child	39	71	55%
Center	Family and Community Partners	4C	Center compiles and provides written program information for families in their home language	12	71	17%
Center	Family and Community Partners	4D	Materials from community agencies are available for families at the center	36	71	51%
Center	Family and Community Partners	4E	Breastfeeding materials and information are available for families at the center	24	71	34%
Center	Family and Community Partners	4F	Program distributes a newsletter to families at least quarterly	24	71	34%
Center	Family and Community Partners	4G	Center has a communication form families can use to communicate with teachers	18	71	25%
Center	Family and Community Partners	4H	Parent teacher conferences are scheduled on an as needed basis	18	71	25%

Model	Indicator Area	#	Indicator	Frequency Count	# of Programs	Percent of Programs
Center	Family and Community Partners	4I	Parent teacher conferences are scheduled on a regular basis	11	71	15%
Center	Family and Community Partners	4J	A written procedure is in place to help families transition children to the next classroom, other programs or schools	27	71	38%
Center	Family and Community Partners	K	Center has a documented procedure to receive family feedback on program quality	12	71	17%
Center	Family and Community Partners	4L	Families' feedback is used to develop a written plan for program improvement	3	71	4%
Center	Family and Community Partners	4M	Center has a written plan for parent involvement	15	71	21%
Center	Family and Community Partners	4N	Center offers on-site family involvement activities at a minimum of four times per year	15	71	21%
Center	Family and Community Partners	4O	Center offers on-site classes or training opportunities specifically for parents at a minimum of four times per year	3	71	4%
Center	Family and Community Partners	4P	Center offers on-site an annual class or training opportunity provided by an outside agency for parents	5	71	7%
Center	Family and Community Partners	4Q	Center offers on-site at least one annual class or training opportunity focused on health, physical activity, or nutrition for parents	3	71	4%
Center	Family and Community Partners	4R	Center has a garden that includes parent participation.	6	71	8%
Center	Family and Community Partners	4S	Center has a parent board, advisory board that includes a parent or a parent association	1	71	1%

Model	Indicator Area	#	Indicator	Frequency Count	# of Programs	Percent of Programs
Center	Family and Community Partners	4S1	Center has a written orientation plan that introduces children and their families to the program	17	71	24%
Center	Family and Community Partners	4S2	Parents are provided with written copy policies and procedures that includes a signature page.	40	71	56%
Center	Family and Community Partners	4T	Staff is available to attend IEP/IFSP meetings with family and service providers	14	71	20%
Home	Professional & Business Practices	1A	Program has a written physical activity statement in their parent/family handbook.	10	14	71%
Home	Professional & Business Practices	1B	Program has policy regarding non- discrimination against a child or family based on race, color, sex, religion, national origin, or disability.	11	14	79%
Home	Professional & Business Practices	1C	Program has a written confidentiality policy.	11	14	79%
Home	Professional & Business Practices	1D	Program has professional development time added into contract with families.	12	14	86%
Home	Professional & Business Practices	1E	Program has a place that is an administrative area for planning, separate from children's areas.	14	14	100%
Home	Professional & Business Practices	1F	Program participates in a listserv or association that allows them regular state policy and licensing updates.	13	14	93%
Home	Professional & Business Practices	1G	If program has additional staff, there is a written employee handbook with a signature page.	5	14	36%
Home	Professional & Business Practices	1H	If program has additional staff, owner /operator reimburse professional development expenses incurred by teaching staff.	3	14	21%

Model	Indicator Area	#	Indicator	Frequency Count	# of Programs	Percent of Programs
Home	Professional & Business Practices	1I	If program has additional staff, monthly meetings are held.	1	14	7%
Home	Professional & Business Practices	1J	If program has additional staff, there is a documented procedure to receive staff feedback on program quality.	2	14	14%
Home	Professional & Business Practices	1K	Staff feedback on program quality is used to develop a written plan for program improvement.	1	14	7%
Home	Professional & Business Practices	1L	If program has additional staff, supervisor provides teaching staff with an annual written performance evaluation.	2	14	14%
Home	Professional & Business Practices	1M	Program has weekly or monthly curriculum planning calendars.	4	14	29%
Home	Professional & Business Practices	1N	Program has written lesson plans for teacher-directed activities which includes adaptations for children with special needs where applicable.	2	14	14%
Home	Professional & Business Practices	1O	Program has policy regarding expulsion and suspension that aligns with the Nevada Department of Education guidelines.	6	14	43%
Home	Professional & Business Practices	1P	Preschool lesson plans align with Nevada Pre-k Standards and Infant/Toddler Guidelines.	1	14	7%
Home	Professional & Business Practices	1Q	On-going child assessment includes at least one informal method such as observations, portfolios, or teachers' anecdotal records.	6	14	43%
Home	Professional & Business Practices	1R	Program has an accurate policy regarding providing information to parents about how Brigance Screen III results will be reported and shared	8	14	57%
Home	Professional & Business Practices	1S	Program has a documentation system in place to support collaboration with specialist working with children identified special needs.	2	14	14%

Model	Indicator Area	#	Indicator	Frequency Count	# of Programs	Percent of Programs
Home	Professional & Business Practices	1T	Program has a written statement on the inclusion of children with special needs.	10	14	71%
Home	Professional & Business Practices	1U	Program obtains (with parental consent) an IFSP/IEP for each child enrolled with a diagnosed disability.	2	14	14%
Home	Professional & Business Practices	1V	Program collaborates with outside agency and family before administrative withdrawal of any child with medical/behavioral issues.	5	14	36%
Home	Professional & Business Practices	1W	Program has a written policy for procedures on reporting child abuse & neglect included in their parent handbook.	12	14	86%
Home	Professional & Business Practices	1X	Program has a written health statement included in their parent handbook.	10	14	71%
Home	Developmental Learning Activities	2A	When multiple staff are present, minimum placement for additional staff on the career ladder is 2.1 for staff.	3	14	21%
Home	Developmental Learning Activities	2B	Owner/Operators AND any regular staff have completed one Core Knowledge Area (CKA) in The Nevada Registry professional development plans.	5	14	36%
Home	Developmental Learning Activities	2C	Owner/Operator and any additional staff have two clock hours on the topic "Environment Rating Scales" received in the past two years.	11	14	79%
Home	Developmental Learning Activities	2D	Program has a working garden that is used for lessons with children.	5	14	36%
Home	Developmental Learning Activities	2E	Owner/Operator is a current member of a national early childhood professional organization.	12	14	86%
Home	Developmental Learning Activities	2F	When multiple staff are present, all teaching staff are current members of a national early childhood professional organization.	2	14	14%

Model	Indicator Area	#	Indicator	Frequency Count	# of Programs	Percent of Programs
Home	Developmental Learning Activities	2G	All teaching staff have two clock hours on the topic “inclusion” received in the past two years.	10	14	71%
Home	Developmental Learning Activities	2H	Owner/Operator provides teaching staff with annual written feedback based on observations of teacher’s performance.	1	14	7%
Home	Developmental Learning Activities	2I	Owner/Operator has a minimum of three credits in management or business related courses.	4	14	29%
Home	Developmental Learning Activities	2J	Owner/Operator participates on an early childhood committee.	5	14	36%
Home	Developmental Learning Activities	2K	Owner/Operator has two clock hours on the topic related to “Diversity” received in the past two years.	7	14	50%
Home	Developmental Learning Activities	2L	Program has a documented action plan based on their ERS scores.	2	14	14%
Home	Developmental Learning Activities	2M	Owner/Operator has taken Business Administration Scale (BAS) training.	4	14	29%
Home	Developmental Learning Activities	2N	Program has a documented improvement plan based on the BAS score.	3	14	21%
Home	Developmental Learning Activities	2O	Program is a T.E.A.C.H. Early Childhood Nevada site.	4	14	29%
Home	Developmental Learning Activities	2P	Owner/Operator receives a minimum of five additional hours of annual training above licensing requirements.	9	14	64%
Home	Developmental Learning Activities	2Q	Owner/Operator has two clock hours on the topic “early childhood mental health” received in the past two years.	9	14	64%

Model	Indicator Area	#	Indicator	Frequency Count	# of Programs	Percent of Programs
Home	Developmental Learning Activities	2R	Owner/Operator has two clock hours on the topic “play-based learning”.	11	14	79%
Home	Developmental Learning Activities	2S	Program uses information about children’s interests and needs to set goals that support children’s development.		14	0%
Home	Developmental Learning Activities	2T	Owner/Operator provides learning activities for parents to do at home, based on their child’s formal assessment.	5	14	36%
Home	Developmental Learning Activities	2U	Owner/Operator has two clock hours of “Infant and Toddler” specific training in the past two years.	11	14	79%
Home	Developmental Learning Activities	2V	Owner/Operator coordinates with other providers in the community to share resources, services and professional development opportunities.	5	14	36%
Home	Developmental Learning Activities	2W	Owner/Operator is a member of a network or listserv that provides regular updates on professional development opportunities.	12	14	86%
Home	Safety & Health	3A	Health and Safety assessment is completed by a child care health consultant or nurse.	2	14	14%
Home	Safety & Health	3B	Child Record review is completed by a child care health consultant or nurse	1	14	7%
Home	Safety & Health	3C	Program is a registered Web IZ provider.	7	14	50%
Home	Safety & Health	3D	Menus are evaluated by a nutritionist or approved by CACFP program field specialist.	8	14	57%
Home	Safety & Health	3E	Program is a Child and Adult Care Food Program (CACFP) sponsored site.	12	14	86%
Home	Safety & Health	3F	Program supports breastfeeding by offering a designated location.	13	14	93%
Home	Safety & Health	3G	Space used by children has a cleaning and sanitation schedule posted.	7	14	50%



Model	Indicator Area	#	Indicator	Frequency Count	# of Programs	Percent of Programs
Home	Safety & Health	3H	Staff plan and implement daily developmental appropriate physical activities for all children.	9	14	64%
Home	Safety & Health	3I	Program has a documented improvement plan based on a nutrition and physical activity self-assessment checklist	4	14	29%
Home	Safety & Health	3J	Program has comprehensive plan for children on walks, field trips or when transported. The plan addresses all safety issues and assures that children do not become separated from the group.	3	14	21%
Home	Safety & Health	3K	Program has individualized health plans for children with medical concerns.	2	14	14%
Home	Safety & Health	3L	Program has an emergency preparedness kit.	10	14	71%
Home	Safety & Health	3M	Owner/operator and staff (if applicable) have advanced training for emergency preparedness or response to threatening incidents.	13	14	93%
Home	Safety & Health	3N	Program has a working garden that is used for lessons with children	6	14	43%
Home	Safety & Health	3O	The ASQ:SE-2 is used to screen children's social-emotional development.	6	14	43%
Home	Safety & Health	3P	Written referrals to the appropriate agency are made for children in need of developmental services.	4	14	29%
Home	Safety & Health	3Q	Written referrals to the appropriate agency are made for children in need of behavioral or mental health services.	2	14	14%
Home	Safety & Health	3R	Program utilizes a daily health checklist for all children.	3	14	21%
Home	Safety & Health	3S	Program has a documented improvement plan based on the Inventory of Practices for Promoting Social Emotional Competence.	3	14	21%
Home	Safety & Health	3T	Children up to two-years-old are served whole milk	9	14	64%
Home	Safety & Health	3U	Children two-years-old and older are served skim or 1% milk	11	14	79%

Model	Indicator Area	#	Indicator	Frequency Count	# of Programs	Percent of Programs
Home	Safety & Health	3V	Infant's teeth and gums are wiped with a disposable tissue after each feeding.	6	14	43%
Home	Relationships & Environment	4A	Families are encouraged to tour home before enrolling child.	11	14	79%
Home	Relationships & Environment	4B	Parent-teacher conferences are scheduled at least semi-annually.	9	14	64%
Home	Relationships & Environment	4C	Parent-teacher conferences are scheduled on an as needed basis.	7	14	50%
Home	Relationships & Environment	4D	A written procedure is in place to help families' transition children to other programs, or school.	8	14	57%
Home	Relationships & Environment	4E	Owner/Operator is available to attend IEP/IFSP meetings with family and service providers.	10	14	71%
Home	Relationships & Environment	4F	Program has a documented procedure to receive family feedback on program quality.	3	14	21%
Home	Relationships & Environment	4G	Families' feedback is used to develop a written plan for program improvement.	1	14	7%
Home	Relationships & Environment	4H	Families are encouraged to volunteer to assist in the program and, with appropriate supervision, share cultural and language traditions or other interests.	7	14	50%
Home	Relationships & Environment	4I	Program offers quarterly family involvement activities.	4	14	29%
Home	Relationships & Environment	4J	Program provides information about community classes or training opportunities, related to parenting or development, for parents at least annually.	10	14	71%
Home	Relationships & Environment	4K	Program offers parents an annual class or training opportunity, on topics other than health, physical activity or nutrition, in the provider's home, can be provided by a qualified professional.	3	14	21%
Home	Relationships & Environment	4L	Program plans occasional social activities where the child care families can get together either in the provider's home or in the community.	10	14	71%
Home	Relationships & Environment	4M	Program collaborates with a community agency.	3	14	21%

Model	Indicator Area	#	Indicator	Frequency Count	# of Programs	Percent of Programs
Home	Relationships & Environment	4N	Materials from community agencies are available for families at the program.	9	14	64%
Home	Relationships & Environment	4O	Breastfeeding materials and information are available for families at the program.	7	14	50%
Home	Relationships & Environment	4P	Program encourages parents to visit any time their children are present.	12	14	86%
Home	Relationships & Environment	4Q	Program provides families daily information reports about each child's activities.	7	14	50%
Home	Relationships & Environment	4R	Program distributes a quarterly newsletter to families.	5	14	36%
Home	Relationships & Environment	4S	Program compiles and provides written program information for families in their home language.	1	14	7%
Home	Relationships & Environment	4T	Program has a communication form families can use to communicate with owner/operator.	5	14	36%
Home	Relationships & Environment	4U	Program offers annual class or training opportunity focused on health, physical activity, or nutrition, provided by a qualified professional for parents/families.	1	14	7%
Home	Relationships & Environment	4V	Program seeks information about each family's cultural traditions and uses this information in responding to the children and planning activities.	3	14	21%
Home	Relationships & Environment	4W	Program seeks information from families to help create developmental plans in regards to showing positive attitudes and inclusion with bottle weaning, diapering, toilet learning, discipline and special needs of children.	1	14	7%
Home	Relationships & Environment	4X	Provider is available to parents by telephone when children are present or regularly checks for phone messages.	14	14	100%
Home	Relationships & Environment	4Y	Program has written policy to communicate to parents that guns, other weapons or material that is violent, sexually explicit, stereotype, or otherwise inappropriate for children should not be brought into the program from home.	14	14	100%
Home	Relationships & Environment	4Z	Program offers a variety of ways for parents to participate in the program's activities. Although participation is encouraged, it is never required.	5	14	36%

Model	Indicator Area	#	Indicator	Frequency Count	# of Programs	Percent of Programs
Home	Relationships & Environment	4AA	Program includes families in garden activities.	1	14	7%
LEA	Federal Indicators	A	Teacher Qualifications for Lead Teachers in each classroom. Definition: Certified teacher with endorsement in either early childhood OR special education with an early childhood developmentally delayed endorsement.	104	109	95%
LEA	Federal Indicators	B	High Quality Professional Development for Lead Teachers Definition: 1 CEU or 15 clock hours in one or more categories specific to early childhood, for each lead teacher: e.g. Pyramid Model, Early Childhood Mental Health, Developmentally Appropriate Instruction, Assessment, Family Engagement, Inclusion, NDE or NevAEYC State Conferences, or National ECE conference.	76	109	70%
LEA	Federal Indicators	C	High Quality Professional Development for 75% Instructional Assistants or Aids (support staff) Definition: .5 CEU or 7.5 clock hours in one or more categories specific to early childhood, for each teacher aid or instructional assistant: e.g. Pyramid Model, Early Childhood Mental Health, Developmentally Appropriate Instruction, Assessment, Family Engagement, Inclusion, NDE or NevAEYC State Conferences.	74	109	68%
LEA	Federal Indicators	D	10 to 1 Ratio A child-to-instructional staff ratio of no more than 10 to 1.	105	109	96%
LEA	Federal Indicators	E	Class Size of No More Than 20 Definition: A class size of no more than 20 with, at minimum, one teacher with high staff qualifications as outlined in (A).	105	109	96%
LEA	Federal Indicators	F	Full Day Program Definition: Equivalent to a full school day at the public elementary schools in the State and not fewer than five hours a day or a minimum of 25 hours per week.	98	109	90%
LEA	Federal Indicators	G	Inclusion of Children with Disabilities Definition: Inclusion of children with disabilities to ensure access to and full participation in all opportunities.	104	109	95%

Model	Indicator Area	#	Indicator	Frequency Count	# of Programs	Percent of Programs
LEA	Federal Indicators	H	Curriculum and Standards Definition: Developmentally appropriate, culturally and linguistically responsive instruction and evidence-based curricula, and learning environment that are aligned with the Nevada Pre-k Standards.	75	109	69%
LEA	Federal Indicators	I	Individualized Accommodations and Supports Definition: Individualized accommodations and supports so that all children can access and participate fully in learning activities.	55	109	50%
LEA	Federal Indicators	J	Monitoring of Child Progress Definition: On-going monitoring of children's progress for both pre and post screening and for the purpose of guiding instruction and making curricular decisions. 1. The Brigance screening tool should be used pre and post (within the first 30 days and just prior to the close of the school year). 2. In addition, a comprehensive, formal assessment system, aligned to the standards, to regularly monitor children's progress toward the standards, and guide instruction should also be provided.	76	109	70%
LEA	Federal Indicators	K	On-site or Accessible Comprehensive Services for Children Definition: Community partnership that promote families' access to services that support their children's language and development.	66	109	61%
LEA	Federal Indicators	L	Health and Safety Standards Definition: Evidence-based health and safety standards.	72	109	66%
LEA	Federal Indicators	M	P-3 Implementation Definition: B-3 refers to the continuum of learning from before kindergarten through third grade. This includes all education settings and services that focus on the early childhood years (birth through age 8). Strategies to align goals, policies, and activities specific to four areas: assessment, approaches to teaching, transitions for children, and parent engagement between any prior early childhood program, district pre-k, and kindergarten. Must include documentation of strategies as children both enter and exit pre-k program.	39	109	36%

## **Appendix D: Notes and Recommendations for Revisions to Indicators of Quality (Centers and Family Child Care) By Small Groups**

During the October and December 2019 work group meetings, small groups met to review indicators related to specific content areas, discuss frequency data, and to consider revisions that support a progression of quality. This appendix includes the notes and recommendations from those small work group conversations. Many of these recommendations were used in examples in SRI's larger recommendations for QRIS revisions. These notes and recommendations can support NDE's continued revision conversations; however, it should be noted that SRI did not engage the larger work group in any consensus processes about specific recommendations.

## Child Screening and Assessment Indicators: Center Model

Child Screening and Assessment Indicators	Small Group Notes	Small Group Revisions
<ul style="list-style-type: none"> <li>• <b>A.C.PP.1B</b> Center has an accurate policy regarding providing information to parents about how Brigance Screen III results will be reported and shared.</li> <li>• <b>A.C.PP.1C</b> On-going child assessment includes at least one informal method such as observations, portfolios, or teachers' anecdotal records</li> <li>• <b>A.C.HS.3K</b> The ASQ:SE-2 is used to screen children's social-emotional development</li> </ul>	<ul style="list-style-type: none"> <li>• Combined A.C.PP.1B and A.C.HS.3K – Both are screenings</li> <li>• Coordinated community screening effort – share screenings and share referrals (currently, referrals are optional)</li> <li>• Assessment policy example: Center has an accurate policy regarding providing information to parents about how Brigance Screen III results will be reported and shared.</li> <li>• Documented method example: Center has Brigance proof of completion. Center has/uses a tool to screen children's social emotional development, such as the ASQ:SE-2.</li> </ul>	<p><b>Original Indicators to Keep As-Is</b></p> <ul style="list-style-type: none"> <li>• A.C.PP.1C On-going child assessment includes at least one informal method such as observations, portfolios, or teachers' anecdotal records</li> </ul> <p><b>Revised Indicators</b></p> <ul style="list-style-type: none"> <li>• Center has an assessment policy.</li> <li>• Center has a documented method.</li> <li>• Center uses assessment/screening data to share referrals.</li> <li>• Center uses assessment/screening data to inform practice.</li> <li>• Center can link assessment/screening data with other data to be used for program improvement.</li> </ul>
Curriculum Indicators	Small Group Notes	Small Group Revisions
<ul style="list-style-type: none"> <li>• <b>TL.C.HS.3B</b> Center has a working garden that is used for lessons with children.</li> <li>• <b>TL.C.HS.3O</b> Center is an implementation site for the Nevada TACSEI Project.</li> <li>• <b>TL.C.PP.1D</b> Classrooms have weekly or monthly curriculum planning calendars.</li> <li>• <b>TL.C.PP.1E</b> Classrooms have written lesson plans for teacher-directed activities for each age group.</li> <li>• <b>TL.C.PP.1E</b> Lesson plans must include adaptations for children with special needs as applicable.</li> <li>• <b>CHW.C.HS.3W</b> Preschool children receive annual oral health education.</li> <li>• <b>TL.C.HW.3H</b> Staff plan and implement daily developmentally appropriate physical activities for all children.</li> </ul>	<ul style="list-style-type: none"> <li>• Remove TL.C.HS.3B, TL.C.PP.1D (example of documentation), and CHW.C.HS.3W.</li> <li>• TL.C.HS.3O – Not a curriculum; this has environment, training, and policy impacts</li> <li>• Include family cultural tradition indicator like home model (FCE.H.RE.4V).</li> </ul>	<p><b>Original Indicators to Keep As-Is</b></p> <ul style="list-style-type: none"> <li>• <b>TL.C.HW.3H</b> Staff plan and implement daily developmentally appropriate physical activities for all children.</li> </ul> <p><b>Revised Indicators</b></p> <ul style="list-style-type: none"> <li>• Classrooms have weekly or monthly curriculum plan (e.g., calendars).</li> <li>• Classrooms have written lesson plans for teacher-directed activities for each age group.</li> <li>• Classrooms have written lesson plans for activities that extend across all domains.</li> <li>• Lesson plans align with Infant Toddler ELGs and/or NV Pre-K Standards.</li> <li>• Lesson plans include adaptations for children with special needs, as applicable.</li> </ul>

## Child Screening and Assessment Indicators: Family Child Care Model

Child Screening and Assessment Indicators	Small Group Notes	Small Group Revisions
<ul style="list-style-type: none"> <li>• A.H.PBP.1R Program has an accurate policy regarding providing information to parents about how Brigance Screen III results will be reported and shared.</li> <li>• A.H.PBP.1Q On-going child assessment includes at least one informal method such as observations, portfolios, or teachers' anecdotal records.</li> <li>• A.H.SH.3O The ASQ:SE-2 is used to screen children's social-emotional development.</li> </ul>	<ul style="list-style-type: none"> <li>• Combined A.H.PBP.1R and A.H.SH.3O – Both are screenings</li> <li>• Coordinated community screening effort – share screenings and share referrals (currently, referrals are optional)</li> <li>• Assessment policy example: Center has an accurate policy regarding providing information to parents about how Brigance Screen III results will be reported and shared.</li> <li>• Documented method example: Center has Brigance proof of completion. Center has/uses a tool to screen children's social emotional development, such as the ASQ:SE-2.</li> </ul>	<p><b>Original Indicators to Keep As-Is</b></p> <ul style="list-style-type: none"> <li>• A.H.PBP.1Q On-going child assessment includes at least one informal method such as observations, portfolios, or teachers' anecdotal records.</li> </ul> <p><b>Revised Indicators</b></p> <ul style="list-style-type: none"> <li>• Program has an assessment policy.</li> <li>• Program has a documented method.</li> <li>• Program uses assessment/screening data to share referrals.</li> <li>• Program uses assessment/screening data to inform practice.</li> <li>• Program can link assessment/screening data with other data to be used for program improvement.</li> </ul>
Curriculum Indicators	Small Group Notes	Small Group Revisions
<ul style="list-style-type: none"> <li>• FCE.H.DLA.2T Owner/Operator provides learning activities for parents to do at home, based on their child's formal assessment.</li> <li>• TL.H.SH.3N Program has a working garden that is used for lessons with children.</li> <li>• TL.H.PBP.1M Program has weekly or monthly curriculum planning calendars.</li> <li>• TL.H.PBP.1N Program has written lesson plans for teacher-directed activities which includes adaptations for children with special needs where applicable.</li> <li>• FCE.H.RE.4V Program seeks information about each family's cultural traditions and uses this information in responding to the children and planning activities.</li> <li>• TL.H.DLA.2S Program uses information about children's interests and needs to set goals that support children's development.</li> <li>• TL.H.SH.3H Staff plan and implement daily developmentally appropriate physical activities for all children.</li> </ul>	<ul style="list-style-type: none"> <li>• Remove TL.H.SH.3N.</li> </ul>	<p><b>Original Indicators to Keep As-Is</b></p> <ul style="list-style-type: none"> <li>• FCE.H.DLA.2T Owner/Operator provides learning activities for parents, based on their child's formal assessment.</li> <li>• FCE.H.RE.4V Program seeks information about each family's cultural traditions and uses this information in responding to the children and planning activities.</li> <li>• TL.H.DLA.2S Program uses information about children's interests and needs to set goals that support children's development.</li> <li>• TL.H.SH.3H Staff plan and implement daily developmentally appropriate physical activities for all children.</li> </ul> <p><b>Revised Indicators</b></p> <ul style="list-style-type: none"> <li>• Program has weekly or monthly curriculum plan (e.g., calendars).</li> <li>• Program has written lesson plans for teacher-directed activities for each age group.</li> <li>• Program has written lesson plans for activities that extend across all domains.</li> <li>• Lesson plans align with Infant Toddler ELGs and/or NV Pre-K Standards.</li> <li>• Lesson plans include adaptations for children with special needs, as applicable.</li> </ul>



## Communication, Comm Partners, Family Events, and Program Policies (Families Indicators): Center Model

Communication Indicators	Small Group Notes	Small Group Revisions
<ul style="list-style-type: none"> <li>• FCE.C.FCP.4C Center compiles and provides written program information for families in their home language.</li> <li>• FCE.C.FCP.4G Center has a communication form families can use to communicate with teachers.</li> <li>• FCE.C.FCP.4F Program distributes a newsletter to families at least quarterly.</li> </ul>	<ul style="list-style-type: none"> <li>• Combined FCE.C.FCP.4C, FCE.C.FCP.4G, and FCE.C.FCP.4F into revised indicators.</li> <li>• Can break indicators down further, for example: <ul style="list-style-type: none"> <li>○ Center has a policy around communication between teachers and families (i.e., communication plan).</li> <li>○ Center has a policy that communication between teachers and families is regular and consistent, reporting on daily activities.</li> <li>○ Center communicates program-wide, quarterly</li> <li>○ Center adapts materials; provide written program information for families in their home language</li> </ul> </li> </ul>	<p><b>Original Indicators to Keep As-Is</b> None</p> <p><b>Revised Indicators</b></p> <ul style="list-style-type: none"> <li>• Center has a communication system that families can use to communicate with teachers.</li> <li>• System for formal communication from the center to the families happens quarterly, that includes program updates and developmental opportunities for families (e.g., newsletter, email blast, etc.).</li> </ul>
Community Partners Indicator	Small Group Notes	Small Group Revisions
<ul style="list-style-type: none"> <li>• FCE.C.FCP.4A Center collaborates with a community agency.</li> </ul>	<ul style="list-style-type: none"> <li>• Community collaboration is big in Head Start.</li> <li>• Keep as is, or break indicator down further, for example: <ul style="list-style-type: none"> <li>○ Center has resources/distributable material available.</li> <li>○ Center has resources/distributable material available that addresses XYZ (e.g., health, CDC, domestic violence, housing assistance, TANF, CPS, services for children with disabilities, healthcare providers).</li> <li>○ Center creates relationship with community agency/service.</li> <li>○ Center creates an internal needs assessment to connect parents to community resources.</li> <li>○ Center can connect families to appropriate and relevant community resources.</li> </ul> </li> </ul>	<p><b>Original Indicators to Keep As-Is</b></p> <ul style="list-style-type: none"> <li>• FCE.C.FCP.4A Center collaborates with a community agency.</li> </ul> <p><b>Revised Indicators</b> None</p>

Family Events Indicator	Small Group Notes	Small Group Revisions
<ul style="list-style-type: none"> <li>• <b>FCE.C.FCP.4N Center offers on-site family involvement activities at a minimum of four times per year.</b></li> </ul>	<ul style="list-style-type: none"> <li>• Alternative to revised indicator(s): can break indicator down further, for example:               <ul style="list-style-type: none"> <li>○ Center has a written plan for parent involvement, or center has policy around family involvement activities. (incorporates FCE.C.FCP.4M)</li> <li>○ Parents have access to program.</li> <li>○ Parent teacher conferences are scheduled on a regular basis. (incorporates FCE.C.FCP.4I)</li> <li>○ Center offers on-site family involvement activities.</li> <li>○ Center has a parent board, parent advisory board/committee that includes a parent or parent association. (incorporates FCE.C.FCP.4S)</li> </ul> </li> </ul>	<p><b>Original Indicators to Keep As-Is</b> None</p> <p><b>Revised Indicators</b></p> <ul style="list-style-type: none"> <li>• Center has a written plan for ongoing parent involvement that includes elements such as: quarterly family involvement activities, occasional social activities where the child care families can get together either in the provider's home or in the community.</li> </ul>
Program Policies: Families Indicators	Small Group Notes	Small Group Revisions
<ul style="list-style-type: none"> <li>• <b>FCE.C.FCP.4J A written procedure is in place to help families transition children to the next classroom, other programs or schools.</b></li> <li>• <b>FCE.C.FCP.4S Center has a parent board, advisory board that includes a parent or a parent association.</b></li> <li>• <b>FCE.C.FCP.4S1 Center has a written orientation plan that introduces children and their families to the program.</b></li> <li>• <b>FCE.C.FCP.4M Center has a written plan for parent involvement.</b></li> <li>• <b>FCE.C.FCP.4B Families are encouraged to tour center before enrolling child.</b></li> <li>• <b>FCE.C.FCP.4I Parent teacher conferences are scheduled on a regular basis.</b></li> <li>• <b>FCE.C.FCP.4H Parent teacher conferences are scheduled on an as needed basis.</b></li> <li>• <b>FCE.C.FCP.4S2 Parents are provided with written copy policies and procedures that includes a signature page.</b></li> </ul>	<ul style="list-style-type: none"> <li>• Alternative to revised indicator(s): FCE.C.FCP.4S, FCE.C.FCP.4M, and FCE.C.FCP.4I can be incorporated with family events indicators (above), with remaining indicators revised to:               <ul style="list-style-type: none"> <li>○ Parents are provided with written copy policies and procedures that includes a signature page.</li> <li>○ Families are encouraged to tour center before enrolling child.</li> <li>○ Center has a written orientation plan that introduces children and their families to the program.</li> </ul> </li> </ul>	<p><b>Original Indicators to Keep As-Is</b> None</p> <p><b>Revised Indicators</b></p> <ul style="list-style-type: none"> <li>• Program has a transition team that partners with outside agencies to facilitate a written plan to support children with the transition into program and to other classrooms, programs, or schools.               <ul style="list-style-type: none"> <li>○ Elements of transition plan: Families are encouraged to tour center before enrolling child in program or before transitioning to a new program; parents are provided with written copy of policies and procedures that includes a signature page</li> </ul> </li> <li>• Center has a written plan for ongoing parent involvement that includes elements such as: center has a parent board, advisory board that includes a parent or parent association; parent teacher conferences are scheduled on a regular basis and as-needed; parent participation in classroom or volunteer opportunities.</li> </ul>

## Communication, Comm Partners, Family Events, and Program Policies (Families Indicators): Family Child Care Model

Program Policies: Families Indicators	Small Group Notes	Small Group Revisions
<ul style="list-style-type: none"> <li>FCE.H.RE.4C A written procedure is in place to help families' transition children to other programs, or school.</li> <li>FCE.H.RE.4A Families are encouraged to tour home before enrolling child.</li> <li>FCE.H.RE.4H Families are encouraged to volunteer to assist in the program and, with appropriate supervision, share cultural and language traditions or other interests.</li> <li>FCE.H.RE.4B Parent-teacher conferences are scheduled at least semi-annually.</li> <li>FCE.H.RE.4C Parent-teacher conferences are scheduled on an as needed basis.</li> <li>FCE.H.RE.4P Program encourages parents to visit any time their children are present.</li> <li>PA.H.RE.4Y Program has written policy to communicate to parents that guns, other weapons or material that is violent, sexually explicit, stereotype, or otherwise inappropriate for children should not be brought into the program from home.</li> <li>FCE.H.RE.4Z Program offers a variety of ways for parents to participate in the program's activities. Although participation is encouraged, it is never required.</li> </ul>	<ul style="list-style-type: none"> <li>Remove FCE.H.RE.4C, FCE.H.RE.4A, FCE.H.RE.4H, FCE.H.RE.4B, FCE.H.RE.4C, FCE.H.RE.4P, and FCE.H.RE.4Z.</li> </ul>	<p><b>Original Indicators to Keep As-Is</b></p> <ul style="list-style-type: none"> <li>PA.H.RE.4Y Program has written policy to communicate to parents that guns, other weapons or material that is violent, sexually explicit, stereotype, or otherwise inappropriate for children should not be brought into the program from home.</li> </ul> <p><b>Revised Indicators</b></p> <ul style="list-style-type: none"> <li>Program has a written procedure in place to help children transition into program and to other programs or schools. Plan should include elements such as: partnerships with nearby programs or schools; input from families; families are encouraged to tour program before enrolling child in program or before transitioning to a new program.</li> <li>Program has a written plan for ongoing parent involvement that includes elements such as: program offers a variety of ways for parents to participate in the program's activities (although participation is encouraged, it is never required); families are encouraged to volunteer to assist in the program and, with appropriate supervision, share cultural and language traditions or other interests; program encourages parents to visit any time their children are present; parent teacher conferences are scheduled on a regular basis and as-needed.</li> </ul>
<ul style="list-style-type: none"> <li>FCE.H.RE.4D A written procedure is in place to help families' transition children to other programs, or school.</li> <li>FCE.H.RE.4A Families are encouraged to tour home before enrolling child.</li> <li>FCE.H.RE.4H Families are encouraged to volunteer to assist in the program and, with appropriate supervision, share cultural and language traditions or other interests.</li> <li>FCE.H.RE.4B Parent-teacher conferences are scheduled at least semi-annually.</li> <li>FCE.H.RE.4C Parent-teacher conferences are scheduled on an as needed basis.</li> </ul>	<ul style="list-style-type: none"> <li>Remove FCE.H.RE.4D, FCE.H.RE.4A, FCE.H.RE.4H, FCE.H.RE.4B, FCE.H.RE.4C, FCE.H.RE.4P, and FCE.H.RE.4Z.</li> </ul>	<p><b>Original Indicators to Keep As-Is</b></p> <ul style="list-style-type: none"> <li>PA.H.RE.4Y Program has written policy to communicate to parents that guns, other weapons or material that is violent, sexually explicit, stereotype, or otherwise inappropriate for children should not be brought into the program from home.</li> </ul> <p><b>Revised Indicators</b></p> <ul style="list-style-type: none"> <li>Program has a written procedure in place to help children transition into program and to other programs or schools. Plan should include elements such as: partnerships with nearby programs or schools; input from families; families are encouraged to tour program before enrolling child in program or before transitioning to a new program.</li> <li>Program has a written plan for ongoing parent involvement that includes elements such as: program offers a variety of ways for</li> </ul>

Program Policies: Families Indicators	Small Group Notes	Small Group Revisions
<ul style="list-style-type: none"> <li>FCE.H.RE.4C A written procedure is in place to help families' transition children to other programs, or school.</li> <li>FCE.H.RE.4A Families are encouraged to tour home before enrolling child.</li> <li>FCE.H.RE.4H Families are encouraged to volunteer to assist in the program and, with appropriate supervision, share cultural and language traditions or other interests.</li> <li>FCE.H.RE.4B Parent-teacher conferences are scheduled at least semi-annually.</li> <li>FCE.H.RE.4C Parent-teacher conferences are scheduled on an as needed basis.</li> <li>FCE.H.RE.4P Program encourages parents to visit any time their children are present.</li> <li>PA.H.RE.4Y Program has written policy to communicate to parents that guns, other weapons or material that is violent, sexually explicit, stereotype, or otherwise inappropriate for children should not be brought into the program from home.</li> <li>FCE.H.RE.4Z Program offers a variety of ways for parents to participate in the program's activities. Although participation is encouraged, it is never required.</li> </ul>	<ul style="list-style-type: none"> <li>Remove FCE.H.RE.4C, FCE.H.RE.4A, FCE.H.RE.4H, FCE.H.RE.4B, FCE.H.RE.4C, FCE.H.RE.4P, and FCE.H.RE.4Z.</li> </ul>	<p><b>Original Indicators to Keep As-Is</b></p> <ul style="list-style-type: none"> <li>PA.H.RE.4Y Program has written policy to communicate to parents that guns, other weapons or material that is violent, sexually explicit, stereotype, or otherwise inappropriate for children should not be brought into the program from home.</li> </ul> <p><b>Revised Indicators</b></p> <ul style="list-style-type: none"> <li>Program has a written procedure in place to help children transition into program and to other programs or schools. Plan should include elements such as: partnerships with nearby programs or schools; input from families; families are encouraged to tour program before enrolling child in program or before transitioning to a new program.</li> <li>Program has a written plan for ongoing parent involvement that includes elements such as: program offers a variety of ways for parents to participate in the program's activities (although participation is encouraged, it is never required); families are encouraged to volunteer to assist in the program and, with appropriate supervision, share cultural and language traditions or other interests; program encourages parents to visit any time their children are present; parent teacher conferences are scheduled on a regular basis and as-needed.</li> </ul>
<ul style="list-style-type: none"> <li>FCE.H.RE.4D A written procedure is in place to help families' transition children to other programs, or school.</li> <li>FCE.H.RE.4A Families are encouraged to tour home before enrolling child.</li> <li>FCE.H.RE.4H Families are encouraged to volunteer to assist in the program and, with appropriate supervision, share cultural and language traditions or other interests.</li> <li>FCE.H.RE.4B Parent-teacher conferences are scheduled at least semi-annually.</li> <li>FCE.H.RE.4C Parent-teacher conferences are scheduled on an as needed basis.</li> </ul>	<ul style="list-style-type: none"> <li>Remove FCE.H.RE.4D, FCE.H.RE.4A, FCE.H.RE.4H, FCE.H.RE.4B, FCE.H.RE.4C, FCE.H.RE.4P, and FCE.H.RE.4Z.</li> </ul>	<p><b>Original Indicators to Keep As-Is</b></p> <ul style="list-style-type: none"> <li>PA.H.RE.4Y Program has written policy to communicate to parents that guns, other weapons or material that is violent, sexually explicit, stereotype, or otherwise inappropriate for children should not be brought into the program from home.</li> </ul> <p><b>Revised Indicators</b></p> <ul style="list-style-type: none"> <li>Program has a written procedure in place to help children transition into program and to other programs or schools. Plan should include elements such as: partnerships with nearby programs or schools; input from families; families are encouraged to tour program before enrolling child in program or before transitioning to a new program.</li> <li>Program has a written plan for ongoing parent involvement that includes elements such as: program offers a variety of ways for</li> </ul>

<ul style="list-style-type: none"> <li>• FCE.H.RE.4P Program encourages parents to visit any time their children are present.</li> <li>• PA.H.RE.4Y Program has written policy to communicate to parents that guns, other weapons or material that is violent, sexually explicit, stereotype, or otherwise inappropriate for children should not be brought into the program from home.</li> <li>• FCE.H.RE.4Z Program offers a variety of ways for parents to participate in the program's activities. Although participation is encouraged, it is never required.</li> </ul>		<p>parents to participate in the program's activities (although participation is encouraged, it is never required); families are encouraged to volunteer to assist in the program and, with appropriate supervision, share cultural and language traditions or other interests; program encourages parents to visit any time their children are present; parent teacher conferences are scheduled on a regular basis and as-needed.</p>
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## Staff Qual, Director Qual, Professional Development, Professionalism Indicators: Center Model

Staff Qualification Indicators	Small Group Notes	Small Group Revisions
<ul style="list-style-type: none"> <li>EPD.C.ASD.2I Minimum placement on the career ladder is 2.1 for 75% of teaching staff.</li> <li>EPD.C.ASD.2J Minimum placement on the career ladder is 4.1 for 50% of teaching staff.</li> </ul>	<ul style="list-style-type: none"> <li>Remove EPD.C.ASD.2I and EPD.C.ASD.2J.</li> <li>Use progression for revised indicator, for example: <ul style="list-style-type: none"> <li>Minimum placement on the career ladder is 2.1 for 25% of teaching staff.</li> <li>Minimum placement on the career ladder is 2.1 for 50% of teaching staff.</li> <li>Minimum placement on the career ladder is 2.1 for 75% of teaching staff.</li> <li>Minimum placement on the career ladder is 4.1 for 25% of teaching staff.</li> <li>Minimum placement on the career ladder is 4.1 for 50% of teaching staff.</li> <li>Minimum placement on the career ladder is 4.1 for 75% of teaching staff.</li> </ul> </li> </ul>	<p><b>Original Indicators to Keep As-Is</b> None</p> <p><b>Revised Indicators</b></p> <ul style="list-style-type: none"> <li>Minimum placement on the career ladder is X for Y% of teaching staff. (see notes for example of progression)</li> </ul>
Director Indicator	Small Group Notes	Small Group Revisions
<ul style="list-style-type: none"> <li>EPD.C.ASD.2A Director has a minimum of 21 credits in management or business related courses.</li> </ul>	<ul style="list-style-type: none"> <li>Remove EPD.C.ASD.2A.</li> </ul>	<p><b>Original Indicators to Keep As-Is</b> None</p> <p><b>Revised Indicators</b></p> <ul style="list-style-type: none"> <li>Director has a minimum of 3 credits in management or business related courses, or PAS training, or 8 approved Registry business training hours.</li> </ul>
Professional Development Indicators	Small Group Notes	Small Group Revisions
<ul style="list-style-type: none"> <li>EPD.C.ASD.2V 50% of all teaching staff have two clock hours on the topic "Diversity" received in the past two years.</li> <li>EPD.C.ASD.2T 50% of all teaching staff have two clock hours on the topic "early childhood mental health" received in the past two years.</li> <li>EPD.C.ASD.2W 50% of all teaching staff have two clock hours on the topic "Environment Rating Scales" received in the past two years.</li> <li>EPD.C.ASD.2U 50% of all teaching staff have two clock hours on the</li> </ul>	<ul style="list-style-type: none"> <li>Remove EPD.C.ASD.2V, EPD.C.ASD.2T, EPD.C.ASD.2W, EPD.C.ASD.2U, EPD.C.HS.3C, EPD.C.ASD.2S, EPD.C.ASD.2Q, EPD.C.ASD.2R, EPD.C.ASD.2D1, and EPD.C.ASD.2D.</li> </ul>	<p><b>Original Indicators to Keep As-Is</b></p> <ul style="list-style-type: none"> <li>PA.C.ASD.2P Center has a written policy that teaching staff complete a minimum of five additional hours of annual training above licensing requirements.</li> <li>EPD.C.ASD.2H Center offers quarterly staff professional development activities.</li> </ul> <p><b>Revised Indicators</b></p> <ul style="list-style-type: none"> <li>50% of all program staff has 12 clock hours in any of the following areas in the past two years: diversity; early childhood mental health;</li> </ul>

<p>topic “inclusion” received in the past two years.</p> <ul style="list-style-type: none"> <li>• EPD.C.HS.3C Administrator AND 50% of all teaching staff have advanced training for emergency preparedness or response to threatening incident.</li> <li>• EPD.C.ASD.2S All administrators have two clock hours on the topic “Diversity” received in the past two years.</li> <li>• EPD.C.ASD.2Q All administrators have two clock hours on the topic “early childhood mental health” received in the past two years.</li> <li>• EPD.C.ASD.2R All administrators have two clock hours on the topic “inclusion” received in the past two years.</li> <li>• PA.C.ASD.2P Center has a written policy that teaching staff complete a minimum of five additional hours of annual training above licensing requirements.</li> <li>• EPD.C.ASD.2H Center offers quarterly staff professional development activities.</li> <li>• EPD.C.ASD.2D1 Director has completed a leadership academy.</li> <li>• EPD.C.ASD.2D Director has completed an approved Program Administration Scale (PAS) training.</li> </ul>		<p>Environment Rating Scales; and/or inclusion.</p> <ul style="list-style-type: none"> <li>• Administrator and 25% of all teaching staff have advanced training for emergency preparedness or response to threatening incident. <ul style="list-style-type: none"> <li>○ Administrator and 50% of all teaching staff have advanced training for emergency preparedness or response to threatening incident.</li> </ul> </li> <li>• Director has completed a leadership training series (e.g., Leadership, Community, and Practice through extension; Coaches Community of Practice; TNTP, etc.).</li> </ul>
Professionalism Indicators	Small Group Notes	Small Group Revisions
<ul style="list-style-type: none"> <li>• EPD.C.ASD.2O 50% of teaching staff are current members of a national early childhood professional organization.</li> <li>• EPD.C.ASD.2B Director is a current member of a national early childhood professional organization.</li> <li>• EPD.C.ASD.2C Director participates on an early childhood committee.</li> </ul>	<ul style="list-style-type: none"> <li>• Remove EPD.C.ASD.2O, EPD.C.ASD.2B, and EPD.C.ASD.2C.</li> </ul>	<p><b>Original Indicators to Keep As-Is</b> None</p> <p><b>Revised Indicators</b></p> <ul style="list-style-type: none"> <li>• Director and 25% of staff participate in one of the following: current member of a national early childhood professional organization; or participates on an early childhood committee.</li> </ul>

## Staff Qual, Director Qual, Professional Development, Professionalism Indicators: Family Child Care Model

Staff Qualification Indicator	Small Group Notes	Small Group Revisions
<ul style="list-style-type: none"> <li>EPD.H.DLA.2A When multiple staff are present, minimum placement for additional staff on the career ladder is 2.1 for staff.</li> </ul>	<ul style="list-style-type: none"> <li>Remove EPD.H.DLA.2A.</li> <li>Use progression for revised indicator, for example: <ul style="list-style-type: none"> <li>When multiple staff are present, minimum placement for additional staff is 2.1.</li> <li>When multiple staff are present, minimum placement for additional staff is 3.1.</li> <li>When multiple staff are present, minimum placement for additional staff is 4.1.</li> </ul> </li> </ul>	<p><b>Original Indicators to Keep As-Is</b></p> <p>None</p> <p><b>Revised Indicators</b></p> <ul style="list-style-type: none"> <li>When multiple staff are present, minimum placement for additional staff is X. (see notes for example of progression)</li> </ul>
Director Indicator	Small Group Notes	Small Group Revisions
<ul style="list-style-type: none"> <li>EPD.H.DLA.2I Owner/Operator has a minimum of three credits in management or business related courses.</li> </ul>	<ul style="list-style-type: none"> <li>Remove EPD.H.DLA.2I.</li> </ul>	<p><b>Original Indicators to Keep As-Is</b></p> <p>None</p> <p><b>Revised Indicators</b></p> <ul style="list-style-type: none"> <li>Owner/operator has a minimum of 3 credits in management or business related courses, or BAS training, or 8 Nevada Registry training hours.</li> </ul>
Professional Development Indicators	Small Group Notes	Small Group Revisions
<ul style="list-style-type: none"> <li>EPD.H.DLA.2F All teaching staff have two clock hours on the topic “inclusion” received in the past two years.</li> <li>EPD.H.DLA.2B Owner/Operator and any additional staff have two clock hours on the topic “Environment Rating Scales” received in the past two years.</li> <li>EPD.H.SF.3M Owner/operator and staff (if applicable) have advanced training for emergency preparedness or response to threatening incidents.</li> <li>EPD.H.DLA.2M Owner/Operator has taken Business Administration Scale (BAS) training.</li> <li>EPD.H.DLA.2U Owner/Operator has two clock hours of “Infant and Toddler” specific training in the past two years.</li> <li>EPD.H.DLA.2Q Owner/Operator has two clock hours on the topic “early childhood mental health” received in the past two years.</li> </ul>	<ul style="list-style-type: none"> <li>Remove EPD.H.DLA.2F, EPD.H.DLA.2B, EPD.H.DLA.2M, EPD.H.DLA.2U, EPD.H.DLA.2Q, EPD.H.DLA.2R, and EPD.H.DLA.2K.</li> </ul>	<p><b>Original Indicators to Keep As-Is</b></p> <ul style="list-style-type: none"> <li>EPD.H.SF.3M Owner/operator and staff (if applicable) have advanced training for emergency preparedness or response to threatening incidents.</li> <li>PA.H.DLA.2P Owner/Operator receives a minimum of five additional hours of annual training above licensing requirements.</li> </ul> <p><b>Revised Indicators</b></p> <ul style="list-style-type: none"> <li>All teaching staff have 12 clock hours in any of the following areas in the past two years: diversity; early childhood mental health; Environment Rating Scales; infant and toddler specific training; play-based learning; and/or inclusion.</li> <li>Owner/operator has 12 clock hours in any of the following areas in the past two years:</li> </ul>



<ul style="list-style-type: none"> <li>• EPD.H.DLA.2R Owner/Operator has two clock hours on the topic “play-based learning”.</li> <li>• EPD.H.DLA.2K Owner/Operator has two clock hours on the topic related to “Diversity” received in the past two years.</li> <li>• PA.H.DLA.2P Owner/Operator receives a minimum of five additional hours of annual training above licensing requirements.</li> </ul>		<p>diversity; early childhood mental health; Environment Rating Scales; infant and toddler specific training; play-based learning; and/or inclusion.</p>
Professionalism Indicators	Small Group Notes	Small Group Revisions
<ul style="list-style-type: none"> <li>• FCE.H.DLA.2V Owner/Operator coordinates with other providers in the community to share resources, services and professional development opportunities.</li> <li>• EPD.H.DLA.2E Owner/Operator is a current member of a national early childhood professional organization.</li> <li>• EPD.H.DLA.2W Owner/Operator is a member of a network or listserv that provides regular updates on professional development opportunities.</li> <li>• EPD.H.DLA.2J Owner/Operator participates on an early childhood committee.</li> <li>• EPD.H.PBP.1F Program participates in a listserv or association that allows them regular state policy and licensing updates.</li> <li>• EPD.H.DLA.2F When multiple staff are present, all teaching staff are current members of a national early childhood professional organization.</li> </ul>	<ul style="list-style-type: none"> <li>• If FCE.H.DLA.2V is already being required through the cohort, consider whether it should be an indicator, or consider excluding cohort as a usable example.</li> <li>• Remove EDP.DLA.2E, EPD.H.DLA.2W, EPD.H.PBP.1F, and EPD.H.DLA.2F.</li> </ul>	<p><b>Original Indicators to Keep As-Is</b></p> <ul style="list-style-type: none"> <li>• EPD.H.DLA.2J Owner/Operator participates on an early childhood committee.</li> </ul> <p><b>Revised Indicators</b></p> <ul style="list-style-type: none"> <li>• Owner/operator is either a current member of a national early childhood professional organization (e.g., HighScope, NAEYC membership), or a member of a network or listserv (e.g., DOE, UNCE, ECAC, SNECAC) that provides regular updates on professional development opportunities.</li> <li>• When multiple staff are present, all teaching staff are current members of a national early childhood professional organization (e.g., HighScope, NAEYC membership), or members of a network or listserv (e.g., DOE, UNCE, ECAC, SNECAC) that provides regular updates on professional development opportunities.</li> </ul>

## Health, Mental Health, Nutrition, Safety Indicators: Center Model

Health Indicators	Small Group Notes	Small Group Revisions
<ul style="list-style-type: none"> <li>CHW.C.HS.3X All classrooms have a cleaning and sanitation schedule posted.</li> <li>PA.C.HS.3J Center is a registered Web IZ provider.</li> <li>CHW.C.HS.3E Child Record Review is completed by a child care health consultant or nurse.</li> <li>CHW.C.HS.3L Children in need of developmental services are referred to the appropriate agency.</li> <li>CHW.C.HS.3V Infant's teeth and gums are wiped with a disposable tissue after each feeding.</li> </ul>	<ul style="list-style-type: none"> <li>Remove PA.C.HS.3J, CHW.C.HS.3E, and CHW.C.HS.3L.</li> </ul>	<p><b>Original Indicators to Keep As-Is</b></p> <ul style="list-style-type: none"> <li>CHW.C.HS.3X All classrooms have a cleaning and sanitation schedule posted.</li> <li>CHW.C.HS.3V Infant's teeth and gums are wiped with a disposable tissue after each feeding.</li> </ul> <p><b>Revised Indicators</b></p> <ul style="list-style-type: none"> <li>All admin staff are registered Web IZ users.</li> <li>Children in need of developmental services are referred to the appropriate agency (e.g., early intervention, Child Find).</li> </ul>
Mental Health Indicators	Small Group Notes	Small Group Revisions
<ul style="list-style-type: none"> <li>CHW.C.HS.3N Center has a behavior support team.</li> <li>CHW.C.HS.3M Children in need of mental or behavioral health services are referred to the appropriate agency.</li> </ul>	<ul style="list-style-type: none"> <li>Remove CHW.C.HS.3M.</li> </ul>	<p><b>Original Indicators to Keep As-Is</b></p> <ul style="list-style-type: none"> <li>CHW.C.HS.3N Center has a behavior support team.</li> </ul> <p><b>Revised Indicators</b></p> <ul style="list-style-type: none"> <li>Children in need of mental or behavioral health services are referred to the appropriate agency (e.g., Early Childhood Mental Health).</li> </ul>
Nutrition Indicators	Small Group Notes	Small Group Revisions
<ul style="list-style-type: none"> <li>CHW.C.HS.3R Center is a Child and Adult Care Food Program (CACFP) sponsored site.</li> <li>CHW.C.HS.3U Children two-years-old and older are served skim or 1% milk.</li> <li>CHW.C.HS.3T Children up to two-years-old are served whole milk.</li> <li>CHW.C.HS.3Q Menus are evaluated by a nutritionist.</li> </ul>	<ul style="list-style-type: none"> <li>Remove CHW.C.HS.3U and CHW.C.HS.3T.</li> </ul>	<p><b>Original Indicators to Keep As-Is</b></p> <ul style="list-style-type: none"> <li>CHW.C.HS.3R Center is a Child and Adult Care Food Program (CACFP) sponsored site.</li> <li>CHW.C.HS.3Q Menus are evaluated by a nutritionist.</li> </ul> <p><b>Revised Indicators</b></p> <ul style="list-style-type: none"> <li>Children two-years-old and older are served skim or 1% milk, and children up to two-years-old are served whole milk (if applicable).</li> </ul>
Safety Indicator	Small Group Notes	Small Group Revisions
<ul style="list-style-type: none"> <li>PA.C.HS.3A Center has an emergency preparedness kit.</li> </ul>		<p><b>Original Indicators to Keep As-Is</b></p> <p><b>Revised Indicators</b></p> <ul style="list-style-type: none"> <li>Program has comprehensive plan for children on walks, field trips or when transported. The plan addresses all safety issues and assures that children do not become separated from the group.</li> </ul>

## Health, Mental Health, Nutrition, Safety Indicators: Family Child Care Model

Health Indicators	Small Group Notes	Small Group Revisions
<ul style="list-style-type: none"> <li>CHW.H.SH.3A Child Record Review is completed by a child care health consultant or nurse.</li> <li>CHW.H.SH.3V Infant's teeth and gums are wiped with a disposable tissue after each feeding.</li> <li>PA.H.SH.3C Program is a registered Web IZ provider.</li> <li>CHW.H.SH.3R Program utilizes a daily health checklist for all children.</li> <li>PA.H.SH.3G Space used by children has a cleaning and sanitation schedule posted.</li> <li>CHW.H.SH.3P Written referrals to the appropriate agency are made for children in need of developmental services.</li> </ul>	<ul style="list-style-type: none"> <li>Remove CHW.H.SH.3A, PA.H.SH.3C, and CHW.H.SH.3P.</li> </ul>	<p><b>Original Indicators to Keep As-Is</b></p> <ul style="list-style-type: none"> <li>CHW.H.SH.3V Infant's teeth and gums are wiped with a disposable tissue after each feeding.</li> <li>CHW.H.SH.3R Program utilizes a daily health checklist for all children.</li> <li>PA.H.SH.3G Space used by children has a cleaning and sanitation schedule posted.</li> </ul> <p><b>Revised Indicators</b></p> <ul style="list-style-type: none"> <li>Owner/operator is a registered Web IZ user.</li> <li>Children in need of developmental services are referred to the appropriate agency (e.g., early intervention, Child Find).</li> </ul>
Mental Health Indicator	Small Group Notes	Small Group Revisions
<ul style="list-style-type: none"> <li>CHW.H.SH.3Q Written referrals to the appropriate agency are made for children in need of behavioral or mental health services.</li> </ul>	<ul style="list-style-type: none"> <li>Remove CHW.H.SH.3Q.</li> </ul>	<p><b>Original Indicators to Keep As-Is</b></p> <p>None</p> <p><b>Revised Indicators</b></p> <ul style="list-style-type: none"> <li>Children in need of mental or behavioral health services are referred to the appropriate agency (e.g., Early Childhood Mental Health).</li> </ul>
Nutrition Indicators	Small Group Notes	Small Group Revisions
<ul style="list-style-type: none"> <li>CHW.H.SH.3U Children two-years-old and older are served skim or 1% milk.</li> <li>CHW.H.SH.3T Children up to two-years-old are served whole milk.</li> <li>CHW.H.SH.3D Menus are evaluated by a nutritionist or approved by CACFP program field specialist.</li> <li>CHW.H.SH.3E Program is a Child and Adult Care Food Program (CACFP) sponsored site.</li> </ul>	<ul style="list-style-type: none"> <li>Remove CHW.H.SH.3U, CHW.H.SH.3T, and CHW.H.SH.3D.</li> </ul>	<p><b>Original Indicators to Keep As-Is</b></p> <ul style="list-style-type: none"> <li>CHW.H.SH.3E Program is a Child and Adult Care Food Program (CACFP) sponsored site.</li> </ul> <p><b>Revised Indicators</b></p> <ul style="list-style-type: none"> <li>Children two-years-old and older are served skim or 1% milk, and children up to two-years-old are served whole milk (if applicable).</li> <li>Menus are evaluated by a nutritionist.</li> </ul>
Safety Indicators	Small Group Notes	Small Group Revisions
<ul style="list-style-type: none"> <li>PA.H.SH.3L Program has an emergency preparedness kit.</li> <li>PA.H.SH.3J Program has comprehensive plan for children on walks, field trips or when transported. The plan addresses all safety issues and assures that children do not become separated from the group.</li> </ul>		<p><b>Original Indicators to Keep As-Is</b></p> <ul style="list-style-type: none"> <li>PA.H.SH.3L Program has an emergency preparedness kit.</li> <li>PA.H.SH.3J Program has comprehensive plan for children on walks, field trips or when transported. The plan addresses all safety issues and assures that children do not become separated from the group.</li> </ul> <p><b>Revised Indicators</b></p> <p>None</p>

## Program Assessment and Improvement Indicators: Center Model

Program Assessment and Improvement Indicators	Small Group Notes	Small Group Revisions
<ul style="list-style-type: none"> <li>• CHW.C.HS.3I Center has a documented improvement plan based on a nutrition and physical activity self-assessment checklist.</li> <li>• PA.C.ASD.2F Center has a documented improvement plan based on a PAS self-assessment.</li> <li>• CHW.C.HS.3O Center has a documented improvement plan based on the Inventory of Practices for Promoting Social Emotional Competence.</li> <li>• FCE.C.FCP.K Center has a documented procedure to receive family feedback on program quality.</li> <li>• PA.C.PP.1W Center has a documented procedure to receive staff feedback on program quality.</li> <li>• FCE.C.FCP.4L Families' feedback is used to develop a written plan for program improvement.</li> <li>• CHW.C.HS.3D Health and Safety Assessment is completed by a child care health consultant or nurse.</li> <li>• A.C.PP.1X Staff feedback on program quality is used to develop a written plan for program improvement.</li> </ul>	<ul style="list-style-type: none"> <li>• Weight CHW.C.HS.3O more heavily, for example, make it worth two indicators</li> <li>• Remove CHW.C.HS.3D.</li> </ul>	<p><b>Original Indicators to Keep As-Is</b></p> <ul style="list-style-type: none"> <li>• CHW.C.HS.3I Center has a documented improvement plan based on a nutrition and physical activity self-assessment checklist.</li> <li>• PA.C.ASD.2F Center has a documented improvement plan based on a PAS self-assessment.</li> <li>• CHW.C.HS.3O Center has a documented improvement plan based on the Inventory of Practices for Promoting Social Emotional Competence.</li> <li>• FCE.C.FCP.K Center has a documented procedure to receive family feedback on program quality.</li> <li>• PA.C.PP.1W Center has a documented procedure to receive staff feedback on program quality.</li> <li>• FCE.C.FCP.4L Families' feedback is used to develop a written plan for program improvement.</li> <li>• A.C.PP.1X Staff feedback on program quality is used to develop a written plan for program improvement.</li> </ul> <p><b>Revised Indicators</b> None</p>

## Program Assessment and Improvement Indicators: Family Child Care Model

Program Assessment and Improvement Indicators	Small Group Notes	Small Group Revisions
<ul style="list-style-type: none"> <li>• FCE.H.RE.4G Families' feedback is used to develop a written plan for program improvement.</li> <li>• CHW.H.SH.3A Health and Safety assessment is completed by a child care health consultant or nurse.</li> <li>• PA.H.PHP.1J If program has additional staff, there is a documented procedure to receive staff feedback on program quality.</li> <li>• RL.H.DLA.2L Program has a documented action plan based on their ERS scores.</li> <li>• CHW.H.SH.3I Program has a documented improvement plan based on a nutrition and physical activity self-assessment checklist.</li> <li>• PA.H.DLA.2N Program has a documented improvement plan based on the BAS score.</li> <li>• CHW.H.SH.3S Program has a documented improvement plan based on the Inventory of Practices for Promoting Social Emotional Competence.</li> <li>• FCE.H.RE.4F Program has a documented procedure to receive family feedback on program quality.</li> <li>• A.H.PBP.1K Staff feedback on program quality is used to develop a written plan for program improvement.</li> </ul>	<ul style="list-style-type: none"> <li>• Weight CHW.H.HS.3S more heavily.</li> <li>• Remove CHW.H.SH.3A, PA.H.PHP.1J, FCE.H.RE.4F, and A.H.PBP.1K.</li> </ul>	<p><b>Original Indicators to Keep As-Is</b></p> <ul style="list-style-type: none"> <li>• FCE.H.RE.4G Families' feedback is used to develop a written plan for program improvement.</li> <li>• RL.H.DLA.2L Program has a documented action plan based on their ERS scores.</li> <li>• CHW.H.SH.3I Program has a documented improvement plan based on a nutrition and physical activity self-assessment checklist.</li> <li>• PA.H.DLA.2N Program has a documented improvement plan based on the BAS score.</li> <li>• CHW.H.SH.3S Program has a documented improvement plan based on the Inventory of Practices for Promoting Social Emotional Competence.</li> </ul> <p><b>Revised Indicators</b> None</p>

## Program Policies (Children) Indicators: Center Model

Program Assessment and Improvement Indicators	Small Group Notes	Small Group Revisions
<ul style="list-style-type: none"> <li>PA.C.PP.1R Center collaborates with outside agency and family before administrative withdrawal of any child with medical/behavioral issues.</li> <li>PA.C.PP.1O Center has a documentation system in place to support collaboration with specialist working with identified children.</li> <li>PA.C.PP.1T Center has a written health statement.</li> <li>PA.C.PP.1U Center has a written physical activity statement.</li> <li>PA.C.PP.1S Center has a written policy for procedures on reporting child abuse &amp; neglect included in their parent handbook.</li> <li>PA.C.PP.1P Center has a written statement on the inclusion of children with special needs.</li> <li>CHW.C.HS.3F Center has individualized health plans for children with medical concerns.</li> <li>PA.C.PP.1F Center has policy regarding expulsion and suspension that aligns with the Nevada Department of Education guidelines.</li> <li>PA.C.PP.1Q Center obtains (with parental consent) an IFSP/IEP for each child enrolled with a diagnosed disability.</li> <li>TL.C.FCP.4T Staff is available to attend IEP/IFSP meetings with family and service providers.</li> </ul>	<ul style="list-style-type: none"> <li>Note: The small group did not address this section. However, the suspension and expulsion indicator was discussed by a special topics group.</li> </ul>	<p><b>Original Indicators to Keep As-Is</b></p> <p><b>Revised Indicators</b></p> <ul style="list-style-type: none"> <li>Center has a policy regarding expulsion and suspension.</li> <li>Policy regarding expulsion and suspension aligns with the Nevada Department of Education guidelines.</li> </ul>

## Program Policies (Children) Indicators: Family Child Care Model

Program Assessment and Improvement Indicators	Small Group Notes	Small Group Revisions
<ul style="list-style-type: none"> <li>• TL.H.RE.4C Owner/Operator is available to attend IEP/IFSP meetings with family and service providers.</li> <li>• PA.H.PBP.1V Program collaborates with outside agency and family before administrative withdrawal of any child with medical/behavioral issues.</li> <li>• PA.H.PBP.1S Program has a documentation system in place to support collaboration with specialist working with children identified special needs.</li> <li>• PA.H.PBP.1X Program has a written health statement included in their parent handbook.</li> <li>• PA.H.PBP.1A Program has a written physical activity statement in their parent/family handbook.</li> <li>• PA.H.PBP.1W Program has a written policy for procedures on reporting child abuse &amp; neglect included in their parent handbook.</li> <li>• PA.H.PBP.1T Program has a written statement on the inclusion of children with special needs.</li> <li>• CHW.H.SH.3K Program has individualized health plans for children with medical concerns.</li> <li>• PA.H.PBP.1O Program has policy regarding expulsion and suspension that aligns with the Nevada Department of Education guidelines.</li> <li>• PA.H.PBP.1U Program obtains (with parental consent) an IFSP/IEP for each child enrolled with a diagnosed disability.</li> </ul>	<p>Note: The small group did not address this section. However, the suspension and expulsion indicator was discussed by a special topics group.</p>	<p><b>Original Indicators to Keep As-Is</b></p> <p><b>Revised Indicators</b></p> <p><b>Revised Indicators</b></p> <ul style="list-style-type: none"> <li>• Program has a policy regarding expulsion and suspension.</li> <li>• Policy regarding expulsion and suspension aligns with the Nevada Department of Education guidelines.</li> </ul>

## Program Policies: General, Program Set Up, Resources Indicators: Center Model

Program Set Up Indicators	Small Group Notes	Small Group Revisions
<ul style="list-style-type: none"> <li>CHW.C.HS.3G Center provides care for sick children in a separate location, supervised by a medical practitioner.</li> <li>CHW.C.HS.3S Center supports breastfeeding by offering a designated location.</li> <li>PA.C.ASD.2L Work environment for staff includes a place for adults that is an administrative area for planning, separate from children's areas.</li> <li>PA.C.ASD.2K Work environment for staff includes a place for adults to take a break from children, an adult-sized bathroom, and a secure place for staff to secure their belongings.</li> </ul>	<ul style="list-style-type: none"> <li>Remove CHW.C.HS.3G.</li> </ul>	<p><b>Original Indicators to Keep As-Is</b></p> <ul style="list-style-type: none"> <li>CHW.C.HS.3S Center supports breastfeeding by offering a designated location.</li> <li>PA.C.ASD.2L Work environment for staff includes a place for adults that is an administrative area for planning, separate from children's areas.</li> <li>PA.C.ASD.2K Work environment for staff includes a place for adults to take a break from children, an adult-sized bathroom, and a secure place for staff to secure their belongings.</li> </ul> <p><b>Revised Indicators</b> None</p>
Resources Indicator	Small Group Notes	Small Group Revisions
<ul style="list-style-type: none"> <li>CHW.C.FCP.4E Breastfeeding materials and information are available for families at the center.</li> <li>FCE.C.FCP.4R Center has a garden that includes parent participation.</li> <li>FCE.C.FCP.4P Center offers on-site an annual class or training opportunity provided by an outside agency for parents.</li> <li>FCE.C.FCP.4Q Center offers on-site at least one annual class or training opportunity focused on health, physical activity, or nutrition for parents.</li> <li>FCE.C.FCP.4O Center offers on-site classes or training opportunities specifically for parents at a minimum of four times per year.</li> <li>FCE.C.FCP.4D Materials from community agencies are available for families at the center.</li> </ul>	<ul style="list-style-type: none"> <li>Weight FCE.C.FCP.4P and FCE.C.FCP.4D more heavily.</li> <li></li> </ul>	<p><b>Original Indicators to Keep As-Is</b></p> <ul style="list-style-type: none"> <li>CHW.C.FCP.4E Breastfeeding materials and information are available for families at the center.</li> <li>FCE.C.FCP.4R Center has a garden that includes parent participation. (Note: The other garden indicators were suggested for removal.)</li> <li>FCE.C.FCP.4P Center offers on-site an annual class or training opportunity provided by an outside agency for parents.</li> <li>FCE.C.FCP.4Q Center offers on-site at least one annual class or training opportunity focused on health, physical activity, or nutrition for parents.</li> <li>FCE.C.FCP.4O Center offers on-site classes or training opportunities specifically for parents at a minimum of four times per year.</li> <li>FCE.C.FCP.4D Materials from community agencies are</li> </ul>



		<p>available for families at the center.</p> <p><b>Revised Indicators</b> None</p>
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## Program Policies: General, Program Set Up, Resources Indicators: Family Child Care Model

Program Policies: General Indicators	Small Group Notes	Small Group Revisions
<ul style="list-style-type: none"> <li>PA.H.PBP.1C Program has a written confidentiality policy.</li> <li>PA.H.PBP.1B Program has policy regarding non- discrimination against a child or family based on race, color, sex, religion, national origin, or disability.</li> </ul>	None	<p><b>Original Indicators to Keep As-Is</b></p> <ul style="list-style-type: none"> <li>PA.H.PBP.1C Program has a written confidentiality policy.</li> <li>PA.H.PBP.1B Program has policy regarding non- discrimination against a child or family based on race, color, sex, religion, national origin, or disability.</li> </ul> <p><b>Revised Indicators</b> None</p>
Program Set Up Indicators	Small Group Notes	Small Group Revisions
<ul style="list-style-type: none"> <li>PA.H.PBP.1E Program has a place that is an administrative area for planning, separate from children's areas.</li> <li>CHW.H.SH.3F Program supports breastfeeding by offering a designated location.</li> </ul>	<ul style="list-style-type: none"> <li>Remove PA.H.PBP.1E</li> </ul>	<p><b>Original Indicators to Keep As-Is</b></p> <ul style="list-style-type: none"> <li>CHW.H.SH.3F Program supports breastfeeding by offering a designated location.</li> </ul> <p><b>Revised Indicators</b> None</p>
Resources Indicator	Small Group Notes	Small Group Revisions
<ul style="list-style-type: none"> <li>CHW.H.RE.4O Breastfeeding materials and information are available for families at the program.</li> <li>FCE.H.RE.4N Materials from community agencies are available for families at the program.</li> <li>FCE.H.RE.4AA Program includes families in garden activities.</li> <li>FCE.H.RE.4U Program offers annual class or training opportunity focused on health, physical activity, or nutrition, provided by a qualified professional for parents/families.</li> <li>FCE.H.RE.4K Program offers parents an annual class or training opportunity, on topics other than health, physical activity or nutrition, in the provider's home, can be provided by a qualified professional.</li> </ul>	<ul style="list-style-type: none"> <li>Weight FCE.H.RE.4U, FCE.H.RE.4K, and FCE.H.RE.4J more heavily.</li> </ul>	<p><b>Original Indicators to Keep As-Is</b></p> <ul style="list-style-type: none"> <li>CHW.H.RE.4O Breastfeeding materials and information are available for families at the program.</li> <li>FCE.H.RE.4N Materials from community agencies are available for families at the program.</li> <li>FCE.H.RE.4AA Program includes families in garden activities.</li> <li>(Note: The other garden indicators were suggested for removal.)</li> <li>FCE.H.RE.4U Program offers annual class or training opportunity focused on health, physical activity, or nutrition, provided by a</li> </ul>

<ul style="list-style-type: none"> <li>• <b>FCE.H.RE.4J Program provides information about community classes or training opportunities, related to parenting or development, for parents at least annually.</b></li> </ul>		<p>qualified professional for parents/families.</p> <ul style="list-style-type: none"> <li>• FCE.H.RE.4K Program offers parents an annual class or training opportunity, on topics other than health, physical activity or nutrition, in the provider's home, can be provided by a qualified professional.</li> <li>• FCE.H.RE.4J Program provides information about community classes or training opportunities, related to parenting or development, for parents at least annually.</li> </ul> <p><b>Revised Indicators</b> None</p>
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## Program Policies: Staff, Staff Supervision, Compensation and Benefits Indicators: Center Model

Program Policies: Staff Indicators	Small Group Notes	Small Group Revisions
<ul style="list-style-type: none"> <li>PA.C.PP.1L Center has a written employee handbook with a signature page.</li> <li>PA.C.PP.1V Center holds monthly staff meetings.</li> <li>PA.C.PP.1N Supervisor provides teaching staff with an annual written performance evaluation.</li> </ul>		<p>Original Indicators to Keep As-Is</p> <p>Revised Indicators</p>
Staff Supervision Indicator	Small Group Notes	Small Group Revisions
<ul style="list-style-type: none"> <li>PA.C.ASD.2M Supervisor completes three observations per staff member per year.</li> <li>PA.C.ASD.2N Supervisor provides teaching staff with written feedback based on observations of teacher's performance.</li> </ul>		<p>Original Indicators to Keep As-Is</p> <p>Revised Indicators</p>
Compensation and Benefits Indicators	Small Group Notes	Small Group Revisions
<ul style="list-style-type: none"> <li>PA.C.PP.1K Benefits (other than medical insurance) are provided to staff members.</li> <li>PA.C.PP.1H Center has a compensation plan that provides for annual pay increases (i.e. cost of living raises).</li> <li>PA.C.PP.1I Center has a compensation plan that provides for increases based on merit, education, or performance.</li> <li>PA.C.ASD.2G Center is a current T.E.A.C.H. Early Childhood Nevada site</li> <li>PA.C.PP.1M Center reimburses professional development expenses incurred by teaching staff.</li> <li>PA.C.PP.1J Medical insurance is available to staff members.</li> </ul>		<p>Original Indicators to Keep As-Is</p> <p>Revised Indicators</p>

## Program Policies: Staff, Staff Sup, Comp and Benefits Indicators: Family Child Care Model

Program Policies: Staff Indicators	Small Group Notes	Small Group Revisions
<ul style="list-style-type: none"> <li>PA.H.PBP.1I If program has additional staff, monthly meetings are held.</li> <li>PA.H.PBP.1L If program has additional staff, supervisor provides teaching staff with an annual written performance evaluation.</li> <li>PA.H.PBP.1G If program has additional staff, there is a written employee handbook with a signature page.</li> </ul>		<p>Original Indicators to Keep As-Is</p> <p>Revised Indicators</p>
Staff Supervision Indicator	Small Group Notes	Small Group Revisions
<ul style="list-style-type: none"> <li>EPD.H.DLA.2H Owner/Operator provides teaching staff with annual written feedback based on observations of teacher's performance.</li> </ul>		<p>Original Indicators to Keep As-Is</p> <p>Revised Indicators</p>
Compensation and Benefits Indicators	Small Group Notes	Small Group Revisions
<ul style="list-style-type: none"> <li>PA.H.PBP.1H If program has additional staff, owner/operator reimburse professional development expenses incurred by teaching staff.</li> <li>PA.H.PBP.1D Program has professional development time added into contract with families.</li> <li>PA.H.DLA.2O Program is a T.E.A.C.H. Early Childhood Nevada site.</li> </ul>		<p>Original Indicators to Keep As-Is</p> <p>Revised Indicators</p>