

IOWA QUALITY PRESCHOOL PROGRAM STANDARDS Complete Criteria Summary

PROGRAM STANDARD 1 — RELATIONSHIPS

THE PROGRAM HAS A SAFE AND HEALTHFUL ENVIRONMENT THAT PROVIDES APPROPRIATE AND WELL-MAINTAINED INDOOR AND OUTDOOR PHYSICAL ENVIRONMENTS. THE ENVIRONMENT INCLUDES FACILITIES, EQUIPMENT, AND MATERIALS TO FACILITATE CHILD AND STAFF LEARNING AND DEVELOPMENT.

| DHS CH 12 | IQPPS Number | Criteria | Notes |
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| | 1.1. | Teachers work in partnership with families, establishing and maintaining regular, on-going, two-way communication. | Provide examples of methods for TWO-WAY communication with families of children in the classroom. |
| | 1.2 | Teaching staff evaluate and change their responses based on individual needs. Teaching staff vary their interactions to be sensitive and responsive to differing abilities, temperament, activity levels, and cognitive and social development. | <p>Examples of ways to demonstrate implementation of this standard include, but are not limited to providing evidence that:</p> <ul style="list-style-type: none"> • Personnel substitute equipment as needed (e.g., when children and youth have poor motor skills, personnel provide a large beach ball instead of a volleyball for outdoor games); • Personnel are able to spend time with individual children; • Personnel bring in materials related to the interests of children (e.g., visiting pets, music, sports, etc.); • Personnel find suitable ways to include all children; • Personnel modify activities as needed so that all children can participate; • Personnel make an effort to support goals set by Special Education Teams or included in Individualized Education Plans, 504 plans, and/or Behavior Intervention Plans. |
| DHS IAC 441- 109.12(2) | 1.3 | Teaching staff never use threats or derogatory remarks and neither withhold nor threaten to withhold food as a form of discipline. | Provide discipline policy and policy for ethical and professional interaction with children. |

| DHS CH 12 | IQPPS Number | Criteria | Notes |
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| | 1.4. | Teaching staff talk frequently with children and listen to children with attention and respect. They <ul style="list-style-type: none"> • respond to children’s questions and requests. • use strategies to communicate effectively and build relationships with every child. • engage regularly in meaningful and extended conversations with each child. | See guidance for 1.3. |
| | 1.5. | Teaching Staff support children’s development of friendships and provide opportunities for children to play with and learn from each other. | Evidence could include schedules that include multiple groupings and clean up times; and environments that provide for small (2 children) and larger groupings. |
| | 1.6. | Teaching staff assist children in resolving conflicts by helping them identify feelings, describe problems, and try alternative solutions. | Provide examples of strategies of curriculum, and materials for promoting children’s positive relationships and interactions such as: *Evidence of the use of negotiation, reasoning, and redirection to help children find alternatives *Procedures and/or materials for teaching children and strategies they can use to work through conflicts. |
| | 1.7. Required | Teaching staff counter potential bias and discrimination by <ul style="list-style-type: none"> • treating all children with equal respect and consideration. • initiating activities and discussions that build positive self-identity and teach the valuing of differences. • intervening when children tease or reject others. • providing models and visual images of adult roles, differing abilities, and ethnic or cultural backgrounds that counter stereotypical limitations. • avoiding stereotypes in language references. | Provide program policies, procedures, curriculum, and materials for reducing bias and discrimination. |
| | 1.8. | Teaching staff promote pro-social behavior by interacting in a respectful manner with all staff and children. They <ul style="list-style-type: none"> • model turn taking and sharing as well as caring behaviors. • help children negotiate their interactions with one another and with shared materials. • engage children in the care of their classroom. • ensure that each child has an opportunity to contribute to the group. • encourage children to listen to one another. • encourage and help children provide comfort when others are sad or distressed. • use narration and description of ongoing interactions to identify pro-social behaviors. | See guidance for 1.3 and 1.6. |
| | 1.9. | For children with persistent, serious, challenging behavior, teachers, families, and other professionals work as a team to develop and implement an individualized plan that supports the child’s inclusion and success. | *Provide evidence that personnel make an effort to support goals set by Special Education Teams or included in Individualized Education Plans, 504 |

| DHS CH 12 | IQPPS Number | Criteria | Notes |
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| | | | plans, and/or Behavior Intervention Plans. |
| | 1.10. | Rather than focus solely on reducing the challenging behavior, teachers focus on <ul style="list-style-type: none"> teaching the child social, communication, and emotional regulation skills and using environmental modifications, activity modifications, adult or peer support, and other teaching strategies to support the child's appropriate behavior. | *Provide examples of materials, strategies, and equipment used to teach and promote positive behavior. *See also guidance for 1.9. |
| | 1.11. | Teaching staff help children manage their behavior by guiding and supporting children to: <ul style="list-style-type: none"> persist when frustrated. play cooperatively with other children. use language to communicate needs. learn turn taking. Gain control of physical impulses. Express negative emotions in ways that do not harm others or themselves. Use problem-solving techniques. Learn about self and others. | See guidance for 1.3 and 1.6. |

PROGRAM STANDARD 2— CURRICULUM

THE PROGRAM HAS A SAFE AND HEALTHFUL ENVIRONMENT THAT PROVIDES APPROPRIATE AND WELL-MAINTAINED INDOOR AND OUTDOOR PHYSICAL ENVIRONMENTS. THE ENVIRONMENT INCLUDES FACILITIES, EQUIPMENT, AND MATERIALS TO FACILITATE CHILD AND STAFF LEARNING AND DEVELOPMENT.

| | IQPPS Number | Criteria | Notes |
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| | 2.1. | The program has a written statement of philosophy and uses one or more written curricula or curriculum frameworks consistent with the philosophy that address central aspects of child development. | Provide information about selected curriculum (curricula). |
| | 2.2. | A clearly stated curriculum or curriculum framework provides a coherent focus for planning children's experiences. It allows for adaptations and modifications to ensure access to the curriculum for all children. | Provide information about selected curriculum (curricula). |
| | 2.3. | The curriculum guides teacher's development and intentional implementation of learning opportunities consistent with the program's goals and objectives. | Provide information about selected curriculum (curricula). |
| | 2.4. | The curriculum can be implemented in a manner that reflects responsiveness to family home values, beliefs, experiences, and language. | Provide information about selected curriculum (curricula). |
| | 2.5. | Curriculum goals and objectives guide teachers' ongoing assessment of children's progress. | Provide a description about how selected curriculum guides ongoing child assessment. |
| | 2.6. | The curriculum guides teachers to integrate assessment information with curriculum goals to support individualized learning. | Provide a description about how selected curriculum guides ongoing child assessment and individualized instruction. |

| | IQPPS Number | Criteria | Notes |
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| | 2.7. | The curriculum guides the development of a daily schedule that is predictable yet flexible and responsive to individual needs of the children. The schedule provides time and support for transitions, includes both indoor and outdoor experiences, and is responsive to a child’s need to rest or be active. | *Provide 3 weeks of activity/lesson plans. *Provide evidence of flexibility in what activities/opportunities are provided to children based on strengths, needs, and interests. |
| | 2.8. | Materials and equipment used to implement the curriculum <ul style="list-style-type: none"> • reflect the lives of the children and families. • reflect the diversity found in society, including gender, age, language, and abilities. • provide for children’s safety while being appropriately challenging. • encourage exploration, experimentation, and discovery. • promote action and interaction. • are organized to support independent use. • are rotated to reflect changing curriculum and accommodate new interests and skill levels. • are rich in variety. • accommodate children’s special needs. | Provide photo evidence that addresses all bullets in this criterion. |
| | 2.9. | The curriculum guides teachers to incorporate content, concepts, and activities that foster social, emotional, physical, language, and cognitive development and that integrate key areas of content including literacy, mathematics, science, technology, creative expression and the arts, health and safety, and social studies. | Provide information about selected curriculum. |
| | 2.10. | The schedule provides children learning opportunities, experiences, and projects that extend over the course of several days and incorporates time for: play, self-initiated learning, creative expression, large-group, small-group, and child-initiated activity. | Provide a daily schedule and 3 weeks of activity/lesson plans. |
| | 2.11. | The curriculum guides teachers to plan for children’s engagement in play (including dramatic play and blocks) that is integrated into classroom topics of study. | Provide information about the selected curriculum and 3 weeks of activity/lesson plans. See also guidance for 2.7. |
| | 2.12. | Children have varied opportunities to engage throughout the day with teaching staff who are attentive and responsive to them, and facilitate their social competence and their ability to learn through interacting with others. | See guidance for Criterion 2.7. |
| | 2.13. | Children are provided varied opportunities and materials that support fine-motor development. | Provide examples of opportunities that children have to practice small muscle movements (usually in the fingers) that enable such functions as writing, grasping small objects, and fastening clothing. |
| | 2.14. | Children have varied opportunities and are provided equipment to engage in large motor experiences that <ul style="list-style-type: none"> • stimulate a variety of skills. • enhance sensory-motor integration. • develop controlled movement (balance, strength, coordination). | Provide examples of opportunities that children have to engage in large motor experiences that address the bullets. |

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| | | <ul style="list-style-type: none"> • enable children with varying abilities to have large-motor experiences similar to those of their peers. • range from familiar to new and challenging. • help them learn physical games with rules and structure. | |
| | 2.15. | Children have varied opportunities to develop competence in verbal and nonverbal communication by responding to questions; communicating needs, thoughts and experiences; and describing things and events. | Provide examples of the methods and strategies used by staff to ensure that children have frequent opportunities to practice verbal and nonverbal communication. |
| | 2.16. | Children have varied opportunities to develop vocabulary through conversations, experiences, field trips, and books. | Provide examples of varied opportunities for children to develop vocabulary. |
| | 2.17. | Children have varied opportunities and materials that encourage them to have discussions to solve problems that are interpersonal and those that are related to the physical world. | See guidance for 1.3 and 1.6. |
| | 2.18. Required | Children are provided varied opportunities and materials that encourage them to engage in discussions with one another. | Provide examples of opportunities and strategies and materials for promoting children’s interpersonal interactions. |
| | 2.19. | <p>Children have opportunities to become familiar with print. They are actively involved in making sense of print, and they have opportunities to become familiar with, recognize, and use print that is accessible throughout the classroom:</p> <ul style="list-style-type: none"> • Items belonging to a child are labeled with his or her name. • Materials are labeled. • Print is used to describe some rules and routines. • Teaching staff help children recognize print and connect it to spoken words. | Provide photo evidence with caption/description to address all bullets. |
| | 2.20. Required | <p>Children have varied opportunities to</p> <ul style="list-style-type: none"> • be read books in an engaging manner in group or individualized settings at least twice a day in full-day programs and at least once daily in half-day programs. • be read to regularly in individualized ways including one to one or in small groups of two to six children. • explore books on their own and have places that are conducive to quiet enjoyment of books. • have access to various types of books including storybooks, factual books, books with rhymes, alphabet books, and wordless books. • be read the same book on repeated occasions. • retell or reenact events in storybooks. • engage in conversations that help them understand the content of the book. • be assisted in linking books to other aspects of the curriculum. • Identify the parts of books and differentiate print from pictures. | Provide photo evidence with caption/description to address all bullets. |

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| | 2.21. | Children have multiple and varied opportunities to write: <ul style="list-style-type: none"> • Writing materials and activities are readily available in art, dramatic play, and other learning centers. • Various types of writing are supported including scribbling, letter-like marks, and developmental spelling. • Children have daily opportunities to write or dictate their ideas. • Children are provided needed assistance in writing the words and messages they are trying to communicate. • Children are given the support they need to write their own, including access to the alphabet and to printed words about topics of current interest, both of which are made available at eye level or on laminated cards. • Children see teaching staff model functional use of writing and are helped to discuss the many ways writing is used in daily life. | Provide photo evidence with caption/description to address all bullets. |
| | 2.22. | Children are regularly provided multiple and varied opportunities to develop phonological awareness: <ul style="list-style-type: none"> • Children are encouraged to play with the sounds of language, including syllables, word families, and phonemes, using rhymes, poems, songs, and finger plays. • Children are helped to identify letters and the sounds they represent. • Children are helped to recognize and produce words that have the same beginning or ending sounds. • Children’s self-initiated efforts to write letters • that represent the sounds of words are supported. | Provide photo evidence with caption/description to address all bullets |
| | 2.23. Required | Children are provided varied opportunities and materials to build understanding of numbers, number names, and their relationship to object quantities and to symbols. | Provide photo evidence with caption/description to address all bullets |
| | 2.24. | Children are provided varied opportunities and materials to categorize by one or two attributes, such as shape, size, and color. | Provide photo evidence of materials and supplies that address this criterion. |
| | 2.25. | Children are provided varied opportunities and materials to help them understand the concept of measurement by using standard and non-standard units of measurement. | Provide photo evidence of materials and supplies that address this criterion. |
| | 2.26. | Children are provided varied opportunities and materials to understand basic concepts of geometry by, for example, naming and recognizing two - and three- dimensional shapes and recognizing how figures are composed of different shapes. | Provide photo evidence of materials and supplies that address this criterion. |
| | 2.27. | Children are provided varied opportunities and materials to learn key content and principles of science such as: <ul style="list-style-type: none"> • the difference between living and nonliving things (e.g. plants versus rocks) and life cycles of various organisms (e.g. plants, butterflies, humans). • earth and sky (e.g. seasons, weather, geologic features, light and shadow, sun, moon, and stars). | Provide photo evidence of materials and supplies that address each bullet of this criterion. |

| | IQPPS Number | Criteria | Notes |
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| | | <ul style="list-style-type: none"> Structure and property of matter (e.g. characteristics that include concepts like hard and soft, floating and sinking) and behavior of materials (e.g. transformation of liquids and solids by dissolving or melting). | |
| | 2.28. | Children are provided varied opportunities and materials that encourage them to think, question, and reason about observed and inferred phenomena. | *Provide photo evidence of materials and supplies that address this criterion. *Provide 3 weeks of lesson/activity plans. |
| | 2.29. | The use of passive media such as televisions, film, videotapes, and audiotapes should be limited to developmentally appropriate programming. | *Provide program philosophy on the use of passive media. *Provide daily schedule. |
| | 2.30. | All children have opportunities to access technology (e.g. tape recorders, microscopes, computers) that they can use by themselves, collaboratively with their peers, and with teaching staff or a parent. | Provide photo evidence of materials and supplies that address this criterion. |
| | 2.31. | Technology is used to extend learning within the classroom and to integrate and enrich the curriculum. | Provide photo evidence of materials and supplies that address this criterion with captions/descriptions. |
| | 2.32 | Children are provided many and varied open-ended opportunities and materials to express themselves creatively through music, drama, dance and two- and three-dimensional art | Provide photo evidence of materials and supplies that address this criterion with captions/descriptions. |
| | 2.33 | Children are provided varied opportunities and materials that encourage good health practices such as serving and feeding themselves, rest, good nutrition, exercise, hand washing, and tooth brushing. | Provide photo evidence of materials and supplies that address this criterion with captions/descriptions. |
| | 2.34 | Children are provided varied opportunities and materials that help them learn about nutrition, including identifying sources of food and recognizing, preparing, eating, and valuing healthy foods. | *Provide photo evidence of materials and supplies that address this criterion with captions/descriptions. *Provide 3 weeks of lesson/activity plans. |
| | 2.35. | Children are provided varied opportunities and materials that increase their awareness of safety rules in their classroom, home, and community. | *Provide descriptions and photo evidence to address this criterion. |
| | 2.36. | Children have opportunities to practice safety procedures. | *Provide program safety procedures. *Provide the schedule/routine for children to practice safety/emergency procedures. |
| | 2.37. | Children are offered opportunities to become part of the classroom community so that each child feels accepted and gains a sense of belonging. | Provide evidence of this criterion via activity/lesson plans, job/ |

| | IQPPS Number | Criteria | Notes |
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| | | | responsibility charts, names on displays/artwork, and/or activities that provide opportunities for all children to participate fully. |
| | 2.38. | Children are provided varied opportunities and materials to build their understanding of diversity in culture, family structure, ability, language, age, and gender in non-stereotypical ways. | *Provide descriptions and photo evidence to address this criterion. |
| | 2.39. | Children are provided opportunities and materials to explore social roles in the family and workplace through play. | *Provide descriptions and photo evidence to address this criterion. |
| | 2.40. | Children have varied opportunities to engage in discussions about fairness, friendship, responsibility, and authority, and differences. | *Provide examples of activities/lessons and/or opportunities that address this criterion. |

PROGRAM STANDARD 3—TEACHING

THE PROGRAM USES DEVELOPMENTALLY, CULTURALLY, AND LINGUISTICALLY APPROPRIATE AND EFFECTIVE TEACHING APPROACHES THAT ENHANCE EACH CHILD’S LEARNING AND DEVELOPMENT IN THE CONTEXT OF THE PROGRAM’S CURRICULUM GOALS.

| IQPPS Number | Criteria | Notes |
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| 3.1. | Teachers organize space and select materials in all content and developmental areas to stimulate exploration, experimentation, discovery, and conceptual learning. | *Provide photo evidence with captions/descriptions to address this criterion. |
| 3.2. | Teachers work to prevent challenging or disruptive behaviors through <ul style="list-style-type: none"> • environmental design. • schedules that meet the needs and abilities of children. • effective transitions. • engaging activities. | *See guidance for 1.9 and 1.10. |
| 3.3. | Teaching staff and children work together to arrange the classroom materials in predictable ways so children know where to find things and where to put them away. | *Provide evidence that children are allowed to join in the decision making process about where items and classroom materials are going to be stored and assist with clean-up. Materials should be accessible to children and may be labeled with words or pictures. |
| 3.4. | Teaching staff create and maintain a setting in which children of differing abilities can progress, with guidance, toward increasing levels of autonomy, responsibility, and empathy. | Provide program philosophy and strategies that staff use for helping individual children to be independent, learn to take care of themselves and their own needs, and pay |

Guidance revised 6.26.14

| IQPPS Number | Criteria | Notes |
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| | | attention to the needs and feelings of others. |
| 3.5. | Teachers help individual children learn socially appropriate behavior by providing guidance that is consistent with the child's level of development. | See guidance for 1.6. |
| 3.6. | Teachers manage behavior and implement classroom rules and expectations in a manner that is consistent and predictable. | *Provide classroom rules/expectations and strategies/methods for sharing them with children. |
| 3.7. | Teachers notice patterns in children's challenging behaviors to provide thoughtful, consistent, and individualized responses. | *See guidance for 1.9 and 1.10. |
| 3.8. | Teachers address challenging behavior by <ul style="list-style-type: none"> • assessing the function of the child's behavior. • convening families and professionals to develop individualized plans to address behavior. • using positive behavior support strategies. | *See guidance for 1.9 and 1.10. |
| 3.9. Required | Teaching staff supervise children primarily by sight. Supervision for short intervals by sound is permissible, as long as teachers check frequently on children who are out of sight (e.g., those who can use the toilet independently, who are in the library area, or who are napping). | *Provide program policy for supervision. *See also guidance for Criterion 10.4 regarding ratio for this age level. |
| 3.10 | Teachers organize time and space on a daily basis to allow children to work or play individually and in pairs, to come together in small groups, and to engage as a whole group. | Evidence could include schedules and lesson plans, small and large group activities, and space in the classroom for children to work and play individually and in pairs. |
| 3.11. | Teachers create opportunities for children to engage in group projects and to learn from one another. | Evidence could include schedules, lesson plans, curriculum webs, or small and large group activities that promote child-to-child engagement. |
| 3.12. | Teachers use their knowledge of children's social relationships, interests, ideas, and skills to tailor learning opportunities for groups and individuals. | Written evidence could include lesson plans, curriculum webs, or schedules with anecdotal notes about individuals, or individual child assessments. |
| 3.13. | Teachers use curriculum in all content and developmental areas as a flexible framework for teaching and to support the development of daily plans and learning experiences. | Provide a description about how selected curriculum guides daily learning experiences and lesson plans. |
| 3.14. | Play is planned for each day. | Provide daily schedule and 3 weeks of activity/lesson plans. |
| 3.15. | Teaching staff help children understand spoken language (particularly when children are learning a new language) by using pictures, familiar objects, body language, and physical cues. | *Provide photo evidence with captions/description to address this criterion. |
| 3.16. | Teachers use multiple sources (including results of informal and formal assessments as well as children's initiations, questions, interests, and misunderstandings) to <ul style="list-style-type: none"> • identify what children have learned. | Provide evidence of assessments used by the program to address the bullets. "Multiple sources" means two or more. |

| IQPPS Number | Criteria | Notes |
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| | <ul style="list-style-type: none"> • adapt curriculum and teaching to meet children’s needs and interests. • foster children’s curiosity. • extend children’s engagement. • support self-initiated learning. | Evidence could include informal and/or formal assessments. |
| 3.17. | Teachers use their knowledge of content to pose problems and ask questions that stimulate children’s thinking. Teachers help children express their ideas and build on the meaning of their experiences. | Provide examples of strategies and procedures used by staff to stimulate children’s thinking. |
| 3.18. | Teachers help children identify and use prior knowledge. They provide experiences that extend and challenge children’s current understandings. | Examples could include scaffolding, conversations, field trips, or books created based on shared experiences like taking a field trip. |
| 3.19. | Teachers promote children’s engagement and learning by responding to their need for and interest in practicing emerging skills, and by enhancing and expanding activities that children choose to engage in repeatedly. | Evidence may address how materials and activities are provided to practice emerging skills and expanding activities in which children repeatedly engage. |
| 3.20. | Teachers promote children’s engagement and learning by guiding them in acquiring specific skills and by explicitly teaching those skills. | Evidence may include charts or posters showing routines such as hand washing broken into steps or other activities deconstructed into meaningful and achievable parts that are developmentally appropriate for the age category being served. |

PROGRAM STANDARD 4—ASSESSMENT OF CHILD PROGRESS

THE PROGRAM IS INFORMED BY ONGOING SYSTEMATIC, FORMAL, AND INFORMAL ASSESSMENT APPROACHES TO PROVIDE INFORMATION ON CHILDREN’S LEARNING AND DEVELOPMENT. THESE ASSESSMENTS OCCUR WITHIN THE CONTEXT OF RECIPROCAL COMMUNICATIONS WITH FAMILIES AND WITH SENSITIVITY TO THE CULTURAL CONTEXTS IN WHICH CHILDREN DEVELOP. ASSESSMENT RESULTS ARE USED TO BENEFIT CHILDREN BY INFORMING SOUND DECISIONS ABOUT CHILDREN, TEACHING, AND PROGRAM IMPROVEMENT.

| IQPPS Number | Criteria | Notes |
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| 4.1. | The program has a written plan for assessment that describes assessment purposes, procedures, and uses of the results. The plan also includes <ul style="list-style-type: none"> • conditions under which children will be assessed, • timelines associated with assessments that occur throughout the year, • procedures to keep individual child records confidential, • ways to involve families in planning and implementing assessments, and • methods to effectively communicate assessment information to families. | Provide a written plan addressing all bullets and aligned with current practice. |
| 4.2. | The program’s written assessment plan includes the multiple purposes and uses of assessment including <ul style="list-style-type: none"> • arranging for developmental screening and referral for diagnostic assessment when indicated, | Provide a written plan addressing all bullets and aligns with current practice. |

| IQPPS Number | Criteria | Notes |
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| | <ul style="list-style-type: none"> • identifying children’s interests and needs, • describing the developmental progress and learning of children, • improving curriculum and adapting teaching practices and the environment, • planning program improvement, and • communicating with families. | |
| 4.3. | Programs use a variety of assessment methods that are sensitive to and informed by family culture, experiences, children’s abilities and disabilities, and home language; are meaningful and accurate; and are used in settings familiar to the children. | Provide information about the assessment methods used and the procedures for conducting the selected assessments. |
| 4.4. | Assessments obtain information on all areas of children’s development and learning, including cognitive skills, language, social-emotional development, approaches to learning, health, and physical development (including self-help skills). | Provide evidence that the selected assessments address all areas of children’s development. |
| 4.5. | Norm-referenced and standardized tests are used primarily when seeking information on eligibility for special services or when collecting information for overall program effectiveness. When formal assessments are used, they are combined with informal methods such as observation, checklists, rating scales, and work sampling. | Provide evidence that the program uses a published classroom assessment instrument and other informal methods of collecting information, rather than heavy use of norm referenced/standardized tests. |
| 4.6. Required | <p>Staff-developed assessment methods</p> <ul style="list-style-type: none"> • are aligned with curriculum goals. • provide an accurate picture of all children’s abilities and progress. • are appropriate and valid for their stated purposes. • provide meaningful and stable results for all learners, including English-language learners and children with special needs. • provide teachers with clear ideas for curriculum development and daily planning. • are regularly reviewed to be certain that they are providing the needed information. | The use of staff-developed assessment methods are not endorsed by the DE. |
| 4.7. | Teachers assess the developmental progress of <i>each child across all developmental areas</i> , using a <i>variety of instruments and multiple data sources</i> that address the program’s curriculum areas. Staff with diverse expertise and skills collect information across the full range of children’s experiences. | Provide evidence of comprehensive assessment(s) across all developmental areas documented by a completed assessment protocol. Information should be collected over multiple settings using multiple methods. |
| 4.8. | Teachers <i>refer</i> to curriculum goals and developmental expectations when interpreting assessment data. | *Provide procedures used by staff for analyzing and interpreting assessment data *Provide procedures/descriptions for how the data is used to inform curriculum and instruction for groups and individuals. |
| 4.9. | <i>Teachers or others who know the children</i> and are able to observe their strengths, interests, and needs on an ongoing basis <i>conduct assessments</i> to inform classroom instruction and to make sound decisions about individual and group curriculum content, teaching approaches, and personal interactions. | Provide evidence that teachers or other staff conduct assessment, rather than specialized assessment staff who do not work with the child on a regular basis. |

| IQPPS Number | Criteria | Notes |
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| 4.10. | Teaching teams <i>meet at least weekly to interpret and use assessment results</i> to align curriculum and teaching practices to the interests and needs of the children. | Provide evidence of weekly meetings focused on discussion of children’s skills, interests and progress to guide lesson planning. |
| 4.11. Required | Teachers <i>interact with children to assess their strengths and needs</i> to inform curriculum development and individualize teaching. | Teaching staff use planned and spontaneous interactions to assess strengths and needs. Examples include large, small group and individual activities that may include open ended questions or examples of scaffolding based on assessment information. It may also be evidenced through lesson plans. |
| 4.12. | Teachers and other professionals associated with the <i>program use assessment methods and information to design goals for individual children</i> as well as to guide curriculum planning and <i>monitor progress</i> . | Provide evidence of goals for individual children and monitoring individual children’s performance and growth based on assessment information. |
| 4.13. | Teachers observe and document children’s work, play, behaviors, and interactions to assess progress. <i>They use the information gathered to plan and modify</i> the curriculum and their <i>teaching</i> . | Provide evidence that staff’s observations are used to modify any ONE of these areas: children’s work, play, behaviors, or interactions. Written evidence may include but is not limited to anecdotal notes, notes of teachers’ observations or interactions with children. |
| 4.14. Required | Families have ongoing opportunities to share the results of observations from home to contribute to the assessment process. | Describe methods to collect information from families regarding strengths, interest or needs of the child. |

PROGRAM STANDARD 5—HEALTH

THE PROGRAM PROMOTES THE NUTRITION AND HEALTH OF ALL CHILDREN AND STAFF AND PROTECTS THEM FROM PREVENTABLE ILLNESS AND INJURY.

| | IQPPS Number | Criteria | Notes |
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| DHS IAC 441-109.9(3) | 5.1. | <p>The program maintains current health records for each child:</p> <ul style="list-style-type: none"> • Within six weeks after a child begins the program, and as age-appropriate thereafter, health records document the dates of services to show that the child is current for routine screening tests and immunizations according to the schedule recommended, published in print, and posted on the Web sites of the American Academy of Pediatrics, the Centers for Disease Control of the United States Public Health Service (CDC-USPHS), and the Academy of Family Practice. • When a child is overdue for any routine health services, parents, legal guardians, or both provide evidence of an appointment for those services before the child’s entry into the program and as a | Provide evidence of how the program addresses this criterion. |

| | IQPPS Number | Criteria | Notes |
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| | | <p>condition of remaining enrolled in the program, except for immunization for which parents are using religious exemption.</p> <p>Child health records include:</p> <ul style="list-style-type: none"> • current information about any health insurance coverage required for treatment in an emergency; • results of health examination, showing up-to-date immunizations and screening tests with an indication of normal or abnormal results and any follow-up required for abnormal results; • current emergency contact information for each child, that is kept up to date by a specified method during the year; • names of individuals authorized by the family to have access to health information about the child; • instructions for any of the child’s special health needs such as allergies or chronic illness (e.g., asthma, hearing or vision impairments, feeding needs, neuromuscular conditions, urinary or other ongoing health problems, seizures, diabetes); and • supporting evidence for cases in which a child is under-immunized because of a medical condition (documented by a licensed health professional) or the family’s beliefs. Staff implement a plan to exclude the child promptly if a vaccine-preventable disease to which children are susceptible occurs in the program. | |
| DHS IAC 441 - 109.8(1)c | 5.2. Required | <p>At least one staff member who has a certificate showing satisfactory completion of pediatric first-aid training, including managing a blocked airway and providing rescue breathing for children, is always present with each group of children. When the program includes swimming and wading and when a child in the group has a special health condition that might require CPR, one staff person who has successfully completed training in CPR is present in the program at all times.</p> | <p>Copy of cards for Pediatric First Aid, 1 per classroom. CPR as indicated by the needs of the children in the classroom as well as if the program includes swimming.</p> <p>One person from each group of children must have Pediatric First Aid. CPR may be required depending on the needs of the children.</p> |
| DHS IAC 441- 109.10(2), 109.10(4) 109.10(6) | 5.3. | <p>The program follows these practices in the event of an illness:</p> <ul style="list-style-type: none"> • If an illness prevents the child from participating comfortably in activities or creates a greater need for care than the staff can provide without compromising the health and safety of the other children, or if a child’s condition is suspected to be contagious and requires exclusion as identified by public health authorities, then the child is made comfortable in a location where she or he is supervised by a familiar caregiver. If the child is suspected of having a contagious disease, then until she or he can be picked up by the family, the child is located where new individuals will not be exposed. • The program immediately notifies the parent, legal guardian, or other person authorized by the parent when a child has any sign or symptom that requires exclusion from the program. • A program that allows ill children or staff to remain in the program implements plans that have been reviewed by a health professional about (a) what level and types of illness require exclusion; (b) how care is provided for those who are ill but who are not excluded; and (c) when it is necessary to require consultation and documentation from a health care provider for an ill child or staff member. | Board Policy or procedure (handbook). |
| DHS IAC 441 - 109.4(3)a for | 5.4. | <p>Staff and teachers provide information to families verbally and in writing about any unusual level or type of communicable disease to which their child was exposed, signs and symptoms of the disease, mode of transmission, period of communicability, and control measures that are being implemented at the</p> | <p>Evidence of communication with families about communicable diseases.</p> <p>Documentation of cooperative</p> |

| | IQPPS Number | Criteria | Notes |
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| notification, not agreement. | | program and that the families should implement at home. The program has documentation that it has cooperative arrangements with local health authorities and has, at least annually, made contact with those authorities to keep current on relevant health information and to arrange for obtaining advice when outbreaks of communicable disease occur. | arrangements with local health authorities regarding health and/or communicable diseases (email, letter, screening, flu shots etc.). |
| | 5.5. | Children of all ages have daily opportunities for outdoor play (when weather, air quality, or environmental safety conditions do not pose a health risk). When outdoor opportunities for large-motor activities are not possible because of conditions, the program provides similar activities inside. Indoor equipment for large-motor activities meets national safety standards and is supervised at the same level as outdoor equipment. | *Provide daily schedule. *Provide safety inspections/assessments for indoor and outdoor equipment. |
| | 5.6. | <p>To protect against cold, heat, sun injury, and insect-borne disease, the program ensures that:</p> <ul style="list-style-type: none"> • Children wear clothing that is dry and layered for warmth in cold weather. • Children have the opportunity to play in the shade. When in the sun, they wear sun-protective clothing, applied skin protection, or both. Applied skin protection will be either sunscreen or sun block with UVB and UVA protection of SPF 15 or higher that is applied to exposed skin (only with written parental permission to do so). • When public health authorities recommend use of insect repellents due to a high risk of insect-borne disease, only repellents containing DEET are used. Staff apply insect repellent no more than once a day and only with written parental permission. | All bullets addressed in policy, handbook or family intake forms |
| | 5.7. | <p>For children who are unable to use the toilet consistently, the program makes sure that:</p> <ul style="list-style-type: none"> • Staff use only commercially available disposable diapers or pull-ups unless the child has a medical reason that does not permit their use (the health provider documents the medical reason). • For children who require cloth diapers, the diaper has an absorbent inner lining completely contained within an outer covering made of waterproof material that prevents the escape of feces and urine. Both the diaper and the outer covering are changed as a unit. • Cloth diapers and clothing that are soiled by urine or feces are immediately placed in a plastic bag (without rinsing or avoidable handling) and sent home that day for laundering. • Staff check children for signs that diapers or pull-ups are wet or contain feces (a) at least every two hours when children are awake and (b) when children awaken. • Diapers are changed when wet or soiled. • Staff change children’s diapers or soiled underwear in the designated changing areas and not elsewhere in the facility. • Each changing area is separated by a partial wall or at least three feet from other areas that children use and is used exclusively for one designated group of children. • At all times, caregivers have a hand on the child when being changed on an elevated surface. | Policy or evidence addressing toileting. |

| | IQPPS Number | Criteria | Notes |
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| | | <ul style="list-style-type: none"> • In the changing area, staff post and follow changing procedures (as outlined in the Cleaning and Sanitations Frequency Table). These procedures are used to evaluate teaching staff who change diapers. • Surfaces used for changing and on which changing materials are placed are not used for other purposes, including temporary placement of other objects, and especially not for any object involved with food or feeding. • Containers that hold soiled diapers and diapering materials have a lid that opens and closes tightly by using a hands-free device (e.g., a step can). • Containers are kept closed and are not accessible to children. • Staff members whose primary function is preparing food do not change diapers until their food preparation duties are completed for the day. | |
| <p>DHS IAC 441 - 109.10(7), 109.10(8) Bullets #3, #5, #7only</p> | <p>5.8.</p> | <p>The program follows these practices regarding hand washing:</p> <ul style="list-style-type: none"> • Staff members and those children who are developmentally able to learn personal hygiene are taught hand-washing procedures and are periodically monitored. • Hand washing is required by all staff, volunteers, and children when hand washing would reduce the risk of transmission of infectious diseases to themselves and to others. • Staff assist children with hand washing as needed to successfully complete the task. Children wash either independently or with staff assistance. <p>Children and adults wash their hands:</p> <ul style="list-style-type: none"> • on arrival for the day; • after diapering or using the toilet; • after handling body fluids (e.g., blowing or wiping a nose, coughing on a hand, or any touching of mucus, blood or vomit); • before meals and snacks, preparing or serving food, or handling any raw food that requires cooking (e.g., meat, eggs, poultry); • after playing in water that that is shared by two or more people; • after handling pets and other animals or any materials such as sand, dirt, or surfaces that might be contaminated by contact with animals; and • when moving from one group to another (e.g., visiting) that involves contact with toddlers/twos. <p>Adults also wash their hands:</p> <ul style="list-style-type: none"> • before and after feeding a child; • before and after administering medication; • after assisting a child with toileting; and • after handling garbage or cleaning. <p>Proper hand-washing procedures are followed by adults and children and include:</p> <ul style="list-style-type: none"> • using liquid soap and running water; • rubbing hands vigorously for at least 10 seconds, including back of hands, wrists, between fingers, under and around any jewelry, and under fingernails; rinsing well; drying hands with a paper towel, a | <p>Policy or procedure addressing all bullets.</p> |

| | IQPPS Number | Criteria | Notes |
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| | | <p>single-use towel, or a dryer; and avoiding touching the faucet with just-washed hands (e.g., by using a paper towel to turn off water).</p> <p>Except when handling blood or body fluids that might contain blood (when wearing gloves is required), wearing gloves is an optional supplement, but not a substitute, for hand washing in any required hand-washing situation listed above.</p> <ul style="list-style-type: none"> • Staff must wear gloves when contamination with blood may occur. • Staff do not use hand-washing sinks for bathing children or for removing smeared fecal material. • In situations where sinks used for both food preparation and other purposes, staff clean and sanitize the sinks before using them to prepare food. <p>Note: <i>The use of alcohol-based hand rubs in lieu of hand washing is not recommended for early education and child care settings. If these products are used as a temporary measure, a sufficient amount must be used to keep the hands wet for 15 seconds. Since the alcohol-based hand rubs are toxic and flammable, they must be stored and used according to the manufacturer's instructions.</i></p> | |
| | 5.9. | <p>Precautions are taken to ensure that communal water play does not spread infectious disease. No child drinks the water. Children with sores on their hands are not permitted to participate in communal water play. Fresh portable water is used, and the water is changed before a new group of children comes to participate in the water play activity. When the activity period is completed with each group of children, the water is drained. Alternatively, fresh portable water flows freely through the water play table and out through a drain in the table.</p> | Policy or evidence addressing communal water play. |
| <p>LEA – IAC 281-41.404(3) – All.</p> <p>DHS – IAC 441-09.10(3) Bullets #2 and #4 only</p> | 5.10. | <p>Safeguards are used with all medications for children:</p> <ul style="list-style-type: none"> • Staff administer both prescription and over-the-counter medications to a child only if the child's record documents that the parent or legal guardian has given the program written permission. • The child's record includes instructions from the licensed health provider who has prescribed or recommended the medication for that child; alternatively, the licensed health provider's office may give instructions by telephone to the program staff. • Any administrator or teaching staff who administers medication has (a) specific training and (b) a written performance evaluation updated annually by a health professional on the practice of the five right practices of medication administration : <ul style="list-style-type: none"> (1) verifying that the right child receives the (2) right medication (3) in the right dose (4) at the right time (5) by the right method with documentation of each right each time the medication is given. <p>The person giving the medication signs documentation of items (1) through (5) above. Teaching staff who are required to administer special medical procedures have demonstrated to a health professional that they are competent in the procedures and are guided in writing about how to perform the procedure by the prescribing health care provider.</p> <ul style="list-style-type: none"> • Medications are labeled with the child's first and last names, the date that either the prescription was filled or the recommendation was obtained from the child's licensed health care provider, the name of the licensed health care provider, the expiration date of the medication or the period of use of the | Policy or procedure for addressing all bullets addressed in this criterion |

| | IQPPS Number | Criteria | Notes |
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| | | medication, the manufacturer’s instructions or the original prescription label that details the name and strength of the medication, and instructions on how to administer and store it. <ul style="list-style-type: none"> • All medications are kept in a locked container. • | |
| | 5.11. | At least once daily in a program where children older than one year receive two or more meals, teaching staff provide an opportunity for tooth brushing and gum cleaning to remove food and plaque. (The use of toothpaste is not required.) | Policy or daily schedule addressing tooth brushing, if applicable. Snack and meals are counted. |
| DHS IAC 441-109.15(1) | 5.12. | If the program provides food for meals and snacks (whether catered or prepared on-site), the food is prepared, served, and stored in accordance with the U.S. Department of Agriculture (USDA) Child and Adult Care Food Program (CACFP) guidelines. | Policy or evidence of school lunch program or CACFP requirements. |
| DHS IAC 441-109.15(4)a-d | 5.13. | Staff take steps to ensure the safety of food brought from home: <ul style="list-style-type: none"> • They work with families to ensure that foods brought from home meet the USDA’s CACFP food guidelines. • All foods and beverages brought from home are labeled with the child’s name and the date. • Staff make sure that food requiring refrigeration stays cold until served. • Food is provided to supplement food brought from home if necessary. • Food that comes from home for sharing among the children must be either whole fruits or commercially prepared packaged foods in factory-sealed containers. | Policy or evidence addressing food brought from home. Does not need to address all bullets. |
| DHS IAC 441-109.15(5)a-d (Policy) | 5.14. | The program takes steps to ensure food safety in its provision of meals and snacks. Staff discard foods with expired dates. The program documents compliance and any corrections that it has made according to the recommendations of the program’s health consultant, nutrition consultant, or a sanitarian that reflect consideration of federal and other applicable food safety standards. | Policy or evidence addressing food safety.. |
| | 5.15. | For all children with disabilities who have special feeding needs, program staff keep a daily record documenting the type and quantity of food a child consumes and provide families with that information. | Policy or procedure addressing special feeding needs and staff responsibilities. |
| | 5.16. | For each child with special health care needs or food allergies or special nutrition needs, the child’s health provider gives the program an individualized care plan that is prepared in consultation with family members and specialists involved in the child’s care. The program protects children with food allergies from contact with the problem food. The program asks families of a child with food allergies to give consent for posting information about that child’s food allergy and, if consent is given, then posts that information in the food preparation area and in the areas of the food preparation area and in the areas of the facility the child uses so it is a visual reminder to all those who interact with the child during the program day. | Procedure for addressing food allergies and health care needs. |
| DHS IAC 441-109.15(6)a-b | 5.17 | Clean sanitary drinking water is made available to children throughout the day. | Statement of water source. |
| | 5.18. | Liquids and foods that are hotter than 110 degrees Fahrenheit are kept out of children’s reach. | Policy or evidence that water is not hotter than 110 degrees. |

| | IQPPS Number | Criteria | Notes |
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| | 5.19 | <p>Staff do not offer children younger than four years these foods: hotdogs, whole or sliced into rounds; whole grapes; nuts; popcorn; raw peas and hard pretzels; spoonfuls of peanut butter; or chunks of raw carrots or meat larger than can be swallowed whole.</p> <p>Staff cut foods into pieces no larger than ¼-inch square for infants and ½-inch square for toddlers/twos, according to each child’s chewing and swallowing capability.</p> | Policy or procedure addressing this criterion. |
| DHS - IAC 441-109.15(2) | 5.20 | The program prepares written menus, and posts them where families can see them, and has copies available for families. Menus are kept on file for review by a program consultant. | Written menus prepared and posted where families can see them; menus are kept on file and reviewed by program consultant. Snack is not part of the school food program. |
| DHS - IAC 441-109.15(1) | 5.21. | The program serves meals and snacks at regularly established times. Meals and snacks are at least two hours apart but not more than three hours apart. | Daily schedule addressing this criterion. |
| | 5.22. | The routine frequency of cleaning and sanitizing all surfaces in the facility is as indicated in the Cleaning and Sanitation Frequency Table. Ventilation and sanitation, rather than sprays, air freshening chemicals, or deodorizers, control odors in inhabited areas of the facility and in custodial closets. | Policy or evidence of cleaning or sanitation. |
| | 5.23. | <p>Procedures for standard precautions are used and include the following:</p> <ul style="list-style-type: none"> • Surfaces that may come in contact with potentially infectious body fluids must be disposable or made of a material that can be sanitized. • Staff use barriers and techniques that minimize contact of mucus membranes or of openings in skin with potentially infectious body fluids and that reduce the spread of infectious disease. • When spills of body fluids occur, staff clean them up immediately with detergent followed by water rinsing. • After cleaning, staff sanitize nonporous surfaces by using the procedure for sanitizing designated changing surfaces described in the Cleaning and Sanitation Frequency Table. • Staff clean rugs and carpeting by blotting, spot cleaning with a detergent-disinfectant, and shampooing or steam cleaning. • Staff dispose of contaminated materials and diapers in a plastic bag with a secure tie that is placed in a closed container. | Policy or evidence of standard precautions. Fifty percent of bullets are required. |
| | 5.24. | A toy that a child has placed in his or her mouth or that is otherwise contaminated by body secretion or excretion is either to be (a) washed by hand using water and detergent, then rinsed, sanitized, and air dried or (b) washed and dried in a mechanical dishwasher before it can be used by another child. | Policy or evidence of cleaning contaminated items. Provide evidence of practices to separate such toys such as a bucket labeled to place contaminated items. |
| | 5.25. | Staff maintain areas used by staff or children who have allergies or any other special environmental health needs according to the recommendations of health professionals. | Evidence of forms used to collect this information from families. If the program provides evidence there are no allergies or environmental hazards this criterion would not need to be addressed. |

| | IQPPS Number | Criteria | Notes |
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| DHS - IAC 441-109.10(14) | 5.26. | Classroom pets or visiting animals appear to be in good health. Pets or visiting animals have documentation from a veterinarian or an animal shelter to show that the animals are fully immunized (if the animal should be so protected) and that the animal is suitable for contact with children. Teaching staff supervise all interactions between children and animals and instruct children on safe behavior when in close proximity to animals. Program staff make sure that any child who is allergic to a type of animal is not exposed to that animal. Reptiles are not allowed as classroom pets because of the risk for salmonella infection. | Policy or evidence regarding animals in the classroom. Provide evidence from a veterinarian that visiting and classroom pets are in good health. |

PROGRAM STANDARD 6—TEACHERS

THE PROGRAM EMPLOYS AND SUPPORTS A TEACHING STAFF THAT HAS THE EDUCATIONAL QUALIFICATIONS, KNOWLEDGE, AND PROFESSIONAL COMMITMENT NECESSARY TO PROMOTE CHILDREN’S LEARNING AND DEVELOPMENT AND TO SUPPORT FAMILIES’ DIVERSE NEEDS AND INTERESTS.

| | IQPPS Number | Criteria | Notes |
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| | 6.1. Required | <p>When working with children, all teaching staff demonstrate the ability to:</p> <ul style="list-style-type: none"> • interact with children without using physical punishment or any form of psychological abuse. • recognize health and safety hazards and protect children from harm. • encourage and provide children with a variety of opportunities for learning. • encourage and provide children with a variety of social experiences. • adapt and respond to changing and challenging conditions in ways that enhance program quality. • communicate with children and their families. | Evidence may include a written policy, a component of employee orientation/training, staff handbook, etc. |
| | 6.2. | <p>Before working alone with children, new teaching staff are given an initial orientation that introduces them to fundamental aspects of program operation including</p> <ul style="list-style-type: none"> • program philosophy, values, and goals; • expectations for ethical conduct; • health, safety, and emergency procedures; • individual needs of children they will be teaching or caring for; • accepted guidance and classroom management techniques; • daily activities and routines of the program; • program curriculum; • child abuse and neglect reporting procedures; • program policies and procedures; • Iowa Quality Preschool Program Standards and Criteria; • regulatory requirements. <p>Follow-up training expands on the initial orientation.</p> | Evidence of initial orientation specific to preschool program addressing at least 50% of the bullets. Teaching staff includes associates. Policy alone is not sufficient. |

| | IQPPS Number | Criteria | Notes |
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| | 6.3. | <p>Teachers are licensed by the Iowa Board of Educational Examiners and hold an early childhood endorsement.</p> | <p>A teacher must have a prekindergarten endorsement (can be PK-K, PK-3, PK-3 regular/special education). If the teacher has a Class B and teaching general education. A teacher with early childhood special education must be indicated for a child on an instructional services IEP. A stand alone ECSE endorsement is not appropriate to the SWVPP because it does not include general education.</p> |
| | 6.4. Required | <p>Assistant teachers-teacher aides (staff who implement program activities under direct supervision) have a high school diploma or GED and:</p> <ul style="list-style-type: none"> • 50% of assistant teachers-teacher aides have at least a Child Development Associate Credential (CDA) or equivalent; and • 100% of assistant teachers-teacher aides who do not have at least a CDA are enrolled in a program leading to a CDA or equivalent, are actively participating in the program, and are demonstrating progress toward the CDA or equivalent. <p>College-level course work is from regionally accredited institutions of higher education and may include distance learning or online coursework. If there is only one assistant teacher-teacher aide, then either of the requirements can be met.</p> | <p>A CDA credential must be granted from the Center for Professional Recognition, hours alone do not count. A Paraeducator license must be granted from the BOEE. The qualification for paraeducator is Level I Generalist AND Level II Early Childhood. It is not necessary to maintain the paraeducator certificate. Two years of college must be from an accredited college or university and equal to 48 semester hours.</p> |
| LEA – IAC 281-12.7(1)(c), 281-83.6(1) teachers only | 6.5. | <p>All teaching staff evaluate and improve their own performance based on ongoing reflection and feedback from supervisors, peers, and families. They add to their knowledge and increase their ability to put knowledge into practice. They develop an annual individualized professional development plan with their supervisor and use it to inform their continuous professional development.</p> | <p>Evidence of a professional development resulting from a conversation with their supervisor.</p> |
| | 6.6. | <p>All teaching staff continuously strengthen their leadership skills and relationships with others and work to improve the conditions of children and families within their programs, the local community or region, and beyond. Teaching staff participate in informal or formal ways in local, state, or regional public-awareness activities related to early care by joining groups, attending meetings, or sharing information with others both at and outside the program.</p> | <p>Evidence of current professional development.</p> |

PROGRAM STANDARD 7—FAMILIES

THE PROGRAM ESTABLISHES AND MAINTAINS COLLABORATIVE RELATIONSHIPS WITH EACH CHILD’S FAMILY TO FOSTER CHILDREN’S DEVELOPMENT IN ALL SETTINGS. THESE RELATIONSHIPS ARE SENSITIVE TO FAMILY COMPOSITION, LANGUAGE, AND CULTURE.

| IQPPS Number | Criteria | Notes |
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| 7.1. | Program staff use a variety of formal and informal strategies (including conversations) to become acquainted with and learn from families about their family structure; their preferred child-rearing practices; and information families wish to share about their socioeconomic, linguistic, racial, religious, and cultural backgrounds. | Policy or evidence of multiple ways to engage families through ongoing, two-way communication. |
| 7.2. | Program staff ensure that all families, regardless of family structure; socioeconomic, racial, religious, and cultural backgrounds; gender; abilities; or preferred language are included in all aspects of the program, including volunteer opportunities. These opportunities consider each family's interests and skills and the needs of program staff. | Policy or evidence of family handbook, surveys or orientation materials describing how volunteering is open to all volunteers. |
| 7.3. | Program staff inform families about the program's systems for formally and informally assessing children's progress. This information includes the purposes of the assessment, the procedures used for assessment, procedures for gathering family input and information, the timing of assessments, the way assessment results or information will be shared with families, and the ways the program will use the information. | Policy or evidence of multiple ways to engage families through ongoing, two-way communication. |
| 7.4. | When program staff suspect that a child has a developmental delay or other special need, this possibility is communicated to families in a sensitive, supportive, and confidential manner and is provided with documentation and explanation for the concern, suggested next steps, and information about resources for assessment. | Policy or evidence of involving families through ongoing, two-way communication. |
| 7.5 | Program staff communicate with families on at least a weekly basis regarding children's activities and developmental milestones, shared care-giving issues, and other information that affects the well-being and development of their children. Where in-person communication is not possible, program staff communicate through established alternative means. | Evidence of daily reporting to families communicating individual child activities and milestones. |
| 7.6. | Program staff encourage families to raise concerns and work collaboratively with them to find mutually satisfying solutions that staff then incorporate into classroom practice. | Policy or evidence of multiple ways to engage families through ongoing, two-way communication. |
| 7.7. | Program staff encourage and support families to make the primary decisions about the services that their children need, and they encourage families to advocate to obtain needed services. | Policy or evidence of multiple ways to engage families through ongoing, two-way communication. |
| 7.8. | Program staff provide families with information about programs and services from other organizations. Staff support and encourage families' efforts to negotiate health, mental health, assessment, and educational services for their children. | Policy or evidence of multiple ways to engage families through ongoing communication about community resources and services. |
| 7.9. | Program staff use established linkages with other early education programs and local elementary schools to help families prepare for and manage their children's transitions between programs, including special education programs. Staff provide information to families that can assist them in communicating with other programs. | Policy or evidence of multiple ways to engage families through ongoing, two-way communication to prepare for transition. |
| 7.10. | To help families with their transitions to other programs or schools, staff provide basic general information on enrollment procedures and practices, visiting opportunities, and/or program options. | Policy or evidence of multiple ways to engage families through ongoing, two-way communication to prepare for transition. |

PROGRAM STANDARD 8—COMMUNITY RELATIONSHIPS

THE PROGRAM ESTABLISHES RELATIONSHIPS WITH AND USES THE RESOURCES OF THE CHILDREN'S COMMUNITIES TO SUPPORT THE ACHIEVEMENT OF PROGRAM GOALS.

| IQPPS Number | Criteria | Notes |
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| 8.1. | Program staff maintain a current list of child and family support services available in the community based on the pattern of needs they observe among families and based on what families request (e.g., health, mental health, oral health, nutrition, child welfare, parenting programs, early intervention/special education screening and assessment services, and basic needs such as housing and child care subsidies). They share the list with families and assist them in locating, contacting, and using community resources that support children's and families' well-being and development. | Policy or evidence of multiple ways to inform families about community resources and services. |
| 8.2. | Program staff develop partnerships and professional relationships with agencies, consultants and organizations in the community that further the program's capacity to meet the needs and interests of the children and families that they serve. | Policy or evidence that indicates relationships with specialized consultants to support children and families. |
| 8.3. | Program staff identify and establish relationships with specialized consultants who can assist all children's and families' full participation in the program. This assistance includes support for children with disabilities, behavioral challenges, or other special needs. | Policy or evidence that indicates relationships with specialized consultants to support children. |
| 8.4. | Program staff use their knowledge of the community and the families it serves as an integral part of the curriculum and children's learning experiences. | Provide examples of how knowledge about the community and the families of children is used to inform the curriculum/activities. |
| 8.5. | The program encourages staff to participate in joint and collaborative training activities or events with neighboring early childhood programs and other community service agencies. | Policy or evidence indicating training or events with neighboring EC programs and community agencies. |
| 8.6. | Program staff are encouraged and given the opportunity to participate in community or statewide interagency councils or service integration efforts. | Policy or evidence indicating training or events with neighboring EC programs and community agencies. |

PROGRAM STANDARD 9—PHYSICAL ENVIRONMENT

THE PROGRAM HAS A SAFE AND HEALTHFUL ENVIRONMENT THAT PROVIDES APPROPRIATE AND WELL-MAINTAINED INDOOR AND OUTDOOR PHYSICAL ENVIRONMENTS. THE ENVIRONMENT INCLUDES FACILITIES, EQUIPMENT, AND MATERIALS TO FACILITATE CHILD AND STAFF LEARNING AND DEVELOPMENT.

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| | 9.1. Required | <p>A variety of age and developmentally appropriate materials and equipment are available indoors and outdoors for children throughout the day. This equipment includes</p> <ul style="list-style-type: none"> • dramatic play equipment; • sensory materials such as sand, water, play dough, paint, and blocks; • materials that support curriculum goals and objectives in literacy, math, science, social studies, and other content areas; and • gross motor equipment for activities such as pulling up; walking; climbing in, on, and over; moving through, around, and under; pushing; pulling; and riding. | Provide evidence of materials addressing all bullets both indoors and outdoors. |
| DHS - IAC 441-109.12(4) | 9.2. | The indoor environment is designed so staff can supervise children by sight and sound at all times without relying on artificial monitoring devices. In semiprivate areas, it is always possible for both children and adults to be observed by an adult from outside the area. | Floor plan of classrooms including bathrooms used by the children. Evidence (photographs, etc.) of outdoor environment indicating the area may be appropriately supervised by sight and sound. |
| | 9.3. | Materials and equipment that facilitate focused individual play or play with peers are available in sufficient quantities to occupy each child in activities that meet his or her interests. | Evidence of formal or informal assessment to assure sufficient materials are available. |
| DHS - IAC 441-109.12(1), 109.12(3) | 9.4. | <p>Indoor space is designed and arranged to:</p> <ul style="list-style-type: none"> • accommodate children individually, in small groups, and in a large group. • divide space into areas that are supplied with materials organized in a manner to support children’s play and learning. • provide semiprivate areas where children can play or work alone or with a friend. • provide children with disabilities full access (making adaptations as necessary) to the curriculum and activities in the indoor space. | See evidence for 9.2. |
| | 9.5. | <p>Outdoor play areas, designed with equipment that is age and developmentally appropriate and that is located in clearly defined spaces with semiprivate areas where children can play alone or with a friend, accommodate</p> <ul style="list-style-type: none"> • motor experiences such as running, climbing, balancing, riding, jumping, crawling, scooting, or swinging. • activities such as dramatic play, block building, manipulative play, or art activities. • exploration of the natural environment, including a variety of natural and manufactured surfaces, and areas with natural materials such as nonpoisonous plants, shrubs, and trees. <p>The program makes adaptations so children with disabilities can fully participate in the outdoor curriculum and activities.</p> | Evidence of formal or informal assessment to assure sufficient equipment is available. |

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| | 9.6. Required | Program staff provide for an outdoor play area that is protected by fences or by natural barriers to prevent access to streets and to avoid other dangers, such as pits, water hazards, or wells. | Evidence that outdoor play area is fenced. |
| | 9.7. | The outdoor play area is arranged so that staff can supervise children by sight and sound. | See evidence in 9.2. |
| DHS - IAC 441-109.11(3)d 109.12(3) | 9.8. | The findings of a Playground Assessment are documented and available on-site. The assessment documents: <ul style="list-style-type: none"> • that play equipment is safe, protecting against death or permanently disabling injury for children from two years through kindergarten. • that, through remedial action, the program has corrected any unsafe conditions, where applicable. • that an inspection and maintenance program has been established and is performed on a regular basis to ensure ongoing safety. • that the outdoor play area accommodates abilities, needs, interests of each age group the program serves. | Evidence of completed playground safety checklist. Make recommendations to sign and date. |
| DHS - IAC 441-109.11(1) | 9.9. Required | There is a minimum of 35 square feet of usable space per child in each of the primary indoor activity areas. (The primary activity area does not include diaper stations, cribs, large structures that cannot be removed or moved aside easily, toilets, any sick-child area, staff rooms, corridors, hallways, stairways, closets, lockers or cubbies, laundry rooms, janitor rooms, furnace rooms, storage areas, and built-in shelving. Specialty areas such as computer rooms, reading rooms, and lunchrooms, where children are expected to remain seated for short periods of time, may be excluded from the minimum space requirement.) | Evidence of a floor plan. |
| LEA and DHS Req – US Dept of Justice | 9.10. Required | Facilities meet Americans with Disabilities Act (ADA) accessibility requirements. Accessibility includes access to buildings, toilets, sinks, drinking fountains, outdoor play space, and all classroom and therapy areas. | Board policy or evidence addressing ADA compliance |
| | 9.11. | The routine frequency of cleaning and sanitation in the facility is carried out as indicated in the Cleaning and Sanitation Frequency Table. Staff clean and sanitize toilet seats, toilet handles, toilet bowls, doorknobs, or cubicle handles and floors either daily or immediately if visibly soiled. Staff clean and sanitize potty chairs, if in use, after each child's use. | Completed checklist of Cleaning and Sanitation Frequency. |
| DHS - IAC 441-109.11(3) | 9.12. Required | Program staff protect children and adults from hazards, including electrical shock, burns or scalding, slipping, tripping, or falling. Floor coverings are secured to keep staff and children from tripping or slipping. The program excludes baby walkers. | Statement and evidence of protection from hazards. |
| DHS - IAC 441-109.10(9) | 9.13. Required | Fully equipped first-aid kits are readily available and maintained for each group of children. Staff take at least one kit to the outdoor play areas as well as on field trips and outings away from the site. | -Statement and evidence of a first aid kit accessible at all times (playground). |
| | 9.14. Required | Fully working fire extinguishers and fire alarms are installed in each classroom and are tagged and serviced annually. Fully working carbon monoxide detectors are installed in each classroom and are tagged and serviced annually. Smoke detectors, fire alarms, and carbon monoxide detectors are tested monthly, and a written log of testing dates and battery changes is maintained and available. | Fire extinguisher and carbon monoxide detector (if applicable) must be in the classroom. Completed log of monthly testing of fire extinguisher, carbon monoxide detector, and smoke detectors. If sprinkler system in the classroom, no fire extinguisher is required. No carbon |

| | IQPPS Number | Criteria | Notes |
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| | | | monoxide detector necessary if site has geothermal or electric heating. A “Tundra” is an acceptable replacement for a fire extinguisher. |
| | 9.15. Required | Any body of water, including swimming pools, built-in wading pools, ponds, and irrigation ditches, is enclosed by a fence at least four feet in height, with any gates childproofed to prevent entry by unattended children. To prevent drowning accidents, staff supervise all children by sight and sound in all areas with access to water in tubs, pails, and water tables. | |
| DHS - IAC 441-109.11(7)a and b | 9.16. | Documentary evidence, available on-site, indicates that the building has been assessed for lead, radon, radiation, asbestos, fiberglass, or any other hazard from friable material. Evidence exists that the program has taken remedial or containment action to prevent exposure to children and adults if warranted by the assessment. | Evidence of a report indicating inspection for hazards in the building. |
| DHS - IAC 441-109.15(6) | 9.17. | When the water supply source is a well or other private source (i.e., not served by a public supply), on-site documentary evidence verifies that the local regulatory health authority has determined the water to be safe for human consumption. | Statement that water is from the public water supply. |
| DHS - IAC 441-109.11(7) | 9.18. | All rooms that children use are heated, cooled, and ventilated to maintain room temperature and humidity level. The maintenance staff or contractor certifies that facility systems are maintained in compliance with national standards for facility use by children. | Provide a copy of HVAC inspection or statement from district/center that systems are maintained. |
| All - IAC 641—153 | 9.19 Required | The facility and outdoor play areas are entirely smoke free. No smoking is permitted in the presence of children. | Policy indicating the facility is smoke free. |

PROGRAM STANDARD 10—LEADERSHIP AND MANAGEMENT

THE PROGRAM EFFECTIVELY IMPLEMENTS POLICIES, PROCEDURES, AND SYSTEMS THAT SUPPORT STABLE STAFF AND STRONG PERSONNEL, FISCAL, AND PROGRAM MANAGEMENT SO ALL CHILDREN, FAMILIES AND STAFF HAVE HIGH-QUALITY EXPERIENCES.

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| | 10.1. | The program has a well-articulated mission and philosophy of program excellence that guide its operation. The goals and objectives relate to the mission, philosophy, and all program operations and include child and family desired outcomes. | Copy of district/program mission and philosophy. . |
| | 10.2. Required | The program administrator has the educational qualifications and personal commitment required to serve as the program’s operational and pedagogical leader. The administrator | Principal endorsement which includes PK is acceptable. Otherwise indicators for each bullet must be documented. This individual must be on site during summer programming. |

| | IQPPS Number | Criteria | Notes |
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| | | <p>-has at least a baccalaureate degree¹. -has at least 9 credit-bearing hours of specialized college-level course work in administration, leadership, and management (which can be in school administration, business management, communication, technology, early childhood management or administration, or some combination of these areas.) -has at least 24 credit-bearing hours of specialized college-level course work in early childhood education, child development, elementary education, or early childhood special education that encompasses child development and children’s learning from birth through kindergarten; family and community relationships; the practices of observing, documenting and assessing young children; teaching and learning processes; and professional practices and development. OR documents that a plan is in place to meet the above qualifications within five years. OR can provide documentation of having achieved a combination of relevant formal education and experience as specified in table 5, Alternative Pathways to Achieve Educational Qualifications as a Program Administer.</p> | |
| | 10.3. | <p>The program, regardless of its size or funding auspices, has a designated program administrator with the educational qualifications detailed in Criterion 10.2. When a program has a total enrollment of fewer than 60 full-time equivalent (FTE) children, employs fewer than eight FTE staff, or both,</p> <ul style="list-style-type: none"> • a program may have a part-time administrator or an administrator who fulfills a dual role (e.g. teacher-administrator), and • in multi-site programs, the sites may share an off-site administrator. <p>When a program has a total enrollment of 60 or more FTE children, employs eight or more FTE staff, or both,</p> <ul style="list-style-type: none"> • a program has a full-time administrator, or • at multi-site programs, individual facilities have on-site a full-time administrator or full-time manager under the direct supervision of an individual who meets the qualifications outlined for the program administrator. <p>Note: When two or more people share administrative responsibilities, at least one person must meet the qualifications detailed in Criterion 10.2. This person is considered the designated administrator, and her or his contributions will be included in the assessment of criteria within the Leadership topic area.</p> | <p>(10.2 – Endorsement for Pk-6 or Pk-12 is acceptable.)</p> <p>One administrator, who has met 10.2, is acceptable for any size program.</p> |
| | 10.4 | <ul style="list-style-type: none"> • Written procedures address the maintenance of developmentally appropriate teaching staff-child ratios within group size (see table 4) to facilitate adult-child interaction and constructive activity among children. • Teaching staff-child ratios within group size are maintained during all hours of operation, including indoor time, outdoor time, and during transportation and field trips (when transporting children, the teaching staff-child ratio is used to guide the adult-child ratio). • Groups of children may be limited to one or may include multiple ages. (A group or classroom consists of the children assigned to a teacher or a team of teaching staff for most of the day and who occupy an | <p>Policies and procedure for maintaining child:staff ratios and group size. Ratio for all ages is 1:10, however, if the predominance of children are 3 years old – the maximum class size is 18 not 20.</p> |

¹ Degrees and college course work are from regionally accredited institutions of higher education. They may include distance learning, on-line course work, and degree completion programs that offer credit as a part of formal assessment of prior learning.

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| | | individual classroom or well-defined space that prevents intermingling of children from different groups within a larger room or area.) | |
| LEA required to follow Uniform Financial Accounting and make audit part of bd records; 281 IAC 12.3(8) | 10.5. | Financial policies and the procedures to implement them provide evidence of sound fiscal accountability using standard accounting practices. Financial policies and procedures are consistent with the program’s vision, philosophy, mission, goals, and expected child outcomes. Operating budgets are prepared annually, and there is at least quarterly reconciliation of expenses to budget. A system exists to review or adjust the budget if circumstances change, and it includes a yearly audit. Budgets are reviewed and amended as needed. Fiscal records (such as revenue and expenditure statements, balance sheets, banking reconciliation, etc.) are kept as evidence of sound financial management. | Policy addressing fiscal policy. District policy only. |
| DHS - IAC 441-109.10(5), 109.10(7), 109.12(1), 109.11 | 10.6. | <p>The program has written policies to promote wellness and safeguard the health and safety of children and adults. Procedures are in place that address</p> <ul style="list-style-type: none"> • steps to reduce occupational hazards such as infectious diseases (e.g. exposure of pregnant staff to CMV [cytomegalovirus], chicken pox), injuries (e.g. back strain, falls), environmental exposure (e.g. indoor air pollution, noise, stress); • management plans and reporting requirements for staff and children with illness, including administration of medication, and criteria for their inclusion or exclusion; • supervision of children in instances when teaching staff are assigned to specific areas that are near equipment where injury could occur; • the providing of space, supervision, and comfort for a child waiting for pick up because of illness; • the providing of adequate nutrition for children and adults; • sleeping and napping arrangements, including sleep positioning for infants; • sanitation and hygiene, including food handling and feeding; • maintenance of the facility and equipment; • prohibition of smoking, firearms, and other significant hazards that pose risks to children and adults; and • the providing of referrals for staff to resources that support them in wellness, prevention and treatment of depression, and stress management. | Policies or procedures to protect children and adults – at least 50% of bullets are addressed. |
| DHS - IAC 441-109.11(7)a,b,c | 10.7. | The program has written procedures to protect children and adults from environmental hazards such as air pollution, lead, and asbestos, according to public health requirements. | Policies or procedures to protect children and adults. |
| DHS - IAC 441-109.4(4) except for last sentence; LEA -IAC 281-102 1 st sentence only. | 10.8. | The program has a written policy for reporting child abuse and neglect as well as procedures in place that comply with applicable federal, state, and local laws. The policy includes requirements for staff to report all suspected incidents of child abuse, neglect, or both by families, staff, volunteers, or others to the appropriate local agencies. Staff who report suspicions of child abuse or neglect where they work are immune from discharge, retaliation, or other disciplinary action for that reason alone unless it is proven that the report is malicious. | Must address 3 rd sentence. Frequently see Board Policy that says “protected to the greatest extent possible” that is ok. Could be in the Preschool or Staff Handbook. If the policy says they follow all state laws, it is acceptable. <i>Teachout v. Forest City Community School</i> District: http://caselaw.findlaw.com/ia-supreme-court/1252662.html |

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| | 10.9. | The program has written procedures to be followed if a staff member is accused of abuse or neglect of a child in the program that protect the rights of the accused staff person as well as protect the children in the program. | Policy or procedures to protect children and adults. Appropriate - "The processing of a complaint or allegation will be handled confidentially to the maximum extent possible." |
| DHS - IAC 441- 109.9(2), 109.9(3), 109.10(1) Confidentiality required per reg language; LEA - IAC 281- 12.3(4) Confidentiality only | 10.10. | The program has written procedures that outline the health and safety information to be collected from families and to be maintained on file for each child in one central location within the facility. The files are kept current by updating as needed, but at least quarterly. The content of the file is confidential, but is immediately available to: <ul style="list-style-type: none"> • administrators or teaching staff who have consent from a parent or legal guardian for access to records, • the child's parents or legal guardian, and • regulatory authorities, upon request. | Policy and procedures describing health and safety information collected from families as well as how that information will be kept confidential. |
| | 10.11. | Written procedures address all aspects of the arrival, departure, and transportation of children. The procedures: <ul style="list-style-type: none"> • facilitate family-staff interaction. • ensure that all children transported during the program day are accounted for before, during, and after transport. • ensure the safety of all children as pedestrians and as passengers. • address specific procedures for children with disabilities. • address special circumstances in picking up children at the end of the day. | Policy and procedures describing arrival, departure and transportation of children. |
| LEA IAC 281— 43.33(285) | 10.12. | Transportation services are managed and program vehicles are licensed and insured in accordance with applicable federal and state laws. Certification of licensing and insurance is available on site. | Evidence of licensing and insurance. If the district transports children, this criterion is met. |
| DHS - IAC 441- 109.10(15), 109.4(2)b | 10.13. | The program has written and posted disaster preparedness and emergency evacuation policies and procedures. Procedures designate an appropriate person to assume authority and take action in an emergency when the administrator is not on site. The procedures include: <ul style="list-style-type: none"> • plans that designate how and when to either shelter in place or evacuate and that specify a location for the evacuation; • plans for handling lost or missing children, security threats, utility failure, and natural disasters; • arrangements for emergency transport and escort from the program; and • monthly practice of evacuation procedures with yearly practice of other emergency procedures. | Evidence of emergency plans. |
| DHS - IAC 441- 109.10(2) | 10.14. | The program has written, up-to-date, comprehensive procedures to prepare for and respond to medical and dental emergencies for children and adult staff. The procedures include <ul style="list-style-type: none"> • identification of a hospital or other source of medical care as the primary site for emergency care (program staff have informed the facility of their intent to use their services in an emergency); | Evidence of policies for medical and dental emergencies. |

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| | | <ul style="list-style-type: none"> • immediate access to written familial-consent forms to relevant health insurance information for emergency medical treatment and transportation arrangements; • arrangements for emergency transport and escort from the program of individuals who require immediate medical attention; • presence of an adult with current pediatric first-aid training certification on-site at all times (training includes providing rescue breathing, management of a blocked airway, and any special procedures that physicians of enrolled children have documented that the children require); and • individual emergency care plans for children with known medical or developmental problems or other conditions that might require special care in an emergency (allergy, asthma, seizures, orthopedic or sensory problems, and other chronic conditions; conditions that require regular medication or technology support). | |
| LEA - nondiscrim hiring practices IAC 95 | 10.15. | The program has written personnel policies that define the roles and responsibilities, qualifications, and specialized training required of staff and volunteer positions. The policies outline nondiscriminatory hiring procedures and policies for staff evaluation. Policies detail job descriptions for each position, including reporting relationships; salary scales with increments based on professional qualification, length of employment, and performance evaluation; benefits; and resignation, termination, and grievance procedures. Personnel policies provide for incentives based on participation in professional development opportunities. The policies are provided to each employee upon hiring. | Evidence of personnel policies minimum job description for teachers and associates for district and partners. |
| DHS - IAC 441- 109.9 all but age and education | 10.16. | <p>Hiring procedures ensure that all employees in the program (including bus drivers, bus monitors, custodians, cooks, clerical and other support staff) who come in contact with children in the program or who have responsibility for children:</p> <ul style="list-style-type: none"> • have passed a criminal-record check. • are free from any history of substantiated child abuse or neglect. • are at least 18 years old (except vehicle drivers who must be at least 21). • have completed high school or the equivalent. • have provided personal references and a current health assessment that attest to the prospective employee's ability to perform the tasks required to carry out the responsibilities of their position. | Staff files for this criterion are reviewed only for all teachers and associates whose classrooms. |
| | 10.17. | <p>Programs maintain current health information from documented health assessments for all paid staff and for all volunteers who work more than 40 hours per month and have contact with children. A current health assessment (not more than one year old) is received by the program before an employee starts work or before a volunteer has contact with children. The health assessment is updated every two years. Documented health assessments include:</p> <ul style="list-style-type: none"> • immunization status • capacities and limitations that may affect job performance, and • documentation by a licensed health professional of TB skin testing using the Mantoux method and showing the employee to be free from active TB disease. For those who have positive TB skin tests and who develop a persistent cough or unexplained fever, immediate assessment by a licensed physician is required. For those who have increased risk of TB according to the Centers for Disease Control (CDC), documentation is required annually by a licensed health professional showing that the employee is free from active TB disease. | Evidence of health assessments for paid staff. |

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| | 10.18. | Staff are provided space and time away from children during the day. When staff work directly with children for more than four hours, staff are provided breaks of at least 15 minutes in each four-hour period. In addition, staff may request temporary relief when they are unable to perform their duties. | Policy or evidence of breaks away from children. |
| DHS Required per Regulation doc. | 10.19. | Confidential personnel files, including applications with record of experience, transcripts of education, health-assessment records, documentation of ongoing professional development, and results of performance evaluation, are kept in a secure location. | Policy indicating files are in a secure location. |
| LEA – Teachers (PD Plan) and Admin IAC 281-86.6(1), 12.7(1)(c), 12.3(3) | 10.20. | All staff are evaluated at least annually by an appropriate supervisor or, in the case of the program administrator, by the governing body. | Policy or procedure indicating all staff are evaluated annually. |