



Abbreviated Quality Standards for Head Start Family Child Care Providers (In Full Compliance with Head Start Performance Standards)

Updated April 2024

Head Start providers pre-qualify for the QUALITYstarsNY Standards indicated in gray, having already met the requirements for these Standards as part of their federal Head Start compliance. **Head Start providers do not need to submit evidence for Standards in gray;** they will automatically earn points for them in the rating process.

The QUALITYstarsNY Standards represent the best practices and policies in early childhood care and education. Developed by leading experts in the field of early childhood learning and development from across New York State and then validated by research, QUALITYstarsNY Standards are used to assess and rate the quality of an early childhood program.

Programs participating in QUALITYstarsNY earn points toward their rating for meeting these quality indicators. Programs are rated 1-5 Stars with 3-5 Stars representing an exceptional level of quality.

Important Notes

* Evidence verified in The Aspire Registry*

Documentation for Standards pertaining to professional qualifications and experiences are collected through The Aspire Registry for New York's early childhood workforce for verification. This applies to all the Standards in the Qualifications & Experience category, as well as Standards HE1, COA6 CPI6, PH6, and FIS9. The provider and any additional staff must ensure they upload all documentation relevant to these Standards to their individual profiles in The Aspire Registry, and that the documentation is verified in Aspire BEFORE the program submits their Standards Inventory for rating. The information verified in Aspire, and the scores your program will receive for each of these Standards, is found in your program's Qualifications & Experience Report, available in your QUALITYstarsNY Profile.

Please refer to the following checklist to confirm the accuracy of scores for these Standards:

- Your program MUST review the information in your Qualifications & Experience Report available in your QUALITYstarsNY Profile (in the data system) and confirm that all information about you and your staff's trainings, experience, and education, is verified in The Aspire Registry and accurately reflected in the Qualifications & Experience Report.
- If not, DO NOT SUBMIT your Standards Inventory UNTIL the Qualifications & Experience Report is accurate.
- If you have an inquiry about your Qualification & Experience Report, please complete the [Qualifications & Experience Report Inquiry Form](#) for assistance, which you can access on our website, qualitystarsny.org.

Submitting a copy or excerpt of a policy or practice statement

When submitting a policy or practice statement as evidence, **it MUST be clear** that the written policy or practice statement is part of the program's official manual/handbook. *For example, submit a copy or excerpt of the policy or practice statement that visibly shows the page number from the program's manual/handbook or submit a copy of the table of contents from the program's manual/ handbook along with a copy of the written policy/practice statement.*

Evidence Notes Box: when uploading evidence for each Standard in the data system, you will find an "Evidence Notes" box where you can input a note about your uploaded documentation. **If submitting a large document, such as an official manual/handbook, you must enter a note in the Evidence Notes box indicating what page(s) shows the relevant information.** In the large document, it must be clear what page is being referred to and the relevant text must be highlighted.

Conditional Standards

Conditional Standards are Standards that are dependent on whether the provider serves a specific population of children. The Conditional Standards for family child care programs are CPI7, PH1, PH2, C1, FIS1, FIS7, FIS8, FIS9.

- If your program is not serving the specific population indicated by a Conditional Standard at the time when you submit your Standards Inventory, then you are "Not Eligible" for the Standard. If your program is "Not Eligible" for a Standard, it does not negatively impact your score in the rating process. Programs that do not serve the population of children indicated by a Conditional Standard must select the "I do not serve this population" option when completing your Standards Inventory in the data system to indicate you are "Not Eligible" for that Standard.
- If your program **does** serve the population of children indicated by a Conditional Standard, you must select the option for whether you are uploading evidence for the Standard, or if your program does not meet the Standard when you submit your Standards Inventory.
- Incorrectly responding to a Conditional Standard in the QUALITYstarsNY data system could result in your program not receiving the correct points for a Standard, or a Rater marking the Standard as "Incomplete" when they review your Standards Inventory.

LEARNING ENVIRONMENT

Research Rationale: There is substantial evidence that classroom environment features are central to program quality and there is limited evidence that varied and appropriate classroom materials support children’s development. Research shows that the quality of teacher-child interactions contributes to quality in early care and education settings and there is substantial evidence that children with involved and responsive caregivers fare better on a wide variety of child development measures. There is also a substantial amount of evidence that developmentally appropriate curriculum is related to other measures of program quality and substantial evidence that a developmentally appropriate curriculum is related to child outcomes. There is a moderate amount of evidence that developmentally-appropriate assessment is associated with improved child development outcomes.

Home Environment (HE) - 60 points

CODE	STANDARD	INTENTION	REQUIRED EVIDENCE	POINTS
HE 1	Provider attends training on the Family Child Care Environment Rating Scale (FCCERS).	Providers are well versed in the ERS so they can create an environment in their home that is conducive to learning and caring for children’s routine needs.	<input type="checkbox"/> Evidence in The Aspire Registry that at least the provider has attended training on the FCCERS within the last 15 months, verified with training certificate. Attention: <i>*See Important Notes on page 2 for guidance on evidence verified in The Aspire Registry.</i>	2
HE 2	Provider completes a self-assessment using one of the FCCERS assessment tools and writes an improvement plan to address subscale scores below 3.25.	Provider and assistant provider(s) identify ways to improve the environment, using the relevant ERS.	To meet this Standard, evidence MUST include: <ul style="list-style-type: none"> <input type="checkbox"/> One copy of a completed Environmental Rating Scale (ERS) Score Sheet. <input type="checkbox"/> If applicable, include improvement plan or action plan developed by the program, with dates for goal completion, for all Average Scores below 3.25. Attention: <ul style="list-style-type: none"> <input type="checkbox"/> The ERS Score Sheet MUST show the date of observation. <input type="checkbox"/> Uploaded evidence MUST be dated within the 15 months prior to Standards Inventory submission (MUST include full date: month, day, year). <input type="checkbox"/> All pages of the completed ERS Score Sheet MUST be submitted, including scores for each subscale section, and the last page showing the “Total” and “Average Scores” table. 	8

CODE	STANDARD	INTENTION	DOCUMENTATION	REQUIRED EVIDENCE	POINTS
<p><i>Providers do not submit evidence for Standards HE 3 – HE 5. These Standards are only applicable after Standards Inventory submission for programs that earn a Provisional Rating of 3-5 Stars. For eligible programs, an ERS assessment will be conducted by QUALITYstarsNY’s independent assessment team and the average scores will be used to determine the points that will be calculated into the program’s Active Rating. If a program earns an average score of 4.25 or below on their ERS assessment, they will automatically decrease a Star level for their Active Rating.</i></p>					
HE 3	Program has an <u>independent</u> ERS assessment and achieves an overall score of 4.25 – 4.99.	An external observer can provide an unbiased assessment of the learning environment.	Program does not submit evidence for this Standard. <i>If applicable, completed ERS report(s) is automatically sent to QUALITYstarsNY from the independent observer.</i>	Program does not submit evidence for this Standard. If applicable, completed ERS report(s) is automatically sent to QUALITYstarsNY from the independent observer.	30
HE 4	Program has an <u>independent</u> ERS assessment using the appropriate scale(s) and achieves an overall score of 5.00 – 5.49.	An external observer can provide an unbiased assessment of the learning environment.	Program does not submit evidence for this Standard. <i>If applicable, completed ERS report(s) is automatically sent to QUALITYstarsNY from the independent observer.</i>	Program does not submit evidence for this Standard. If applicable, completed ERS report(s) is automatically sent to QUALITYstarsNY from the independent observer.	40
HE 5	Program has an <u>independent</u> ERS assessment using the appropriate scale(s) and achieves an overall score of 5.50 or higher.	An external observer can provide an unbiased assessment of the learning environment.	Program does not submit evidence for this Standard. <i>If applicable, completed ERS report(s) is automatically sent to QUALITYstarsNY from the independent observer.</i>	Program does not submit evidence for this Standard. If applicable, completed ERS report(s) is automatically sent to QUALITYstarsNY from the independent observer.	50

Child Observation & Assessment (COA) - 20 points

CODE	STANDARD	INTENTION	REQUIRED EVIDENCE	POINTS
COA 1	Provider collects information at enrollment on children’s development including social emotional concerns, home language(s), preferences, and any special needs.	Providers should gather information about each child and family during enrollment, in order to inform curriculum planning, help guide children’s learning, and understand family circumstances from day one.	To meet this Standard, submit copies of completed questionnaires and/or enrollment forms for 2 different children . Questionnaires and/or enrollment forms MUST reference ALL of the following specific to the child: <input type="checkbox"/> Copies of 2 completed questionnaires and/or enrollment forms for 2 different children . <input type="checkbox"/> Specific questions/examples regarding physical development. <input type="checkbox"/> Specific questions/examples regarding cognitive development.	2

CODE	STANDARD	INTENTION	REQUIRED EVIDENCE	POINTS
		<p>This information is collected on all children.</p> <p>In addition to gathering information on any special needs, general information on children’s preferences and background should be collected.</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Specific questions/examples regarding social-emotional development. <input type="checkbox"/> Home language(s) of child. <input type="checkbox"/> Child’s dietary needs and preferences. <input type="checkbox"/> Child’s date of enrollment. <p>Acceptable type(s) of evidence include:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Questionnaires and/or enrollment forms. <p>Attention:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Redact/remove identifying information (names, addresses, etc.). <input type="checkbox"/> Label all forms as Child #1 and Child #2. <input type="checkbox"/> If information is collected on multiple forms, include an example of each completed form for each child. 	
COA 2	<p>Provider documents the developmental status of each child within 45 days of entering the home/starting the program using a child development screening tool.</p>	<p>Before or soon after starting in a family child care home, a child should be initially screened for basic developmental levels in order to help define individual learning goals and identify any potential special needs.</p>	<p>To meet this Standard, submit either:</p> <p>If submitting a developmental screening form, include ALL of the following:</p> <ul style="list-style-type: none"> <input type="checkbox"/> One copy of a completed and dated developmental screening form for 1 child. <p>AND</p> <ul style="list-style-type: none"> <input type="checkbox"/> Include the date the child started/entered the program on the screening form (this MUST be added to the form if no space exists). <p>OR</p> <p>If submitting a written policy:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Submit a detailed written policy or practice statement for screening the developmental status of each child within 45 days of entering/starting the program. <p>Acceptable type(s) of evidence include:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Developmental screening tool. <p>OR</p> <ul style="list-style-type: none"> <input type="checkbox"/> A detailed written policy or practice statement in parent/family handbook or other official manual/handbook. <p>Attention:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Screening date occurs before enrollment date OR within 45 days of the enrollment date (MUST include full screening date on forms: month, day, year). 	2

CODE	STANDARD	INTENTION	REQUIRED EVIDENCE	POINTS
			<ul style="list-style-type: none"> <input type="checkbox"/> Child's start date MUST be on the form (MUST include full date: month, day, year). <input type="checkbox"/> Redact/remove identifying information (name, address, etc.). <input type="checkbox"/> All pages of the developmental screening form MUST be uploaded; no partial copies. <p><i>* See Important Notes on page 2 for guidance on submitting a copy or excerpt from a written policy or practice statement.</i></p>	
COA 3	<p>Provider uses a developmental screening tool that is valid and reliable.</p>	<p>When providers use a developmental screening tool that has been researched, tested and shown to measure appropriate developmental milestones, they are assured that the results can be used for curriculum planning, as well as a basis to refer families for special educational services.</p> <p>Valid: A screening tool is valid when it measures what we want to measure and not something else.</p> <p>Reliable: A screening tool is reliable when the screening procedure is conducted accurately and consistently over time. The procedure would yield similar results if repeated or if done by a different person.</p>	<p>To meet this Standard:</p> <p>If submitting copies of one of the valid and reliable developmental screening tools from the list below, submit:</p> <ul style="list-style-type: none"> <input type="checkbox"/> One copy of a completed developmental screening form from the list of the valid and reliable developmental screening tools for 1 child. <p>OR</p> <p>If selecting "Other", submit ALL of the following:</p> <ul style="list-style-type: none"> <input type="checkbox"/> One copy of a completed developmental screening form(s) for 1 child. <input type="checkbox"/> Show evidence that the tool is designed for the purpose of screening (not assessment). <input type="checkbox"/> Show evidence that the screening tool is appropriate for use with children between birth and age five. <input type="checkbox"/> Show evidence that the screening tool covers multiple developmental domains (e.g., physical, social and emotional, cognitive, and language). <input type="checkbox"/> Show evidence that the screening tool is valid and reliable (information must be provided about the screening tool's reliability AND validity). <p>Attention:</p> <ul style="list-style-type: none"> <input type="checkbox"/> MUST be a child screening tool (not child assessment tool). <input type="checkbox"/> Redact/remove identifying information (name, address, etc.). <input type="checkbox"/> All pages of the developmental screening form MUST be uploaded; no partial copies. <p>List of accepted valid AND reliable developmental screening tools:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Ages and Stages Questionnaires, Third Edition (ASQ-3) <input type="checkbox"/> Ages and Stages Questionnaires Social-Emotional <input type="checkbox"/> Battelle Developmental Inventory Screening Test <input type="checkbox"/> Brigance Inventories System II 	1

CODE	STANDARD	INTENTION	REQUIRED EVIDENCE	POINTS
			<ul style="list-style-type: none"> <input type="checkbox"/> Brigance Self-Help and Social-Emotional Scales <input type="checkbox"/> Denver Developmental Screening Test (DDST) <input type="checkbox"/> Developmental Indicators for the Assessment of Early Learning 3rd Edition (DIAL 3) <input type="checkbox"/> Early Screening Inventory – Revised (ESI-R) <input type="checkbox"/> Learning Accomplishment Profile-Diagnostic Screens <input type="checkbox"/> Parents’ Evaluation of Developmental Status (PEDS) <input type="checkbox"/> Parents’ Evaluation of Developmental Status-Developmental Milestones (PEDS:DM) <input type="checkbox"/> Preschool and Kindergarten Behavior Scales, Second Edition (PKBS-2) <input type="checkbox"/> Other - additional documentation is required when submitting a tool that is not listed, see details above. 	
COA 4	<p>Provider documents the developmental progress of each child at least 3 times using a child development assessment tool(s) or anecdotal records.</p>	<p>Authentic assessments are done regularly throughout the year, developmental progress is tracked and learning goals are adjusted. This is done for all children in the family child care home, regardless of age, using an age-appropriate tool.</p> <p>Authentic assessment tools can take many forms, including:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Observation notes <input type="checkbox"/> Checklists <input type="checkbox"/> Developmental scales <input type="checkbox"/> Standardized assessment forms <input type="checkbox"/> Work sampling <p>In order to understand the whole child, providers should gather information about each child’s development within all of the following domains:</p>	<p>To meet this Standard:</p> <p>If submitting developmental assessment tools, evidence must include ALL of the following for 1 child:</p> <ul style="list-style-type: none"> <input type="checkbox"/> 3 completed assessment tools for 1 child. MUST be designed for the purpose of assessment (not screening). <p>AND</p> <ul style="list-style-type: none"> <input type="checkbox"/> Assessments are conducted on 3 different dates within the 15 months prior to Standards Inventory submission. <p>AND</p> <ul style="list-style-type: none"> <input type="checkbox"/> Each form MUST be dated at least 3 months apart. <p>AND</p> <ul style="list-style-type: none"> <input type="checkbox"/> At least ONE of the developmental assessment forms MUST contain data regarding ALL of the following developmental domains: <ul style="list-style-type: none"> <input type="checkbox"/> Physical well-being, health, and motor development. <input type="checkbox"/> Social and emotional development. <input type="checkbox"/> Cognition and general knowledge. <input type="checkbox"/> Language, communication, and literacy. <p>OR</p> <p>If submitting anecdotal records, they MUST include ALL of the following:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Submit 3 anecdotal records for 1 child. <p>AND</p> <ul style="list-style-type: none"> <input type="checkbox"/> Each anecdotal record MUST be dated at least 3 months apart. 	2

CODE	STANDARD	INTENTION	REQUIRED EVIDENCE	POINTS
		<ul style="list-style-type: none"> <input type="checkbox"/> Physical well-being, health, and motor development <input type="checkbox"/> Social and emotional development <input type="checkbox"/> Approaches to learning <input type="checkbox"/> Cognition and general knowledge <input type="checkbox"/> Language, communication, and literacy 	<p>AND</p> <ul style="list-style-type: none"> <input type="checkbox"/> Anecdotal records MUST note the child's developmental milestone(s) in ALL of the listed developmental domains (physical, social and emotional, cognitive, and language). <p>Attention:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Uploaded evidence MUST be dated within the 15 months prior to Standards Inventory submission (MUST include full date: month, day, year). <input type="checkbox"/> Redact/remove identifying information (names, addresses, etc.). <input type="checkbox"/> If a program uses a variety of assessment tools throughout the period, a different assessment may be submitted for each timeframe. However, the program MUST submit 3 assessments OR 3 anecdotal records for the same child. <input type="checkbox"/> All pages of the assessment tool MUST be uploaded; no partial copies. 	
COA 5	<p>Provider uses a developmental assessment tool that is valid and reliable.</p>	<p>Valid and reliable assessment tools have been shown to give meaningful information about a child's development and can effectively help identify developmental delays, if any exist.</p> <p>Valid: An assessment is valid when it measures what we want it to measure and not something else.</p> <ul style="list-style-type: none"> <input type="checkbox"/> Reliable: A sound assessment is reliable when the assessment is conducted accurately and consistently over time. The procedure would yield similar results if repeated or if done by different people. 	<p>To meet this Standard: If submitting a copy of one of the valid and reliable developmental assessment tools from the list below, submit:</p> <ul style="list-style-type: none"> <input type="checkbox"/> One copy of a completed developmental assessment tool for 1 child <p>OR</p> <p>If selecting "Other", submit ALL of the following:</p> <ul style="list-style-type: none"> <input type="checkbox"/> One copy of a completed developmental assessment form for 1 child. <input type="checkbox"/> Show evidence that the tool is designed for the purpose of assessment (not screening). <input type="checkbox"/> Show evidence that the assessment tool is appropriate for use with children between birth and age five. <input type="checkbox"/> Show evidence that the assessment tool covers multiple developmental domains (e.g. physical, social and emotional, cognitive, and language). <input type="checkbox"/> Show evidence that the assessment tool is valid and reliable (e.g. reference(s) to applicable studies AND research). <p>Attention:</p> <ul style="list-style-type: none"> <input type="checkbox"/> MUST be a child assessment tool (not child screening tool). <input type="checkbox"/> Redact/remove identifying information (names, addresses, etc.). 	1

CODE	STANDARD	INTENTION	REQUIRED EVIDENCE	POINTS
			<input type="checkbox"/> All pages of the developmental assessment tool MUST be uploaded; no partial copies. List of accepted valid AND reliable developmental assessment tools: <ul style="list-style-type: none"> <input type="checkbox"/> Creative Curriculum Developmental Continuum Assessment <input type="checkbox"/> Bayley Scale of Infant and Toddler Development <input type="checkbox"/> Brigance Inventories <input type="checkbox"/> Galileo Preschool Assessment Scales <input type="checkbox"/> High Scope Child Observation Record (COR) <input type="checkbox"/> Learning Accomplishment Profile-Diagnostic (English or Spanish) <input type="checkbox"/> Mullen Scales of Early Learning <input type="checkbox"/> Ounce Scale <input type="checkbox"/> Work Sampling System <input type="checkbox"/> Teaching Strategies GOLD <input type="checkbox"/> Other - additional documentation is required when submitting a tool that is not listed, see details above. 	
COA 6	Provider and any regular assistants have annual training(s) in child observation and assessment including recognition of developmental milestones, identifying possible developmental delays and linking child observation and assessment to curriculum implementation.	Home providers and their assistants should have regular training that develops and continuously refines all aspects of child development; child observation and assessment; and integrating assessment results into learning goals and experiences, in order to be knowledgeable of and able to implement the latest recommended practices.	<input type="checkbox"/> Evidence in The Aspire Registry must show that at least 60% of family child care staff have attended child observation and assessment training within the 15 months prior to Standards Inventory submission, verified with training certificate. Attention: <i>*See Important Notes on page 2 for guidance on evidence verified in The Aspire Registry.</i>	6
COA 7	Provider can document that child observations and assessments are used to inform instruction that guide curriculum implementation and individual child learning.	Assessment should be used to promote each child's development by planning and providing learning experiences that align with learning goals and help children reach their next developmental milestones.	To meet this Standard, evidence must include ALL of the following: <ul style="list-style-type: none"> <input type="checkbox"/> A detailed written policy or practice statement describing how instruction is tailored to address assessment results, including how instruction addresses the needs of individual children. AND <ul style="list-style-type: none"> <input type="checkbox"/> One copy of assessment results for 1 child. AND	6

CODE	STANDARD	INTENTION	REQUIRED EVIDENCE	POINTS
		<p>There should be a clear connection between the child's needs and the learning experience.</p> <p>Evidence of assessment results may include: conclusions drawn from observations, work samples, checklists, etc., such as:</p> <p>During an observation, I noticed 4 year old child shows interest in using scissors, but holds incorrectly and rips paper. The weekly/daily lesson plan would then indicate the individual child's learning goal and opportunity for cutting with scissors.</p>	<p><input type="checkbox"/> Evidence of having tailored instruction to address the child's assessment results (e.g. activity or lesson plan clearly showing individualization for the specific child).</p> <p>Acceptable type(s) of evidence include:</p> <p><input type="checkbox"/> A detailed written policy or practice statement in parent/family handbook or other official manual/handbook.</p> <p>AND</p> <p><input type="checkbox"/> Assessment results.</p> <p>AND</p> <p><input type="checkbox"/> Activity or lesson plans.</p> <p>Attention:</p> <p><input type="checkbox"/> Redact/remove identifying information (names, addresses, etc.).</p> <p><input type="checkbox"/> Activity or lesson plan(s) MUST be complete; No blank templates.</p> <p><i>* See Important Notes on page 2 for guidance on submitting a copy or excerpt from a written policy or practice statement.</i></p>	

Curriculum Planning & Implementation (CPI) - 20 points

CODE	STANDARD	INTENTION	REQUIRED EVIDENCE	POINTS
CPI 1	Provider has lesson plans that outline learning goals and contain associated intentional activities/experiences.	<p>Written lesson plans are a guide, helping providers plan ahead so that the children in the family child care home can learn at their own pace and in their own way. Lesson plans will help providers be prepared for all the children, whether they are infants or school-age children; the home's learning environment will be safe for the youngest, while challenging for the oldest and yet comfortable and familiar. Lesson plans will also help providers</p>	<p>To meet this Standard, evidence must contain ALL of the following:</p> <p><input type="checkbox"/> 2 weekly lesson plans (MUST be 2 full weeks) OR 2 daily lesson plans.</p> <p>AND</p> <p><input type="checkbox"/> Description of the learning experience.</p> <p>AND</p> <p><input type="checkbox"/> Developmental goals and/or learning goals.</p> <p>AND</p> <p><input type="checkbox"/> Materials needed for the learning experience/lesson plan(s).</p> <p>AND</p> <p><input type="checkbox"/> MUST show opportunities for individualized learning.</p> <p>Acceptable type(s) of evidence include:</p> <p><input type="checkbox"/> Lesson plans.</p> <p>OR</p>	2

CODE	STANDARD	INTENTION	REQUIRED EVIDENCE	POINTS
		remember what worked and what didn't, what children were most interested in, and think about what to do next. There are many ways to plan lessons.	<input type="checkbox"/> Daily plans. Attention: <input type="checkbox"/> Lesson plan or daily lesson plan(s) MUST be complete; No blank templates.	
CPI 2	Provider uses a written curriculum or curriculum framework that is developmentally appropriate and addresses the key domains of child development.	The family child care provider's curriculum or curriculum framework is written, organized and references the five domains of child development, in order to promote optimal child development.	To meet this Standard, evidence MUST contain ALL of the following: <input type="checkbox"/> One copy of the curriculum OR curriculum framework used by the provider. Either: <input type="checkbox"/> Copy of pages from the curriculum referencing ALL key domains of child development (physical, social and emotional, cognitive, and language). OR <input type="checkbox"/> One copy of a curriculum framework referencing ALL key domains of child development (physical, social, emotional, cognitive, and language). AND <input type="checkbox"/> One source of evidence of the provider's use of curriculum or curriculum framework. Acceptable type(s) of evidence of the provider's use of the curriculum or curriculum framework include: <input type="checkbox"/> Completed lesson plan(s). OR <input type="checkbox"/> A detailed written policy or practice statement from an official handbook/manual, explaining how curriculum is appropriately used in lesson plans. Attention: <input type="checkbox"/> Any submitted evidence MUST be complete and include references to the curriculum so that one can tell it is based on the curriculum. <i>For example, if coding is used, an explicit statement on how curriculum is appropriately transferred to lesson plans is expected.</i> <input type="checkbox"/> Lesson plans MUST be complete; No blank templates. <i>* See Important Notes on page 2 for guidance on submitting a copy or excerpt from a written policy or practice statement.</i>	3
CPI 3	Provider uses a written curriculum or curriculum	Using a curriculum or curriculum framework this is	To meet this Standard, submit ONE of the following:	3

CODE	STANDARD	INTENTION	REQUIRED EVIDENCE	POINTS
	<p>framework curriculum that is evidence-based, meaning research has been conducted regarding the relationship between the curriculum and children’s learning.</p>	<p>evidence-based, gives the provider and families assurance that learning experiences that are guided by the curriculum will effectively support children’s learning for each key domain of child development.</p> <p>Evidence-based means the relationship between the curriculum and child outcomes has been proven effective through published, scientifically-based studies.</p>	<p><input type="checkbox"/> Cover page of the curriculum used by the program, including the title of the curriculum (if applicable), from the list of evidence-based curricula below.</p> <p>OR</p> <p>If selecting "Other", submit ALL of the following:</p> <p><input type="checkbox"/> Cover page of the curriculum or curriculum framework, including the title of the curriculum (if applicable).</p> <p><input type="checkbox"/> Evidence that curriculum or curriculum framework is evidence-based; meaning research has been conducted regarding the relationship between the curriculum and children’s learning.</p> <p><input type="checkbox"/> Reference(s) to applicable studies and research.</p> <p>List of accepted evidence-based curricula:</p> <p><input type="checkbox"/> Before ABCs: Promoting School Readiness in Infants and Toddlers.</p> <p><input type="checkbox"/> Caring for Infants and Toddlers in Groups: Developmentally Appropriate Practice (Second Edition), Zero to Three.</p> <p><input type="checkbox"/> Cradling Literacy.</p> <p><input type="checkbox"/> Creative Curriculum.</p> <p><input type="checkbox"/> Create Curriculum for Infants, Toddlers, and Two’s.</p> <p><input type="checkbox"/> Family Childcare Curriculum.</p> <p><input type="checkbox"/> High Scope Curriculum.</p> <p><input type="checkbox"/> The Montessori Method.</p> <p><input type="checkbox"/> Other –Additional documentation is required when submitting a tool that is not listed, see details above.</p>	
<p>CPI 4</p>	<p>Program uses a written curriculum or curriculum framework that addresses the child development areas of learning outlined in State or Federal guidance resources; the NYS Early Learning Guidelines (2019) and/or The NYS PreKindergarten Learning Standards (2019) and/or the Head Start Early Learning</p>	<p>The written curriculum is aligned to major state initiatives that reference children’s development and learning needs.</p>	<p>To meet this Standard, evidence MUST include the following:</p> <p><input type="checkbox"/> One source of evidence of the curriculum or curriculum framework used by the provider. Either:</p> <ul style="list-style-type: none"> ○ Cover page of curriculum used by the program, including title of the curriculum (if applicable). <p>OR</p> <ul style="list-style-type: none"> ○ One copy of a curriculum framework used by the program, MUST include ALL key domains of child development (physical, social, emotional, cognitive, and language). <p>AND</p> <p><input type="checkbox"/> A completed curriculum crosswalk, statement, or chart demonstrating the <u>alignment</u> between the curriculum/curriculum framework (used by the provider) and all child development</p>	<p>4</p>

CODE	STANDARD	INTENTION	REQUIRED EVIDENCE	POINTS
	Outcomes Framework: Ages Birth to Five		<p>areas of learning (domains and sub-domains) outlined in ONE of State or Federal guidance resources listed below:</p> <ul style="list-style-type: none"> • The NYS Early Learning Guidelines (2019). • The NYS Prekindergarten Learning Standards (2019). • Head Start Early Learning Outcomes Framework: Ages Birth to Five. <p>Attention:</p> <p><input type="checkbox"/> If a written statement or chart is submitted as evidence of alignment, it MUST clearly note how ALL child development areas of learning in the curriculum/framework (used by the provider) <u>align</u> with ALL child development areas of learning outlined in the chosen State or Federal guidance resources.</p>	
CPI 5	The curriculum or curriculum framework is adapted to be culturally competent by incorporating into the learning environment culturally sensitive books, themes and projects.	<p>Written curriculum recognizes the diversity of cultures, linguistic abilities, family units, disabilities, and religions that exist within the family child care home and throughout the world and fosters a sense of awareness, empathy, understanding, and acceptance of these differences.</p> <p>Additional Information:</p> <ul style="list-style-type: none"> • Curriculum guides teachers in planning and implementing learning experiences related to diverse cultures • Diverse elements of the world are incorporated into classroom and learning experiences • Curriculum provides opportunities for children to confront biases 	<p>To meet this Standard, submit ONE of the following:</p> <p><input type="checkbox"/> 2 different detailed <u>activities</u>—MUST reference culturally sensitive books, themes and projects.</p> <p>OR</p> <p><input type="checkbox"/> 2 different detailed <u>lesson plans</u>—MUST reference culturally sensitive books, themes and projects.</p> <p>Attention:</p> <p><input type="checkbox"/> Redact/remove identifying information of child/children from submitted evidence.</p> <p><input type="checkbox"/> Activity or lesson plan(s) MUST be complete; No blank templates.</p>	2

CODE	STANDARD	INTENTION	REQUIRED EVIDENCE	POINTS
CPI 6	Provider and any assistants receive annual training to implement the curriculum.	Ongoing training is needed to develop and continuously refine the providers' abilities to effectively implement curricula activities.	<input type="checkbox"/> Evidence in The Aspire Registry that at least 60% of the staff of family child care program have attended Curriculum Implementation training within the 15 months prior to Standards Inventory submission, verified with a training certificate. Attention: <i>*See Important Notes on page 2 for guidance on evidence verified in The Aspire Registry.</i>	3
Does the provider currently serve at least one child with an IFSP or IEP? <input type="checkbox"/> If yes, continue <input type="checkbox"/> If no, go to Physical Well-being & Health				
CPI 7	Provider implements appropriate modifications and provides additional supports to enable children with IFSPs or IEPs more effective inclusion in the full range of the program's activities.	When children with special needs participate in a family child care home, it is important for the providers to modify and support those children's learning, using IEPs and IFSPs for guidance, in order to provide a more effective, inclusive environment that gives children as much access to the full range of experiences with the least restrictions.	To meet this Standard, evidence MUST contain ALL of the following: <ul style="list-style-type: none"> <input type="checkbox"/> One copy of a detailed written statement, self-written by the provider, specifying what is needed for the child's individualized learning AND early childhood education experience. <input type="checkbox"/> Statement references 1 child currently enrolled with an IFSP/IEP. <input type="checkbox"/> Statement references modifications made for the child and/or family by the provider. Attention: <ul style="list-style-type: none"> <input type="checkbox"/> Redact/remove identifying information of child from submitted evidence. <input type="checkbox"/> DO NOT include the actual IEP/IFSP for the child. 	3

Physical Well-being & Health (PH) - 8 points

CODE	STANDARD	INTENTION	REQUIRED EVIDENCE	POINTS
Does the provider currently serve at least one child under 12 months of age? <input type="checkbox"/> If yes, continue <input type="checkbox"/> If no, go to PH 2				
PH 1	Program provides infants daily opportunities to move freely under adult supervision to explore indoor and outdoor environments, including tummy time when awake.	Infants need freedom of movement, including tummy time, to build strength and motor skills.	To meet this Standard, submit a written policy or practice statement that includes ALL of the following: <ul style="list-style-type: none"> <input type="checkbox"/> Supervised daily exercise/movement opportunities BOTH indoors and outdoors. AND <ul style="list-style-type: none"> <input type="checkbox"/> Supervised free movement on stomach while awake and alert. Acceptable type(s) of evidence include: <ul style="list-style-type: none"> <input type="checkbox"/> A detailed written policy or practice statement in parent/family handbook or other official manual/handbook. <i>Pictures are not allowed unless they are picture(s) of the required</i>	1

CODE	STANDARD	INTENTION	REQUIRED EVIDENCE	POINTS
			<p><i>written documentation.</i></p> <p>Attention:</p> <p><input type="checkbox"/> * See Important Notes on page 2 for guidance on submitting a copy or excerpt from a written policy or practice statement.</p>	
<p>Does the provider currently serve at least one child 12 months of age or older? <input type="checkbox"/> If yes, continue <input type="checkbox"/> If no, go to PH 3</p>				
<p>PH 2</p>	<p>Program provides opportunities for toddlers and/or preschoolers to have at least 15 minutes of developmentally appropriate, structured and unstructured, moderate to vigorous physical activity (both inside and outside) for every hour they are in care. For example, in a 3 hour program, children should have at least 45 minutes of physical activity in total, not necessarily continuously.</p>	<p>Provider should support the social-emotional, health, physical, and fine and gross motor development of children through active play. Multiple daily opportunities should be offered for structured and unstructured physical activity.</p>	<p>To meet this Standard, evidence MUST include specific examples of the experiences for ALL of the following:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Structured physical activity, teacher-led (MUST include name of structured activity and description). <input type="checkbox"/> Unstructured physical activity/free play (MUST include name of unstructured activity and description). <input type="checkbox"/> Indoor play. <input type="checkbox"/> Outdoor play (weather permitting). <input type="checkbox"/> At least 15 minutes of physical activity is provided for every hour children are in care including a combination of both indoor and outdoor experiences. <p>Acceptable type(s) of evidence include:</p> <ul style="list-style-type: none"> <input type="checkbox"/> A detailed policy or practice statement in parent/family handbook or other official manual/handbook. <p>OR</p> <ul style="list-style-type: none"> <input type="checkbox"/> A detailed daily schedule or plan. <p>Attention:</p> <p>Pictures are not allowed unless they are picture(s) of the required written documentation.</p> <p><i>* See Important Notes on page 2 for guidance on submitting a copy or excerpt from a written policy or practice statement.</i></p> <p>Note: To meet the Standard, program provides at least 15 minutes of developmentally appropriate, structured and unstructured, moderate to vigorous physical activity (including a combination of indoor and outdoor experiences) for every hour children are in care. For example, in a 3-hour program, children should have at least 45 minutes of physical activity in total, not necessarily continuously.</p>	<p>1</p>
<p>PH 3</p>	<p>Provider has a policy that details screen time for children, including that screen</p>	<p>Children’s access to television/video should be nonexistent for infants and toddlers and limited to 30</p>	<p>To meet this Standard, written evidence MUST reference the following:</p>	<p>2</p>

CODE	STANDARD	INTENTION	REQUIRED EVIDENCE	POINTS
	<p>time time is never used for children birth to age 2. For children ages 2 to 5, there is no more than 30 minutes once a week of high quality educational or movement-based commercial-free programming and screen time is never used during nap and meal time.</p>	<p>minutes per week for preschoolers so as to reduce the harmful effects of screen time and commercial marketing on health, learning, behavior and sleep.</p>	<p><input type="checkbox"/> Written policy that states "no screen time" is provided for any age group in the program.</p> <p>OR</p> <p><input type="checkbox"/> Written policy that references ALL of the following:</p> <ul style="list-style-type: none"> • No screen time for children birth to age 2 (if applicable). • For children ages 2-5 (if applicable): <ul style="list-style-type: none"> ○ 30 minutes/ per week maximum for ALL types of screen time. ○ No screen time during naps. ○ No screen time during meals. ○ All screen time is quality educational and/or movement based. ○ No commercial advertising. <p>Attention: <i>* See Important Notes on page 2 for guidance on submitting a copy or excerpt from a written policy or practice statement.</i></p>	
<p>PH 4</p>	<p>Provider promotes the consumption of meals and snacks that meet the Child and Adult Care Food Program (CACFP) meal pattern for the ages served.</p>	<p>Nutrition is important to children's growth and development. Childhood is also a time to teach nutrition and healthy habits that will last a lifetime. Menus that comply with the CACFP meal pattern requirements meet children's nutrition, growth and developmental needs.</p> <p>There must be a clear link between CACFP guidelines and the meal pattern (portion size and components for meals and snacks) on menus.</p> <p>For more information about CACFP meal patterns, visit the USDA Food and Nutrition website for family day care homes.</p>	<p>To meet this Standard, written evidence MUST reference the following:</p> <p>IF PROGRAM PARTICIPATES IN CACFP</p> <p><input type="checkbox"/> One source of evidence of participation in CACFP.</p> <p>Acceptable types of evidence (MUST include your CACFP contract number):</p> <ul style="list-style-type: none"> <input type="checkbox"/> Most recent CACFP billing. <input type="checkbox"/> Most recent CACFP reimbursement check. <input type="checkbox"/> Most recent correspondence from CACFP sponsor (related to monitoring visit). <input type="checkbox"/> Approved CACFP contract. <ul style="list-style-type: none"> ○ Note: Menus, meal counts or attendance forms will <u>NOT</u> be accepted as evidence. <p>OR</p> <p>IF PROGRAM DOES NOT PARTICIPATE IN CACFP, evidence MUST include ALL of the following:</p> <ul style="list-style-type: none"> <input type="checkbox"/> 1 week of detailed menus for all meals and snacks served in the program. <input type="checkbox"/> Menus MUST show compliance with all CACFP minimum meal pattern components including: food components and minimum requirements/serving size for all meals and snacks served (For 	<p>2</p>

CODE	STANDARD	INTENTION	REQUIRED EVIDENCE	POINTS
PH 5	Provider implements a program-wide obesity prevention program.	It is important for providers to establish program-wide goals that instill in children, families, and staff, the importance of healthy, active living and to provide them with the tools to adopt healthy habits.	<p>information on the CACFP nutrition standards for meals and snacks served in CACFP, type National CACFP Sponsors Association Meal Pattern Guidance in the search bar).</p> <p>To meet this Standard, written evidence must reference ALL of the following:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Adoption and implementation of a program-wide healthy active living program as described in an official manual/handbook. <p>AND</p> <ul style="list-style-type: none"> <input type="checkbox"/> Detailed plan (MUST include components for children, families, and staff). <p>Submit ONE of the acceptable types of evidence:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Completed program assessment tool and a detailed action plan <u>with</u> timeline(s)for implementation. <p>OR</p> <ul style="list-style-type: none"> <input type="checkbox"/> Action plan(s) <u>with</u> detailed timeline(s)for implementation. <p>OR</p> <ul style="list-style-type: none"> <input type="checkbox"/> Goal statement(s) <u>with</u> detailed timeline(s)for implementation. <p>OR</p> <ul style="list-style-type: none"> <input type="checkbox"/> If your program is already implementing a program-wide healthy active living program, submit a detailed outline of the program that explains the tools provided for children, families, and staff to adopt healthy habits. <p>Attention: <i>* See Important Notes on page 2 for guidance on submitting a copy or excerpt from a written policy or practice statement.</i></p>	1
PH 6	Provider attends training regarding implementation of the program-wide obesity prevention program.	Provider is trained to implement a formal obesity prevention program.	<ul style="list-style-type: none"> <input type="checkbox"/> Evidence in The Aspire Registry that the provider has attended training regarding implementation of the program-wide obesity prevention program within the 15 months prior to Standards Inventory Submission, verified with training certificate. <p>Attention: <i>*See Important Notes on page 2 for guidance on evidence verified in The Aspire Registry.</i></p>	1

FAMILY ENGAGEMENT

Research Rationale: *There is substantial evidence that parent involvement and parent-provider communication is important for high quality early childhood education and that parent-involvement is related to child development outcomes. Parent-provider communication in the parent’s dominant language is necessary for optimum results.*

Communication (C) - 32 points

CODE	STANDARD	INTENTION	REQUIRED EVIDENCE	POINTS
Does the provider currently serve at least one child under 12 months of age? <input type="checkbox"/> If yes, continue <input type="checkbox"/> If no, go to C 2				
C 1	Provider communicates with parents of infants in writing on a daily basis about care giving routines, such as feeding, sleeping, and diapering/toileting.	It is important to keep families informed as to the health and schedule of their child on a daily basis. Verbal communications are great, but not enough to ensure that parents have the information they need at the end of a busy day, when their infants might be fussy and need their full attention.	<p>To meet this Standard, the program MUST communicate with parents of infants, in writing, on a daily basis. Evidence MUST include ALL of the following:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Completed forms for 1 infant that references ALL of the following care routines: <ul style="list-style-type: none"> <input type="checkbox"/> Times of day for feeding. <input type="checkbox"/> Times of day for sleeping. <input type="checkbox"/> Times of day for diapering. <p>AND</p> <ul style="list-style-type: none"> <input type="checkbox"/> A detailed written policy or practice statement in parent/family handbook describing how written reports/forms are shared with families on a daily basis (specific to infants under 12 months of age). <p>Attention:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Redact/remove identifying information (names, addresses, etc.). <p><i>* See Important Notes on page 2 for guidance on submitting a copy or excerpt from a written policy or practice statement.</i></p>	3
C 2	Program communicates with families in a comprehensive, written format about the program’s history, philosophy, admissions policies, other procedures, applicable regulations, and parent involvement opportunities.	<input type="checkbox"/> Important program information and policies should be written down, periodically updated and distributed to families.	<p>To meet this Standard, evidence MUST include ALL of the following information:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Program’s history (include details such as opening date of program, etc.). <input type="checkbox"/> Admissions policies. <input type="checkbox"/> Specific opportunities for parent/family involvement. <p>Acceptable type(s) of evidence include:</p> <ul style="list-style-type: none"> <input type="checkbox"/> A detailed written policy or practice statement in parent/family handbook. 	8

CODE	STANDARD	INTENTION	REQUIRED EVIDENCE	POINTS
			<p>OR</p> <ul style="list-style-type: none"> <input type="checkbox"/> Handouts. <p>OR</p> <ul style="list-style-type: none"> <input type="checkbox"/> Website posting(s). <p>Attention: <i>* See Important Notes on page 2 for guidance on submitting a copy or excerpt from a written policy or practice statement.</i></p>	
C 3	Provider periodically communicates in writing with families about program and child activities and other pertinent information.	It is important to regularly share information about general program events and children’s activities with families so that they are aware of activities and may prepare or plan to participate. Information should be presented in a format easily accessible to families and translated, if necessary.	<p>To meet this Standard, evidence MUST include ALL of the following:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Copies of 2 written sources of communications. <input type="checkbox"/> Evidence clearly indicates that information was communicated on 2 DIFFERENT dates, within the 15 months before Standards Inventory submission (MUST include full date: month, day, year). <input type="checkbox"/> MUST reference the specific nature of general program events and child activities. <p>Acceptable type(s) of evidence include:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Newsletters. <p>OR</p> <ul style="list-style-type: none"> <input type="checkbox"/> E-newsletters. <p>OR</p> <ul style="list-style-type: none"> <input type="checkbox"/> E-mails. <p>OR</p> <ul style="list-style-type: none"> <input type="checkbox"/> Website postings. <p>OR</p> <ul style="list-style-type: none"> <input type="checkbox"/> Text messages to families. <p><i>Pictures are not allowed unless they are picture(s) of the required written documentation.</i></p> <p>Attention:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Uploaded evidence MUST be dated within the 15 months prior to Standards Inventory submission (MUST include full date: month, day, year). 	4

CODE	STANDARD	INTENTION	REQUIRED EVIDENCE	POINTS
C 4	Provider meets one-on-one with parents about their individual child's development at least twice a year.	Children grow fast and sometimes behave differently at home and the provider's child care. Therefore, it is important for families and providers to intentionally meet at least twice a year for a two-way discussion about their child's development, including physical well-being, health, and motor development; social and emotional development; approaches to learning; cognitive and general knowledge; and language, communication, and literacy. Providers and families will be able to use this shared knowledge to support learning at home and in the family child care home.	<p>To meet this Standard, evidence MUST reference ALL of the following for 1 child:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Evidence for 1 child that demonstrates that meetings occurred on at least 2 different dates (twice a year). <p>AND</p> <ul style="list-style-type: none"> <input type="checkbox"/> 2 meetings occurred within the 15 months prior to Standards Inventory submission (MUST include full date: month, day, year). <p>Acceptable type(s) of evidence include:</p> <ul style="list-style-type: none"> <input type="checkbox"/> 2 dated meeting invitations to family for the 1 child. <p>OR</p> <ul style="list-style-type: none"> <input type="checkbox"/> 2 dated conference announcement(s) to family for the 1 child. <p>OR</p> <ul style="list-style-type: none"> <input type="checkbox"/> 2 dated sign-in sheet(s) for the meeting with family for the 1 child. <p>Attention:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Redact/remove identifying information (names, addresses, etc.). 	4
C 5	Provider shares information with parents about the provider's, and any assistant's, educational qualifications and professional experience.	Families are informed, in writing, of the qualifications of the people who are taking care of and providing learning experiences to their children so they can trust and develop significant positive relationships.	<p>To meet this Standard, evidence must include ALL of the following:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Written communication to families about staff qualifications AND experience that reference BOTH: <ul style="list-style-type: none"> <input type="checkbox"/> Educational qualifications AND experience of the provider/owner/on-site provider. <p>AND</p> <ul style="list-style-type: none"> <input type="checkbox"/> Educational qualifications AND experience for at least 1 CURRENT assistant, if applicable. <p>Acceptable type(s) of evidence include:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Parent/family handbook excerpt (if submitting an excerpt from a handbook, the information MUST be specific to CURRENT staff members). <p>OR</p> <ul style="list-style-type: none"> <input type="checkbox"/> Individual staff member profiles. <p>OR</p> <ul style="list-style-type: none"> <input type="checkbox"/> Website (screenshot of relevant webpage). 	4

CODE	STANDARD	INTENTION	REQUIRED EVIDENCE	POINTS
			<p>Attention:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Redact/remove identifying information (names, addresses, etc.). <input type="checkbox"/> MUST identify/label documentation for each staff member, provider/owner/onsite provider and assistant. 	
C 6	Provider provides written information about family resources and supports, such as information on child development, oral health, child health insurance, tax credits, and child care financial assistance.	It is helpful to families when family child care programs provide information about family resources and supports in the community.	<p>To meet this Standard, evidence must include ALL of the following:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Written statement such as a note to families or statement in parent/family handbook referencing available resources and supports. <p>AND</p> <ul style="list-style-type: none"> <input type="checkbox"/> Copies of 3 different resources/supports offered, MUST be different topics. <p>Acceptable type(s) of sample resources include:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Informational flyers, pamphlets about child development, oral health, child health insurance, tax credits, child care financial assistance, or other topics of interest. <p>Attention:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Resources and supports MUST be accessible to families. <input type="checkbox"/> Providing web links to online resources alone will not suffice, the program MUST upload 3 copies of resources/supports offered. <p><i>* See Important Notes on page 2 for guidance on submitting a copy or excerpt from a written policy or practice statement.</i></p>	9

Family Involvement & Support (FIS) - 32 points

CODE	STANDARD	INTENTION	REQUIRED EVIDENCE	POINTS
Does the provider currently serve at least one child under 12 months of age? <input type="checkbox"/> If yes, continue <input type="checkbox"/> If no, go to FIS 2				
FIS 1	Provider supports breastfeeding.	There are proven health benefits and development advantages associated with breastfeeding. Providers should support mothers who desire to provide breast milk for their children.	<p>To meet this Standard, evidence MUST reference ONE of the following:</p> <p>IF PROGRAM PARTICIPATES IN CACFP</p> <ul style="list-style-type: none"> <input type="checkbox"/> Submit a current CACFP Breastfeeding Friendly Certificate from CACFP only. <input type="checkbox"/> If certificate has expired, the provider/owner/on-site provider MUST be active on the CACFP website. 	2

CODE	STANDARD	INTENTION	REQUIRED EVIDENCE	POINTS
			<p>https://www.health.ny.gov/prevention/nutrition/cacfp/breastfeeding_homes/.</p> <p>OR</p> <p>IF PROGRAM DOES NOT PARTICIPATE IN CACFP, submit ALL of the following:</p> <ul style="list-style-type: none"> <input type="checkbox"/> A completed copy of Day Care Home Breastfeeding Friendly Self-Assessment DOH-5186 (English)/ DOH-5186es (Spanish); dated within the 15 months prior to Standards Inventory submission (MUST include full date: month, day, year). <input type="checkbox"/> A copy of the program's breastfeeding written policy. 	
FIS 2	Provider offers family social gatherings that intentionally include other family members, in addition to parents.	Engaging extended family members in the program's activities sends the message that every member of each child's family and communities are important to children's development.	<p>To meet this Standard:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Submit written evidence of intentionally having offered social gatherings inclusive of extended family members in addition to parents (e.g., grandparents, siblings, uncles, aunts, etc.). <p>Acceptable type(s) of evidence include:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Announcements, invitations, newsletters, or flyers to parents AND families. <p>OR</p> <ul style="list-style-type: none"> <input type="checkbox"/> Calendar showing gathering(s) with event details for parents AND families. <p><i>Pictures are not allowed unless they are picture(s) of the required written documentation.</i></p>	3
FIS 3	Provider offers volunteering opportunities for families, such as help with field trips and opportunities to share talents and expertise.	It is important to provide families with opportunities to participate in their child's program. Allowing family members to volunteer will enhance the trust and partnership between families and care givers.	<p>To meet this Standard:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Written evidence MUST show that the program offers opportunities for parents/family members to volunteer or that families can initiate volunteer opportunities, that will then be considered by the provider. <p>Acceptable type(s) of evidence include:</p> <ul style="list-style-type: none"> <input type="checkbox"/> A detailed written policy or practice statement in parent/family handbook. <p>OR</p> <ul style="list-style-type: none"> <input type="checkbox"/> Memo, announcement, invitation, or flyer. <p>OR</p> <ul style="list-style-type: none"> <input type="checkbox"/> Consent forms (e.g. chaperone for field trips). 	3

CODE	STANDARD	INTENTION	REQUIRED EVIDENCE	POINTS
			<p><i>Pictures are not allowed unless they are picture(s) of the required written documentation.</i></p> <p>Attention:</p> <p><i>* See Important Notes on page 2 for guidance on submitting a copy or excerpt from a written policy or practice statement.</i></p>	
FIS 4	Families complete a program evaluation or survey annually and results are used for program improvement.	Providers, who are looking to improve their family child care homes, welcome feedback about the program’s strengths and weaknesses from families. This information is analyzed and used to improve the program.	<p>To meet this Standard, evidence MUST include ALL of the following:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Copies of 2 completed surveys or other evaluation tool(s) from parents/families. <p>AND</p> <ul style="list-style-type: none"> <input type="checkbox"/> Summary of survey results for the program. <p>AND</p> <ul style="list-style-type: none"> <input type="checkbox"/> Improvement/action plan based on results from completed surveys or evaluations; required, no exceptions. <p>Attention:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Uploaded evidence MUST be dated within the 15 months prior to Standards Inventory submission (MUST include full date: month, day, year). <input type="checkbox"/> Redact/remove identifying information (names, addresses, etc.). 	4
FIS 5	Provider completes a self-assessment on family-responsive practices using a tool, such as the Center for the Study of Social Policy’s Family Strengthening Self-Assessment tool, and results are used for program improvement.	Providers should regularly assess whether their responsiveness to families and the supports they need are effective. The results will be used to determine improvements to the family child care program’s responsive practices.	<p>To meet this Standard, evidence MUST include BOTH of the following:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Strengthening Families: Self-Assessment for Family Child Care Programs tool on family responsiveness that is at least 50% completed; required, no exceptions. <p>AND</p> <ul style="list-style-type: none"> <input type="checkbox"/> One copy of the Action Plan for Program Improvement based on the assessment results; required, no exceptions. <p>Attention:</p> <p>To access self-assessments AND improvement plans, see the Center for the Study of Social Policy website: https://cssp.org/our-work/projects/self-assessments-for-programs/.</p>	5
FIS 6	Provider and any assistants complete a self-assessment	Provider’s family child care program is actively working to	To meet this Standard, evidence must include BOTH of the following:	5

CODE	STANDARD	INTENTION	REQUIRED EVIDENCE	POINTS
	of cultural awareness/Anti-Bias Education using an evidence-based tool. The results are used for program improvement.	improve its cultural and linguistic competency so that it can work with and support diverse families.	<input type="checkbox"/> One copy of a completed cultural awareness/Anti-Bias Education self-assessment tool. AND <input type="checkbox"/> One copy of a written improvement or action plan based on assessment results; required, no exceptions. Acceptable tools include: <input type="checkbox"/> The National Association for the Education of Young Children (NAEYC) Pathways to Cultural Competence Checklist. OR <input type="checkbox"/> Self-Assessment Checklist for Personnel Providing Services and Supports in Early Intervention and Early Childhood Settings from the National Center on Cultural Competence. OR <input type="checkbox"/> Other: MUST be an evidence-based tool on cultural awareness/Anti-Bias Education: <i>If submitting "other" a summary of findings or strategic plans alone will not suffice, MUST also submit a copy of the tool used to assess cultural awareness.</i>	
Does the provider currently serve at least one child whose home language is not English? <input type="checkbox"/> If yes, continue <input type="checkbox"/> If no, go to Transitions				
FIS 7	Provider and any assistants greet children and families in the home languages of the children and parents.	Staff supports the needs of children and families whose home language is not English.	To meet this Standard, evidence MUST include ALL of the following: <input type="checkbox"/> List of ALL of the children's home language(s) spoken other than English. AND <input type="checkbox"/> One copy of a detailed written policy or practice statement explaining how the program greets children and families in their home language(s) - MUST provide examples. Attention: <i>* See Important Notes on page 2 for guidance on submitting a copy or excerpt from a written policy or practice statement.</i>	2
FIS 8	Provider has access to at least one English speaker who also speaks those	To support the needs of children who speak a home language other than English	To meet this Standard, evidence MUST include ALL of the following:	2

CODE	STANDARD	INTENTION	REQUIRED EVIDENCE	POINTS
	languages who can assist with translation or other requests (e.g., another parent, community volunteer, or neighbor).	and to communicate effectively with families about their children, a provider needs to have utilized someone who speaks both English and the language spoken by the family.	<input type="checkbox"/> List of ALL of the children’s home language(s) spoken other than English. AND <input type="checkbox"/> Evidence that staff speaks language(s) of majority of children. AND <input type="checkbox"/> Evidence that person(s) noted as “staff” are employed at the program. Acceptable types of evidence demonstrating that staff speaks language(s) of majority of children include: <input type="checkbox"/> Attestation from person(s) who speaks the dominant language. OR <input type="checkbox"/> Resume(s) of current staff showing language fluency. OR <input type="checkbox"/> Evidence of bi-lingual CDA. OR <input type="checkbox"/> Staff transcripts. OR <input type="checkbox"/> Program Information Report (Head Start).	
FIS 9	Provider completes training to address the needs of Emergent Multilingual Learners (EML).	Providers will be more capable of supporting the needs of children and families whose home language is not English, if they participate in regular training to develop and refine their knowledge of practices related to English Language Learners (ELL).	<input type="checkbox"/> Evidence in The Aspire Registry that at least the provider has attended training that addresses the needs of Emergent Multilingual Learners (EML) within the 15 months prior to Standards Inventory submission, verified with training certificate. Attention: <i>*See Important Notes on page 2 for guidance on evidence verified in The Aspire Registry.</i>	6

Transitions (T) - 8 points

CODE	STANDARD	INTENTION	REQUIRED EVIDENCE	POINTS
T 1	Provider has a written policy and procedures to support children and families transitioning into the home childcare setting, which includes providing information on separation and attachment.	Separation is difficult for both young children and their parents/families. Providers should be knowledgeable about the meaning of separation at different ages and have the skills to help both children and parents/families to understand and cope with separation. Having a specific written policy demonstrates a provider's awareness of transitions and acknowledges its significance to families.	<p>To meet this Standard, evidence MUST include a detailed written policy or practice statement referencing ALL of the following:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Explain to families the ways the program supports families when starting at the program. <p>AND</p> <ul style="list-style-type: none"> <input type="checkbox"/> Explain and provide examples of separation/separation anxiety. <p>AND</p> <ul style="list-style-type: none"> <input type="checkbox"/> Explain and provide examples of Attachment Theory. <p>Acceptable type(s) of evidence include:</p> <ul style="list-style-type: none"> <input type="checkbox"/> A detailed written policy or practice statement in parent/family handbook. <p>Attention:</p> <ul style="list-style-type: none"> <input type="checkbox"/> In addition to the required written policy or practice statement, the program may also submit printed articles on separation and attachment; printed articles alone are not accepted. <p><i>* See Important Notes on page 2 for guidance on submitting a copy or excerpt from a written policy or practice statement.</i></p>	4
T 2	Provider has a written policy and procedures to support children and families transitioning out of the home child care setting including when children transition to another care or educational setting (e.g., other family home, kindergarten).	A provider should follow procedures to help children and their families anticipate and adjust to new routines. Careful implementation and clarity in written policies and procedures reduce the trauma and upset. When possible, families should be included in the planning for changes in their child's routine or primary caregiver. Additionally, in the case of children going to Kindergarten, providers should have resources to aid families in making this large transition to school.	<p>To meet this Standard, evidence MUST explain and include examples of the ways the program supports families when children are:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Transitioning out of their family child care program and into another program or educational setting (e.g., another child care program or kindergarten). <p>Acceptable type(s) of evidence include:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Detailed written policy or practice statement in parent/family handbook. <p>OR</p> <ul style="list-style-type: none"> <input type="checkbox"/> Detailed written procedures in parent/family handbook. <p>OR</p> <ul style="list-style-type: none"> <input type="checkbox"/> Detailed sample transition plan(s). <p>Attention:</p> <p><i>* See Important Notes on page 2 for guidance on submitting a copy or excerpt from a written policy or practice statement.</i></p>	4

QUALIFICATIONS AND EXPERIENCE

Research Rationale: *There is a substantial amount of evidence that teacher education and training are related to other measures of program quality and to child outcomes. There is substantial evidence that director professional development is related to other measures of program quality and limited evidence that director professional development is related to child outcomes. While there is limited and conflicting evidence that experience of staff is related to other measures of program quality or child development outcomes, consumers value experience.*

Note: Documentation pertaining to professional qualifications and experiences are collected through The Aspire Registry for New York’s early childhood education workforce for verification. Provider and any assistants must manage their Individual Profiles in Aspire to submit documentation pertaining to education, professional qualification and experience for verification in Aspire. Points are earned for the highest degree completed AND for each of several credentials AND for experience. The provider earns points in the Provider Management Qualifications and Experience sections. Both the provider and any assistants earn points in the Provider and Assistants Qualifications and Experience sections. If there is an assistant, these points are weighted by percent of time worked by the provider and the assistant, and averaged. To be equitable between group family and family child care, the provider’s qualifications and experience count more heavily than the assistant’s.

Providers must review their Qualifications & Experience Report, available in their QUALITYstarsNY Profile, and confirm that it accurately reflects all qualifications, education, and trainings for themselves and their staff (if applicable) BEFORE submitting their Standards Inventory.

Provider Management Qualifications - 12 points

CODE	STANDARD	INTENTION	REQUIRED EVIDENCE	POINTS
PMQ 1 - 4	<p>PMQ 1: 15 clock-hours in ECE-related management and/or administration (or for Group FCC in supervision)</p> <p>OR</p> <p>PMQ 2: 3 to 5 credits (4.5-7.5 CEUs) in ECE-related leadership, management and/or administration (or for Group FCC in supervision)</p> <p>OR</p> <p>PMQ 3: 6 to 8 credits (9-12 CEUs) in ECE-related leadership, management and/or administration (or for Group FCC in supervision)</p> <p>OR</p>	<p>Provider has the appropriate education and background in ECE to manage a developmentally appropriate and high-quality program.</p>	<p><i>PMQ 1-4 award points only ONCE, to the provider only, for the highest applicable training hours or college credits.</i></p> <p>The following is indicated and verified with training certificates or an official transcript in The Aspire Registry:</p> <ul style="list-style-type: none"> <input type="checkbox"/> 15 clock-hours in ECE-related management and/or administration (or for Group FCC in supervision). (2 points) <p>OR</p> <ul style="list-style-type: none"> <input type="checkbox"/> 3 to 5 credits (4.5-7.5 CEUs) in ECE-related leadership, management and/or administration (or for Group FCC in supervision). (6 points) <p>OR</p> <ul style="list-style-type: none"> <input type="checkbox"/> 6 to 8 credits (9-12 CEUs) in ECE-related leadership, management and/or administration (or for Group FCC in supervision) (9 points) <p>OR</p> <ul style="list-style-type: none"> <input type="checkbox"/> 9 or more credits (13.5 CEUs) in ECE-related leadership, management and/or administration (or for Group FCC in supervision) (12 points) <p>Attention:</p>	2-12

	PMQ 4: 9 or more credits (13.5 CEUs) in ECE-related leadership, management and/or administration (or for Group FCC in supervision)		<input type="checkbox"/> Training hours must be specific to Core Body of Knowledge Area 7 as indicated in the Core Competency Areas for the training(s) in The Aspire Registry. <input type="checkbox"/> College credits must be categorized as approved credits for Leadership, Administration, and Management in the provider's higher education record in The Aspire Registry.	
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Provider Administrative Experience - 2 points

CODE	STANDARD	INTENTION	REQUIRED EVIDENCE	POINTS
PAE 1	At least 3 years of experience in an administrative position in an early care and education program	Provider has the appropriate experience in supervising a care program to manage a developmentally appropriate and high-quality program.	<i>PAE 1 awards points to the provider only.</i> As indicated in The Aspire Registry employment tab: <input type="checkbox"/> At least 3 years of experience teaching in an ECE program documented in The Aspire Registry.	2

Provider & Assistant Qualifications - 58 points

CODE	STANDARD	INTENTION	REQUIRED EVIDENCE	POINTS
<i>PAQ 1-8 awards the points ONCE for the highest degree or credential (up to 48 points). Calculations for programs with both a provider and assistant(s) will be scored based on the average points earned by each staff member, which will be weighted based on if staff are full or part time.</i>				
PAQ 1 -OR-	Child Development Associate (CDA) credential with Infant-Toddler specialization OR Child Development Associate (CDA) credential with Family Child Care specialization OR	Staff has the appropriate education and background in ECE to provide developmentally appropriate and high-quality care.	ONE of the following credentials is indicated in The Aspire Registry and verified with certificate: <input type="checkbox"/> Child Development Associate (CDA) credential with Infant Toddler specialization. OR <input type="checkbox"/> Child Development Associate (CDA) credential with Family Child Care specialization. OR	23

	Child Development Associate (CDA) credential with Preschool specialization -OR-		<input type="checkbox"/> Child Development Associate (CDA) credential with Preschool specialization.	
PAQ 2 -OR-	Montessori, Infant/Toddler Credential OR Montessori, Early Childhood Credential OR Montessori, International Credential -OR-	Staff has the appropriate education and background in ECE to provide developmentally appropriate and high-quality care.	ONE of the following credentials is indicated in The Aspire Registry and verified with certificate: <input type="checkbox"/> Montessori, Infant/Toddler Credential. OR <input type="checkbox"/> Montessori, Early Childhood Credential. OR <input type="checkbox"/> Montessori, International Credential.	28
PAQ 3 -OR-	NYS Infant-Toddler Credential OR NYS Family Child Care Credential -OR-	Staff has the appropriate education and background in ECE to provide developmentally appropriate and high-quality care.	ONE of the following credentials is indicated in The Aspire Registry and verified with certificate: <input type="checkbox"/> NYS Infant-Toddler Credential. OR <input type="checkbox"/> NYS Family Child Care Credential.	31
PAQ 4 -OR-	No higher education degree but at least 9 college credits in ECE -OR-	Staff has the appropriate education and background in ECE to provide developmentally appropriate and high-quality care.	The following is indicated and verified with an official transcript in The Aspire Registry: <input type="checkbox"/> At least 9 college credits in ECE (No higher education degree completed).	28
PAQ 5 -OR-	No higher education degree but at least 18 college credits in ECE -OR-	Staff has the appropriate education and background in ECE to provide developmentally appropriate and high-quality care.	The following is indicated and verified with an official transcript in The Aspire Registry: <input type="checkbox"/> At least 18 college credits in ECE (no higher education degree completed).	35
PAQ 6 -OR-	Associates degree in ECE, or Associates degree in a related field and 9 ECE credits, or any Associates degree and at least 24 credits in ECE -OR-	Staff has the appropriate education and background in ECE to provide developmentally appropriate and high-quality care.	ONE of following is indicated and verified with an official transcript in The Aspire Registry: <input type="checkbox"/> Associate's degree in ECE. OR <input type="checkbox"/> Associate's degree in a related field and 9 ECE credits. OR <input type="checkbox"/> Any Associate's degree and at least 24 credits in ECE.	38
PAQ 7 -OR-	Bachelor's degree in ECE, or Bachelor's degree in a related field and 9 ECE credits, or any	Staff has the appropriate education and background in ECE to provide	ONE following is indicated and verified with an official transcript in The Aspire Registry: <input type="checkbox"/> Bachelor's degree in ECE.	45

	Bachelor's degree and at least 24 credits in ECE. -OR-	developmentally appropriate and high-quality care.	OR <input type="checkbox"/> Bachelor's degree in a related field and 9 ECE credits. OR <input type="checkbox"/> Any Bachelor's degree and at least 24 credits in ECE.	
PAQ 8	Master's degree or higher in ECE, or Master's degree in a related field and 9 ECE credits or any Master's degree or higher and at least 24 credits in ECE	Staff has the appropriate education and background in ECE to provide developmentally appropriate and high-quality care.	ONE following is indicated and verified with an official transcript in The Aspire Registry: <input type="checkbox"/> Master's degree in ECE. OR <input type="checkbox"/> Master's degree in a related field and 9 ECE credits. OR <input type="checkbox"/> Any Master's degree and at least 24 credits in ECE.	48
PAQ 9	NYS Early Childhood Teacher (Birth – Grade 2) Certificate OR NYS Students with Disabilities (Birth – Grade 2) Certificate OR NYC Teacher (N-6) Certificate	Staff has the appropriate education and background in ECE to provide developmentally appropriate and high-quality care.	ONE of the following credentials is indicated in The Aspire Registry staff profile and verified with certificate: <input type="checkbox"/> NYS Early Childhood Teacher (Birth – Grade 2) Certificate. OR <input type="checkbox"/> NYS Students with Disabilities (Birth – Grade 2) Certificate. OR <input type="checkbox"/> NYC Teacher (N-6) Certificate.	5
PAQ 10	Family Development Credential	Staff has the appropriate education and background in ECE to provide developmentally appropriate and high-quality care.	The following is indicated and verified with credential in The Aspire Registry: <input type="checkbox"/> Family Development Credential.	5

Provider & Assistant Experience - 6 points

CODE	STANDARD	INTENTION	REQUIRED EVIDENCE	POINTS
E 1	At least 3 years of experience in any teaching position in an early care and education program.	Staff has the appropriate experience in supervising a care program to manage a developmentally appropriate and high quality program.	As indicated in the Aspire Registry employment tab. <input type="checkbox"/> At least 3 years of experience in any teaching position in an early care and education program documented in The Aspire Registry.	6

Retention - 12 points

CODE	STANDARD	INTENTION	REQUIRED EVIDENCE	POINTS
R 1	Provider has been a registered or licensed (group) family day care operator continuously for 5 or more years.	The program has maintained a healthy care environment over a long period of time.	Calculated automatically based on employment information in The Aspire Registry. <input type="checkbox"/> Provider has been a registered or licensed (group) family day care operator continuously for 5 or more years, at the same physical address, documented in The Aspire Registry.	12

MANAGEMENT AND LEADERSHIP

Research Rationale: There is some evidence that the implementation of program policies and procedures is related to other measures of quality and child development outcomes.

Administrative Self-Assessment (ASA) - 10 points

CODE	STANDARD	INTENTION	REQUIRED EVIDENCE	POINTS
ASA 1	Provider conducts a self-assessment using a tool, such as the Business Administration Scale (BAS) or the self-study for National Association for Family Child Care Accreditation (NAFCC).	Provider is systematically looking to improve the management and business practices of the family child care program.	To meet this Standard, evidence must include ONE of the following: BAS submission requires: <input type="checkbox"/> Completed BAS Item Summary Form. AND <input type="checkbox"/> Completed BAS Profile. OR NAFCC self-study submission requires: <input type="checkbox"/> Completed NAFCC self-study. OR <input type="checkbox"/> Proof of enrollment in NAFCC self-study.	5
ASA 2	Program demonstrates progress on a plan aligned to the administrative/management self-assessment.	After an evaluation, it is important that management follows through on area(s) identified as needing improvement in order to improve the program.	To meet this Standard, evidence MUST include/reference ALL of the following: <input type="checkbox"/> A detailed written plan based on results of the program management self-assessment tool submitted in ASA 1. AND <input type="checkbox"/> Reference at least 3 indicators in need of improvement. AND <input type="checkbox"/> Reference concrete steps taken to achieve improvement for at least 3 indicators. Attention: <input type="checkbox"/> Program MUST submit a program management tool for ASA 1 in order to submit evidence for ASA 2.	5

Financial Accountability & Sustainability (FAS) - 27 points

CODE	STANDARD	INTENTION	REQUIRED EVIDENCE	POINTS
FAS 1	Liability insurance premium is current to date.	Even in the best homes, accidents happen. Therefore, it is imperative that family child care providers protect their family and home with appropriate, up-to-date liability insurance.	<p>To meet this Standard, evidence must reference ALL of the following:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Liability insurance for the program (MUST be current). <p>AND</p> <ul style="list-style-type: none"> <input type="checkbox"/> Liability insurance end date MUST not expire more than one month past the Standards Inventory submission date. <p>Acceptable type(s) of evidence include:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Insurance declaration page (MUST show the dates the policy is in effect). <p>OR</p> <ul style="list-style-type: none"> <input type="checkbox"/> Proof of payment for an upcoming payment or renewal (liability insurance MUST show the dates the policy is in effect). <p>Attention:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Effective dates of the liability insurance policy MUST be clearly visible. 	2
FAS 2	Local, state and federal taxes are paid on time.	Fiscal responsibilities, including the payment of taxes, should be maintained at all times.	<p>To meet this Standard, evidence MUST include ALL of the following:</p> <ul style="list-style-type: none"> <input type="checkbox"/> <u>State</u> AND <u>Federal</u> income taxes are paid: <ul style="list-style-type: none"> • <u>State</u>: NYS IT-201 or 45 (If a balance is due, MUST also submit proof of payment). <p>AND</p> <ul style="list-style-type: none"> • <u>Federal</u>: IRS 1040 or 941 (If a balance is due, MUST also submit proof of payment). <p>Acceptable type(s) of evidence include:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Proof of <u>State</u> AND <u>Federal</u> income taxes paid on time: Voided check, bank statement, debit, online payment receipt or report showing proof of payment of <u>State</u> AND <u>Federal</u> taxes. <p>OR</p> <ul style="list-style-type: none"> <input type="checkbox"/> Applicable IRS Forms. <p>Attention:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Uploaded evidence MUST be dated within the 15 months prior to Standards Inventory submission (MUST include full date: month, day, year). <input type="checkbox"/> Redact/remove identifying information. <p><i>A written statement OR letter from a financial institution stating that State and federal taxes are paid or applicable IRS Forms are filed on time is not sufficient.</i></p>	2

CODE	STANDARD	INTENTION	REQUIRED EVIDENCE	POINTS
FAS 3	Provider has a current-year operating budget showing revenues and expenses.	Providers must plan for future expenditures by creating a regular budget for their business, separate from their family's (usually annually). Examples: Quick Book report, Calendar Keeper, accountant's report, etc.	To meet this Standard, evidence MUST include ALL of the following: <ul style="list-style-type: none"> <input type="checkbox"/> Current year annual program operating budget (total amount and/or projected amount). <input type="checkbox"/> MUST clearly indicate program revenues. <input type="checkbox"/> MUST clearly indicate program expenses. <input type="checkbox"/> Budget MUST show the current program year (MUST include month AND year). Acceptable type(s) of evidence include: <ul style="list-style-type: none"> <input type="checkbox"/> Copy of annual budget from program or payroll management company, or other. 	3
FAS 4	Provider records income and expenses at least monthly and reviews income and expense statements, comparing actual revenues and expenses to budget quarterly.	Providers should be aware of current financial resources and expenses, in order to remain a viable business and service for families. Regular analysis of the family child care business income and expenses will help providers adjust fees, pay assistant(s), and provide materials and experiences for the children's learning environment.	To meet this Standard, the provider MUST submit: <ul style="list-style-type: none"> <input type="checkbox"/> Copies of quarterly financial reports; MUST compare actual and projected income and expenses. <input type="checkbox"/> If program operates more than 9 months per year: submit 4 quarterly financial reports; Otherwise, submit 3 quarterly financial reports. Attention: <ul style="list-style-type: none"> <input type="checkbox"/> Uploaded evidence MUST be dated within the 15 months prior to Standards Inventory submission (MUST include full date: month, day, year). <i>A written statement OR letter from a financial institution summarizing their financial review is not sufficient; detailed financial reports MUST be submitted.</i>	4
FAS 5	Provider has a system of record keeping that tracks incomes and expenses for tax purposes and individual cost of care.	Providers who have an effective system for tracking income and expenses, will be able to pay the appropriate amount of taxes (not too much or too little) on time. This system keeps more funds available so providers can manage expenses more effectively.	To meet this Standard, the provider MUST submit: <ul style="list-style-type: none"> <input type="checkbox"/> A <u>logbook</u> or <u>spreadsheet</u> showing BOTH: <ul style="list-style-type: none"> • Dated income entries (MUST include full date: month, day, year). • Dated expense entries (MUST include full date: month, day, year). Attention: <ul style="list-style-type: none"> <input type="checkbox"/> Uploaded evidence MUST be dated within the 15 months prior to Standards Inventory submission (MUST include full date: month, day, year). 	4
FAS 6	Provider calculates cost of care, has goals for her own compensation, and	Having an accurate understanding of the cost of care, including	To meet this Standard, the provider MUST submit: <ul style="list-style-type: none"> <input type="checkbox"/> Cost of care calculation that includes ALL of the following: <ul style="list-style-type: none"> • Income goal. 	2

CODE	STANDARD	INTENTION	REQUIRED EVIDENCE	POINTS
	uses both to set tuition rates.	compensation for the provider and any assistant(s) is important for the small business, family child care home. Using this information effectively will help providers plan for the future and stay in business.	<ul style="list-style-type: none"> Estimated expenses. Weekly child care rate depending on number of children to be served. Determination of tuition rates that align with the cost of care calculation. <p>Acceptable type(s) of evidence include:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Cost of care calculation sheet or printout <p>Attention:</p> <ul style="list-style-type: none"> <input type="checkbox"/> A copy of the program's budget is not sufficient; evidence MUST include cost of care calculations. <p><i>You can find information on cost of care calculations as an additional resource in the Family Child Care Interactive Standards for FAS 6 on the QUALITYstarsNY website:</i></p> <p>https://earlychildhoodny.org/qualitystarsny/standardsguide/std.php?std=930 and access the "How to Set your Rates" resources under "Further Reading".</p>	
FAS 7	There is an independent preparation of taxes by someone with accounting or bookkeeping expertise.	Family child care providers have many responsibilities and it is easy to make accounting errors. In order to protect your family child care business, it is important to have another person with accounting expertise prepare your tax forms.	<p>To meet this Standard, evidence MUST include ALL of the following:</p> <ul style="list-style-type: none"> <input type="checkbox"/> A bill/invoice from a tax preparer; MUST be someone other than the family child care provider. <p>AND</p> <ul style="list-style-type: none"> <input type="checkbox"/> IRS Tax form(s) with the tax preparer's signature. <p>Attention:</p> <ul style="list-style-type: none"> <input type="checkbox"/> The uploaded tax forms MUST contain the tax preparer's signature or other electronic identification. 	4
FAS 8	Provider uses technology to manage finances and enrollment, e.g., uses Minute Menu for CACFP or automated time and attendance.	Technology provides a valuable time-saving tool for managing finances and enrollment.	<p>To meet this Standard, the provider MUST submit:</p> <ul style="list-style-type: none"> <input type="checkbox"/> One copy of a report from a technology tool, such as Minute Menu, KidKare, CAPS Online, Quickbooks, payroll service provider, or another management tool. 	2
FAS 9	Provider has established procedures to market and fill open child care seats (slots).	Provider should have a plan in place to market open slots, so they can fill vacancies as soon as possible and have a steady source of income.	<p>To meet this Standard, evidence MUST include BOTH of the following:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Detailed written procedure discussing the marketing and filling of open child care seats/slots. <p>AND</p> <ul style="list-style-type: none"> <input type="checkbox"/> One example of a tool used for marketing open child care seats/slots. 	4

CODE	STANDARD	INTENTION	REQUIRED EVIDENCE	POINTS
			<p>Acceptable type(s) of evidence include:</p> <ul style="list-style-type: none"> <input type="checkbox"/> A detailed written policy, practice statement or procedures in an employee handbook or other official manual/handbook. <p>Attention:</p> <p><i>* See Important Notes on page 2 for guidance on submitting a copy or excerpt from a written policy or practice statement.</i></p>	

Policies and Procedures (PP) - 27 points

CODE	STANDARD	INTENTION	REQUIRED EVIDENCE	POINTS
PP 1	Provider uses substitutes no more than 20% of the time (e.g., no more than one day per week).	It is important for family child care homes to maintain as much consistency among the adults who care for the children, so that providers can ensure the safety and well-being of children at all times and that children can feel safe and secure.	<p>To meet this Standard, the program MUST submit:</p> <ul style="list-style-type: none"> <input type="checkbox"/> A detailed written policy or practice statement describing when substitutes are used indicating that substitutes are used no more than 20% of the time (e.g. no more than one day per week). <p>Acceptable type(s) of evidence include:</p> <ul style="list-style-type: none"> <input type="checkbox"/> A detailed policy or practice statement in parent/family handbook or other official manual/handbook. <p>Attention:</p> <p><i>* See Important Notes on page 2 for guidance on submitting a copy or excerpt from a written policy or practice statement.</i></p>	9
PP 2	Provider maintains confidentiality regarding children and family information and communicates this confidentiality policy to any family members, employees and substitutes.	Providers have a responsibility to respect and maintain confidentiality regarding children, their families, and staff.	<p>To meet this Standard, evidence MUST include a detailed written policy or practice statement referencing ALL of the following:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Explain how the Provider maintains confidentiality regarding children and family information. <p>AND</p> <ul style="list-style-type: none"> <input type="checkbox"/> Explain how confidentiality of information is communicated to families (e.g. parent/family handbook). <p>AND</p> <ul style="list-style-type: none"> <input type="checkbox"/> Explain how confidentiality of information is communicated to employees (e.g. employee handbook signed attestation from employee handbook). <p>Acceptable type(s) of evidence include:</p> <ul style="list-style-type: none"> <input type="checkbox"/> A detailed policy or practice statement in parent/family handbook or other official manual/handbook. <p>Attention:</p>	6

CODE	STANDARD	INTENTION	REQUIRED EVIDENCE	POINTS
			<i>* See Important Notes on page 2 for guidance on submitting a copy or excerpt from a written policy or practice statement.</i>	
PP 3	The provider and any paid employees have professional development plans that match the <i>Core Body of Knowledge: New York State's Core Competencies for Early Childhood Educators</i> competency areas.	<p>Every provider and assistant will benefit personally and professionally from having an individual, written plan for professional development in order to gain the necessary knowledge and improve skills on all topics related to early childhood education.</p> <p>The Core Body of Knowledge (CBK) outlines recommended practices for professionals who work directly with young children. These practices offer a road map for building meaningful relationships with children, families and colleagues; for creating nurturing, stimulating environments; and for developing oneself as a professional in an incredibly important field.</p> <p>The CBK is structured to consider all areas established by NYS as being essential for early childhood educators.</p>	<p>To meet this Standard, evidence MUST include a completed copy of ONE of the following for provider and any current assistant(s):</p> <ul style="list-style-type: none"> <input type="checkbox"/> Core Body of Knowledge (CBK) Professional Development Planning Tool Plan including all pages of the Assessment and Professional Development Planning tool, pages 89-101. <p>OR</p> <ul style="list-style-type: none"> <input type="checkbox"/> Paula Jorde Bloom Staff Development Action Plan . <p>OR</p> <ul style="list-style-type: none"> <input type="checkbox"/> One copy of another professional development planning tool that includes ALL of the following: <ul style="list-style-type: none"> • Assessment, goals, and an action plan. • MUST align to at least (2) of the (7) core competency areas in the Core Body of Knowledge INCLUDING the individual core competencies (e.g., Child Growth and Development: 1.1, 1.2, etc.). <p>Attention:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Uploaded evidence MUST be dated within the 15 months prior to Standards Inventory submission. <input type="checkbox"/> Name of the teaching staff MUST be included on the tool (this MUST be added to the tool if no space exists). <input type="checkbox"/> Date tool completed MUST be included on the tool (this MUST be added to the tool if no space exists). 	12

Compensation and Benefits (CB) - 13 points

CODE	STANDARD	INTENTION	REQUIRED EVIDENCE	POINTS
CB 1	Provider offers for self and any paid, full-time employees: (3 POINTS PER BENEFIT OPTION, UP TO 9 POINTS MAXIMUM)	Staff is provided with a comprehensive benefits package to support personal and professional needs.	<p>To meet this Standard, evidence MUST state that the provider offers one or more of the following benefits for themselves and any full-time staff (program earns 3 points for each benefit offered for a potential total of 9 points):</p> <ul style="list-style-type: none"> <input type="checkbox"/> 5 days of time off (sick and/or personal) (3 points). <input type="checkbox"/> Paid holidays (3 points). <input type="checkbox"/> Day(s) to complete professional development (3 points). 	3-9

CODE	STANDARD	INTENTION	REQUIRED EVIDENCE	POINTS
	<input type="checkbox"/> 5 days of time off (sick and/or personal). <input type="checkbox"/> Holidays. <input type="checkbox"/> Professional development days.		Acceptable type(s) of evidence include: <input type="checkbox"/> A detailed written policy or practice statement in employee handbook or other official manual/handbook. OR <input type="checkbox"/> A detailed compensation package in employee handbook or other official manual/handbook. OR <input type="checkbox"/> A detailed employee policy in employee handbook or other official manual/handbook. Attention: <i>* See Important Notes on page 2 for guidance on submitting a copy or excerpt from a written policy or practice statement.</i>	
CB 2	Provider and any paid, full-time employees have health insurance.	Staff is provided with a comprehensive benefits package to support personal and professional needs.	Evidence MUST include proof of health insurance for: <input type="checkbox"/> The provider. AND <input type="checkbox"/> Any paid, full-time assistant(s), if applicable. Acceptable type(s) of evidence include: <input type="checkbox"/> Copy of health insurance cards. Attention: <input type="checkbox"/> Redact/remove identifying information.	4

Program Planning (PPL) - 13 points

CODE	STANDARD	INTENTION	MINIMUM REQUIREMENTS	POINTS
PPL 1	Provider spends at least one hour per week in program planning using appropriate resources such as printed materials, the internet, and curriculum-based planning tools.	Planning ahead will help the provider remain organized and ready for each and every learning opportunity, while maintaining a safe and healthy environment and sustainable business.	Evidence should indicate ALL of the following: <input type="checkbox"/> Weekly schedule/planning sheet that shows at least one hour of scheduled planning time during regular hours of operation. AND <input type="checkbox"/> At least 3 sources of resource(s) gathered during planning time. Acceptable types of evidence for resources gathered include at least 3 of the following sources: <input type="checkbox"/> Resources from curriculum-based planning tools. <input type="checkbox"/> Internet searches of ideas for activity or lesson plans. <input type="checkbox"/> Materials needed for activity or lesson plans. <input type="checkbox"/> Recipes and menus.	13

Checklist Before Submitting your Standards Inventory

Please use this checklist to ensure you have completed all the steps necessary to submit your Standards Inventory in the QUALITYstarsNY data system. When **all** the checklist items are checked off, you will be ready to submit.

- I have gone over any questions I had regarding the QUALITYstarsNY Standards with my Quality Improvement Specialist.
- I fully understand the Standards and the Standards Inventory submission process.
- I have reviewed my Qualifications & Experience (Q&E) Report and confirmed that all information about my program staff's trainings, experience, and education, verified in The Aspire Registry is accurately reflected in the Report. If not, DO NOT SUBMIT UNTIL the Q&E Report is accurate. If you have an inquiry about your Q&E Report, complete the [Qualifications & Experience Report Inquiry Form](#) for assistance.
- I have redacted any personal children/family/employee information in my uploaded evidence as indicated in the Required Evidence for applicable Standards.
- I am submitting only necessary pages as documentation or have highlighted sections referencing page numbers where evidence is listed.
- The evidence I am submitting is clear and legible.
- The evidence I am submitting is for current practices/policies and no documentation is in draft form.
- The evidence I am submitting includes visible dates that fall within the Standards' specified time period.