Illinois State Board of Education Early Childhood Development FY2024 Prevention Initiative Continuous Quality Improvement Plan (CQIP)

| Program Name | RCDT # | |
|------------------------------------|--------|------|
| Authorized Official's Printed Name | Title | Date |

Authorized Official's Electronic Signature

The authorized representative of the applicant who will affix his or her digital signature above certifies that he or she has read, understood, and will comply with all the provisions of the FY 23-24 Continuous Quality Improvement Plan. The person approving this FY 23-24 Continuous Quality Improvement Plan hereby certifies and assures the Illinois State Board of Education that the person submitting the document on behalf of the applicant has the necessary legal authority to do so.

Prevention Initiative Compliance Checklist (PICC)

Directions: This report is due 30 days from the receipt of the program monitoring results. The Compliance Checklist CQIP should address all <u>non-compliance</u> items by the following fiscal year of the original CQIP.

| PI Compliance Checklist Number | Non-Compliance Issue (All PI Programs) | Action Steps/Resources/ Professional Development to address issues | Person Responsible | Timeline | Follow Up – to be completed in subsequent year (Update current action steps/plans and be sure to add <u>new goals</u> for the next fiscal year. The new goa do not need to be related to the monitoring result they may be from your program self-assessment.In ProcessAction Step Update | | |
|---|---|--|-----------------------|----------|--|-----------------------------------|--|
| Information PI1. Identification of the Prevention Initiative program. HV, CB | Not Scored for ISBE Monitoring | Not Scored for ISBE Monitoring | | | | Not Scored for ISBE Monitoring | |
| Compliance Issue PI2. The program has a mission statement based on shared beliefs developed cooperatively by parents/guardians, families, staff members, and community representatives. HV, CB | | | | | | | |

| Compliance Issue PI3. | | | | |
|---------------------------|--|------|--|--|
| The program will not | | | | |
| collect any fees from | | | | |
| parents/guardians | | | | |
| and their children | | | | |
| who are enrolled. HV, | | | | |
| CB | | | | |
| Compliance Issue PI4. | | | | |
| The program has | | | | |
| developed policies | | | | |
| and procedures. HV, | | | | |
| CB | | | | |
| Policy Issue PI5. | | | | |
| | | | | |
| Program eligibility | | | | |
| screening procedures | | | | |
| include all required | | | | |
| documentation that is | | | | |
| found in each child's | | | | |
| file, as applicable. [23 | | | | |
| Ill. Adm. Code | | | | |
| 235.40(b)] HV, CB | | | | |
| Compliance Issue PI6. | | | | |
| The program partners | | | | |
| with each family | | | | |
| enrolled to complete | | | | |
| an Individual Family | | | | |
| Goal Plan that will | | | | |
| guide programming. | | | | |
| The program will also | | | | |
| implement a | | | | |
| research-based | | | | |
| Family Centered | | | | |
| Assessment for each | | | | |
| family enrolled. [23 Ill. | | | | |
| Adm. Code 235.40(d)] | | | | |
| HV, CB | | | | |
| Compliance Issue PI7. | | | | |
| The program has | | | | |
| developed a | | | | |
| comprehensive, | | | | |
| utilized referral | | | | |
| system to ensure | | | | |
| families are referred | | | | |
| to community | | | | |
| resources and | | | | |
| services, as | | | | |
| applicable. [23 III. | | | | |
| Adm. Code | | | | |
| 235.40(c)(g)] HV, CB | | | | |
| Adm. Code | | | | |

| Compliance Issue PI8. | | | | |
|------------------------|--|--|------|--|
| The program has a | | | | |
| written Annual Self- | | | | |
| Assessment/Evaluatio | | | | |
| n and continuous | | | | |
| quality improvement | | | | |
| plan. HV, CB | | | | |
| Compliance Issue PI9. | | | | |
| The program | | | | |
| conducts staff | | | | |
| | | | | |
| development | | | | |
| assessments and | | | | |
| ongoing professional | | | | |
| development. [23. | | | | |
| III.Adm. Code | | | | |
| 235.20(c)(17) and | | | | |
| 235. Appendix B | | | | |
| Program Goal III] HV, | | | | |
| СВ | | | | |
| Compliance Issue | | | | |
| PI10. Developmental | | | | |
| screening/monitoring | | | | |
| procedures include all | | | | |
| required | | | | |
| documentation. The | | | | |
| program uses a | | | | |
| research-based | | | | |
| developmental | | | | |
| screening instrument | | | | |
| and activities that | | | | |
| measure all aspects of | | | | |
| the child's | | | | |
| development. [23 Ill. | | | | |
| Adm. Code | | | | |
| 235.20(c)(6) (A-D, F)] | | | | |
| HV, CB. | | | | |
| Compliance Issue | | | | |
| HV1. Identification of | | | | |
| the program model | | | | |
| implemented for | | | | |
| parent education. [23 | | | | |
| Ill. Adm. Code | | | | |
| 235.40(a)] HV | | | | |
| Policy Issue HV2. | | | | |
| | | | | |
| Identification of the | | | | |
| program's model | | | | |
| fidelity and quality. | | | | |
| HV | | | | |

| | | r | | |
|-------------------------|--|---|--|--|
| Policy Issue HV3. The | | | | |
| program employs | | | | |
| qualified staff in | | | | |
| accordance with the | | | | |
| program model being | | | | |
| implemented. [23 Ill. | | | | |
| Adm. Code | | | | |
| 235.20(c)(9)] HV | | | | |
| Compliance Issue | | | | |
| HV4. The program is | | | | |
| implementing a | | | | |
| research-based | | | | |
| curriculum for parent | | | | |
| education that is | | | | |
| aligned with the | | | | |
| Illinois Early Learning | | | | |
| Guidelines (IELG). | | | | |
| The program is | | | | |
| implementing the | | | | |
| IELG. [23 Ill. Adm. | | | | |
| Code 235.20 (c)(3)(A- | | | | |
| B) and 23 Ill. Adm. | | | | |
| Code 235.40(a)] HV | | | | |
| HV5. Supplemental | | | | |
| Doula Services. May | | | | |
| not apply to all | | | | |
| programs. HV | | | | |
| Policy Issue CB1: | | | | |
| Hours of the PI | | | | |
| center-based services. | | | | |
| CB | | | | |
| Compliance Issue | | | | |
| CB2. Identification of | | | | |
| Department of | | | | |
| Children and Family | | | | |
| Services (DCFS) | | | | |
| licensure and | | | | |
| standards, | | | | |
| ExceleRate, and Early | | | | |
| Head Start, as | | | | |
| applicable. [23 II. | | | | |
| Adm. Code 235.10(b)] | | | | |
| CB | | | | |
| Compliance Issue | | | | |
| CB3. The program is | | | | |
| implementing a | | | | |
| research-based child- | | | | |
| centered curriculum | | | | |
| and assessment that | | | | |
| und assessment tridt | | 1 | | |

| is aligned with the Illinois Early Learning Guidelines. The program is implementing the IELG. [23 III. Adm. Code 235.20 (c)(3)(A- B) and 23 III. Adm. Code 235.40(a)] CB Policy Issue CB4. Staff to classroom ratios. CB Compliance Issue CB5. Classroom food | | | | | | | |
|--|-------------------------------------|--|-------------------|----------------|--------------|-----------------------------------|---------|
| service. CB Compliance Issue CB6. Classroom staff qualifications. [23 II. Adm. Code 235.10(b)] CB | | | | | | | |
| Compliance Issue CB7. Identification of Center-Based parent and family education services. CB | | | | | | | |
| Policy Issue CB8. The program has developed policies and procedures. CB | | | | | | | |
| | Homo Visit P | ating Scales – Revised, Res | structured | Povalidate | | 25 2) | |
| HOVRS-3 area of im | ort is due 30 days from the receipt | of the program monitoring results. Or le. Programs may use the follow-up re | n the original CC | QIP, columns 2 | through 5, p | rograms should choose, at least 1 | ea |
| | Areas of Potential Growth: | Action Steps/Resources/ | Person | | Follow Up | o – to be completed in subsequent | t years |
| HOVRS Section | Items with Scores Less Than | Professional Development to | Responsible | Timeline | In | | |
| | 4.50 | address issues Home Visit Pra | actices | | Process | Action Step Update | Met |
| Relationship building | | | | | | | |
| with family | | | | | | | |
| Responsiveness to family strengths and cultures | | | | | | | |

| Facilitation of caregiver-child | | | | | | | |
|--|---|---|--------------------|----------------|-----------------------------------|---|------------------|
| interaction | | | | | | | |
| Collaboration with caregivers as partners | | | | | | | |
| Year 2 | | | | | | | |
| Program Goal(s) | | | | | | | |
| | | | | | | | |
| | | Engagem | ent | | | | |
| Parent-Child | Not Scored for ISBE Monitoring | Not Scored for ISBE Monitoring | | | | Not Scored for ISBE | |
| interaction | | | | | | Monitoring | |
| Parent engagement | Not Scored for ISBE Monitoring | Not Scored for ISBE Monitoring | | | | Not Scored for ISBE | |
| | | | | | | Monitoring | |
| Child engagement | Not Scored for ISBE Monitoring | Not Scored for ISBE Monitoring | | | | Not Scored for ISBE | |
| | | | | | | Monitoring | |
| | | | | | | | |
| | | Infant/Toddler Environ | ment Ratin | g Scale | | | |
| Discretion of This see | | 6.1 I. I | | | | | ITERC |
| Directions: This rep | ort is due 30 days from the receipt | of the program monitoring results. O | in the original CC | JIP, columns 2 | through 5, p | rograms should choose, at least 3 | TIERS |
| areas of improvem | ent to respond, as applicable. Progr | ams may use the follow-up years, co | _ | | | - | |
| areas of improvem | ent to respond, as applicable. Progr o address the next fiscal year (Due | ams may use the follow-up years, co | lumns 6 through | | e the action s | - | ed or |
| areas of improvem | ent to respond, as applicable. Progr | ams may use the follow-up years, col June 30 or before). | _ | | e the action s | steps for the original areas identifi | ed or |
| areas of improvem choose new areas t | ent to respond, as applicable. Progr o address the next fiscal year (Due Areas of Potential Growth: | ams may use the follow-up years, col June 30 or before). Action Steps/Resources/ Professional Development to | Person | 8, to complet | e the action s Follow Up In | steps for the original areas identifi - to be completed in subsequen | ed or t years |
| areas of improvem choose new areas t | ent to respond, as applicable. Progr o address the next fiscal year (Due Areas of Potential Growth: | ams may use the follow-up years, col June 30 or before). Action Steps/Resources/ Professional Development to | Person | 8, to complet | e the action s Follow Up In | steps for the original areas identifi - to be completed in subsequen | ed or t years |
| areas of improvement choose new areas to ITERS Section Space and Furniture Personal Care | ent to respond, as applicable. Progr o address the next fiscal year (Due Areas of Potential Growth: | ams may use the follow-up years, col June 30 or before). Action Steps/Resources/ Professional Development to | Person | 8, to complet | e the action s Follow Up In | steps for the original areas identifi - to be completed in subsequen | ed or t years |
| areas of improvement choose new areas to ITERS Section Space and Furniture Personal Care Routines | ent to respond, as applicable. Progr o address the next fiscal year (Due Areas of Potential Growth: | ams may use the follow-up years, col June 30 or before). Action Steps/Resources/ Professional Development to | Person | 8, to complet | e the action s Follow Up In | steps for the original areas identifi - to be completed in subsequen | ed or t years |
| areas of improvement choose new areas to ITERS Section Space and Furniture Personal Care Routines Listening and Talking | ent to respond, as applicable. Progr o address the next fiscal year (Due Areas of Potential Growth: | ams may use the follow-up years, col June 30 or before). Action Steps/Resources/ Professional Development to | Person | 8, to complet | e the action s Follow Up In | steps for the original areas identifi - to be completed in subsequen | ed or t years |
| areas of improvement choose new areas to ITERS Section Space and Furniture Personal Care Routines Listening and Talking Activities | ent to respond, as applicable. Progr o address the next fiscal year (Due Areas of Potential Growth: | ams may use the follow-up years, col June 30 or before). Action Steps/Resources/ Professional Development to | Person | 8, to complet | e the action s Follow Up In | steps for the original areas identifi - to be completed in subsequen | ed or t years |
| areas of improvement choose new areas to ITERS Section Space and Furniture Personal Care Routines Listening and Talking Activities Interaction Program Structure Parents and Staff | ent to respond, as applicable. Progr o address the next fiscal year (Due Areas of Potential Growth: | ams may use the follow-up years, col June 30 or before). Action Steps/Resources/ Professional Development to | Person | 8, to complet | e the action s Follow Up In | steps for the original areas identifi - to be completed in subsequen | ed or t years |
| areas of improvement choose new areas to ITERS Section Space and Furniture Personal Care Routines Listening and Talking Activities Interaction Program Structure Parents and Staff Year 2 | ent to respond, as applicable. Progr o address the next fiscal year (Due Areas of Potential Growth: | ams may use the follow-up years, col June 30 or before). Action Steps/Resources/ Professional Development to | Person | 8, to complet | e the action s Follow Up In | steps for the original areas identifi - to be completed in subsequen | ed or t years |
| areas of improvement choose new areas to ITERS Section Space and Furniture Personal Care Routines Listening and Talking Activities Interaction Program Structure Parents and Staff | ent to respond, as applicable. Progr o address the next fiscal year (Due Areas of Potential Growth: | ams may use the follow-up years, col June 30 or before). Action Steps/Resources/ Professional Development to | Person | 8, to complet | e the action s Follow Up In | steps for the original areas identifi - to be completed in subsequen | ed or t years |
| areas of improvement choose new areas to ITERS Section Space and Furniture Personal Care Routines Listening and Talking Activities Interaction Program Structure Parents and Staff Year 2 | ent to respond, as applicable. Progr o address the next fiscal year (Due Areas of Potential Growth: | ams may use the follow-up years, col June 30 or before). Action Steps/Resources/ Professional Development to | Person | 8, to complet | e the action s Follow Up In | steps for the original areas identifi - to be completed in subsequen | ed or t years |

PIQET- Prevention Initiative Quality Evaluation Tool

Directions: This report is due 30 days from the receipt of the program monitoring results. On the original CQIP, columns 2 through 5, programs should choose the areas marked as need improvement and rated below a score of 2 to respond, as applicable. Programs may use the follow-up reports, columns 6 through 8, to complete the action steps for the original area identified or choose new areas to address the next fiscal year (Due June 30 or before).

| PIQET Section | T Section Items with Scores Less Than 5 Professional Development to address issues Timeline | | | Timeline | Follow Up – to be completed in subsequent years | | | |
|---|---|---------------------------|------------------|--------------------|---|--|--|--|
| | | | | | In | | | |
| | | | Process | Action Step Update | Met | | | |
| | | Section A: Functional Org | anizational Clii | mate | | | | |
| The grantee | | | | | | | | |
| implements data | | | | | | | | |
| management systems | | | | | | | | |
| for collecting and | | | | | | | | |
| managing | | | | | | | | |
| information. | | | | | | | | |
| The grantee develops | | | | | | | | |
| budgets to support | | | | | | | | |
| quality program | | | | | | | | |
| service delivery. | | | | | | | | |
| The grantee has a | | | | | | | | |
| plan for program | | | | | | | | |
| implementation and delivery (logic model, | | | | | | | | |
| mission statement, | | | | | | | | |
| goals and outcomes) | | | | | | | | |
| as well as a plan for | | | | | | | | |
| continuous quality | | | | | | | | |
| improvement | | | | | | | | |
| Year 2 | | | | | | | | |
| Program Goal(s) | | | | | | | | |
| | | | | | | | | |
| | | | | | L | | | |
| | | Section B: Curriculum an | d Service Deliv | very | | | | |
| The grantee | | | | | | | | |
| implements the | | | | | | | | |
| program model or | | | | | | | | |
| curriculum as | | | | | | | | |
| intended, with a | | | | | | | | |
| holistic approach to | | | | | | | | |
| development. The grantee follows the | | | | | | | | |
| curriculum or | | | | | | | | |
| program model | | | | | | | | |
| recommendations for | | | | | | | | |
| supporting caregiver- | | | | | | | | |

| child interactions and family involvement. Program staff are family involvement. | |
|--|---|
| Program staff are | |
| Program staff are | 1 |
| | |
| trained and | |
| knowledgeable about | |
| early childhood | |
| | |
| development and stay | |
| informed on current | |
| research and | |
| initiatives in the field. | |
| The grantee meets | |
| the individual and | |
| diverse needs of the | |
| children and families | |
| that they serve. | |
| Year 2 Year 2 | |
| Program Goal(s) | |
| | |
| | |
| Section C: Family and Community Engagement | |
| The grantee | |
| leadership and staff | |
| | |
| seek and facilitate | |
| family participation | |
| and partnership. | |
| The grantee ensures | |
| that families have | |
| access to | |
| comprehensive | |
| services. | |
| The grantee takes an | |
| active role in | |
| community and | |
| system planning by | |
| establishing | |
| collaborative | |
| | |
| relationships with | |
| other institutions and | |
| organizations that | |
| serve families. | |
| Year 2 | |
| Program Goal(s) | |
| | |
| | |
| Section D: Implementation Leadership | |
| The grantee has | |
| strong, effectual | |
| leadership and | |

| administration to | | | | |
|-------------------------|--|--|--|--|
| support staff | | | | |
| | | | | |
| implementation of the | | | | |
| program to fidelity | | | | |
| (Program Leadership). | | | | |
| The grantee has | | | | |
| strong, effectual | | | | |
| leadership and | | | | |
| administration to | | | | |
| support staff | | | | |
| implementation of the | | | | |
| program to fidelity | | | | |
| (Home | | | | |
| Visitors/Teachers). | | | | |
| The grantee ensures | | | | |
| performance | | | | |
| assessment policies | | | | |
| and practices are fully | | | | |
| functioning (Program | | | | |
| Leadership). | | | | |
| The grantee ensures | | | | |
| performance | | | | |
| assessment policies | | | | |
| and practices are fully | | | | |
| functioning (Home | | | | |
| Visitors/Teachers). | | | | |
| The grantee has a | | | | |
| framework in place to | | | | |
| support employee | | | | |
| morale and retention | | | | |
| (Program Leadership) | | | | |
| The grantee has a | | | | |
| framework in place to | | | | |
| support employee | | | | |
| morale and retention | | | | |
| (Home | | | | |
| Visitors/Teachers | | | | |
| Year 2 | | | | |
| Program Goal(s) | | | | |
| | | | | |