



Illinois State Board of Education

100 North First Street • Springfield, Illinois 62777-0001
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Governor

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State Superintendent of Education

May 2011

TO: Eligible Applicants

FROM: Christopher A. Koch, Ed.D. 
State Superintendent of Education

SUBJECT: REQUEST FOR PROPOSALS (RFP): Prevention Initiative Technical Assistance and Training: Birth to 3 Years

General Information

Purpose of RFP: The Illinois State Board of Education (ISBE) seeks to identify a qualified entity to coordinate and deliver statewide training and technical assistance services as outlined in this RFP to the recipients of Prevention Initiative grants.

Eligible Applicants: Public school districts, university laboratory schools approved by the Illinois State Board of Education (ISBE), charter schools, area vocational centers, Regional Offices of Education (ROE), Intermediate Service Centers (ISC), and other not-for-profit entities with experience in providing training and technical assistance on educational, health, social, and child development services to young children and their families are eligible to submit a proposal for the Prevention Initiative Technical Assistance and Training: Birth to 3 Years.

Grant Award: One grant will be awarded in fiscal year (FY) 2012 in an amount not to exceed \$1,000,000. The annual grant award amount in Years 2 through 5 (FYs 2013, FY 2014, FY 2015, and FY 2016) is expected to be \$1,000,000. The annual grant amounts will depend on the needs addressed and scope of activities in each year and the total appropriation for the program.

Allocations are preliminary, and payment under this grant is subject to passage of a sufficient appropriation by the Illinois General Assembly. Obligations of the State Board of Education will cease immediately without further obligation should the Agency fail to receive sufficient State funds for this program.

Grant Period: The grant period will begin no sooner than July 1, 2011 and will extend from the execution date of the grant until June 30, 2012. The successful applicant may reapply via continuing application for up to four additional years (FYs 2013 through 2016), with subsequent grant periods extending from July 1 of each year through June 30 of the following year. Funding in the subsequent years will be contingent upon a sufficient appropriation for the program and satisfactory progress in the preceding grant period.

Application Deadline: Mail the **original and 5 copies** to Kay Henderson, Illinois State Board of Education, 100 North First Street, E-225, Springfield, Illinois 62777-0001 to ensure receipt no later than 4:00 p.m., June 23, 2011. Electronic submissions, including facsimiles, will not be accepted.

Proposals also may be hand-delivered to the following locations:

Springfield Office
Information Center
1st Floor
100 N. 1st Street

Chicago Office
Reception Area
Suite 14-300
100 W. Randolph

Contact Person: For more information on this RFP, contact the Early Childhood Education Division at 217-524-4835.

Background

The Illinois State Board of Education (ISBE) is committed to supporting early childhood education to ensure that all Illinois children develop a strong foundation for learning. This commitment is outlined in ISBE’s Early Childhood Care and Education Position Statement found in Appendix A. Section 2-3.89 of the School Code ([105 ILCS 5/2-3.89](#)) provides for grants to establish programs which offer coordinated services to at-risk infants and toddlers and their families. To review the State Board’s rules for the Prevention Initiative program go to [23 Illinois Administrative Code 235- Early Childhood Block Grant, Subpart A: Preschool Education and Prevention Initiative Programs](#). For the purposes of this grant, “at risk” is defined as those children who because of their home and community environment are subject to such language, cultural, economic, and like disadvantages to cause them to have been determined as a result of screening procedures to be at risk of academic failure. These programs are commonly referred to as Prevention Initiative programs. The aim of Prevention Initiative is to provide voluntary, continuous, intensive, research-based, and comprehensive child development and family support services, as defined by the State Board of Education, for expecting parents and families with children from birth to age 3 to help them build a strong foundation for learning and to prepare children for later school success. At this time, the program models identified by the Illinois State Board of Education as meeting the criteria set forth in Section 2-3.89 include [Baby TALK](#), [Healthy Families](#), [Parents as Teachers](#), and Prevention Initiative – Center Based. Further explanation of these programs is provided in Appendices B and C. The intent of this RFP is to fund a successful applicant to provide training and technical assistance to the recipients of Prevention Initiative grants.

Applicants submitting a proposal for this grant are encouraged to think strategically about providing program model and job specific training and professional development to Prevention Initiative program personnel to assist them in complying with the statutory mandate to implement a research-based program model. Applicants are also advised to review information posted on ISBE’s Early Childhood Education Birth to Age 3 Years webpage found at <http://www.isbe.net/earlychi/html/birth-3.htm> before completing their proposals. In FY 2012, there will be approximately 177 programs located throughout the State that may need training and technical assistance services. Applicants should conduct ongoing evaluation to ensure that the training and professional development being developed and implemented is meeting the needs of the local Prevention Initiative personnel. Due to the nature of the work required, prior successful experience with activities similar in scope as those called for in this RFP, including the deployment and supervision of qualified staff, will be a crucial consideration in awarding of the grant.

Program Specifications

Goals and Objectives

The following are goals and objectives for the program to be carried out in consultation with ISBE Early Childhood staff.

Goal 1: Provide core and ongoing trainings that meet the requirements of each program model to ensure high-quality programming as well as additional trainings needed for the management and implementation of all prevention initiative components. (See Appendix C for more information on specific training requirements for each program model. At a minimum one cycle of training for each program model should be provided.)

Objectives:

- Provide model-specific and general early childhood training and technical assistance.
- Provide model-specific training and technical assistance and other early childhood training for staff in Prevention Initiative programs implementing birth-to-three research-validated program models, including Parents as Teachers, Baby TALK, and Healthy Families.
- Provide training for standards-based infant toddler child care providers on the Program for Infant Toddler Caregivers (PITC). Further information on PITC is available at <http://www.pitc.org/>.
- Ensure that model-specific training is always provided by trainers with the appropriate credential or accreditation required by the specific program model.
- Conduct ongoing evaluation to ensure trainings that meet the needs of the local Prevention Initiative personnel are developed and implemented.

Goal 2: Provide technical assistance to help programs with strategies for improving services, strengthening program quality, planning for a continuous improvement approach, implementing their chosen model with fidelity and helping program staff implement what is learned in training.

Objectives:

- Conceptualize and implement an integrated training and technical assistance system to ensure that training is more than a series of unrelated events.
- Provide, as part of the system, opportunities for reflection, integration into practice of concepts learned in training, and feedback from technical assistance staff and peers.
- Review and identify core competencies and skills addressed in trainings across program models.
- Provide forums for cross-agency exchange of ideas, interventions, experiences, and observations to enhance Prevention Initiative program quality.
- Provide structured opportunities for program-to-program mentorship, support, and guidance that includes a screening process to determine programs that are

requested to serve in a leadership mentoring role as well as support for those serving as mentors.

Goal 3: Deliver training in coordination with other organizations providing model specific and more general early childhood trainings.

Objectives:

- Provide training on research-validated program models or curricula other than those listed in #1 above , with the understanding that new models are designed and validated over time and may be identified by the Illinois State Board of Education, or may be proposed by funded programs or the training entity.
- Coordinate with other organizations that provide specific curricula training, program model training, or training for implementation and management of high quality Birth to Three Prevention Initiative programs and work to create a registry of training opportunities for infant and toddler professionals with the understanding that there are several organizations that may provide training relevant to birth-to-three practitioners (e.g., Illinois Trainers Network, Illinois Resource Center, Illinois Network of Childcare Resource and Referral Agencies).
 - Develop capacity to provide or to connect programs with training and technical assistance on other program models.
 - Maintain or work with other organizations to maintain a training registry.
 - Encourage alternate training opportunities through distance and web-based learning to supplement face-to-face relational trainings.
 - Explore accreditation opportunities for training participants including working with the higher education community to develop a process for obtaining college credit for infant toddler trainings when appropriate.

Staff Qualifications

Staff providing training on program models must at a minimum have a bachelor's degree and meet the appropriate credential or accreditation required by the specific program model. In addition, trainers should have relevant experience in providing training and professional development.

Fiscal Information

The annual grant award will not exceed \$1,000,000. The actual grant amount will be contingent upon the amount of funding available. Grant funds are to be used in the direct provision of services.

Travel expenses, including mileage and, where overnight stay is required, lodging and per diem, are subject to the state rates according to the Governor's Travel Control Board as outlined in the Reimbursement Schedule of the Travel Guide for State Employees and any annual changes found therein. The Travel Guide can be found at http://www.state.il.us/cms/2_servicese_oth/trvlguid.htm.

Allowable activities and related expenditures for Prevention Initiative Training and Technical Assistance are provided in Appendix D. Indirect costs are not allowable.

Proposal Format

Each proposal must be submitted in the format outlined below. Please use the following as a checklist in assembling your completed proposal.

- ___ **1. Cover Page (Attachment 1):** Must be signed by the school district superintendent or official authorized to submit the proposal.

- ___ **2. Proposal Abstract (Attachment 2):** Briefly describe the overall objectives and activities of the project, including outcomes. Not to exceed 1 page.

- ___ **3. Proposal Narrative:** Follow the specifications found under “Narrative Requirements,” beginning on pages 5 and 6.

- ___ **4. Budget Summary and Payment Schedule (Attachment 3A):** Must be submitted on the form provided and signed by the district superintendent or official authorized to submit the proposal. The payment schedule should be based on the projected date of expenditures. Salaries and fringe benefits should be requested in equal intervals on the schedule. Supplies, equipment, contracted services and professional development should be requested in the month for which the expenditure is anticipated.

- ___ **5. Budget Breakdown (Attachment 3B):** Must include descriptions of the anticipated expenditures, correlated to the line items set forth on the Budget Summary. Must include subcontract information, if applicable (see item 7 of the document titled “Certification and Assurances, and Standard Terms of the Grant,” Attachment 6).

- ___ **6. Certifications and Assurances (Attachments 4 and 5):** Each applicant is required to submit the certification forms attached (“Program-Specific Terms of the Grant” and “Certification and Assurances and Standard Terms of the Grant”). These must be signed by the official legally authorized to submit the proposal and to bind the applicant to its contents.

Narrative Requirements

The proposal narrative should include the information below in the order in which it is presented. Limit proposal narratives to **10 pages** with a minimum font size equivalent to Arial 11. Information beyond the 10 page limit will not be included in the review process.

- a. **Experience**
 - i. Describe prior experience in providing activities similar in scope and type to the ones called for in this RFP.
 - ii. Describe how these experiences will contribute to the success of this project if awarded the grant.

- b. **Program Planning**
 - i. Describe how the staff development needs of personnel in the local Prevention Initiative programs will be assessed.

- ii. Describe how assurances will be made that all stakeholders including but not limited to local Prevention Initiative programs and other organizations that provide specific curricula training, program model training, or training for implementation and management of high quality Birth to Three Prevention Initiative programs have a voice.
- c. **Program Description**
 - i. In relation to the goals and objectives of the program, describe each activity that will be conducted, the timeline for completion, the person responsible, and how the effectiveness of the activity will be measured.
 - ii. Describe the process, measures, and data elements to be used to determine project success and the degree to which objectives have been met.
- d. **Staffing**
 - i. Describe the qualifications including education and relevant experience of the staff (paid and unpaid) responsible for the activities and services.
 - ii. Indicate the positions including the full-time equivalent (FTE) that will be paid for with the grant and the corresponding job descriptions.

Criteria for Review and Approval of Proposals

Proposals will be reviewed by a panel of reviewers in accordance with the criteria set forth below. Total possible points is 100.

1. Experience (30 points)

The applicant demonstrates sufficient knowledge about educational, health, social and child development services to young children and their families. The applicant demonstrates prior successful experience in providing training and technical assistance activities similar in scope and type to those called for in this RFP.

2. Program Planning (15 points)

The proposal presents adequate procedures for assessing the staff development needs of the personnel in the local Prevention Initiative programs and assuring that all stakeholders have a voice.

3. Program Description (30 points)

The proposed activities are comprehensive, demonstrate a sound approach and have a strong likelihood of effectively addressing the staff development needs of Prevention Initiative personnel to assist them in complying with the statutory mandate to implement a research-based program model. The proposal describes appropriate staff development activities and proposes evaluation methods that will be successful in determining the effectiveness of the approaches taken.

4. Cost-effectiveness of the Proposed Activities (25 points)

The proposed staffing level is sufficient to assure that the proposal's activities and services will be provided in an effective and efficient manner. The proposed budget is consistent with the proposal's activities and appears to be cost-effective, as evidenced by the cost in relation to the numbers to be served and the services to be provided.

**ILLINOIS STATE BOARD OF EDUCATION
Early Childhood Care and Education Position Statement**

The State Board of Education believes that the educational development and success of all Illinois children can be significantly enhanced when children participate in early childhood programs and services.

For the purposes of this position statement, early childhood is defined as the period in a child's life from birth through eight years of age. Appropriate early childhood programs, practices, and services are defined as those which:

- are founded on research-based knowledge about child development;
- promote the child's emotional, physical, mental, and social well-being; and
- support and nurture families.

The Illinois State Board of Education is actively committed to develop, deliver, and support early childhood programs, practices, and services that will enable all children to be successful students and responsible citizens. The State Board will give particular attention to the following actions:

1. Emphasize the need for high-quality early experiences that reflect research and knowledge on program quality and outcomes across the developmental period of birth through eight years.
2. Encourage Illinois public schools to create coherent early learning systems that minimize major transitions for children and provide stable, consistent educational experiences for young children, ages three through eight years.
3. Make prekindergarten programs available for all Illinois children identified as at-risk of academic failure and actively seek their participation. Support the provision of full-day prekindergarten for at-risk students who need additional educational experiences.
4. Support the availability of full-day kindergarten programs for all Illinois children.
5. Collaborate with families and relevant social service providers to provide early identification of and response to educational risk factors among children from birth through three years of age.
6. Collaborate with families, community organizations, child care organizations, Head Start, and other State agencies to meet the physical, mental, social, and emotional needs of young children, including their physical care and protection; share resources, services and accountability.
7. Emphasize the quality of instructional staff and leadership for early childhood programs in Illinois.

RESEARCH-BASED PROGRAM MODEL

For the purposes of the Early Childhood Block Grant for Birth to Age 3 Years, a program model must meet one of the three criteria listed below to be considered research-based. A program model is defined as a frame of reference that identifies the objectives and goals of a program, as well as their relationship to program activities intended to achieve these outcomes. It reflects standard practices that guide the provision of services and determines the parameters delineating the service settings, duration, type of intervention, and ratios of child and/or family served to service provider, etc.

Criteria 1: The proposed program is a replication of a program model which has been validated through research and found to be effective in providing prevention services for at-risk families. Specifically:

- The program model must have been found to be effective in at least one well-designed randomized, controlled trial, or in at least two well-designed quasi-experimental (matched comparison group) studies.
- The program is implemented as closely as possible to the original program design, including similar caseloads, frequency and intensity of services, staff qualifications and training, and curriculum content.

Examples of Research-Based Birth to Three Program Models Recommended by ISBE

- Baby TALK. Further information can be found at <http://www.babytalk.org/>
- Healthy Families America (HFA). Further information can be found at <http://www.healthyfamiliesamerica.org/home/index.shtml>
- Parents as Teachers (PAT). Further information can be found at <http://www.parentsasteachers.org/>
- Prevention Initiative - Center-Based. Further information in Appendix C

Examples of Supplemental Services to Enhance Birth to Three Comprehensive Services

- Doula Services. Further information can be found at <http://www.ounceofprevention.org/programs/doula.php>
- Fussy Baby Network. Further information can be found at <http://www.fussybabynetwork.org/>
- Strengthening Families Illinois. Further information can be found at <http://www.strengtheningfamiliesillinois.org/>

Criteria 2: The proposed program will comply with all of the standards of a nationally recognized accrediting organization (e.g., National Association for the Education of Young Children (NAEYC)). Specifically:

- The program must comply with all standards regarding group size, staff-to-child and/or staff-to-family ratios, staff qualifications and training, and comprehensiveness and intensity of services offered.

- The program must implement a formal, written curriculum which is comprehensive and is based on research about how infants and toddlers learn and develop.

Criteria 3: The program meets all the [Illinois Birth to Three Program Standards](#), has been operating successfully for at least three years, and has a formal, written program model or logic model which identifies the objectives and goals of a program, as well as their relationship to program activities intended to achieve these outcomes. The program model is based on research about what combinations of services have been effective in achieving positive learning outcomes with at-risk infants, toddlers, and their families. The program model should include the following components.

- A formal, written curriculum that is based on research about how infants and toddlers learn and develop and on how to teach parents new ways of supporting and enhancing their child's development.
- A formal, written plan for conducting family needs assessments and developing Individual Family Service Plans addressing their cultural and linguistic background.
- Documented evidence of participant's success in achieving the goals of the prevention initiative (i.e., outcome data).
- An intensity of services sufficient to achieve stated goals with a high-risk population (i.e., amount of contact with parents and children). As a guideline, intensity of services should be on par with Parents as Teachers, Baby TALK, Healthy Families, or Prevention Initiative Center-Based requirements.
- Caseload sizes that do not exceed those recommended by Parents as Teachers, Baby TALK, Healthy Families, or Prevention Initiative Center-Based models.

AT A GLANCE REFERENCE SHEET: REQUIREMENTS FOR SELECTED PREVENTION INITIATIVE MODELS

Model Requirements	Healthy Families (HF)	Parents As Teachers (PAT)	Baby TALK	Prevention Initiative – Centered-Based																								
<p>Staff Qualifications and Training</p>	<p>Educational requirement is HS diploma</p> <p>4 day Core Training provided by Ounce of Prevention.</p> <p>Ongoing in-service trainings</p>	<p>4-year degree in ECE or related field is preferred. Two years of supervised experience with young children and their parents is required.</p> <p>Initial 5-day training consists of 3-day Foundational and 2-day Model Implementation training. A Parent Educator is certified upon successful completion of PAT Model Implementation Training.</p> <p>Annual certification is required to use the PAT model and curriculum materials. To maintain certification, annual in-service hours are required: 1st year = 20 hours 2nd year = 15 hours 3rd year + = 10 hours</p>	<p>A bachelor’s degree is preferred or an associate’s degree with a high level of experience in education, nursing, or social work.</p> <p>Baby TALK professionals should display a high degree of empathy, knowledge and willingness to learn about a family’s needs and culture.</p> <p>Professional Development Training is four full days with the expectation that trainees will study curriculum after they leave training.</p> <p>Annual recertification is required to implement the Baby TALK model and materials.</p> <p>Touchpoints Training, also offered by Baby TALK, is suggested as practitioners mature in their work.</p>	<p>All head infant toddler teachers must have a minimum of an Associate’s degree in Child Development (CD) or Early Childhood Education (ECE) or the equivalent. Teachers must have specialized college-level course work and/or professional development training that prepares them to work with infants and toddlers.</p> <ul style="list-style-type: none"> For programs with 1-2 classrooms, at least one of the infant toddler teachers currently holds or is actively working toward a Baccalaureate degree in CD or ECE or equivalent. For programs with 3 or more classrooms, at least one in every three infant toddler teachers currently holds or is actively working toward a Baccalaureate degree in CD or ECE or equivalent. <p>Family Support Worker qualifications and training is based on Program Model being used.</p>																								
<p>Staffing</p>	<p>Essential staff are a Program Supervisor (see below for Supervisor-to-Staff ratio), a Family Assessment Worker, and Family Support Workers (home visitors).</p> <p>Generally, the ratio of Assessment Worker to Support Workers is 1:4 or 1:5.</p>	<p>Minimum of 1 parent educator and 1 supervisor is required.</p> <p>Number of parent educators is determined by number of families to be served and intensity of services provided.</p> <p>Two years of supervised</p>	<p>Number of practitioners needed is dependent upon program design.</p> <p>Baby TALK recommends a minimum of two practitioners per community for the purpose of collaboration.</p>	<p>Child Care Classroom</p> <p>All classrooms must, at a minimum, meet NAEYC guidelines for ratios and group size</p> <table border="1"> <thead> <tr> <th rowspan="2">Age</th> <th colspan="2">EHS (exceeds)</th> <th colspan="2">NAEYC (Meets)</th> </tr> <tr> <th>Ratio</th> <th>Group Size</th> <th>Ratio</th> <th>Group Size</th> </tr> </thead> <tbody> <tr> <td>6 wk – 12 mo.</td> <td>1:4</td> <td>8</td> <td>1:4</td> <td>8</td> </tr> <tr> <td>12-24 mo.</td> <td>1:4</td> <td>8</td> <td>1:4</td> <td>12</td> </tr> <tr> <td>24-36 mo.</td> <td>1:4</td> <td>8</td> <td>1:6</td> <td>12</td> </tr> </tbody> </table>	Age	EHS (exceeds)		NAEYC (Meets)		Ratio	Group Size	Ratio	Group Size	6 wk – 12 mo.	1:4	8	1:4	8	12-24 mo.	1:4	8	1:4	12	24-36 mo.	1:4	8	1:6	12
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<p>Supervision</p>	<p>At least 1 ½ hours weekly. Maximum staff-to-supervisor ratio is 6:1</p>	<p>Supervisor must attend PAT 2-day Model Implementation Training and maintain PAT certification.</p>	<p>Baby TALK provides ongoing technical support through a variety of media following training. Certified</p>	<p>As determined by the program</p>																								

Model Requirements	Healthy Families (HF)	Parents As Teachers (PAT)	Baby TALK	Prevention Initiative – Centered-Based
		<p>Qualifications: A 4-year degree in ECE or related field is recommended</p> <p>Demonstrated ability to work with adults and children is necessary.</p> <p>Supervisors must provide a minimum of 2 hours of staff meetings and 2 hours of individual supervision for each parent educator each month.</p> <p>Maximum staff –to-supervisor ration is 12:1.</p>	<p>practitioners report their progress on an annual basis as they renew their certification through the Baby TALK Professional Association.</p> <p>Reflective Supervision is dependent on reflection, collaboration and regularity. Best practice of reflective supervision would indicate regularity of not less than once per month.</p>	
Case Load	A maximum of 15 cases/full-time home visitor if all participants are seen weekly with no more than 25 cases, regardless of service intensity levels of participants.	<p>Caseload sizes: Weekly visits = 10-12 families Every 2 weeks = up to 24 families</p>	Following screening/outreach services, caseloads will be 15-25 families per full time staff member depending on the intensity of services	<p>Family Support Case Load Parent support staff: 1 FTE for 25 – 30 families Classroom staff: see ratio and group size above.</p>
Frequency of home visits/group services	Visits are weekly for at least the first 6-9 months of enrollment. There are criteria for decreasing the level of intensity after that point.	<p>Home visiting intensity is a key factor in achieving outcomes. High need families must receive a minimum of 2 visits a month spread out over the course of the year</p> <p>Families with greater need should receive weekly visits. Group meetings must be conducted at least once a month.</p>	Program design should provide for a minimum of twice/monthly services. For families facing challenges, a minimum of weekly contacts is recommended.	<p>Home Visits Monthly individual visits with families, at least two of which per year should be in the home and Monthly group meetings with families</p>
Curriculum	No specific curriculum is required, though there is a requirement that the program use a curriculum. Commonly used curricula include PIPE, San Angelo, HELP at Home, and others.	<p>Parents as Teachers strength –based approach includes three areas of emphasis:</p> <ul style="list-style-type: none"> ▪ child centered parenting, ▪ parent – child interaction and ▪ family well being. <p>The developmental-centered parenting approach builds on the strengths of families by collaboration with them; providing a rich knowledge base for parents on targeted</p>	<p>Baby TALK Curriculum is provided to all trainees. It covers prenatal through preschool and provides materials for personal visits, group activities, and specialized populations such as teen parents, parents in need of adult education services, and families whose children have special needs.</p> <p>Most curriculum components are available in Spanish.</p>	Creative Curriculum for Infants and Toddlers, High/Scope for Infants and Toddlers, or another researched based classroom curriculum

Model Requirements	Healthy Families (HF)	Parents As Teachers (PAT)	Baby TALK	Prevention Initiative – Centered-Based
		<p>childhood development and insights on family growth.</p> <p>The curriculum includes seven foundational visits as well as a planning tool and materials for subsequent visits. Parent educators create visit plans that meet the family specifically where they are in their family life development and areas of need. In addition, an extensive resource of research based materials is available to parent educators to address family life and risk issues. These materials are designed to deepen the parent educators knowledge as well as provide parent friendly materials to help educate and empower families.</p> <p>Child development handouts for parents are available in both English and Spanish.</p> <p>Other curriculum and training available include:</p> <ul style="list-style-type: none"> ▪ Working with Teen Parents ▪ Supporting Care Providers ▪ Working with Families with Special Needs Children ▪ Young Dads & Young Moms: A Curriculum for Peer Facilitated Groups 		
Program Model Consultants' Contact Information	Bill McKenzie bmckenzie@ounceofprevention.org	Clare Eldredge celdredge@ounceofprevention.org	Deb Widenhofer deb@babytalk.org	Raydeane James rjames@isbe.net

DEFINITIONS OF BUDGET FUNCTIONS

Function Number	FUNCTION
2210	<u>Improvement of Instruction Services</u> - Activities which are designed primarily for assisting instructional staff in planning, developing, and evaluating the instructional process. Included are instructional and curriculum development services and instructional staff training services.
2300	<u>General Administration</u> - Activities concerned with establishing and administering policy in connection with operating the local education agency or funded agency.
2540	<u>Operation and Maintenance of Plant Services</u> - Activities concerned with keeping the physical plant (i.e., grounds, buildings, and equipment) in an effective and safe working condition. This includes activities of maintaining safety in buildings, on the grounds, and in the vicinity of schools or funded agency.
3000	<u>Community Services</u> - Services provided by the LEA or funded agency for the community as a whole or some segment of the community, such as community recreation programs, civic organization activities, public libraries, programs of custody and child care, welfare services, non-public school student services, and home/school services.
4000	<p><u>Payments to Other Districts and Governmental Units</u> - Payments to LEAs, generally for tuition, transportation and all other services rendered to pupils residing in the paying LEA. Where a nonoperating district pays an operating district for the education of pupils, the nonoperating district records such payments here. Flow-through funds - where payment is received by an LEA and a portion is transferred to one or more other LEAs - use object 600. (Expenditures in this function are not counted in state expenditure totals.)</p> <ul style="list-style-type: none"> -Payments for Regular Programs -Payments for Special Education Programs -Payments to University/College Programs -Payments for Career & Technical Ed Programs -Payments for Community College Programs -Other Payments to Governmental Units

DEFINITIONS OF BUDGET OBJECTS

Object Number	Object
100	<u>Salaries</u> : Amounts paid to permanent, temporary or substitute employees on the payroll of the local education agency (LEA). This includes gross salary for personal services rendered while on the payroll of the LEA.
200	<u>Employee Benefits</u> : Amounts paid by the LEA on behalf of employees; these amounts are not included in the gross salary, but are over and above.
300	<u>Purchased Services</u> : Amounts paid for personal services rendered by personnel who are not on the payroll of the LEA and other services which the LEA may purchase. While a product may or may not result from the transaction, the primary reason for the purchase is the service provided in order to obtain the desired results.
400	<u>Supplies and Materials</u> : Amounts paid for material items of an expendable nature that are consumed, worn out, or deteriorated in use or items that lose their identity through fabrication or incorporation into different or more complex units or substances.
500	<u>Capital Outlay</u> : Expenditures for the acquisition of fixed assets or additions to fixed assets.
600	<u>Other Objects</u> : Flow-through funds that one district receives as a part of a specific grant and then transfers to one or more other districts.
700	<u>Non-capitalized Equipment</u> : Items that would be classified as capital assets except that they cost less than the capitalization threshold but more than the \$500 minimum value established for purposes of calculating per capita cost pursuant to Section 18-3 of the School Code [105 ILCS 5/18-3].

* Definitions are from the Illinois Program Accounting Manual
(For further information, see <http://www.isbe.state.il.us/sfms/html/ipam.htm>)

