Guidelines & Applications
Child Care Program Quality Improvement

YWCA Northwestern Illinois
Child Care Solutions
4990 East State Street
Rockford, IL 61108

July 1, 2018– June 30, 2019

Illinois is committed to assisting child care providers in providing quality education and care for young children (birth through 12 years). One way to do that is with the Quality Improvement (QI) Funds. The QI Funds have been developed and are offered through the child care resource and referral agencies to assist and support programs that are choosing to work towards / maintain an ExceleRate™ IL Circle of Quality.   There are three areas to the QI Funds: ExceleRate™ IL cohort, ExceleRate™ IL training stipend and accreditation assistance. Please read the overview and the guidelines to determine which area(s) best meets your needs. Requests may be made in multiple areas.

The QI Funds are based on available funding. The QI Funds program is administered by the YWCA Northwestern Illinois Child Care Solutions. Funds are provided by the Illinois Department of Human Services.

Specifics on each component are noted in this Quality Improvement Funds Grant Pack.

Section A   Quality Improvement Funds Overview Chart

Section B   General Information + Quality Improvement Funds Application (required for all who apply)

Section C   ExceleRate™ IL Cohort Specific Information + ExceleRate™ IL Cohort Application

Section D   ExceleRate™ IL Training Stipend Specific Information + ExceleRate™ IL Training Stipend Application

Section E   Accreditation Specific Information + Accreditation Application

Please read the entire document before completing any application.

Section A: Overview

Basic Eligibility for all Quality Improvement Funds	1. Program must be listed on the local Child Care Resource & Referral (CCR&R) provider database 2. Must currently be providing child care services in one of the following Illinois counties: Boone, Jo Daviess, Stephenson or Winnebago 3. Programs must currently be caring for children whose care is paid for by the IDHS Child Care Assistance Program (CCAP) 4. Have no unpaid financial obligation to CCR&R agency or IDHS Bureau of Child Care & Development
Priority Programs	1. Programs currently caring for children whose care is paid for by the IDHS CCAP, with greater priority given to those with 50% or more of their enrollment consisting of IDHS CCAP funded children 2. Programs that are full year (at least 47 weeks)/full day (at least 8 hours) 3. Programs that are currently caring for infants and toddlers 4. For **ExceleRate IL Cohort** – first time applicant programs are a priority for cohort participation

Abbreviations: •*FCC = family child care*   •*LFCC = Licensed family child care*   •*FGH= family group home*   •*CC = child care*

Component	ExceleRate™ IL Cohort	ExceleRate™ IL Training Stipend	Accreditation Assistance
Provider Type	Licensed CC Centers & LFCC	Licensed CC Centers & LFCC	Licensed CC Centers & LFCC
Circle of Quality	ExceleRate™ Illinois Silver, Gold	ExceleRate™ Illinois Bronze, Silver, Gold	ExceleRate™ Illinois Silver, Gold
Specific Requirements and Expectations *For the definition of "working towards/ maintaining" see B8*	1. **Centers** must be working towards/maintaining ExceleRate™ IL under the child care path **LFCC/FGH** must be working towards/maintaining ExceleRate™ IL under the LFCC path 2. Attend and participate in the cohort meetings 3. Self-assessment: If maintaining an ExceleRate Circle, must have completed within the last 6 months. If working towards ExceleRate application, must be willing to complete as part of cohort participation. 4. Consultant agreement: Must have a current, signed Consultant Agreement in place with the CCR&R Quality and/or Infant Toddler Specialist OR willing to sign Agreement during the cohort session one. 5. Develop a Continuous Quality Improvement Plan (CQIP)	1. **Centers** must be working towards/maintaining ExceleRate™ IL under the child care path **LFCC/FGH** must be working towards/ maintaining ExceleRate™ IL under the LFCC path 2. Training must be required for an ExceleRate™ IL Circle of Quality and must be ExceleRate™ approved 3. Staff member must be a current member of the Gateways Registry 4. A stipend is only available for the minimum staff required to take the training for ExceleRate™ IL 5. Training participants must be currently employed at the child care program	**Programs** must be applying for or maintaining an ExceleRate™ IL Circle of Quality
Funding	Funding is determined based on the Continuous Quality Improvement Plan (CQIP) and provider type; in addition, for child care centers program capacity.	$10 / contact training hour	80% of the cost of accreditation, as funding allows

Funding Range for the Fiscal Year (July - June). *The allowable funding applies for any combination of QI Funds.*		
Provider Type	Capacity	Funding Range
Licensed Family Child Care		Up to $1200
Licensed Family Group Home		Up to $1500
Child Care Center	50 or less	Up to $3000
	51-100	Up to $6000
	101 or more	Up to $9000

Section B: Frequently Asked Questions
The use of the term "child care program" / "program" in this document includes child care centers and family child care

B1. WHO CAN APPLY?
- Please refer to the chart in Section A: Overview *"Basic Eligibility and Provider Type"*

B2. ARE THERE ANY PRIORITY PROGRAMS?
- Yes, refer to the chart in Section A: Overview "*Priority Programs*"

B3. WHAT ARE THE THREE AREAS OF THE QUALITY IMPROVEMENT FUNDS?
- ExceleRate™ IL Cohort – see Section C for details
- ExceleRate™ IL Training Stipend – see Section D for details
- Accreditation Assistance – see Section E for details

B4. CAN A PROGRAM APPLY FOR MORE THAN ONE AREA?
- Yes

B5. CAN A PROGRAM BE WORKING ON MORE THAN ONE CIRCLE OF QUALITY?
- Not for the purposes of the Quality Improvement Funds. A program must declare **one** Circle of Quality.

B6. WHAT IS THE APPLICATION PROCESS?
- Child Care programs complete and submit the application, the appropriate supplemental application and all required supporting documentation - Refer to a specific section for required supporting documentation
- As applications are received, a team of CCR&R staff will review for completeness and eligibility. Programs will be notified in writing of their approval/denial.
- Incomplete applications will be returned to the child care program

B7. CAN AN AGENCY SUBMIT ONE APPLICATION FOR ALL SITES IF THEY HAVE MORE THAN ONE SITE?
- No. Each site (physical location) is considered a different program. Each program must submit an application with requests specific to that program.   One license = one site = one program = one application

B8. WHAT IS MEANT BY "WORKING TOWARDS OR MAINTAINING" EXCELERATE™ ILLINOIS
- A program must have at a minimum completed the *Orientation to ExceleRate™ IL training* or currently hold an ExceleRate™ IL Circle of Quality (Bronze, Silver, Gold).
- For those maintaining an ExceleRate Circle, must have completed self-assessment within the last 6 months (from time of application). For those working towards ExceleRate application, must be willing to complete as part of cohort participation.
- Must have a current, signed Consultant Agreement in place with the CCR&R Quality and/or Infant Toddler Specialist **OR** willing to sign Agreement during cohort session one.

B9. WHAT IS THE DEADLINE FOR SUBMITTING AN APPLICATION/SUPPORTING DOCUMENTATION?
- See each section for application submission deadlines (C12, D15, E4)
- All supporting documentation must be received at **YWCA Northwestern Illinois Child Care Solutions** by **May 17, 2019.**

B10. WHAT SUPPLEMENTAL APPLICATION(S) DO I COMPLETE?
- That depends - ALL applicants must complete the QI Funds application (pages 5-7). In addition, they must complete one or more of the corresponding Supplemental Applications (found in this pack). C = ExceleRate™ IL Cohort; D = ExceleRate™ IL Training Stipend; E = Accreditation Assistance
- If Supplemental applications are submitted at different times, a QI Funds application must be completed each time

B11. WHAT ARE THE GRANT FUNDING AMOUNTS?
- Please refer to the Overview Chart in Section A
- Please note the allowable funding range is for *any combination of Quality Improvement Funds components*

B12. HOW IS PAYMENT MADE?
- Please see the specific section for payment information

B13. DO THE FUNDS NEED TO BE REPAID?
- This is a grant program, which means funds do not generally need to be paid back. However, the grant funds come from the State of Illinois, and certain policies and procedures must be followed.
- If a program goes out of business within two years of the grant award, funds received under the **_cohort component_** will need to be repaid at a pro-rated amount. In some cases, **YWCA Northwestern Illinois Child Care Solutions** may be able to recoup materials and equipment purchased with grant funds.
- In the event of over or improper payment or reimbursement, appropriate arrangements will need to be made with **YWCA Northwestern Illinois Child Care Solutions** regarding return of funds
- If payment is made for an accreditation process and the program withdraws or does not complete the process, the child care program will need to work with **YWCA Northwestern Illinois Child Care Solutions** regarding the return of funds.

B14. DO GRANT FUNDS NEED TO BE REPORTED AS INCOME?
- Grant funds may need to be reported as income. If awarded grant funds, a completed W-9 will be required. Items purchased with grant money may be eligible to claim as business deductions. Please consult an accountant or tax preparer for further information.

B15. WHERE ARE APPLICATIONS SUBMITTED?
> **YWCA Northwestern Illinois**
> **Child Care Solutions**
> **ATTN: Kristian Wanland**
> **4990 East State Street**
> **Rockford, IL 61108**
> **Fax: 815.484.9456**
> **Email: Kristianb@ywcanwil.org**

B16. WHAT ELSE DO I NEED TO KNOW?
- Only completed applications will be considered
- Applicants must use the provided application for July 2018– June 2019
- Faxed/electronic applications will be accepted
- Funding is limited and not guaranteed
- Partial funding may be awarded
- Payment cannot be made until a complete application and all required documents are received

B17. IS THERE AN INFORMATION SESSION FOR THE QUALITY IMPROVEMENT FUNDS?
- No, there is not an information session for the QI Funds, but questions may be directed to Kristian Wanland, QI Funds Coordinator.

B18. FOR MORE INFORMATION OR TO ASK FURTHER QUESTIONS, PLEASE CONTACT:
- **Kristian Wanland / 815.484.9448 ext. 208 / Kristianb@ywcanwil.org**

The QI Funds application form (pages 5 -7) must be completed by anyone applying. In addition, a supplemental application(s) must be attached. Supplemental applications follow each section.

Quality Improvement Funds Application Form

*All applicants are required to complete this application **and one or more** supplemental application(s).*

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July 1, 2018– June 30, 2019

➔ The current year application form must be used. This application may not be reformatted.
➔ Please type or print using black or blue ink
➔ Complete *all fields*; use "NA" if not applicable – **do not leave any field blank.** *Incomplete applications will be returned*.
➔ Please refer to the Quality Improvement Guidelines & Applications

STEP1: Child Care Program Information	

<table>
<tr><td rowspan="10">1A</td><td colspan="2">Program Name</td></tr>
<tr><td colspan="2">Program (work site) Address:</td></tr>
<tr><td colspan="2">City: State: Zip Code: County:</td></tr>
<tr><td colspan="2">Mailing address (if different):</td></tr>
<tr><td>Phone #: (   )</td><td>Fax #: (   )</td></tr>
<tr><td>Director/Administrator Name:</td><td>Email:</td></tr>
<tr><td colspan="2">Is the program listed on the CCR&R referral database?   ☐Yes ☐No</td></tr>
<tr><td colspan="2">Is the program full year (at least 47 weeks)/full day (at least 8 hours)?   ☐ Yes ☐No</td></tr>
</table>

1B

Type of Program:
program must check a program type, license status, enter program capacity & if applicable, accreditation entity

☐ Center	☐ Family Child Care	☐ Group FCC	☐ Head Start	☐ School Age Program

☐ Licensed	DCFS License #: _____ Expiration date: _____	☐ License Exempt Center	Program Capacity: _____

If applicable, program is accredited by: ☐ NAEYC ☐ NAC ☐ NAFCC ☐NECPA ☐Advance-Ed ☐AMS ☐COA

1C

Age Groups:
Currently providing care for:
(Check all that apply)

	☐ Infants 6 wks – 14 months	☐ Toddlers 15-23 months	☐ Twos 24-35 months	☐ Preschool 3-5 years	☐ School Age K-12 years
Capacity					
Current Enrollment					
CC Centers: enter the # of classrooms for age group:	___ classrooms	___ classrooms	___ classrooms	___classrooms	___classrooms

1D

Indicate date attended/completed (mm/dd/yyyy):

CC CENTERS *ExceleRate™ IL Orientation* _____ *, **An *Introduction to Environment Rating Scales* _____	**LICENSED FAMILY CHILD CARE** *ExceleRate™ IL Orientation for LFCC:* _____ * An *Introduction to ERS OR Family Child Care Environment Rating Scale* _____

*Does not apply to programs that are currently accredited or working towards accreditation

** *An Introduction to ERSs inclusive of ECERS-3 (training offered after July 2017). ECERS-3 Update training previously offered is accepted.

	Quality Improvement Funds Application Form
1E	*ExceleRate™ IL* circle program is ***currently at***: ☐ Licensing ☐ Bronze ☐ Silver ☐ Gold ☐ NA	*ExceleRate™ IL* circle program is ***working towards***: ☐ Bronze ☐ Silver ☐ Gold
1F	Does your program currently care for children whose care is paid for by the IDHS Child Care Assistance Program? ☐ Yes ☐ No ***Requirement of the program*** Have the *Program Administrator/Primary FCC provider* complete the following formula to determine the percentage of children in your program receiving IDHS child care financial assistance. To calculate: Total Number of children with IDHS Financial Assistance **DIVIDED** by Current total Enrollment **MULTIPLIED** by 100 EQUALS Percentage of Children Receiving IDHS Assistance. (FCC providers: include your own children, under age 13, in enrollment) _____ ÷ _____ X 100 = _____ % <div align=center>*# of IDHS children* *Current Total Enrollment* *Percentage of IDHS Children*</div>

STEP 2: Funding Request

2A	Request is being made for: ☐ Cohort Participation *Complete Supplemental Application C* ☐ Training Stipend *Complete Supplemental Application D* ☐ Accreditation Assistance *Complete Supplemental Application E*
2B	If only partial funds are available will you complete the activity? ☐ Yes ☐ No Are you receiving additional funding from another source to assist with requested items/training/accreditation? (e.g. SAM Project, United Way, NAEYC, other, etc.) If yes, list the source(s), the item/activity and amount: _____ $_____ _____ $_____ _____ _____ $_____

STEP 3: Payment Information

3	Requesting payment be made to: • Cohort – see question C15for payment method • Training Stipend – All payments are made directly to the child care program • Accreditation Assistance ☐ Child care program ☐ Accrediting body Check Payable To: _____ Address _____ City: _____ State: _____ Zip Code: _____ (**REQUIRED**): Applicant ☐ Social Security Number/ or ☐ FEIN Number:

Quality Improvement Funds Application Form
STEP 4: Application Checklist and Authorization

❏I completed all areas of the current application. If a question was not applicable I inserted N/A.
   Incomplete applications will be returned.

❏I completed the appropriate supplemental application(s). ***Incomplete applications will be returned.***

❏I signed and dated the application and the supplemental application(s).

❏I have attached all the required supporting documentation. (Refer to the guidelines and applications #C9, D14, E3)

❏The payment information I have submitted is correct.

❏I have made a copy of this application for my records.

I have completed all documentation that was requested in the instructions and requirements. I certify that the above information is true and accurate, that I have not been indicated of child abuse and neglect and that my name or the names of my employees (if applicable) are not listed on the child abuse tracking system. Further, I grant permission for a representative of the Illinois Department of Children and Family Services or their agent to release information about my pending or current Child Care Home, Child Care Group Home or Child Care Center license if applicable to my application.

_____   _____
Program Administrator Signature (required)   Date   Agency Administrator Signature (if applicable)   Date

FOR CCR&R USE ONLY:

Request for:

Date received: _____   O Cohort   OTraining Stipend   OAccreditation

Reviewed by: _____   Date: _____

O **Pending**   date:_____/ reason:_____

_____

O**Denied**   date: _____/ reason: _____

_____

O **Approved**   date:_____/ Amount $_____

Section C: ExceleRate™ Illinois Cohort

A cohort is a group of individuals working towards a common goal. It not only provides an opportunity to learn and work on achieving the goal, but also provides an opportunity to develop relationships with your peers. The Child Care Resource & Referral (CCR&R) agency will offer cohort groups for programs working to improve the quality of care, working towards or maintaining an ExceleRate™ IL Silver or Gold Circle of Quality. Upon completion of the cohort requirements/expectations and the program's self-assessment, as applicable programs may request funds to help achieve objectives noted on the program's Continuous Quality Improvement Plan (CQIP). ***Please note: first time applicant programs are given priority for cohort participation.***

C1. WHO CAN PARTICIPATE IN THE COHORT?
- A program administrator is required to attend. For agencies with more than one child care program, an administrator from each site is required to attend.
- Program Administrator is defined as: for centers the person responsible for the on-site day to day operation of the child care program (director, assistant director, director/teacher –when 50% or more time is spent in administration role); for licensed family child care it is the primary care provider.
- Teaching staff (teacher/assistant teacher, school age worker/assistant) from a child care program or assistants from a LFCC program that is working towards improving the quality of care, and working towards/maintaining an ExceleRate™ IL Circle of Quality
- Based on provider applications, the CCR&R may need to limit the number of staff attending from one program

C2. DOES THE SAME PERSON HAVE TO ATTEND ALL THE COHORT MEETINGS?
- Yes

C3. WHAT ARE THE COHORT TOPICS?
- CCR&Rs will work to address the needs of the applicants. For example, programs working on self-assessment and developing a CQIP, programs working towards national accreditation.

C4. WHAT ASSESSMENT TOOLS AND NATIONAL ACCREDITATIONS MAY BE COVERED IN AN EXCELERATE™ IL COHORT?
- The Environment Rating Scales, the Program Administration Scale for centers, the Business Administration scale for family child care or national accreditations

C5. WHO WILL BE LEADING THE COHORT?
- Various CCR&R system staff, depending on the cohort topic

C6. HOW WILL COHORTS BE ASSIGNED?
- A team of CCR&R staff will review applications and based on the needs will assign the cohort groups

C7. WHAT ARE THE EXPECTATIONS?
- Attend and participate in all cohort meetings - at a minimum eight (8) contact hours
- For those maintaining an ExceleRate Circle, must have completed self-assessment within the last 6 months. For those working towards ExceleRate application, must be willing to complete as part of cohort participation.
- Must have a current, signed Consultant Agreement in place with the CCR&R Quality and/or Infant Toddler Specialist OR willing to sign Agreement during the cohort session one.
- Develop a Continuous Quality Improvement Plan (CQIP)
- As applicable, develop a written request/budget for needs based on the self-assessment/CQIP results

C8. SUPPORTING DOCUMENTATION
In addition to a completed application and Supplemental Application C, the following documentation is required:
- A copy of the ExceleRate™ IL, certificate/award if applicable
- W-9 form (included in this packet)

C9. WHAT CAN FUNDS BE USED FOR?
- Materials and equipment to meet the ExceleRate™ IL Circle of Quality standards that are documented as needs through the self-assessment/CQIP

C10. WHAT CAN'T FUNDS BE USED FOR?

- General operating expenses
- Staff salaries/wages, benefits, bonuses
- Televisions, VCR, DVR, Video gaming systems
- Vehicles, vehicle repair
- Pools and pool equipment
- Trampolines
- Service agreements (e.g., cell phone, internet)
- On- going per child costs associated w/assessment tools
- Cosmetic improvements to the facility, decks
- Staff training

- Consumable items (e.g., paint, paper, food)
- Used equipment
- Screen devices for children under 2
- Motorized riding toys
- Items from a 3rd party purchase
- Items that restrict child mobility
- Developmentally inappropriate items
- Non age appropriate items
- Consultants, Mentors, Coaches

C11. WHAT ARE THE DATES FOR THE COHORT MEETINGS?

- **Cohort One- Stephenson County**
  January 29th, February 5th, 19th, & 26th 2019 from 6pm-8pm

- **Cohort Two-Winnebago County**
  January 31st, February 7th, 21st, & 28th 2018 from 6pm-8pm

C12.   WHAT IS THE DEADLINE FOR SUBMITTING MY APPLICATION?

- Applications for cohort **MUST BE RECEIVED BY December 7, 2019.**

C13. MAY I PARTICIPATE IN MORE THAN ONE COHORT PER FISCAL YEAR?

- No

C14. WHAT ARE THE GRANT AMOUNTS?

- Please see the Overview Chart in Section A for funding ranges
- Please note that the funding range is a combination of all three Quality Improvement Fund areas

C15. HOW ARE FUNDS PAID?

- Forward up to 75% of grant award to provider and reimburse remaining percentage after receipt of expenditure documentation for total grant amount

Supplemental Application C: ExceleRate™ Illinois Cohort Application

Program Name	
Program (work site) Address:	
City: State: Zip Code: County:	
Program Administrator:	

Have you participated in an ExceleRate IL QI Cohort? ☐YES ☐NO If yes, What year (s)?		
What ExceleRate™ IL Circle of Quality are you ☐working towards/ ☐maintaining?	☐Silver ☐Gold	
If **maintaining** ExceleRate Circle, have you completed a recent self-assessment of your program?	☐YES ☐NO	
If **working towards** an ExceleRate Silver/Gold Circle, have you completed a recent self-assessment of your program OR are you willing to complete as part of cohort?	☐YES ☐NO	
Is your program currently working with a CCR&R Specialist? *Please note: it is an expectation of the cohort process that programs will work with a CCR&R specialist and have a current, signed Consultant Agreement in place at the start of cohort participation.*	☐YES ☐NO	
Is your program: ☐working towards/ ☐maintaining accreditation?	☐YES ☐NO	
If yes, which accreditation: ☐ NAEYC ☐ NAC ☐ NAFCC ☐NECPA ☐Advance-Ed ☐AMS ☐COA		

To assist CCR&R staff in planning the cohort, please answer the following questions:

1. Which assessment tool do you plan to use, or did you use? If completed already, indicate the date(s):

2. List topics that would be helpful to discuss during a co-hort.   CCR&Rs will work to address the needs of the applicants. **Please note: these are suggested topics and not necessarily part of the co-hort.** (*for example: conducting/assisting staff with a self- assessment, as a team developing a continuous quality improvement plan, encouraging staff involvement with ExceleRate IL, selecting a curriculum, etc.),*

3. List three things you hope to gain/learn by participating in the cohort:

#C8   In addition to a completed QI Funds Application and Supplemental Application C, attach
- If applicable, a copy of your program's ExceleRate™ Illinois, certificate/award
- W-9 form (Included in this packet)

As the program administrator, I agree to complete all the requirements of this program as stated in the Quality Improvement Funds guidelines.

_____   **Program Administrator's Signature**   _____ date

Section D: ExceleRate™ Illinois Training Stipends

Licensed child care programs working towards/maintaining an ExceleRate™ IL Circle of Quality may apply for an ExceleRate™ IL training stipend. The stipend applies only to the required training within the ExceleRate™ IL Circle of Quality that the program is working towards/maintaining and is available only to the minimum staff required to attend the training.

D1. WHO MAY APPLY FOR A TRAINING STIPEND?
- The minimum staff required to take training per the ExceleRate™ IL Circle of Quality
- Staff of licensed programs pursuing an ExceleRate™ IL Bronze, Silver or Gold Circle of Quality
- Staff is defined as
  - for Centers: program administrator and teaching staff. *Program Administrator* is defined as the person responsible for the on-site day to day operation of the child care program. Includes Director, Assistant Director, Director/Teacher (when spending 50% or more time in administration role). *Teaching staff* is defined as Lead Teacher, Teacher, Director/Teacher (when spending 50% or more time in teaching role), teaching assistant
  - for Family Child Care: the primary care provider and FCC assistant

D2. ARE THERE SPECIFIC REQUIREMENTS?
- Training must occur during the current fiscal year (7/1/18-6/30/19)
- Training must be required for the Circle of Quality which the program is working towards/maintaining
- Training must be ExceleRate™ approved (face to face and on-line)
- Training participants must be a current member of the Gateways Registry
- Training participants must be currently employed at the program

D3. WHAT TRAINING IS APPROVED TO RECEIVE AN EXCELERATE™ IL STIPEND?
- Please refer to the training grids at http://www.excelerateillinoisproviders.com (select "How it Works" and then the overview for provider type) to confirm the requirements for a Circle of Quality and the minimum required staff. Below is a list of workshop titles (found on the training grid) that are ExceleRate-Approved/Gateways Registry Approved as of July 25, 2017.
  - *ExceleRate IL Orientation for Licensed Child Care Centers*
  - *ExceleRate IL Orientation for Licensed Family Child Care*
  - *An Introduction to the Environment Rating Scales*
  - *An Introduction to the Family Child Care Environment Rating Scale*
  - *CLASS training*
  - *Illinois Early Learning Guidelines*
  - *Illinois Early Learning & Development Standards*
  - *Finding a Curriculum that Works for You*
  - *Off the Shelf and into Practice: Using Your Curriculum Every Day*
  - *Training on a specific Curriculum (e.g., Creative Curriculum)*
  - *Introduction to Developmental Screening tools*
  - *Early Childhood Developmental Screening*
  - *Fundamentals of Child Assessment*
  - *Welcoming Each & Every Child (formerly Special Care)*
  - *Family & Community – Partners in Learning*
  - *An Introduction to Transitions*
  - *Getting Ready for PAS*
  - *Getting Ready for BAS*
  - *Understanding and Planning for Continuous Quality Improvement*
  - *Basics of Linguistically & Culturally Appropriate Practice*
  - *Creating Individual Professional Development Plans*

D4. DOES THE EXCELERATE™ ILLINOIS TRAINING STIPEND COVER THE TRAINING NEEDED TO OBTAIN/MAINTAIN A CREDENTIAL AND/OR ADDITIONAL PROFESSIONAL DEVELOPMENT HOURS?
- No, these training sessions may be eligible for the Individual Professional Development funds.

D5. WHICH STAFF ARE REQUIRED TO ATTEND TRAINING?
- This varies per training; however, it is either the Center Administrator or the Center Administrator and a percentage of teaching staff. For FCC it is the primary care provider and FCC assistant(s) (when specified on the Circle of Quality Chart). Please refer to the Circle of Quality charts - http://www.excelerateillinoisproviders.com/

D6. DOES THE SAME PERSON HAVE TO ATTEND ALL THE TRAINING?
- Program administrator – No, but the person(s) must be in a role as described in D1.
- Teaching staff– not necessarily, but the person(s) must be in a role as described in D1.
- For LFCC it is the primary care provider and LFCC assistants (when specified on the Circle of Quality chart).

D7. IS THERE A STAFF LIMIT?
- Programs may apply for the stipend based on the **minimum** training requirements listed on the Circle of Quality chart which they are working towards/maintaining

D8. WHAT ABOUT ON-LINE TRAINING?
- If a required ExceleRate™ IL training is offered on-line, the training is eligible for the stipend. Please note the stipend is based on the number of training contact hours

D9. HOW DO I KNOW WHEN AND WHERE THE TRAINING SESSIONS ARE?
- Training sessions will be noted on your local CCR&R training calendar www.ywcanwil.org
- Training information may be found at the statewide training calendar www.ilgateways.com

D10. WHAT IF A PROVIDER WANTS TO ATTEND AN EXCELERATE™ APPROVED TRAINING THAT ISN'T REQUIRED FOR THE CIRCLE OF QUALITY THEY ARE WORKING TOWARDS/MAINTAINING?
- The stipend only applies to training that is required for the Circle of Quality the program is working towards/maintaining

D11. WHAT IF A PROVIDER WANTS TO ATTEND A TRAINING THAT ISN'T REQUIRED FOR EXCELERATE™ ILLINOIS?
- The training may be eligible for Individual Professional Development Funds. Check with **YWCA Northwestern Illinois Child Care Solutions** for information

D12. WHAT IS THE AMOUNT OF THE STIPEND?
- $10.00 per contact training hour (applies to face to face and on-line courses)
- Travel time is not covered under the stipend
- For the allowable funding ranges per program per fiscal year please see Section A: Overview Chart. Please note that the allowable funding range is a combination of all three Quality Improvement Fund areas.

D13. WHAT DOES THE STIPEND COVER?
The stipend is designed ***to assist with*** staff costs while staff are taking the required ExceleRate™ IL training including:
- staff wages while attending training outside of normal working hours
- substitute wages while staff attend training during working hours

D14. WHAT SUPPORTING DOCUMENTATION IS NEEDED?
In addition to a completed application and Supplemental Application D, the following documentation is required
- Documentation of training attendance/completion
- Proof of Gateways Registry Membership for each training participant
- W-9 form (included in this packet)

D15. WHAT ARE THE DEADLINES FOR ME TO SUBMIT MY APPLICATION FOR A TRAINING STIPEND?
- Training Stipend Applications may be submitted at any time during the funding cycle. However, for this funding period the final due date for applications to be received at the CCR&R is May 17, 2019.

D16. HOW IS PAYMENT MADE?
- Payment is made directly to the child care program *after* training is completed and required documentation is submitted

Supplemental Application D: EXCELERATE™ ILLINOIS Training Stipend
For Licensed Child Care Center Staff and Family Child Care Primary Care Giver

Program Name	
Program (work site) Address:	

City:	State:	Zip Code:	County:

What ExceleRate™ IL Circle of Quality are you working towards? ☐Bronze ☐ Silver ☐Gold	

✓*Training stipend is available for the minimum staff required to take the training for ExceleRate™ IL based on the Circle of Quality the program is working towards/maintaining*

✓*Please note: Only one staff member per form, copy as needed.*

STAFF MEMBER:		REGISTRY ID #	☐Administrator ☐Teaching Staff ☑Teacher ☐Assistant ☐LFCC provider ☐ LFCC Assistant
Current Credential: check all that apply – indicate level ☐ IDC ___ ; ☐ECE____ ; ☐ITC ____ ; ☐FCC____ ; ☐ Other _____ ; ☐NA			

TRAINING DATE	TRAINING TITLE / LOCATION	TYPE	CONTACT HOURS
		☐face to face ☐on-line	
		☐face to face ☐on-line	
		☐face to face ☐on-line	
		☐face to face ☐on-line	
		☐face to face ☐on-line	
		☐face to face ☐on-line	
		☐face to face ☐on-line	
		☐face to face ☐on-line	
		☐face to face ☐on-line	
		☐face to face ☐on-line	
TOTAL # OF CONTACT HOURS THIS PAGE			
Request this page: _____ **total of contact hours x 10**			$

> **# D14** In addition to a completed QI Application and Supplemental Application D, the following documentation is required
> - Documentation of training attendance/completion
> - Proof of Gateways Registry Membership for each training participant
> - W-9 form (included in this packet) – for the child care program

As the Program Administrator, I confirm that the above staff member attended the training listed.

_____ **Program Administrator's Signature** _____ date

Section E: Accreditation Assistance

Accreditation is a voluntary process that provides child care programs the opportunity to examine their services based on recognized standards of high quality. The Accreditation Assistance option is for child care programs that are applying for or maintaining an ExceleRate™ IL Silver or Gold Circle of Quality.

E1. WHAT ACCREDITATIONS ARE APPROVED FOR FUNDING?
- National Association for the Education of Young Children (NAEYC)   www.naeyc.org
- National Accreditation Commission for Early Care & Education Programs (NAC)   www.earlylearningleaders.org
- National Association of Family Child Care (NAFCC)   www.nafcc.org
- National Early Childhood Program Accreditation (NECPA)   www.necpa.net
- AdvancEd Accreditation – Early Learning   www.advanc-ed.org
- American Montessori Society (AMS)   www.amshq.org
- Council on Accreditation (COA) – Early Childhood   www.coanet.og

E2. WHAT CAN FUNDS BE REQUESTED FOR?
- Fees associated with the accreditation process as outlined in the Supplemental Application E

E3. WHAT SUPPORTING DOCUMENTATION IS NEEDED?

In addition to a completed application and Supplemental Application E, the following documentation is required
- Proof of payment to the Accrediting Body (if paid by the child care program)
- Copy of page 1 of the application for accreditation
- A written timeline, with dates, that describes how you will reach your goal of accreditation
- W-9 form (included in this packet)

E4. WHAT IS THE DEADLINE TO SUBMIT MY APPLICATION FOR ACCREDITATION ASSISTANCE?
- Accreditation Applications may be submitted at any time during the funding cycle however, for this funding period the CCR&R must receive Accreditation Assistance applications by May 17, 2019.

E5. WHAT ARE THE GRANT AMOUNTS?
- Please see the Overview Chart in Section A for funding ranges
- Please note that the funding range is a combination of all three Quality Improvement Fund areas

E6. HOW IS PAYMENT MADE?
- Programs will be notified in writing if the application has been approved or denied, and if approved, the amount at which the request was funded
- Payment is done as a reimbursement to the child care program

Quality Improvement Funds | **FY19**

Supplemental Application E: Accreditation Assistance Request			
Program Name:			Program Capacity:

Program (work site) Address:	City:	IL	Zip code:	County:

What ExceleRate™ IL Circle of Quality are you working towards/maintaining? ☐ Silver ☐ Gold   Please indicate: ☐ Initial Accreditation ☐ Renewing Accreditation

Accreditation /Component:	CCRR Max	Actual Cost of Accreditation Component	Accreditation /Component:	CCRR Max	Actual Cost of Accreditation Component
National Association of the Education of Young Children (NAEYC)			**American Montessori Society (AMS)**		
☐ Step 1: Enrolling in self- study	**80% of the actual cost**	$	☐ Information Packet	**80% of the actual cost**	$
☐ Step 2: Becoming an applicant		$	☐ Application Form		$
☐ Step 3: Becoming a candidate		$	☐ Self-Study Report/Review Fee		
☐ Annual Report Fee		$	**AdvancEd Accreditation – Early Care** (fee only, no travel expenses)		
☐ Intent to Renew		$	☐ Readiness Visit	**80% of the actual cost**	$
☐ Renewal Material Form Fee		$	☐ Engagement Review		$
National Accreditation Commission (NAC) for Early Care & Education Programs			**Council on Accreditation (COA) Early Childhood**		
☐ Self- Study Enrollment	**80 % of the actual cost**	$	☐ Application Fee	**80% of the actual cost**	$
☐ Verification Fee		$	☐ Accreditation Fee		$
☐ Annual Report Fee		$	☐ Site Visit Costs		$
National Association of Family Child Care (NAFCC)			**TOTALS:**		
☐ Self-study Step	**80% of the actual cost**	$	**TOTAL ACTUAL COST**		$
☐ Application Step		$	**TOTAL REQUEST - 80% of actual cost** **To calculate 80 %: actual cost_____ x 0.80 =**		$
☐ Annual Renewal Fee		$	**#E3** In addition to a completed application and Supplemental Application E, the following documentation is required		
National Early Childhood Program Accreditation (NECPA)			· Proof of payment to the Accrediting Body (if paid by the child care program)		
☐ Enrollment Fee	**80% of the actual cost**	$	· Copy of page 1 of the application for accreditation		
☐ Verification Fee		$	· A written timeline, with dates, that describes a plan to reach accreditation		
☐ Annual Report Fee		$	· W-9 form (included in this packet)		

As program administrator, I confirm we are actively working towards/maintaining accreditation.

_____   *Program Administrator's Signature*   _____ *Date*

(insert W-9 form)