Community Partnership Program Prevention Initiative Application Instructions



City of Chicago Mayor Rahm Emanuel



SECTION 1: OVERVIEW

The Chicago Public Schools (CPS) will be receiving funds from the Illinois State Board of Education (ISBE) for the 2013-2014 program year for Prevention Initiative services. Detailed information about the Prevention Initiative, its authorizing legislation and relevant administrative rules can be found on the ISBE Early Childhood Division website, www.isbe.net/earlychi.

A. Purpose of the RFP for the Prevention Initiative

The Office of Early Childhood Education (OECE) is seeking to partner with community agencies wishing to provide high quality early learning services. Funds shall be distributed for the benefit of infants and toddlers who may need extra preparation for kindergarten. The program provides developmentally appropriate experiences which promote the readiness necessary for school success. It also provides comprehensive parenting education and support for pregnant women and parents of infants and toddlers.

Children are eligible to participate in a Community Partnership Program Prevention Initiative program in Chicago if they are not yet age 3 by September 1st of the program year, are residents of Chicago, and are identified as being at risk of academic failure based on free and reduced lunch guidelines and/or receipt of Child Care Assistance as well as other risk factors. Agencies are required to have selection criteria to enroll the most at risk children in the program.

Prevention Initiative programs must comply with the Illinois Birth to Three Program Standards, which can be found at http://www.isbe.net/earlychi/html/03_standards.htm.

B. Background

The CPS Office of Early Childhood Education (OECE) is seeking to partner with community agencies wishing to provide high quality Prevention Initiative services to infants, toddlers, year old and young three year old. Funds shall be distributed for the benefit of children who may need extra preparation for preschool and kindergarten.

Prevention Initiative services may be provided through

a home-visiting or center-based model. The Prevention Initiative is made up of 10 required components.

1. Screening Component

All applicants must provide a description of the procedures to be used to screen children and their families to determine their need for services, and ensure that the program will serve those children and families most in need based on income and other risk factors. Eligibility screening procedures must include the following:

- Parent interview to obtain a summary of the child's health history, including prenatal history, and social development. Programs may utilize the Community Partnership pink screening folders to collect information.
- Criteria to assess environmental, economic, and demographic information that indicates a likelihood that the children would be at-risk, and to determine at what point performance on an approved screening instrument indicates that children would be at risk of academic failure.

All eligible children must be screened for risk of developmental delays within 45 calendar days of enrollment using the tool specified by CPS (currently Ages & Stages). Comprehensive developmental screening procedures must include the following:

- All screening instruments and activities must be in accordance with CPS developmental screening requirements.
- Written parental permission for the screening of the child must be obtained, and a plan for discussing results with the parent must be established.
- Where possible, the classroom teacher or home visitor must be involved in the screening process.

2. Research-Based Program Model

Programs should be designed so that parents will gain knowledge and skills in parenting through implementation of a research-based program model that will guide the provision of services. Activities requiring substantial participation of, and interaction between, parent and child must occur. These activities must be designed to teach parents new ways of supporting

and enhancing their child's development, and include intensive and regular home visits. Education activities may be site-based or home-based. The education activities and services must adhere to the requirements of the selected program model, and be of sufficient intensity and duration to make sustainable changes in a family.

Programs must not charge fees for parents' program participation. In addition, parents who participate in the parental training component may be eligible for reimbursement of any reasonable transportation and child care costs associated with their participation in this component.

3. Research-Based Curriculum for Parent Education

Prevention Initiative programs must offer appropriate parent education and training services that address the seven designated areas of instruction listed below:

- Child growth and development including prenatal development;
- Child birth and child care;
- Family structure, function and management;
- · Prenatal and postnatal care for mothers and infants;
- Prevention of child abuse;
- The physical, mental, emotional, social, economic and psychological aspects of interpersonal and family relationships; and
- Parenting skill development.

Programs must use one of the approved research-based curriculum for these educational services. (Parents as Teachers, Baby Talk, or Healthy Families)

4. Developmental Monitoring

Prevention Initiative programs must regularly assess children's developmental progress to inform instruction and to ensure identification of any developmental delays or disabilities. Infants and toddlers are growing and changing at remarkable rates. It is important that staff and parents understand what each child is able to do and what developmental skills are challenging for each child. Regular developmental monitoring through multiple, developmentally appropriate methods is important to inform instruction, and to ensure that all children who have a potential developmental delay or disability are identified and referred for appropriate services. See the Illinois Birth to Three Program Standards for more information on Developmental Monitoring (http://www. isbe.net/earlychi/html/03_standards.htm). All children enrolled in CPS center based programs must be assessed three times each year with the citywide child assessment system (currently Teaching Strategies GOLD).

5. Individual Family Service Plan

An important focus of the program is to help families identify how they want to improve their lives and the steps that will help them reach their goals. Families must be full partners in developing and implementing an Individualized Family Service Plan that identifies the family's goals, responsibilities, timelines, and strategies for achieving these goals, including the services to be provided to the child and to the family.

6. Case Management Services

Families must receive comprehensive, integrated and continuous support services through a seamless and unduplicated system. Many of the families participating in Prevention Initiative programs have multiple needs, some of which cannot be met directly by the program. These may include, for example, adult education, housing, nutrition, health care, and other needs. Programs must form relationships with other service providers in the community, including the development of a system for referring families to other service providers, and following up on these referrals to ensure that families receive the needed services. Families participating in Prevention Initiative programs may also have developed service plans with other service providers. The Prevention Initiative program must coordinate the individual family service plan with plans that other community service providers have developed with or for the families.

7. Family and Community Partnerships

Each prevention initiative program must develop a parent and community involvement plan to include, but need not be limited to: orientation to the educational program; opportunities for involvement in home-based or site-based activities; provision for communication with

parents about the program; methods of linking parents with community resources and services; and activities that emphasize and strengthen the role of the parent(s) as the child's primary educator.

Each program must demonstrate that the program is not a duplication of services and has a referral system to ensure transition of three-year-old children into other early childhood education programs after leaving the prevention initiative program.

8. Qualified Staff and Organizational Capacity

Appropriately qualified personnel that meet the requirements of the program model that is to be implemented by the Prevention Initiative program must be employed. This may include, but is not limited to, program administrators, early childhood teachers, counselors, psychiatrists, psychologists, and social workers.

Agencies wishing to provide center based models must hire a BA/BS in Education or an AA in Child Development as the classroom teacher, and a teacher assistant with at least 30 college credit hours, of which at least 15 must be in ECE or Infant/Toddler studies. Programs are also required to have at least one supervisor with an Illinois Infant Toddler Specialist Credential Level 5 or an Erikson Infant Studies Certificate per site, and a Family Support Specialist with a BA degree and course work in family studies per CPS-CPP Prevention Initiative requirements.

The Prevention Initiative Home Visiting programs require a minimum of the following staff:

- One supervisor with a master's degree in ECE or a bachelor's degree in a related field. One supervisor can serve a maximum of 12 staff persons. The supervisor must have experience and knowledge in implementing and managing programs that appropriately support infants and children.
- A case manager with a minimum of a bachelor's degree with a maximum caseload of 40 families.
- A home visitor with a minimum of a bachelor's degree with a maximum caseload of 24 families.
- All staff must be certified in the researchbased curriculum they have selected.

Qualified personnel must be knowledgeable of early childhood programs.

9. Professional Development

In order to enable staff to achieve the purpose and goals of the prevention initiative program, staff development needs must be assessed and appropriate ongoing professional development activities should be provided. The CPS Office of Early Childhood Education Community Partnership Program staff conducts extensive preservice and in-service training programs to enhance the skills of all staff in maximizing the delivery of services to children and their families. All CPS-CPP three or more part workshops are registered through Gateways to Opportunities for points. Agency staff may participate in the CPS professional development workshops or other professional opportunities, and are required to develop written plans to implement in their classrooms or home visiting programs the strategies and techniques learned in these workshops.

Agencies may also provide the required professional development on site if they receive prior approval. Approval may be obtained by submitting a written professional development plan that includes site based activities. However, a written professional development plan must be provided including site based activities regardless of the provider.

10. Evaluation

Program evaluation is an ongoing process that culminates in the improvement of program quality. To be successful in this endeavor, programs need to develop systems for observing, recording, and measuring the quality and significance of the program's progress and success toward the implementation of the program model and the Illinois Birth to Three Program Standards. Likewise, the program needs to develop systems for measuring and analyzing the progress that children and families are making toward their goals.

A summary of the program expectations for Prevention Initiative Home Visiting programs is provided in Appendix A. A summary of the program expectations for Prevention Initiative Center Based programs is provided in Appendix B

SECTION II: ANTICIPATED AWARDS AND TERM OF CONTRACTS FOR DELEGATE AGENCIES

Anticipated Awards

The number and amount of awards will be contingent upon the amount of funding available for the Prevention Initiative program from ISBE and other sources.

Grant Period

The grant period will begin no sooner than July 1, 2013, and will extend from the beginning date of the grant until June 30, 2014. Funding in the subsequent years will be contingent upon a sufficient state and/or local appropriation for the program and satisfactory progress in the preceding grant period. Agencies will have an opportunity to reapply as a continuing program for two years after the grant begins, but after the third year (2015-2016), all participants must reapply with a full proposal.

Contract Process

By submitting an application, the applicant agency agrees that if approved as a provider for the services described in this Request for Proposals, the agency will enter into a written contract with the Board of Education of the City of Chicago for such services, prior to rendering any services. In the event the agency fails to enter into such a contract with the Board, the agency's approval for award will be revoked by the Board. The contract will contain, among other things, the Terms and Conditions contained in the sample Early Childhood Services Program Agreement provided in Appendix C and in the sample full agreement available on the Chicago: Ready to Learn website (www. cityofchicago.org/bids/chicagoreadytolearn), as well as any other terms and conditions deemed necessary by the Board's General Counsel.

In the event the Board and the agency fail to enter into a contract, the agency's approval for award will be revoked by the Board. The Board also reserves the right to revoke its approval for an award of the contract for any reason including, but not limited to, the submission by agency of contract terms which, in the Board's sole opinion, are substantially different from the terms and conditions in the RFP for the contract, or agreed upon based on the agency's response.

Payment Process

As described in the sample Early Childhood Services Program Agreements provided in Appendix C, contracted agencies will receive quarterly payments for services. The initial payment will be provided within 30 days of signing the Board-approved contract. The Board will process the second, third and fourth payments after it has received, reconciled, and approved the Expenditure Report for the prior time period. The compensation amount payable to the contractor during the term of the grant shall not exceed the amount stated in the budget submitted by the contractor and approved by the Board.



SECTION III: APPLICATION INSTRUCTIONS

Proposal Deadline and Submittal Procedures

Please send one original and one copy by 4:30 p.m. on October 1, 2012 to:

Ready to Learn RFP Office of Early Childhood Chicago Public Schools 125 South Clark Street Chicago, IL 60603 readytolearnrfp@cps.edu

Additionally, please e-mail an exact and complete scanned copy of your proposal, budget and ALL attachments to: readytolearnrfp@cps.edu by October 1, 2012 by 4:30 p.m. The emailed copy must be in a pdf file. Often large files cannot be quickly or successfully electronically submitted to us. If your application packet consists of these files, we highly recommend the use of file compression software such as Win Zip (which can be downloaded for a free trial period at http://www.winzip. com/downwz.htm) or any other similar software in order to keep your e-mail submissions to a single e-mail.

Both the paper original and e-mailed copies are required for the submission to be considered complete.

Proposals will be accepted prior to the due date, from 9:00 a.m. to 4:00 p.m. Monday – Friday at the same location. All proposals must be complete. Incomplete proposals may not be reviewed. <u>In-person or bonded messenger</u> <u>delivery of proposals is encouraged</u>. Time-stamped receipts will be issued as proof of timely submittal.

Proposals must not be delivered by fax.

No proposal will be considered complete and therefore reviewed unless the original copy is delivered and received at the CPS office above before the deadline.

Proposals received after the due date and time may be deemed NON-RESPONSIVE and, therefore, subject to rejection.

Certifications and Assurances

The applicant is required to submit certifications and assurances for application exactly as they appear on the form provided on the Chicago: Ready to Learn website. The official legally authorized to submit the proposal must sign certifications and assurances.

Questions

Applicants are encourages to submit all questions and comments related to the RFP via e-mail. For answers to questions please contact:

Ready to Learn RFP readytolearnrfp@cps.edu

B. Application Requirements

Application packages should include:

Cover Page

Applicants should submit a completed cover page for Prevention Initiative.

Program Narrative

Applicants should submit the following forms, which together comprise the Program Narrative:

- Site Level Community and Program Information Sheet (one for each proposed site)
- (Head Start/ Early Head Start Delegate Agency Summary form is not applicable)
- Home Visiting Schedule Description Form, if applicable
- (Family Child Care Home Network form is not applicable)
- Recruitment, Selection, Enrollment and Attendance Form
- Curriculum for Children Form
- Screening and Assessment Form
- Children with Disabilities Form

- Parent Engagement and Support Form
- IFSP and Case Management Form
- Community Partnerships Form
- Transitions Form
- Health Services Form-- Optional
- Staff Qualifications Form
- Human Resources Form
- Organizational History and Experience Form
- Record Keeping, Monitoring and Self-Assessment Form
- Governance Form is not applicable)
- Board of Directors Form
- Fiscal Capacity Form
- (Head Start/Early Head Start Budget Narrative Form is not applicable)
- Appendix List Form

Note: Programs may use the "Additional Pages" form as needed, but should not exceed a total of 5 additional pages for the entire application.

Program Appendix

Applicants should include an appendix which includes the following documents:

- Budget Forms
- Certifications and Assurances
- Application for CPS Vendor Number*
- M/WBE Forms (for profit organizations only)*
- Contractor's Disclosure Forms*
- Taxpayer ID and Certification*
- Copies of applicable child care licenses and/ or certification that facilities meet school board regulations for nonpublic school sites
- Proof of accreditation and quality certifications if available (NAEYC, QRIS, etc)
- Organizational Chart
- Resumes of key organizational leadership staff
- Board of Director's Approval for application

- Independent Auditor's Report and audited balance sheet for the most recent three fiscal years for which these are available
- Letters of Support--optional (maximum of five)

* (Available online at http://www.csc.cps.k12.il.us/ purchasing/index.php@tab=0&id=34.htm)

Applicants should provide a list of items in the Appendix using the Appendix List Form.

C. Narrative Scoring

The Chicago Public Schools' Office of Early Childhood Education will review submitted applications based upon the criteria below. This review process may involve outside reviewers. Before making funding decisions, staff may conduct site visits for selected applicants in order to validate information provided in the proposal. Final determination for selection will be made by the Board of Education of the City of Chicago and will be based upon recommendations resulting from the evaluation and review process.

Proposals will be judged against the qualitative criteria below to determine which proposals provide evidence of a "qualified program." "Qualified programs" will be those scoring at least 60 out of 100 points. "Highly qualified programs" will be those scoring at least 80 out of 100 points.

The selection of proposals for funding will be based in part on geographic distribution and the need to provide resources to communities with varying demographic characteristics. The final selection process will be completed in coordination with the City of Chicago Department of Family Support Services Children's Services Division and their "slot allocation" process for Early Head Start. Among substantially similar proposals, extra consideration in the approval process will be given to proposals that form collaborative partnerships that provide high quality education and care in a full-day, year-round program for preschool children.

Qualitative Criteria (Total possible points are 100)

1. Quality of Proposed Program (Maximum of 50 points)

The extent to which:

- The program proposal reflects consideration of recommended program components and elements specified in the Request for Proposals and Components and Expectations document in Appendices C and D.
- The proposed program contains activities that will sufficiently meet the identified needs of the population to be served and includes child and parent activities designed to enhance child development and parent effectiveness and, ultimately, school readiness.
- The proposal provides for effective linkages among parents, education, health, and social service agencies, and includes a plan for coordination of services with other educational programs serving young children and their families.
- The program is built upon effective research about prevention services and aligned to the Illinois Birth to Three Standards.
- The proposal includes a continuous program improvement process identifying measurable outcomes that are appropriate for the population to be served.

2. Population to be Served (Maximum of 20 points)

The extent to which the criteria and indicators for identifying children and families who are eligible for the program are clearly established and likely to target those children and families most in need of services. The extent to which effective recruitment strategies are proposed that are likely to ensure that the maximum number of eligible children and families are enrolled in the program.

3. Experience and Qualifications (Maximum of 20 points)

The extent to which the program proposal shows how proposed staff hold the appropriate certifications and qualifications necessary to successfully implement a high quality program. The professional development plan addresses individual staff needs, offers a varied and full range of staff development experiences and provides sufficient opportunities for learning so as to allow staff to incorporate the training into program activities and the program holds appropriate licensure and accreditations.

4. Financial Information (Maximum of 10 points)

The extent to which the program is cost-effective, as evidenced by the cost of proposed services in relation to the numbers to be served and the services to be provided. The extent to which salaries are aligned with staff qualifications.

Proposals will be evaluated in accordance with the criteria listed above. The Chicago Public Schools' Board of Education will make final determination for selection. All programs accepted under the Terms of the Grant will be required to enter into a legal agreement with the Chicago Public Schools Board of Education.

APPENDIX A: PREVENTION INITIATIVE-CENTER BASED PROGRAMS SUMMARY OF COMPONENTS AND EXPECTATIONS

Note: Sites that have children 24 months or older only need to implement components 1-7 of Level 1 at this time.

BASIC FIVE EXPECTATIONS

1. Developmental Screenings

- Programs must screen children with the Ages and Stages Questionnaire – Developmental (ASQ) within 45 calendar days of enrollment.
- If programs are using Ages and Stages –
 Social Emotional (ASQ-SE), they must use it in conjunction with the ASQ Developmental.
- Staff must be trained to use this tool.

2. Research Based Classroom Curriculum

- Classroom staff are required to use an early childhood education research based classroom curriculum.
- Creative Curriculum for Infants and Toddlers and High Scope for Infants and Toddlers are approved models.

3. Developmental Monitoring

- Programs are required to complete the comprehensive assessment tool designated by CPS (currently Teaching Strategies GOLD) three times per year and enter assessment information into the complete the comprehensive assessment tool designated by CPS (currently Teaching Strategies GOLD) three times per year and enter assessment database.
- Programs must have data on all children in their PI program, entered into the system, and must complete the creative curriculum objectives (checklist) at least three times a year.

4. Professional Development Plan

- Programs are required to submit a site professional development plan as well as individual staff professional development plans annually to the Community Partnership Program (CPP) office.
- The plans must include goals specific to the PI program (not just 3-5 goals).

5. Program Evaluation and Improvement Plan

- Programs must administer the following:
- a. Annual evaluation of their classroom environment
- b. Annual evaluation of their program administration
- c. An improvement plan based on the findings of the evaluation.
- Program evaluations that meet these requirements include the Head Start self-assessment, NAEYC accreditation self study, Infant/Toddler Environment Rating Scale (ITERS), the Early Childhood Environment Rating Scale (ECERS) used in an infant toddler classroom when half or more of the children enrolled are at ages 30 months or above, and the Program Administration Scale (PAS).
- If your program has designed its own program evaluation, please submit it for approval.

QUALITY INDICATORS

6. Group Size and Ratio

• Programs must meet the following group size and ratio:

AGE	GROUP SIZE	RATIO
6w-12m	8	1:4
12m-24m	12	1:4
24m-36m		
(or age	2	1:6
cycle 3)		

• If a program has a mixed age classroom, the classroom must always meet the group size and ratio of the youngest child in the room.

7. Classroom Staff Qualifications

- All PI programs must have the following full time staff qualifications for each of the 0-3 classrooms:
- a. Teacher: BA or AA in ECE or CD
- b. Teacher Assistant: 30 college credit hours with 15 of those hours in CD or ECE
- All staff must have the most recent transcripts on file in the CPP office. If teaching staff do not have these credentials, programs will not meet this component.

Sites that only have children 24 months and older STOP HERE.

FAMILY AND COMMUNITY PARTNERSHIPS

8. Research Based Parent Education Model

- The case manager/family support specialists are required to use a Research Based Parent Education Curriculum. Parents as Teachers, Baby Talk, and Creative Curriculum Learning Games are approved models; other models may be used, but programs must submit research outcomes to the CPP office for review.
- Case manager/family support specialists staff must be trained to use the model and must have copies of the curriculum.
- Supervisors of the family support specialists must be trained on the parent education model.

9. Case Manager, Community Partnerships, and Individual Family Plans

(Programs must meet all seven (a-g) of the following indicators in order to meet this component.)

a. A case manager/family support specialist with a BA in Human Services or equivalent. In order to be considered an equivalent of the degree, must show a number of college credit hours in Social and Family Work. *Transcripts for staff must be submitted to the CPP office for review.*

- b. The case manager's/family support specialist's caseload must have a maximum ratio of only 1 to
 36. The following is a framework for your reference:
- At least one part-time case manager/family support specialist for a program serving less than 18 families.
- At least one full time case manager/family support specialist for a program serving 18-36 families.
- At least one full time and one part-time case manager/family support specialist for a program serving 37 to 54 families.
- At least two full-time case managers/family support specialists for a program serving 55 to 72 families.
- oAt least two full-time and one part-time case managers/family support specialists for a program serving 73-90 families.
- At least three full-time case managers/family support specialists for a program serving 91 to 108 families.

NOTE: Case managers/family support specialists can work between sites in order to meet these ratios, but may only have the number of caseloads listed above across these sites.

- c. Home Visits are to be completed for families twice a year (minimum) per family, and as needed after that.
- d. Case management staff must annually complete an Individual Family Support Plan (IFSP) with each family in the PI program.
 - The IFSP must be in writing on a form that the site has selected.
 - The IFSP must include a goal that the parent has for the family/parent(s) (themselves), a goal that the parent(s) has for his/her child's development, and a goal that the parent(s) has for his/her relationship with his/her child.
 - The IFSP must be reviewed at least every six months to determine progress toward these goals.
 - Classroom staff and program directors must also support each family's individual plan.

- e. Programs must complete written community partnership agreements with agencies that have collaborative agreements (e.g., hospitals, dentist offices, WIC, counseling, libraries, park districts, etc.).
- f. Family support specialists/case managers must meet individually with each family once a month (minimum) using the selected parent education model as the curriculum.
- g. Family support specialists must provide a group session/meeting for the birth to three parents once a month (minimum). The content of the groups must have a focus on child development, parenting, etc.

INFANT TODDLER SPECIALIST AND SUPERVISION

10. Infant Toddler Specialist and Supervision

- Programs must have an infant toddler specialist on staff at each site that has PI classrooms. If a program has three sites with PI classrooms, the program will need three infant toddler specialists.
- An infant toddler specialist is defined as a nonclassroom staff person who works with infant toddler classroom staff, and has an infant toddler credential level 5, Erikson Institute infant/toddler certificate, or its equivalent.
- This position is a full time position, and is someone who is outside of the classroom who engages with 0-3 staff in a supervisory capacity.
- The infant toddler specialist, at minimum, has monthly individual supervision with the lead teachers.
- The infant toddler specialist observes in the classrooms and provides feedback and support.
- The infant toddler specialist engages with all PI teaching staff around reflective practice, and facilitates the implementation of quality indicators/ practices for infants and toddlers in group care.

In order to verify the implementation of all of the PI Model components documentation must be in evidence.

IMPORTANT REMINDER PREVENTION INITIATIVE-CENTER BASED PROGRAM MODEL

The Prevention Initiative-Center Based Program is an all inclusive model requiring each site to include in the Prevention Initiative Model in all classrooms that have children under three years old. This means implementing all of the components and following all of the requirements for all of the classrooms.

Note: Additional classrooms may only be opened/added after submission of a written request and official approval from the CPP office.



APPENDIX B: PREVENTION INITIATIVE-HOME VISITING PROGRAMS COMPONENTS AND EXPECTATIONS

BASIC FIVE EXPECTATIONS

1. Developmental Screenings

- Programs must screen children with the Ages and Stages Questionnaire – Developmental (ASQ) within 45 calendar days of enrollment.
- If programs are using Ages and Stages –
 Social Emotional (ASQ-SE), they must use it in conjunction with the ASQ Developmental.
- Staff must be trained to use this tool.

2. Research Based Curriculum

- Home Visit staff are required to use a research based model and curriculum.
- Parents as Teachers, Baby Talk, and Healthy Families are approved models.

3. Developmental Monitoring

- Ages and Stages screening must be completed on all children at least every four months.
- Follow-up is done on all children who are referred to early intervention services and/ or those who have a previous IFSP.
- Programs must have a formal method of communicating developmental monitoring results to parents.

4. Professional Development Plan

- Programs are required to submit a site professional development plan as well as individual staff professional development plans annually to the Community Partnership Program (CPP) office.
- The plans must include goals specific to the Pl program.

5. Program Evaluation and Improvement Plan

- Programs must administer the following:
 - Annual evaluation of their program activities/ successes toward annual goals.
 - Annual evaluation of their program administration.

- Complete an improvement plan based on the findings of the evaluation.
- Program evaluations that meet these requirements include annual curriculum evaluation.
- If your program has designed its own program evaluation, please submit it for approval.

QUALITY INDICATORS

6. Caseload

• Programs must meet the following group size and ratio:

	GROUP SIZE
Home Visitor	24
Case Management	40

7. Staff Qualifications

• All PI programs must have the following full time staff qualifications:

Supervisor: BA or MA in ECE,

Home Visitor: BA in ECE or related field,

Case Manager: BA in Social Work or related field.

• All staff must have the most recent transcripts on file in the CPP office. If staff do not have these credentials, programs will not meet this component.

FAMILY AND COMMUNITY PARTNERSHIPS

8. Research Based Parent Education Model

- The case manager/family support staff are required to use a Research Based Parent Education Curriculum. Parents as Teachers, Baby Talk, and Healthy Families are approved models; other models may be used, but programs must submit research outcomes to the CPP office for review.
- Case manager/family support staff must be trained to use the model and must have copies of the curriculum.
- Supervisors of the family support staff/case managers must be trained on the parent education model.

9. Case Manager, Community Partnerships, and Individual Family Plans

(Programs must meet all of the following indicators in order to meet this component.)

- a) A case manager/family support staff with a BA in Human Services or equivalent. In order to be considered an equivalent of the degree must show a number of college credit hours in Social and Family Work. All transcripts must be submitted to the CPP office for review.
- b) The case manager /family support specialist caseload must have a maximum ratio of only 1 to 40. The following is a framework for your reference:
 - At least one part-time case manager/ family support specialist for a program serving less than 18 families.
 - At least one full time case manager/family support specialist for a program serving 18-40 families.
 - At least one full time and one part-time case manager/family support specialist for a program serving 37 to 54 families.
 - At least two full-time case managers/ family support specialists for a program serving 55 to 72 families.
 - At least two full-time and one part-time case managers/family support specialists for a program serving 73-90 families.
 - At least three full-time case managers/family support specialists for a program serving 91 to 108 families.

NOTE: Case managers/family support specialists can work between sites in order to meet these ratios, but may only have the number of case loads listed above across these sites.

- c) Home Visits are to be completed for families twice a month (minimum) per family, and as needed after that.
- d) Programs must complete an IFSP (Individual Family Support Plan – individual family goals) annually by case management staff with each family in the PI program within 30 days of enrollment.

form that the site has selected.

- The IFSP must include a goal that the parent has for the family/parent(s) (themselves), a goal that the parent(s) has for his/her child's development, and a goal that the parent(s) has for his/her relationship with his/her child, and a goal that the home visitor has for the child.
- The IFSP must be reviewed at least every six months to determine progress toward these goals.
- Home visiting staff and program directors must also support each family's individual plan.
- e) Programs must complete written community partnership agreements with agencies that have collaborative agreements (e.g., hospitals, dentist offices, WIC, counseling, libraries, park districts, etc.).
- f) Family support staff must provide a group session/meeting for the birth to three parents once a month (minimum). The content of the groups must have a focus on the seven designated areas of training provided by the curriculum model. Groups should also include time for parent/child interaction activities.

SUPERVISION

10. Supervision

• Supervisors of Prevention Initiative Home Visiting Programs must conduct individual reflective supervision at least once per month with home visiting staff.

In order to verify the implementation of all of the PI Model components documentation must be in evidence.

- For children transitioning out of the program, agencies may use the same protocol as Center Based PI programs.
- For children who reach age 3 after September 1st, the guideline for participation in Home Visiting programs are the same protocol as Center Based PI programs.

• These plans must be in writing on a

APPENDIX C: SAMPLE SUMMARY AGREEMENT



Chicago Public Schools Office of Early Childhood Education

Program Agreement Form Community Partnership Program Prevention Initiative Center Based Birth to Three Model 2012-2013

Authorized agency official: Please read and initial each of the following requirements of the Prevention Initiative Center Based Birth to Three Model and sign the bottom of the statement on pages 1 and 2. All information is contained in the Board agreement.

I understand:

 agencies must serve residents of the city of Chicago in facilities located within the city limits.
 agencies must serve children who are from six weeks to three years on or before September 1 st of the program year. Children who are age eligible for preschool are not eligible for Prevention Initiative.
 it is the agencies' responsibility to ensure Chicago Public Schools (CPS) has the necessary identifying information for all children to be enrolled in the Prevention Initiative Center Based Model.
 attendance for children with CPS ID numbers must be reported monthly by classroom, including COPA attendance as documentation.
 children must be screened with the ASQ developmental screening within 45 days of enrollment to determine risk.
 agencies must offer a research based educational curriculum including language development.
 programs must provide a language curriculum or a commitment made to the CPS <i>Reading is Fundamental</i> program.
 agencies must utilize Teaching Strategies GOLD to assess each child in the program three times each year.
 agencies must offer a research based parent education and involvement component (PAT Baby Talk, Healthy Families) and submit the required annual report.
 teaching staff in the Prevention Initiative Center Based Model must hold either a BA/BS or AA in Early Childhood Education or Child Development, and teacher assistants must have at least 30 college credit hours of which 15 must be in early childhood education.

Program Agreement Form (continued)

I understand:

each qualified teacher may serve no more than one group of children.	
group size and ratio of adults to children must follow CPS required guidelines: Infants (1:4), group size 8; Toddlers (1:4), group size 12; Two's (1:6), group size 12.	
agencies must provide a Professional Development Plan on site or make a commitment to the CPP professional development offerings.	
agencies must provide a Program Quality Improvement Plan (QIP) or Program Evaluation Plan.	
monetary awards are based on the CPS Prevention Initiative Center-Based Model guidelines including staff required for the PI program and the number of enrolled children per month.	
monetary awards will be <u>withheld</u> for programs that exceed group size and ratio per classro	om.
salaries and benefits are based on the educational background and experience of the staff, and comply with CPS salary ranges.	
agencies are required to submit quarterly expense reports based on expenditures from the previous quarter.	
payments for the next quarter will not be made until the prior quarter expenditures have been reconciled.	
account reconciliations that are received after the deadline will jeopardize current and future funding.	
account reconciliations must include funds distribution forms and either automated payroll, with the teacher and teacher assistant's names, or canceled checks.	
CPS has the right to audit the actual number of children enrolled, the placement of the qualified staff, program quality, and the center's professional development plan.	
a variety of different tools may be selected to monitor program quality such as, but not limited to, ITERS, Creative Curriculum Implementation Checklist, etc.	
CPS has the right to utilize data audited to make program decisions for future funding.	

Type name of agency

Date

Type name of authorized agency official

Signature of authorized agency official