

The purpose of the Governance component of the System Framework is to guide state Part C and 619 Coordinators, their staff and partners in making certain there is established enforceable decision-making authority to effectively implement the statewide system and that leadership advocates for and leverages sufficient fiscal and human resources to support quality services throughout the state. The focus of this component is to make certain that structures and partnerships are in place to support effective, efficient statewide service delivery systems for Part C and 619 that provide equitable access to services for all eligible children and their families.

Governance supports Part C and 619 state systems' organizational structures and placement of authority for making program, policy, fiscal, and standards decisions as well as implementing effective practices. Governance responds to this need for authority by creating policies, state laws, regulations, interagency agreements and other enforceable mechanisms. The governance component, built upon the vision, mission and/or purpose of the system, intersects with the other components of the framework serving as the foundation or authority that underpins each component.

Characteristics of effective governance include participation, input by stakeholders, consensus, transparency, responsiveness, and effective communication. It is essential that state leadership develops collaborative partnerships that include roles and responsibilities for all state and regional and/or local system entities within the system. Equally important is the role of governance in recruiting and supporting family leadership and maximizing meaningful family engagement in the development and implementation of the system. The system should have mechanisms in place that facilitate clear communication, collaboration and relationship-building with stakeholders and partners at all levels.

This component includes vision, mission and/or purpose; legal foundations; administrative structures; and leadership and performance management. Vision, mission, and/or purpose guide decisions and provide direction for quality comprehensive and coordinated Part C and Section 619 statewide systems. Legal foundations provide the authority and direction to effectively implement the Part C/619 statewide systems and support the coordination of systems and services across all agencies involved with young children and their families. Administrative structures include state and regional and/or local system entities, with assigned roles and responsibilities, designed to carry out IDEA and related federal and state mandates to ensure statewide implementation of the system including the provision of services. State leadership and management address advocacy for and leveraging of fiscal and human resources for implementation and oversight of the statewide system. This includes promoting strategies that facilitate clear communication and collaboration to build and maintain relationships between and among Part C and Section 619 stakeholders and partners.

Subcomponent 1: Vision, mission and/or purpose

Quality Indicator GV1: Vision, mission and/or purpose guide decisions and provide direction for quality comprehensive and coordinated Part C and Section 619 statewide systems.

Elements of Quality	1-4
<p>GV1a Core values, beliefs, guiding principles and current <u>evidence-based practices</u> are the foundation for public statements of vision/mission/purpose.</p> <p><i>Evidence:</i></p>	
<p>GV1b These public statements are consistent with The Individuals with Disabilities Education Act (IDEA).</p> <p><i>Evidence:</i></p>	
<p>GV1c These public statements address who the program serves, what the program does and the intended outcomes for children and families.</p> <p><i>Evidence:</i></p>	
<p>GV1d These public statements are developed with input from all stakeholders.</p> <p><i>Evidence:</i></p>	

<p>GV1e These public statements are readily available (e.g. on the website, in a parent handbook, etc.) and effectively communicated to all stakeholders including practitioners, families, and community partners.</p> <p><i>Evidence:</i></p>	
<p>GV1f These public statements are clear and understood by staff, local program administrators and families.</p> <p><i>Evidence:</i></p>	
<p>GV1g System level decisions (e.g. fiscal, data, standards, personnel, monitoring), programmatic decisions (e.g. services and supports) and strategic planning are guided by the public statements of vision/mission/purpose.</p> <p><i>Evidence:</i></p>	
<p>GV1h These public statements are reviewed and revised as necessary with stakeholder input.</p> <p><i>Evidence:</i></p>	
<p>GV1i These Part C and 619 public statements of vision, mission and/or purpose are recognized as an integral part of the broader early care and education public statements and strategic plans.</p> <p><i>Evidence:</i></p>	

Subcomponent 2: Legal Foundations

Quality Indicator GV2: Legal foundations (e.g. statutes, regulations, interagency agreements and/or policies) provide the authority and direction to effectively implement the Part C and 619 statewide systems.

Elements of Quality	1-4
<p>GV2a Legal foundations are aligned with IDEA and other federal and state mandates.</p> <p><i>Evidence:</i></p>	
<p>GV2b Legal foundations are developed with input from <u>stakeholders</u>.</p> <p><i>Evidence:</i></p>	
<p>GV2c Legal foundations are clearly written and provide details needed for implementation at the local level.</p> <p><i>Evidence:</i></p>	
<p>GV2d Legal foundations support and do not hinder the implementation of <u>evidence-based practices</u>.</p> <p><i>Evidence:</i></p>	
<p>GV2e Legal foundations are readily available and communicated to stakeholders and partners.</p> <p><i>Evidence:</i></p>	
<p>GV2f Legal foundations provide the authority for the state to <u>monitor</u> implementation.</p> <p><i>Evidence:</i></p>	

<p>GV2g Legal foundations are reviewed and revised as necessary with stakeholder input, using existing data and other pertinent information.</p> <p><i>Evidence:</i></p>	
<p>GV2h Legal foundations support coordination of <u>systems and services</u> across all <u>early care and education programs</u>.</p> <p><i>Evidence:</i></p>	

Subcomponent 3: Administrative Structures

Quality Indicator GV3: Administrative structures such as state and regional and/or local system entities are designed to carry out IDEA and related federal and state mandates to ensure statewide implementation of the system including provision of services.

Elements of Quality	1-4
<p>GV3a Part C and 619 lead agencies assign all required <u>components of IDEA</u> and related federal and state mandates to entities within the state.</p> <p><i>Evidence:</i></p>	
<p>GV3b Information about the state system components and how to access services is widely available and understood by providers, families and the general public.</p> <p><i>Evidence:</i></p>	
<p>GV3c Decisions about Part C and 619 state, and regional and/or local system structures facilitate collaboration and service delivery across <u>early care and education</u> programs.</p> <p><i>Evidence:</i></p>	
<p>GV3d Part C and 619 lead agencies design state, and regional and/or local entities to ensure <u>equitable access</u> to services statewide.</p> <p><i>Evidence:</i></p>	
<p>GV3e Part C and 619 lead agencies evaluate the structure of entities assigned for state, regional and local implementation on an ongoing basis and revise as needed to ensure equitable delivery of services.</p> <p><i>Evidence:</i></p>	

Quality Indicator GV4: State and regional and/or local system entities enforce roles and responsibilities for implementing IDEA and other federal and state mandates.

Elements of Quality	1-4
<p>GV4a State Part C and 619 agencies and partners have enforceable roles and responsibilities established through clearly written state laws, regulations, policies, procedures, contracts, or agreements.</p> <p><i>Evidence:</i></p>	
<p>GV4b Regional and local entities have enforceable roles and responsibilities for provision of direct services established through clearly written state laws, regulations, policies, procedures, contracts, or agreements.</p> <p><i>Evidence:</i></p>	
<p>GV4c Administrators, <u>practitioners</u> and other agency personnel, at all levels of the system, understand and perform their roles and responsibilities in accordance with the lines of decision-making within the state structure.</p> <p><i>Evidence:</i></p>	
<p>GV4d There is an ongoing process for reviewing and revising, as necessary, the designation of roles and responsibilities.</p> <p><i>Evidence:</i></p>	

Quality Indicator GV5: State and regional and/or local system entities are designed to maximize meaningful family engagement in the development and implementation of the system.

Elements of Quality	1-4
<p>GV5a Decisions about system structures support equitable representation of families on the state Interagency Coordinating Council (ICC), local ICCs, task forces, and committees.</p> <p><i>Evidence:</i></p>	
<p>GV5b Part C and 619 state staff or representatives support (e.g. through stipends, transportation, information and preparation, convenient time and location, mentoring, FTE, consulting fee) family members' active roles on councils, committees, and task forces to allow their full participation and input into system decisions related to areas such as policies, training and TA, monitoring, and program improvement.</p> <p><i>Evidence:</i></p>	
<p>GV5c There are ongoing system-wide efforts to recruit families that are representative of the demographics of the state and local communities and support their leadership development.</p> <p><i>Evidence:</i></p>	
<p>GV5d There is an ongoing process for evaluating and improving meaningful family engagement in the system.</p> <p><i>Evidence:</i></p>	

Subcomponent 4: Leadership and Performance Management

Quality Indicator GV6: State leadership advocates for and leverages fiscal and human resources to meet the needs for implementation and oversight of the statewide system and services.

Elements of Quality		1-4
<p>GV6a State leadership continuously uses information and data to identify fiscal and human resource needs for system implementation and <u>oversight</u> (personnel, data system, monitoring, standards, and finance).</p> <p><i>Evidence:</i></p>		
<p>GV6b State leadership effectively seeks and <u>garners</u> federal, state, and/or local resources to meet the needs of the statewide system.</p> <p><i>Evidence:</i></p>		
<p>GV6c State leadership <u>allocates</u> sufficient resources to perform the administrative duties and responsibilities required under IDEA and other state or federal mandates (e.g. Part C and 619 lead agency FTE, proportion of the budget for infrastructure vs. services).</p> <p><i>Evidence:</i></p>		
<p>GV6d State leadership assists local programs/districts to problem-solve and identify creative strategies to address fiscal and human resource challenges to promote implementation of <u>evidence-based practices</u>.</p> <p><i>Evidence:</i></p>		
<p>GV6e State leadership seeks and supports opportunities for collaborating with other agencies/<u>community partners</u> to share fiscal and human resources across all <u>early care and education</u> initiatives.</p> <p><i>Evidence:</i></p>		

Quality Indicator GV7: Leaders use written priorities with corresponding strategic plan(s) and evaluation to drive ongoing system improvement.

Elements of Quality	1-4
<p>GV7a The <u>vision/mission/purpose</u> drives Part C and 619 priorities and strategic plan(s).</p> <p><i>Evidence:</i></p>	
<p>GV7b The priorities and strategic plan(s) are based on data (e.g. <u>monitoring</u>, data systems, <u>demographic projections</u>) about the <u>systems and services</u>.</p> <p><i>Evidence:</i></p>	
<p>GV7c The priorities and strategic plan(s) are developed with input from all relevant <u>stakeholders</u>.</p> <p><i>Evidence:</i></p>	
<p>GV7d The priorities and strategic plan(s) provide clear and detailed information with regard to short and long term goals, strategies, responsible individuals, timelines, and benchmarks for evaluation.</p> <p><i>Evidence:</i></p>	
<p>GV7e The priorities and strategic plan(s) are sanctioned and supported by those in authority.</p> <p><i>Evidence:</i></p>	

<p>GV7f The priorities and strategic plan(s) are coordinated or aligned across agency partners (Part C, 619 and other early care and education initiatives) to ensure collaborative impact.</p> <p><i>Evidence:</i></p>	
<p>GV7g The priorities and strategic plan(s) are <u>transparent</u> and communicated with all stakeholders.</p> <p><i>Evidence:</i></p>	
<p>GV7h Part C and 619 state staff or representatives monitor the progress of the priorities and strategic plans and review and revise them as necessary based on data on progress and changing context.</p> <p><i>Evidence:</i></p>	

Quality Indicator GV8: Part C and 619 state staff or representatives use and promote strategies that facilitate clear communication and collaboration, and build and maintain relationships between and among Part C and Section 619 stakeholders and partners.

Elements of Quality	1-4
<p>GV8a A written formal <u>communication process</u> is in place that includes multi-level strategies detailing how information is shared, input is received, and responses are given (<u>feedback loops</u>) with stakeholders and partners at all levels of the system.</p> <p><i>Evidence:</i></p>	
<p>GV8b Part C and 619 state staff or representatives monitor progress of the written communication process, reviewing and revising it as necessary, based on data on progress and changing context.</p> <p><i>Evidence:</i></p>	
<p>GV8c Leaders use and encourage strategies that promote frank, respectful discussions and facilitate the development and maintenance of long-term collaborative relationships across agencies and partners.</p> <p><i>Evidence:</i></p>	
<p>GV8d Leaders continuously gather and use information from stakeholders and partners at all levels of the system to inform decisions, influence state policy, and improve the system.</p> <p><i>Evidence:</i></p>	
<p>GV8e Leaders regularly inform legislators, funders and public/private partners about the benefits and accomplishments of Part C and 619, and the continuing needs of the system related to the strategic plan.</p> <p><i>Evidence:</i></p>	

GV8f Leaders implement an effective public awareness campaign to ensure families and referral sources are aware of the benefits of program and how to access services.

Evidence:

The purpose of the Finance component of the System Framework is to guide state Part C and Section 619 Coordinators, their staff and partners in ensuring that sufficient funds and resources are in place to support and sustain all components of the system, thereby facilitating the implementation of evidence-based practices.

Both early intervention (Part C) and early childhood special education (619) operate as systems of services and (supports), relying on multiple funding streams at the federal, state and local level. Most funding sources are public (federal, state and/or local). State, regional and/or local system entities may also access private funds (e.g., private insurance and family fees for Part C, grants) to support their program. States have discretion in determining which funding to access. These decisions are influenced by federal, state and local guidelines for use of funds, political will and identified need. As a result, state systems need to be current on service utilization data, demographics of children served and opportunities for collaboration and alignment with other early care and education programs serving the same populations. Working relationships with key partners such as agency fiscal staff, other early care and education program administrators, and advocates prove to be vital as states navigate various funding streams to support the system.

This component includes: finance planning process/forecasting; fiscal data; procurement; resource allocation, use of funds and disbursement; and monitoring and accountability of funds and resources. A strong, fiscally sound system that is sustainable over time is driven by a finance planning process that is in alignment with a larger system or state-level strategic plan to meet program infrastructure and service delivery needs, both for the short and long-term. The planning process should be informed by current and accurate statewide data (both fiscal and programmatic) to provide a clear picture of system costs, revenue and projected need. This information should directly inform decisions regarding which resources to pursue (procurement), and how they should be allocated, used and disbursed. Monitoring use of funds should be conducted regularly to ensure that spending is in compliance with contract performance and all federal, state and local fiscal requirements to maintain access to the various funding sources.

While fiscal data is a defined sub-component area, with a coordinated state-wide means of collection, it is important to note that access to and use of fiscal data is vital to each of the other sub-components and is reflected across all sub-component areas.

Subcomponent 1: Finance Planning Process/Forecasting

Quality Indicator FN1: Part C and Section 619 state staff conduct finance planning to identify adequate resources at the state, and regional and/or local levels to meet program infrastructure and service delivery needs.

Elements of Quality	1-4
<p>FN1a Finance planning uses <u>demographic</u> information of children potentially eligible for the IDEA program and their eligibility for other <u>early care and education</u> programs/funding streams (e.g., <u>Title I</u>, Early/Head Start, state Pre-K) to project the amount of financial resources needed over time and determine how and which resources to access.</p> <p><i>Evidence:</i></p>	
<p>FN1b Finance planning includes a review of program costs, <u>projected revenues and expenditures</u>, and estimated need to <u>garner</u> the resources necessary to support and sustain the system.</p> <p><i>Evidence:</i></p>	
<p>FN1c Part C and Section 619 state staff conduct <u>fiscal mapping</u> of federal, state, local, and private resources to better connect existing funding sources, identify opportunities for cost savings and assure that all potential resources are accessed.</p> <p><i>Evidence:</i></p>	
<p>FN1d Family leaders, key partners (e.g., Early/Head Start, state Pre-K, Medicaid) and program and <u>fiscal</u> staff, who are knowledgeable about specific funding streams, are involved in discussions and decision-making.</p> <p><i>Evidence:</i></p>	
<p>FN1e Part C and Section 619 state staff conduct a <u>cost-benefit analysis</u> of potential funding sources and develop clear, detailed financing strategies, specifying which funding stream(s) would be most beneficial to pursue for what purpose/service or function.</p> <p><i>Evidence:</i></p>	

<p>FN1f A clearly written finance plan aligns with the program priorities and strategic plan(s), the program public statements of <u>vision</u>, <u>mission</u> and/or <u>purpose</u>, and articulates measurable goals and activities.</p> <p><i>Evidence:</i></p>	
<p>FN1g The finance plan is available and <u>effectively</u> communicated to <u>stakeholders</u>, including state and local administrators, fiscal staff, funding partners, <u>practitioners</u>, and families.</p> <p><i>Evidence:</i></p>	
<p>FN1h The finance plan is reviewed and revised, as necessary, including identification of additional financial resources and unexpected fiscal changes to ensure that sufficient funding is available to meet changing needs (e.g., demographics, political and economic context).</p> <p><i>Evidence:</i></p>	

Quality Indicator FN2: State and regional and/or local system entities use strategic finance plan to forecast a long-term and annual proposed budget to ensure a strong base of financial support is formed.

Elements of Quality		1-4
<p>FN2a A proposed budget is developed to forecast the amount of funds needed from each funding source to operate the system for the year as well as a projection of the funds needed to operate the system in the long-term.</p> <p><i>Evidence:</i></p>		
<p>FN2b <u>Trend analyses</u> of children and families served, services provided and funds expended are conducted to predict future budget and personnel needs for use in short and long term planning.</p> <p><i>Evidence:</i></p>		
<p>FN2c State and regional and/or local system entities have adequate <u>budgetary control</u> and flexibility regarding use of funds and resources to support system implementation and improvement.</p> <p><i>Evidence:</i></p>		
<p>FN2d The proposed budget aligns with the public statements of vision/mission and/or purpose of the broader early care and education system.</p> <p><i>Evidence:</i></p>		
<p>FN2e The Governor, legislators and state leaders actively support <u>budget appropriation</u> requests from the system.</p> <p><i>Evidence:</i></p>		

Subcomponent 2: Fiscal Data

Quality Indicator FN3: State and regional and/or local system entities have access to fiscal data for program planning, budget development and required reporting.

Elements of Quality		1-4
<p>FN3a A coordinated state-wide means of collecting timely and accurate fiscal data on <u>revenue</u> and <u>expenditures</u>, by specific fund source, is in place with the ability to <u>disaggregate</u> fiscal and program data by region and/or program.</p> <p><i>Evidence:</i></p>		
<p>FN3b <u>Data checks</u> and other mechanisms are in place to ensure the accuracy and reliability of fiscal data.</p> <p><i>Evidence:</i></p>		
<p>FN3c Fiscal data are linked to programmatic data (e.g., number of referrals, referral source, child count, units of service) to allow for analysis of the amount of funds spent.</p> <p><i>Evidence:</i></p>		
<p>FN3d Fiscal reports on <u>distribution</u> and expenditure of funds by specific fund source are generated and shared to inform fiscal and program staff of financial status, to facilitate <u>resource management</u>, and to meet state and federal fiscal reporting requirements.</p> <p><i>Evidence:</i></p>		
<p>FN3e Training and technical assistance are provided systematically to state, regional and/or local system entities on how to access and use fiscal data.</p> <p><i>Evidence:</i></p>		

<p>FN3f Part C and Section 619 state staff make fiscal and programmatic data readily available in a variety of formats that can be used by <u>stakeholders</u> (e.g., ICC, SAC, legislators and the general public) for advocacy in the <u>procurement</u> of funds.</p> <p><i>Evidence:</i></p>	
<p>FN3g Part C and Section 619 state staff make fiscal data readily available in a variety of formats that can be used by state, regional and/or local structures for accountability and program improvement.</p> <p><i>Evidence:</i></p>	
<p>FN3h Relevant fiscal data (e.g., expenses by service, region and/or local entity, and fund source) are shared among early care and education programs to assess efficient and effective use of resources and to inform budgetary decisions in the alignment and coordination of <u>early care and</u> systems.</p> <p><i>Evidence:</i></p>	
<p>FN3i A systematic process is in place to evaluate and determine whether the means of collecting and disseminating fiscal data is providing data that is useful to stakeholders.</p> <p><i>Evidence:</i></p>	

Quality Indicator FN4: State and regional and/or local system entities use fiscal data to manage the budget.

Elements of Quality		1-4
<p>FN4a Fiscal data on revenues, <u>planned expenses</u> and <u>actual expenditures</u> are tracked and used on an ongoing basis to manage fiscal resources.</p> <p><i>Evidence:</i></p>		
<p>FN4b Fiscal data are used to inform budget development, adjustment and re-distribution of funds and resources based on service and program needs.</p> <p><i>Evidence:</i></p>		
<p>FN4c Fiscal data are sources of information that drive program improvement and effective utilization of funding sources.</p> <p><i>Evidence:</i></p>		

Subcomponent 3: Procurement

Quality Indicator FN5: State and regional and/or local system entities secure funds and resources so that funds can be allocated and distributed to meet the needs of the system in accordance with the finance plan.

Elements of Quality	1-4
<p>FN5a State and regional and/or local <u>fiscal</u> and programmatic staff are aware of the <u>operating budget</u> that is in place and what funds are available for the system to use.</p> <p><i>Evidence:</i></p>	
<p>FN5b A formal process (e.g., budget line item, designated account number) is in place to ensure that <u>appropriated funds</u> are designated for use only by the system.</p> <p><i>Evidence:</i></p>	
<p>FN5c State and regional and/or local system entities are informed about legal requirements (e.g., <u>Maintenance of Effort</u> (MOE), system of payments, fiscal accountability), related to accessing and using funds and resources that support programs and services.</p> <p><i>Evidence:</i></p>	
<p>FN5d Families are generally informed about the fiscal process and their fiscal responsibilities.</p> <p><i>Evidence:</i></p>	
<p>FN5e Families understand their financial obligations, if any, for receiving services as well as the cost of providing services.</p> <p><i>Evidence:</i></p>	

<p>FN5f Additional funds are secured, as necessary, based on review of <u>demographic</u>, fiscal and program data.</p> <p><i>Evidence:</i></p>	
<p>FN5g State and regional and/or local administrative and fiscal staff have clearly defined roles and responsibilities for accessing available funds to support the system.</p> <p><i>Evidence:</i></p>	

Quality Indicator FN6: Part C and Section 619 state staff coordinate and align resources and funding streams with other state agencies, programs and initiatives in order to improve system effectiveness, implement evidence-based practices and ensure efficient use of resources.

Elements of Quality		1-4
<p>FN6a Collaboration and coordination of resources across state agencies, programs and initiatives (e.g., early care and education, health) occurs through review and alignment of fiscal and programmatic policies and activities.</p> <p><i>Evidence:</i></p>		
<p>FN6b Specific mechanisms (e.g., policy, Interagency Agreements (IAs), Memoranda of Understanding (MOUs), <u>Medicaid state plan amendments</u>, waivers, and guidance) clearly articulate service, programmatic and funding responsibilities.</p> <p><i>Evidence:</i></p>		
<p>FN6c Administrative requirements for accessing funding sources are minimized and aligned to reduce burden on regional and/or local entities.</p> <p><i>Evidence:</i></p>		
<p>FN6d Regional and/or local entities are encouraged to pursue partnerships across agencies, programs and initiatives (e.g., <u>early care and education</u>, health) to leverage resources.</p> <p><i>Evidence:</i></p>		
<p>FN6e Partners across state agencies, programs and initiatives and at all levels of the system clearly communicate on an on-going basis regarding agency responsibilities related to requirements for funding sources.</p> <p><i>Evidence:</i></p>		

<p>FN6f There is an ongoing process for reviewing and revising, as necessary, the clear designation of agency roles and responsibilities reflected in state, regional and/or local mechanisms (e.g., policy, IAs, MOUs, Medicaid state plan amendments, waivers, and guidance).</p>	
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Evidence:

Subcomponent 4: Resource Allocation, Use of Funds and Disbursement

Quality Indicator FN7: Part C and Section 619 state staff equitably allocate funds to meet the needs of the system, including children and families.

Elements of Quality	1-4
<p>FN7a <u>Resource allocation</u> is based on data to address geographic and <u>demographic</u> differences and needs (e.g., <u>cost study</u>, <u>reimbursement rate</u> for services, formula based on critical variables).</p> <p><i>Evidence:</i></p>	
<p>FN7b The allocation process is designed to support and fund the implementation of <u>evidence-based practices</u> (e.g., environment, instruction, teaming and collaboration) and high quality programs.</p> <p><i>Evidence:</i></p>	
<p>FN7c The method of fund and resource allocation is predictable, <u>transparent</u> and communicated to <u>stakeholders</u>.</p> <p><i>Evidence:</i></p>	
<p>FN7d The allocation process facilitates and promotes collaboration and shared resources across <u>early care and education</u> programs (e.g., shared program functions, <u>match dollars</u>).</p> <p><i>Evidence:</i></p>	
<p>FN7e Data are gathered on an ongoing basis to evaluate if the fund and resource allocation process addresses the needs of the program, including children and families.</p> <p><i>Evidence:</i></p>	

FN7f The allocation process is reviewed and revised as necessary based upon available data.

Evidence:

Quality Indicator FN8: State and regional and/or local system entities use funds and resources efficiently and effectively to implement high quality programs for meeting the needs of children and families.

Elements of Quality		1-4
<p>FN8a Funds and resources are used in accordance with the state’s <u>vision/mission</u> and/or <u>purpose</u> for the early intervention or early childhood special education system.</p> <p><i>Evidence:</i></p>		
<p>FN8b Implementation of <u>fiscal</u> policies and procedures related to using funds and resources for provision of high quality programs is supported through guidance and on-going <u>technical assistance</u>.</p> <p><i>Evidence:</i></p>		
<p>FN8c State and regional and/or local funds and resources are prioritized to facilitate active implementation of <u>evidence-based practices</u> (e.g., inclusion, coaching, teaming).</p> <p><i>Evidence:</i></p>		
<p>FN8d Funds and resources are used to support alignment and collaboration across <u>early care and education</u> programs.</p> <p><i>Evidence:</i></p>		

<p>FN8e State and regional and/or local system entities comply with federal, state and local requirements related to use of funds and resources.</p> <p><i>Evidence:</i></p>	
<p>FN8f The effective and efficient use of funds is reviewed and revised as necessary to support high quality programs.</p> <p><i>Evidence:</i></p>	

Quality Indicator FN9: State and regional and/or local system entities disperse funds and make timely payments or reimbursement for allowable expenses.

Elements of Quality	1-4
<p>FN9a Policies and procedures are current and explicit, specifying compliance with federal, state and local requirements (e.g., <u>Maintenance of Effort (MOE)</u>, <u>payor of last resort</u>, <u>non-supplanting</u>) and describing how financial transactions are approved and paid.</p> <p><i>Evidence:</i></p>	
<p>FN9b All <u>payment mechanisms</u> (e.g., contracts, grants, vouchers, central finance system) adhere to state and federal requirements regarding use of funds and resources.</p> <p><i>Evidence:</i></p>	
<p>FN9c Payment mechanisms identify inconsistencies in use of funds and resources so that corrections can be made.</p> <p><i>Evidence:</i></p>	
<p>FN9d Programs and practitioners make available information and documentation needed to account for use of funds and/or bill for reimbursement.</p> <p><i>Evidence:</i></p>	
<p>FN9e <u>Fiscal data</u> on services provided and resources used to support each child and family (e.g., <u>expense reports</u>, <u>unit costs</u>) are compared to those services identified on the Individualized Family Service Plan (IFSP)/Individualized Education Program (IEP) in order to verify accuracy and process payments, if appropriate.</p> <p><i>Evidence:</i></p>	

<p>FN9f A system of <u>checks and balances</u> is in place that describes separation of responsibilities across personnel for approving expenditures and making payments.</p> <p><i>Evidence:</i></p>	
<p>FN9g Payment policies and procedures and payment mechanisms are reviewed and revised as necessary.</p> <p><i>Evidence:</i></p>	

Subcomponent 5: Monitoring and Accountability of Funds and Resources

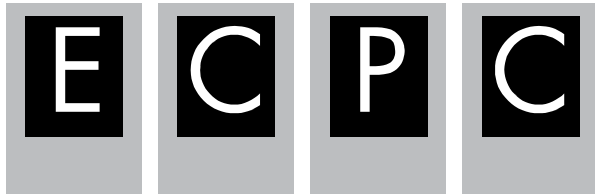
Quality Indicator FN10: State and regional and/or local system entities regularly monitor finances and resources to ensure that spending is in compliance with contract performance and all federal, state and local fiscal requirements.

Elements of Quality	1-4
<p>FN10a <u>Fiscal data</u>, methods and tools are used to monitor districts/contractors/practitioners' performance and compliance with federal and state requirements, as well as contracts, if applicable.</p> <p><i>Evidence:</i></p>	
<p>FN10b Fiscal data, methods and tools are used to evaluate if districts/contractors/practitioners' use funds to help achieve the program's public statements of <u>vision</u>, <u>mission</u> and/or <u>purpose</u>.</p> <p><i>Evidence:</i></p>	
<p>FN10c Policies and procedures are reviewed to ensure they reflect all fiscal mandates.</p> <p><i>Evidence:</i></p>	
<p>FN10d State and regional and/or local system entities participate in fiscal <u>audits</u>, as required, to comply with federal, state and local fiscal mandates.</p> <p><i>Evidence:</i></p>	
<p>FN10e Fiscal monitoring data are shared with districts/contractors/practitioners for informing improvement planning.</p> <p><i>Evidence:</i></p>	

<p>FN10f Fiscal noncompliance is corrected in a timely manner when identified through fiscal monitoring or audits in accordance with requirements.</p> <p><i>Evidence:</i></p>	
<p>FN10g <u>Sanctions</u> are used to address programs/practitioners that are unable to timely correct non-compliance and/or are not fiscally sound (e.g., financially secure, have cash on-hand to keep agency in operation).</p> <p><i>Evidence:</i></p>	
<p>FN10h Fiscal monitoring methods and tools are reviewed and revised as necessary.</p> <p><i>Evidence:</i></p>	
<p>FN10i Monitoring methods and tools are aligned whenever possible with other early care and education programs.</p> <p><i>Evidence:</i></p>	



System Framework Personnel/Workforce (PN) Component



Early Childhood Personnel Center

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The purpose of the Personnel/Workforce component of the System Framework is to guide states in the planning, development, implementation and evaluation of a comprehensive system of personnel development (CSPD). This component is the primary mechanism by which the state ensures that infants, toddlers, and young children with disabilities and their families, are provided services by knowledgeable, skilled, competent, and highly qualified personnel, and that sufficient numbers of these personnel are available in the state to meet service needs. The CSPD is a statutory requirement for Part C. Although no longer a mandate for Part B, we continue to use the terminology because CSPD has a lengthy and prominent history in the Individuals with Disabilities Education Act (IDEA), dating back to the predecessor, the Education of the Handicapped Act (EHA).

An ongoing, coordinated and strategically designed system of personnel development provides the supports needed by the other framework components. An effective CSPD is key to promoting both effective practices and the implementation of legal requirements as determined by the IDEA. It is important for understanding workforce capacity in order to provide timely and consistent services by prepared personnel. An effective system must coordinate and address state needs for both the number of personnel as well as the degree to which those personnel are supported and qualified for their roles in the service system. The CSPD acknowledges the coordination between preservice program and inservice training personnel development as critical for ensuring consistency of practices. A CSPD is informed by ongoing evaluation and multiple sources of data including stakeholder input, monitoring results and the capacity to implement child and program quality standards. The other components of a system framework inform the work of the CSPD and how it can support their effective implementation and desired results.

This component includes: leadership, coordination, and sustainability; state personnel standards; preservice personnel development; inservice personnel development; recruitment and retention; and evaluation. The leadership, coordination, and sustainability subcomponent addresses the membership and responsibilities of a leadership team and the required elements of a written plan for the CSPD. The state personnel standards subcomponent specifies criteria regarding the alignment of state standards with national standards established by discipline-specific organizations (e.g. CEC, ASHA, AOTA) for personnel knowledge, skills, and competencies, and bases state certification, licensure, credentialing, and/or endorsement upon these standards. The preservice personnel subcomponent requires institution of higher education (IHEs) to align programs of study with state and national personnel standards, coordinate with inservice training programs, and specifically prepare students to work with

infants, toddlers, and preschool children and their families. The inservice personnel development subcomponent requires the availability of appropriately targeted and effective training and technical assistance to retool, extend, and update the knowledge, skills, and competencies of the workforce. The recruitment and retention subcomponent delineates strategies that must be in place to ensure the availability of sufficient numbers of highly competent personnel to meet the demand for services in the state. Finally, the evaluation subcomponent provides the basis for collecting data and examining all elements of the CSPD in order to identify strengths and weaknesses, and make appropriate modifications based on the findings.

Subcomponent 1: Leadership, Coordination, and Sustainability

Quality Indicator PN1: A cross-sector leadership team is in place that can set priorities and make policy, governance, and financial decisions related to the personnel system.

Elements of Quality		1-4
PN1a	The composition of the leadership team represents key partners from cross-sector early childhood systems, technical assistance programs, institutions of higher education, parent organizations as well as any other relevant stakeholders across disciplines. <i>Evidence:</i>	
PN1b	Additional stakeholder input, including from families, is actively solicited and considered by the leadership team in setting priorities and determining <u>governance</u> decisions. <i>Evidence:</i>	
PN1c	The leadership team members are aware of other related early childhood and school-age personnel development systems and align efforts when appropriate. <i>Evidence:</i>	

<p>PN1d The leadership team develops an overall <u>vision</u>, <u>mission</u>, and <u>purpose</u> for the CSPD and makes decisions and implements processes that reflect these.</p> <p><i>Evidence:</i></p>	
<p>PN1e The CSPD vision, mission and purpose are <u>aligned</u> with the overall early intervention and preschool special education systems.</p> <p><i>Evidence:</i></p>	
<p>PN1f The leadership team examines current policies and state initiatives (e.g. <u>quality rating and improvement systems</u>, <u>educator effectiveness frameworks</u>) to identify opportunities for collaboration and the coordination of resources, including ongoing and sustained funding across cross-sector early childhood systems.</p> <p><i>Evidence:</i></p>	
<p>PN1g The leadership team advocates for and identifies resources for cross-sector priorities and activities.</p> <p><i>Evidence:</i></p>	
<p>PN1h The leadership team disseminates information on the CSPD plan to relevant public and private audiences.</p> <p><i>Evidence:</i></p>	

Quality Indicator PN2: There is a written multi-year plan in place to address all sub-components of the CSPD.

Elements of Quality	1-4
<p>PN2a The development and implementation of the CSPD plan is based on the specific vision, mission, and purpose for a CSPD.</p> <p><i>Evidence:</i></p>	
<p>PN2b The CSPD plan is aligned with and informed by stakeholder input, national professional organization personnel standards, state requirements, and the vision, mission, and purpose of the cross-sector early childhood systems involved in the CSPD.</p> <p><i>Evidence:</i></p>	
<p>PN2c The CSPD plan articulates a process for two way communication between stakeholders and the leadership team for soliciting input and sharing information on the implementation of activities.</p> <p><i>Evidence:</i></p>	
<p>PN2d The CSPD plan includes strategies for engaging in ongoing <u>formative evaluation</u> and summative evaluation of the activities.</p> <p><i>Evidence:</i></p>	
<p>PN2e The leadership team monitors both the implementation and effectiveness of the activities of the CSPD plan.</p> <p><i>Evidence:</i></p>	

<p>PN2f The leadership team plans for and ensures that funding and resources are available to sustain the implementation of the CSPD plan.</p>	
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Evidence:

Subcomponent 2: State Personnel Standards

Quality Indicator PN3: State personnel standards across disciplines are aligned to national professional organization personnel standards.

Elements of Quality	1-4
<p>PN3a State personnel standards are based on core knowledge and skills needed for working with young children and their families in <u>cross-sector early childhood systems</u>.</p> <p><i>Evidence:</i></p>	
<p>PN3b State personnel standards are specified, accessible, and used by program administrators and staff.</p> <p><i>Evidence:</i></p>	
<p>PN3c State certification or licensing boards have a mechanism for assessing the degree to which state personnel standards are demonstrated by graduates of <u>preservice programs</u> across disciplines.</p> <p><i>Evidence:</i></p>	
<p>PN3d State personnel standards are reviewed annually and updated, when appropriate, to reflect state personnel needs, changes in legal requirements, changes in national professional organizations personnel standards, evaluation data, and updated knowledge on <u>evidence-based practices</u>.</p> <p><i>Evidence:</i></p>	

Quality Indicator PN4: The criteria for state certification, licensure, credentialing and/or endorsement are aligned to state personnel standards and national professional organization

Elements of Quality	1-4
<p>PN4a A system for articulating and attaining a certification, licensure, credentialing and/or endorsement exists across disciplines.</p> <p><i>Evidence:</i></p>	
<p>PN4b The criteria and requirements for attaining certification, licensure, credentialing and/or endorsement are specified and accessible for personnel across disciplines.</p> <p><i>Evidence:</i></p>	
<p>PN4c The criteria and requirements for a system of certification, licensure, credential and/or endorsement are competency or skill based.</p> <p><i>Evidence:</i></p>	
<p>PN4d Mechanisms such as inter-state agreements and policies are defined and exist for cross state <u>reciprocity</u> of certification, licensure, credential and/or endorsement.</p> <p><i>Evidence:</i></p>	
<p>PN4e The system criteria and requirements are reviewed and updated, as appropriate to reflect state personnel needs, changes in legal requirements, changes in national professional organization personnel standards, evaluation data, and updated knowledge on evidence-based practices.</p> <p><i>Evidence:</i></p>	

Subcomponent 3: Preservice Personnel Development

Quality Indicator PN5: Institution of higher education (IHE) programs and curricula across disciplines are aligned with both national professional organization personnel standards and state personnel standards.

Elements of Quality	1-4
<p>PN5a IHE programs and curricula for each discipline are based on knowledge and skill competencies that are aligned with state personnel standards.</p> <p><i>Evidence:</i></p>	
<p>PN5b The criteria and requirements for attaining certification, licensure, credentialing and/or endorsement are specified and accessible for personnel across disciplines. IHE programs and curricula for each discipline are based on knowledge and skill competencies that are aligned with national professional organization personnel standards.</p> <p><i>Evidence:</i></p>	
<p>PN5c IHE program competencies are <u>operationalized</u> and defined by example.</p> <p><i>Evidence:</i></p>	
<p>PN5d IHE programs and curricula for each discipline are aligned with state and local program quality initiatives and evaluation systems (e.g., <u>QRIS</u>, <u>educator effectiveness frameworks</u>, licensing).</p> <p><i>Evidence:</i></p>	
<p>PN5e IHE programs and curricula for each discipline are coordinated to ensure an adequate number of programs of study are available to meet current and future personnel needs.</p> <p><i>Evidence:</i></p>	

Quality Indicator PN6: Institution of higher education programs and curricula address early childhood development and discipline-specific pedagogy.

Elements of Quality	1-4
<p>PN6a IHE programs and curricula across disciplines recruit and prepare personnel for professional roles and responsibilities.</p> <p><i>Evidence:</i></p>	
<p>PN6b IHE programs and curricula across disciplines contain evidence-based practices that reflect the learning needs of children with and at-risk for developmental delays and disabilities and their families.</p> <p><i>Evidence:</i></p>	
<p>PN6c IHE programs and curricula provide relevant field experiences such as internships, observations, and practice in a variety of inclusive early childhood settings.</p> <p><i>Evidence:</i></p>	
<p>PN6d IHE programs and curricula are reviewed, evaluated, and updated to reflect current intervention evidence and revised state personnel standards and national professional organization personnel standards.</p> <p><i>Evidence:</i></p>	
<p>PN6e IHE programs of study and curricula utilize evidence-based <u>professional development</u> practices and instructional methods to teach and supervise adult learners.</p> <p><i>Evidence:</i></p>	

PN6f IHE faculty collaborate and plan with inservice providers to align preservice and inservice personnel development so there is a continuum in the acquisition of content from knowledge to mastery.

Evidence:

Subcomponent 4: Inservice Personnel Development

Quality Indicator PN7: A statewide system for inservice personnel development and technical assistance is in place for personnel across disciplines.

Elements of Quality	1-4
<p>PN7a A statewide system for inservice personnel development is aligned to national professional organization personnel standards across disciplines.</p> <p><i>Evidence:</i></p>	
<p>PN7b A statewide system for inservice personnel development is aligned to state personnel standards across disciplines.</p> <p><i>Evidence:</i></p>	
<p>PN7c The statewide system for inservice personnel development provides a variety of technical assistance opportunities to meet the needs of personnel.</p> <p><i>Evidence:</i></p>	
<p>PN7d The inservice personnel development component of the CSPD plan is guided by updated needs assessments of the capability of the workforce in relation to the desired knowledge and skill competencies.</p> <p><i>Evidence:</i></p>	
<p>PN7e Inservice personnel development is coordinated across early childhood systems and delivered collaboratively, as appropriate.</p> <p><i>Evidence:</i></p>	

<p>PN7f Inservice personnel development employs evidence-based <u>professional development</u> practices that incorporate a variety of adult learning strategies including job embedded applications such as <u>coaching</u>, <u>reflective supervision</u> and supportive <u>mentoring</u>.</p> <p><i>Evidence:</i></p>	
<p>PN7g Inservice learning opportunities are individualized to the needs of the participants and the objectives of the personnel development.</p> <p><i>Evidence:</i></p>	
<p>PN7h Families and/or parent organization participate in the design and delivery of inservice personnel development.</p> <p><i>Evidence:</i></p>	

Quality Indicator PN8: A statewide system for inservice_personnel development and technical assistance is aligned and coordinated with higher education program and curricula across disciplines.

Elements of Quality	1-4
<p>PN8a The content for inservice personnel development is based on <u>evidence-based practices</u>.</p> <p><i>Evidence:</i></p>	
<p>PN8b Faculty from IHEs and inservice staff meet on a quarterly basis to plan for, coordinate, and collaborate on inservice content.</p> <p><i>Evidence:</i></p>	
<p>PN8c Content for inservice personnel development extends the depth of <u>core knowledge and skills</u> (CKCs) acquired in preservice programs and addresses updated knowledge on evidence-based practices and changes in state policies and initiatives.</p> <p><i>Evidence:</i></p>	

Subcomponent 5: Recruitment and Retention

Quality Indicator PN9: Comprehensive recruitment and retention strategies are based on multiple data sources, and revised as necessary.

Elements of Quality	1-4
<p>PN9a Strategies are based on data, current research, and <u>stakeholder</u> input.</p> <p><i>Evidence:</i></p>	
<p>PN9b Strategies target <u>discipline-specific</u> shortages.</p> <p><i>Evidence:</i></p>	
<p>PN9c The effectiveness of strategies is tracked, reviewed annually, and updated as appropriate based on data, current research, and stakeholder input.</p> <p><i>Evidence:</i></p>	

Quality Indicator PN10: Comprehensive recruitment and retention strategies are being implemented across disciplines.

Elements of Quality	1-4
<p>PN10a Strategies include opportunities for advancement through a variety of processes such as articulation between two and four year <u>institutions of higher education</u> and access to <u>career pathways/ladders</u>.</p> <p><i>Evidence:</i></p>	
<p>PN10b Strategies focus on <u>induction</u>, improving administrative supports, and using a variety of <u>mentoring</u> models to support and retain personnel.</p> <p><i>Evidence:</i></p>	
<p>PN10c Strategies include incentives and recognition programs such as financial compensation, scholarships, <u>service obligations</u>, loan reimbursement and/or tuition reimbursement to improve access to preservice and inservice personnel development.</p> <p><i>Evidence:</i></p>	
<p>PN10d Strategies address <u>alternative routes to certification</u>.</p> <p><i>Evidence:</i></p>	
<p>PN10e Strategies address the usefulness of designing and/or participating in online recruitment systems.</p> <p><i>Evidence:</i></p>	

Subcomponent 6: Evaluation

Quality Indicator PN11: The evaluation plan for the CSPD includes processes and mechanisms to collect, store, and analyze data across all subcomponents.

Elements of Quality	1-4
<p>PN11a Decisions regarding priorities for evaluation questions to be addressed and data to be collected are identified when developing the CSPD plan.</p> <p><i>Evidence:</i></p>	
<p>PN11b Multiple processes, mechanisms, and methods to collect data are identified and established based on the need for the information, usefulness of potential findings, and burden on respondents and systems.</p> <p><i>Evidence:</i></p>	
<p>PN11c The state has the capacity to support data collection, management, and analysis for personnel qualifications, needs assessment, preservice and inservice <u>personnel development</u>, and personnel supply and demand.</p> <p><i>Evidence:</i></p>	
<p>PN11d Quality review processes for data collection, verification, storage and management, and analysis are defined and implemented regularly.</p> <p><i>Evidence:</i></p>	
<p>PN11e Personnel data are linked to child and family outcomes.</p> <p><i>Evidence:</i></p>	

Quality Indicator PN12: The evaluation plan is implemented, continuously monitored, and revised as necessary based on multiple data sources.

Elements of Quality	1-4
<p>PN12a The implementation of the evaluation plan results in data or data summaries and analysis that are useful for decision-making and are <u>accessible</u> across <u>cross-sector early childhood systems</u>.</p> <p><i>Evidence:</i></p>	
<p>PN12b Data are used to inform decisions, monitor progress, and make program improvements.</p> <p><i>Evidence:</i></p>	
<p>PN12c Data are collected on personnel variables, such as personnel development participation, acquisition of content, and performance of competencies and those data are examined in relation to relevant child and family outcomes.</p> <p><i>Evidence:</i></p>	
<p>PN12d Data are collected on personnel development variables, such as units of <u>personnel development</u>, type and amount of support (e.g. observational feedback, <u>coaching</u>, practice), and content and those data are examined in relation to relevant child and family outcomes.</p> <p><i>Evidence:</i></p>	

System Framework Accountability & Quality Improvement (AC) Component

The purpose of the Accountability & Quality Improvement component of the System Framework is to guide state Part C and Section 619 Coordinators, their staff and partners in an ongoing process of reviewing and evaluating the Part C and Section 619 systems to identify areas for statewide improvement. The process provides direction on determining strategies that achieve a quality, effective, and efficient system to support implementation of evidence-based practices leading toward improved outcomes for children and their families. This component assists state leaders in assessing and improving all other components of the framework.

States have a responsibility, under federal law, to utilize a system of general supervision that monitors the statewide implementation of the Individuals with Disabilities Education Act (IDEA), identifies and corrects noncompliance, and works toward improved outcomes for children and families. True accountability holds states responsible for a sustainable process that ensures ongoing quality and improvement.

The overall focus of this component is to assist a state in having an accountability and quality improvement system designed to facilitate the achievement of positive results for children and families. The component can be used to support improvement through a variety of methods such as State Systemic Improvement Plan (SSIP), ongoing system evaluation, local program evaluation, and monitoring.

This component includes: planning for accountability and improvement; collecting and analyzing performance data; and using results for continuous improvement. Planning for accountability serves as the basis for documenting the need for change, tracking progress and demonstrating improvement. “The accountability plan” is assumed to be in writing and should include all details necessary to implement a sound and effective statewide accountability and improvement system. The plan may be a stand-alone description or included in one or more state documents (e.g. policies and procedures, monitoring and accountability manuals, the State Performance Plan/Annual Performance Report (SPP/APR), including the State Systemic Improvement Plan (SSIP), Request for Application (RFA) for program or system evaluation). Methods used for collecting and analyzing performance data ensure that adequate information is available at the state, regional and/or local levels to determine the quality of the systems and services and if results are being achieved. Leadership at all levels of the system use strategies to support continuous improvement and achieve expectations. State leadership works to enhance capacity at all levels to use data-informed decision-making practices to implement effective accountability and improvement systems.

Subcomponent 1: Planning for Accountability and Improvement

Quality Indicator AC1: Ongoing statewide planning for accountability and improvement at all levels is informed by data and reflects strong leadership and commitment to positive outcomes for children and their families.

Elements of Quality	1-4
<p>AC1a Planning for accountability and improvement is <u>aligned</u> with the <u>vision</u>, <u>mission</u> and <u>purpose</u> of Part C or 619.</p> <p><i>Evidence:</i></p>	
<p>AC1b An accountability and improvement plan is used to inform policy decisions and actions related to the accountability and ongoing improvement of the system.</p> <p><i>Evidence:</i></p>	
<p>AC1c <u>Stakeholders</u> are engaged on an ongoing basis to inform development, implementation and revisions to the accountability and improvement plan.</p> <p><i>Evidence:</i></p>	
<p>AC1d The accountability and improvement plan is readily available and <u>accessible</u> (e.g., other formats, languages) to the public.</p> <p><i>Evidence:</i></p>	
<p>AC1e <u>State leadership</u> ensures that each element of the accountability and improvement plan is executed in a timely, efficient and <u>effective</u> manner.</p> <p><i>Evidence:</i></p>	

<p>AC1f The accountability and improvement plan is aligned with and informed by other <u>quality improvement initiatives</u> within and across agencies.</p> <p><i>Evidence:</i></p>	
<p>AC1g The accountability and improvement plan is reviewed and revised as necessary based on how well the plan monitors the implementation and effectiveness of the system.</p> <p><i>Evidence:</i></p>	

Quality Indicator AC2: A written accountability and improvement plan includes details necessary to implement an ongoing effective statewide accountability and improvement system at all levels.

Elements of Quality	1-4
<p>AC2a The goals of the accountability and improvement system are defined in the written accountability and improvement plan.</p> <p><i>Evidence:</i></p>	
<p>AC2b The accountability and improvement plan includes mechanisms for implementing informal and formal dispute resolution procedures (e.g. administrative complaints, due process hearings, mediation) as needed as part of the accountability and improvement system.</p> <p><i>Evidence:</i></p>	
<p>AC2c Expectations for <u>systems performance</u> (e.g. <u>targets</u>, <u>benchmarks</u>, <u>indicators</u>) are clearly identified and described in the accountability and improvement plan.</p> <p><i>Evidence:</i></p>	
<p>AC2d The accountability and improvement plan includes mechanisms for collecting valid and reliable data (e.g. record review, surveys, self-assessment, electronic child records) for accountability, program evaluation and quality improvement.</p> <p><i>Evidence:</i></p>	
<p>AC2e The accountability and improvement plan includes mechanisms for collecting valid and reliable data (e.g. record review, surveys, self-assessment, electronic child records) for accountability, program evaluation and quality improvement.</p> <p><i>Evidence:</i></p>	

<p>AC2f The accountability and improvement plan includes processes and timelines for collection, analyses and making data-informed decisions based on performance data.</p> <p><i>Evidence:</i></p>	
<p>AC2g The accountability and improvement plan addresses the use of data to measure performance and identify trends, root causes and improvement strategies at the state, regional and/or local levels of the system.</p> <p><i>Evidence:</i></p>	
<p>AC2h An accountability and improvement plan includes processes that allow for necessary adjustments to strategies (e.g. <u>professional development</u>, <u>incentives</u>, <u>sanctions</u>) based on data to enhance accountability and improvement.</p> <p><i>Evidence:</i></p>	

Subcomponent 2: Collecting and Analyzing Performance Data

Quality Indicator AC3: Part C and 619 state staff and representatives collect adequate data to determine the quality and results of the systems and services.

Elements of Quality	1-4
<p>AC3a <u>Quantitative data</u> and <u>qualitative data</u> collection methods are used to provide data to answer questions that measure progress toward the identified outcomes.</p> <p><i>Evidence:</i></p>	
<p>AC3b <u>Stakeholders</u> are involved in the development of data collection tools or instruments as necessary.</p> <p><i>Evidence:</i></p>	
<p>AC3c Data collection methods are designed to address what is needed to meet federal and state requirements.</p> <p><i>Evidence:</i></p>	
<p>AC3d Data are collected to monitor the appropriateness of outcomes/goals, services, frequency, intensity and settings/environments.</p> <p><i>Evidence:</i></p>	
<p>AC3e State Part C and 619 staff implement procedures to ensure data collected are verified and are of high quality (e.g. valid, reliable, accurate, timely).</p> <p><i>Evidence:</i></p>	

<p>AC3f Data are collected on a regular basis and the type and amount collected is intentional based on priorities included in the <u>accountability</u> and improvement plan for accountability and improvement.</p> <p><i>Evidence:</i></p>	
<p>AC3g Data collection methods measure fidelity of interventions and determine quality and/or the effectiveness of intervention approaches/strategies.</p> <p><i>Evidence:</i></p>	
<p>AC3h Individuals collecting performance data possess required knowledge and competence in data collection and have access to ongoing support and <u>training</u> in this area.</p> <p><i>Evidence:</i></p>	
<p>AC3i Selected data collection methods are coordinated across <u>early care and education</u> programs, are integrated with each other and do not duplicate effort.</p> <p><i>Evidence:</i></p>	
<p>AC3j State Part C and 619 staff review and revise data collection methods as necessary to meet changing circumstances and ensure collection of needed data.</p> <p><i>Evidence:</i></p>	

Quality Indicator AC4: Leadership at all levels have sufficient information to make accountability and improvement decisions.

Elements of Quality	1-4
<p>AC4a Leaders at all levels analyze <u>data quality</u> (e.g. valid, reliable, accurate, timely) to make informed decisions for accountability and improvement.</p> <p><i>Evidence:</i></p>	
<p>AC4b Leaders at all levels analyze and <u>disaggregate</u> data by programs/agencies, <u>demographics</u> and other variables to make conclusions about performance in relation to the <u>targets</u>.</p> <p><i>Evidence:</i></p>	
<p>AC4c Data collected assist stakeholders and leaders at all levels in making <u>data-informed decisions</u> about how to enhance progress towards the intended results.</p> <p><i>Evidence:</i></p>	
<p>AC4d Conclusions about local, regional and state performance are available for developing strategies that yield sustainable improvement.</p> <p><i>Evidence:</i></p>	

Subcomponent 3: Using Results for Continuous Improvement

Quality Indicator AC5: Leadership at all levels, as appropriate, communicate and publicly report data and information through a variety of methods to document performance and evaluation results.

Elements of Quality

The state Part C and 619 systems have effective and efficient procedures in place to report data that adhere to applicable laws and regulations including timelines, content requirements, and privacy requirements.

Performance data and desired messages (e.g. Annual Performance Report (APR), publicly reported data, legislative reports, monitoring reports, dispute resolution data) are accessible to relevant stakeholders using clear and concise reporting methods.

Monitoring and dispute resolution reports communicating data-informed conclusions are issued to programs identifying regional and/or local performance, including findings of noncompliance and actions needed to make improvement and ensure correction.

Leaders at all levels evaluate methods used to communicate data-based conclusions on an ongoing basis and revise as necessary.

Elements of Quality		1-4
<p>AC5a The state Part C and 619 systems have <u>effective</u> and efficient procedures in place to report data that adhere to applicable laws and regulations including timelines, content requirements, and privacy requirements.</p> <p><i>Evidence:</i></p>		
<p>AC5b Performance data and desired messages (e.g. Annual Performance Report (APR), publicly reported data, legislative <u>reports</u>, <u>monitoring</u> reports, dispute resolution data) are <u>accessible</u> to relevant <u>stakeholders</u> using clear and concise reporting methods.</p> <p><i>Evidence:</i></p>		
<p>AC5c Monitoring and dispute resolution reports communicating data-informed conclusions are issued to programs identifying regional and/or local performance, including <u>findings of noncompliance</u> and actions needed to make improvement and ensure correction.</p> <p><i>Evidence:</i></p>		

AC5d Leaders at all levels evaluate methods used to communicate data-based conclusions on an ongoing basis and revise as necessary.

Evidence:

Quality Indicator AC6: Leadership at all levels use strategies to support continuous improvement to achieve expectations, as articulated in the accountability and improvement plan.

Elements of Quality	1-4
<p>AC6a Part C and 619 state staff use <u>data-informed decisions</u> to target state <u>resources</u> and support (e.g. fiscal, human resources, <u>technical assistance</u> and <u>professional development</u>) for effective accountability and continuous improvement.</p> <p><i>Evidence:</i></p>	
<p>AC6b Improvement planning processes incorporate <u>evidence-based practices</u> to achieve intended results.</p> <p><i>Evidence:</i></p>	
<p>AC6c Part C and 619 state staff support continuous improvement by local educational agencies/early intervention service (LEAs/EIS) programs, through a variety of strategies (e.g. technical assistance, corrective action or improvement plans, IDEA determinations, <u>sanctions</u>) designed to meet federal and state requirements and move toward achieving the goals of the accountability and improvement plan.</p> <p><i>Evidence:</i></p>	
<p>AC6d Leaders at all levels use data on <u>fidelity of implementation</u> to improve intervention practices.</p> <p><i>Evidence:</i></p>	
<p>AC6e Continuous improvement activities are <u>aligned</u> with existing <u>early childhood</u> and education <u>initiatives</u> whenever appropriate.</p> <p><i>Evidence:</i></p>	

AC6f Part C and 619 state staff verify timely correction of noncompliance to support overall systems improvement leading to improved access and outcomes for children with disabilities.	
AC6g Strategies that are used to support improvement are reviewed and revised as necessary to ensure improvement occurs and is maintained.	

Quality Indicator AC7: Leadership at all levels work to enhance capacity to use data-informed practices to implement effective accountability and improvement schemes.

Elements of Quality

Technical assistance and/or professional development activities are targeted toward the knowledge and skills needed at the state and local level to use data-informed practices, including identifying and correcting noncompliance and improving results performance.

Multiple professional development activities and supports (e.g. coaching, mentoring, training, peer to peer support) are aligned to enhance knowledge and skills related to using data to make program improvements.

State and local leaders use mechanisms to track and inform improvement to practices and results over time.

Technical assistance and professional development activities designed to enhance capacity at all levels are reviewed and revised as necessary.

a. Elements of Quality		1-4
<p>AC7a <u>Technical assistance</u> and/or <u>professional development</u> activities are targeted toward the knowledge and skills needed at the state and local level to use data-informed practices, including identifying and correcting noncompliance and improving results performance.</p> <p><i>Evidence:</i></p>		
<p>AC7b Multiple professional development activities and supports (e.g. <u>coaching</u>, <u>mentoring</u>, <u>training</u>, <u>peer to peer support</u>) are aligned to enhance knowledge and skills related to using data to make program improvements.</p> <p><i>Evidence:</i></p>		
<p>AC7c State and local leaders use mechanisms to track and inform improvement to practices and results over time.</p> <p><i>Evidence:</i></p>		

<p>AC7d Technical assistance and professional development activities designed to enhance capacity at all levels are reviewed and revised as necessary.</p>	
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Evidence:

System Framework Quality Standards (QS) Component

The purpose of the Quality Standards component of the System Framework is to guide Part C and Section 619 Coordinators, their staff and partners in an ongoing process of evaluating the quality of their programs and services within the context of the larger early care and education community, to ensure continuous program improvement and to develop more effective, efficient systems that support enhanced child and family outcomes.

Infants, toddlers, and young children with disabilities have the right to receive services and participate in the full array of public and private early care and education programs that are available to all young children. In order to effectively support early learning and positive child and family outcomes, these programs must be guided by agreed upon, evidence-based standards for what all young children are expected to know and be able to do (child level standards), as well as agreed upon, evidence-based standards for what constitutes quality in early care and education programs (program level standards).

This component includes both child level standards and program level standards. The child level standards subcomponent contains critical elements of quality that are necessary for young children with disabilities (identified by asterisks). For states that do not address these elements of quality within the broad child standards for all children, elements of quality specifically applicable to early intervention (Part C) and early childhood special education (Section 619) are outlined. The program level standards subcomponent contains a quality indicator related to early care and education programs, as well as a separate quality indicator specific to early intervention (EI) and early childhood special education (ECSE).

Subcomponent 1: Child Level Standards

Quality Indicator QS1: The state has articulated what children under age five, including children with disabilities, are expected to know and do.

Elements of Quality	1-4
<p>QS1a Child level standards emphasize significant, developmentally appropriate content and outcomes.</p> <p><i>Evidence:</i></p>	
<p>QS1b Child level standards are <u>aligned</u> from birth through age five.</p> <p><i>Evidence:</i></p>	
<p>QS1c Child level standards are age-anchored with specific precision to reflect that there are different expectations for children in each year of life.</p> <p><i>Evidence:</i></p>	
<p>QS1d Child level standard content reflects the best available evidence on development and learning.</p> <p><i>Evidence:</i></p>	
<p>QS1e Child level standards are appropriate for children from diverse cultural, linguistic and socio-economic backgrounds.</p> <p><i>Evidence:</i></p>	
<p>QS1f Child level standards are aligned with standards for K-12.</p> <p><i>Evidence:</i></p>	

<p>QS1g Child level standards are clear and understood by early care and education <u>practitioners</u>, local program administrators and families.</p> <p><i>Evidence:</i></p>	
<p>QS1h Child level standards represent multiple areas of development and learning and reflect the content of nationally recognized early childhood outcomes frameworks, including the Office of Special Education Programs (OSEP) child outcomes and the Head Start child outcomes framework. *</p> <p><i>Evidence:</i></p>	
<p>QS1i Child level standards reflect <u>universal design for learning</u> (UDL), ensuring the standards are appropriate for young children with disabilities.*</p> <p><i>Evidence:</i></p>	
<p>QS1j Child level standards are reviewed and revised as necessary with input from <u>stakeholders</u>, including families of young children with disabilities, practitioners and representatives from Part C and 619 programs. *</p> <p><i>Evidence:</i></p>	
<p>QS1k Part C and Section 619 programs use the state child level standards (i.e., those used by other early childhood programs) to support the implementation of high-quality practices. *</p> <p><i>Evidence:</i></p>	
<p>* Note: If elements of quality h. or i. are not in place (scored 1 or 2 on the self-assessment) AND the Part C or Section 619 program does not use the state child standards (k is scored a 1 or 2 on the self-assessment), then elements of quality l. through n. apply.</p>	

<p>QS1l State Part C and Section 619 programs have specified what children birth to 5 are expected to know and do, reflecting universal design, and programs use these standards.</p> <p><i>Evidence:</i></p>	
<p>QS1m Child level standards developed by Part C and Section 619 are reviewed and revised as necessary with input from stakeholders, including families of young children with disabilities, practitioners and representatives from Part C and 619 programs.</p> <p><i>Evidence:</i></p>	
<p>QS1n State Part C and Section 619 programs are involved with state efforts to develop child standards appropriate for all children.</p> <p><i>Evidence:</i></p>	

Quality Indicator QS2: Early childhood programs, including Part C and Section 619, use the child level standards to support the implementation of high-quality practices.

Elements of Quality	1-4
<p>QS2a Child level standards are widely disseminated and easily <u>accessible</u> to <u>practitioners</u>, families and the general public.</p> <p><i>Evidence:</i></p>	
<p>QS2b <u>Early care and education</u> practitioners working with young children with disabilities are familiar with the child standards.</p> <p><i>Evidence:</i></p>	
<p>QS2c Practices (e.g. assessment, Individualized Family Service Plan (IFSP)/Individualized Education Program (IEP) development, development and learning activities) reflect the child level standards.</p> <p><i>Evidence:</i></p>	

Quality Indicator QS3: The state has an infrastructure in place to support the effective use of child level standards.

Elements of Quality	1-4
<p>QS3a Two and four year professional preparation programs address child level standards, including their use with children with disabilities.</p> <p><i>Evidence:</i></p>	
<p>QS3b Ongoing <u>professional development</u> (e.g. <u>mentoring</u>, <u>coaching</u>) supports effective use of the child standards, including individualization for children with disabilities.</p> <p><i>Evidence:</i></p>	
<p>QS3c <u>Resources</u> are available to support families in understanding and using the child standards to help their children develop and learn.</p> <p><i>Evidence:</i></p>	
<p>QS3d The state has policies, procedures and/or guidance to support local programs in the <u>alignment</u> of curriculum and assessment with the child level standards.</p> <p><i>Evidence:</i></p>	
<p>QS3e Evaluating program quality includes <u>monitoring</u> how well child standards are effectively used to guide practice, including individualization for children with disabilities.</p> <p><i>Evidence:</i></p>	

Subcomponent 2: Program Level Standards

Quality Indicator QS4: The state has articulated what constitutes quality in early care and education programs.

Elements of Quality	1-4
<p>QS4a <u>Program level standards</u> are consistent with agreed upon program standards in the field (e.g., National Association for the Education of Young Children (NAEYC) Program Standards, Head Start Performance Standards).</p> <p><i>Evidence:</i></p>	
<p>QS4b Program level standards reflect the best available evidence on early childhood program quality and effectiveness.</p> <p><i>Evidence:</i></p>	
<p>QS4c Program level standards apply to the full range of programs in which young children with disabilities participate.</p> <p><i>Evidence:</i></p>	
<p>QS4d Program level standards address a program’s ability to support the needs of a diverse population of children.</p> <p><i>Evidence:</i></p>	
<p>QS4e Program level standards address program’s responsibilities to build on families’ strengths to support them in caring for their children and in encouraging them to serve in <u>leadership</u> roles.</p> <p><i>Evidence:</i></p>	

<p>QS4f Program level standards are clear and understood by <u>practitioners</u>, local program administrators and families.</p> <p><i>Evidence:</i></p>	
<p>QS4g Program level standards are widely disseminated and easily <u>accessible</u> to practitioners, families and the general public.</p> <p><i>Evidence:</i></p>	
<p>QS4h Early childhood programs, including Part C and Section 619, use program level standards to drive program improvement.</p> <p><i>Evidence:</i></p>	
<p>QS4i Program level standards are reviewed and revised as necessary with input from <u>stakeholders</u>, including families of young children with disabilities, practitioners and representatives from Part C and 619 programs.</p> <p><i>Evidence:</i></p>	

Quality Indicator QS5: State Part C and Section 619 programs have articulated expectations for what constitutes high quality early intervention (EI) and early childhood special education (ECSE) services.

Elements of Quality

Elements of Quality	1-4
<p>QS5a The EI/ECSE standards address federal and state legal requirements.</p> <p><i>Evidence:</i></p>	
<p>QS5b The EI/ECSE standards reflect the best available evidence on early childhood program quality and effectiveness.</p> <p><i>Evidence:</i></p>	
<p>QS5c The EI/ECSE standards address the qualifications of <u>practitioners</u> providing services to young children with disabilities and their families.</p> <p><i>Evidence:</i></p>	
<p>QS5d The EI/ECSE standards are consistent with professional practice guidance in the field (e.g., <u>DEC Recommended Practices</u>, American Speech and Hearing Association Practice Policies).</p> <p><i>Evidence:</i></p>	
<p>QS5e The EI/ECSE standards are coordinated and consistent with other early care and education programs across the state.</p> <p><i>Evidence:</i></p>	

<p>QS5f The EI/ECSE standards are widely disseminated and easily accessible to practitioners, families and the general public.</p> <p><i>Evidence:</i></p>	
<p>QS5g The EI/ECSE standards address program’s responsibilities to build on families’ strengths to support them in caring for their children and in encouraging them to serve in leadership roles.</p> <p><i>Evidence:</i></p>	
<p>QS5h Part C and Section 619 programs use the standards to drive program improvement.</p> <p><i>Evidence:</i></p>	
<p>QS5i The EI/ECSE standards are reviewed and revised as necessary with input from a diverse group of <u>stakeholders</u>, including families of young children with disabilities, practitioners and representatives from Part C and 619 programs.</p> <p><i>Evidence:</i></p>	

Quality Indicator QS6: The state has an infrastructure in place to support the full range of programs in meeting program level standards.

Elements of Quality

The infrastructure includes adequate fiscal and human resources for the development, implementation and monitoring of program standards.

Two and four year professional preparation programs address the application of program level standards to the full range of early care and education programs.

Ongoing professional development (e.g. mentoring, coaching) supports effective application of program level standards to the full range of early care and education programs.

The state has a process to use the program standards as part of monitoring and program improvement.

The extent to which each program has achieved the program level standards is easily accessible to practitioners, families and the general public (e.g. State Performance Plan (SPP), Annual Performance Reports (APR), SPP/APR public reporting, quality rating and improvement systems (QRIS)).

Resources are available to support families in understanding the extent to which each program has achieved the standards in order to help them make informed decisions.

The state evaluates the effectiveness of the infrastructure that supports the use of the program standards.

Elements of Quality		1-4
<p>QS6a The infrastructure includes adequate <u>fiscal and human resources</u> for the development, implementation and <u>monitoring of</u> program standards.</p> <p><i>Evidence:</i></p>		
<p>QS6b Two and four year professional preparation programs address the application of program level standards to the full range of early care and education programs.</p> <p><i>Evidence:</i></p>		
<p>QS6c Ongoing professional development (e.g. <u>mentoring, coaching</u>) supports <u>effective</u> application of program level standards to the full range of early care and education programs.</p> <p><i>Evidence:</i></p>		

<p>QS6d The state has a process to use the program standards as part of monitoring and program improvement.</p> <p><i>Evidence:</i></p>	
<p>QS6e The extent to which each program has achieved the program level standards is easily <u>accessible</u> to <u>practitioners</u>, families and the general public (e.g. State Performance Plan (SPP), Annual Performance Reports (APR), SPP/APR public reporting, <u>quality rating and improvement systems</u> (QRIS)).</p> <p><i>Evidence:</i></p>	
<p>QS6f <u>Resources</u> are available to support families in understanding the extent to which each program has achieved the standards in order to help them make informed decisions.</p> <p><i>Evidence:</i></p>	
<p>QS6g The state evaluates the effectiveness of the infrastructure that supports the use of the program standards.</p> <p><i>Evidence:</i></p>	