

ARE WE READY FOR ACCREDITATION?

Administration

| | Yes | Not Sure | No |
|---|--------------------------|--------------------------|--------------------------|
| 1. Is our Administration willing to support us in the accreditation process? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Is our Program Director willing to support us in the accreditation process? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Does our Program Director understand he/she will need at least five hours a month to assist us with the self-study process? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Does our program have the funds to support the purchase of needed materials and supplies? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Will our administration allow each of our staff members (at least two hours a month) to participate in training sessions regarding accreditation and the self-study process? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Will our Program Director have extra time in his/her schedule to help with the paperwork? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Do we have the appropriate resources to support professional development along with changes needed to improve quality? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

If you answered “no” or “not sure” to some of the questions in this section, please refer to the *Overview of Administrative and Management Quality Standards, Quality Standard 35.*

Program Stability

| | Yes | Not Sure | No |
|---|--------------------------|--------------------------|--------------------------|
| 1. Has our Program Director been working with our program for the last six months? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Do we think our Program Director will stay for at least the next year? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Has our Site Director been working in our program for the last six months? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Do we think our Site Director will stay with our program for at least the next year? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Is our program at the same location as it was last year? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Do we think our program will be in the same location next year? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Do we have substitute staffing available? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

If you answered “no” or “not sure” to some of the questions in this section, please refer to the *Overview of Administrative and Management Quality Standards, Quality Standards 28, 31, and 37.*

Professional Development

| | Yes | Not Sure | No |
|---|--------------------------|--------------------------|--------------------------|
| 1. Is there a thorough orientation process for new staff members? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Is there a mentor available for new staff members? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Do all of our staff members have current first aid training? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Do all of our staff members have current CPR training? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Do our staff members have opportunities to attend professional trainings or conferences? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Does our Program Director and/or Site Director belong to a professional organization? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

If you answered “no” or “not sure” to some of the questions in this section, please refer to the *Overview of Administrative and Management Quality Standards, Quality Standards 28, 31, 32, and 33.*

Family Interactions

| | Yes | Not Sure | No |
|---|--------------------------|--------------------------|--------------------------|
| 1. Are all family members greeted upon arrival? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Do we have an organized parent informational area? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Do we communicate with each family on a regular basis, in many different ways? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Do we host family events (dinners, plays, talent shows)? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Do we have parents that volunteer their time in program? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Do we provide parents opportunities to give us feedback? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

If you answered “no” or “not sure” to some of the questions in this section, please refer to the *Overview of Administrative and Management Quality Standards*, Quality Standards 51, 52, 53, and 54. You should also refer to Quality Standard 26 a, b, c, and d in the *Program Practices Self-Study Tool*.

Policies and Procedures

| | Yes | Not Sure | No |
|--|--------------------------|--------------------------|--------------------------|
| 1. Do we have a published mission statement? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Do we have written job descriptions? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Do we have written personnel policies and procedures? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Do we have a parent handbook? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Do we have written health and safety guidelines? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

If you answered “no” or “not sure” to some of the questions in this section, please refer to the *Overview of Administrative and Management Quality Standards*, Quality Standards 31, 33, 34, and 55.

Decision Making

| | Yes | Not Sure | No |
|---|--------------------------|--------------------------|--------------------------|
| 1. Is our Director accepting of ideas from staff members? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Do our children and staff members have the opportunity to develop daily activity plans? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Do we believe that feedback from the community (parents, children, school personnel, etc.) is important in making decisions about our program? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Are we willing to have an Accreditation Coach observe our program? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Are we willing to have an Accreditation Coach give us suggestions about our program? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Are we ready to make changes to improve the quality of our program? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

If you answered “no” or “not sure” to some of the questions in this section, please refer to the *Overview of Administrative and Management Quality Standards*, Quality Standards 42, 43, 51, 52, 53, and 54.