

Section 1 - Required Training

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An on-site Program Administrator and/or teaching staff must complete the following trainings (a before applying for the Silver Circle of Quality. A Program Administrator may be any person lister main application as a Director, Assistant Director, or Director/Teacher. Completion of trainings Gateways Registry.	ed in Section 4 of t	he	
Has an on-site Program Administrator completed the ExceleRate Illinois Orientation?	O YES	О ио	
2. Has an on-site Program Administrator completed the Getting Ready for the Program Administration Scale (PAS) training?	○ YES	○ NO	
Section 2 - Standards and Evidence			
For each question below, check either 'Yes' or 'No' to indicate whether your program meets the If answering 'Yes', additional information may be required. Completion of required trainings and by the Gateways Registry.			
1A – LEARNING ENVIRONMENT			
1. Has your program completed an ERS self-assessment?	O YES	О ио	
NOTE: Personal care routines will note be included in ExceleRate Illinois.			
☐ If Yes, submit a copy of the Assessment Profile Sheet(s)—ITERS, ECERS, SACERS.			
2. Using self-assessment results, did your program meet an overall ERS score of 4.50, with no classroom score below 4.0?	○ YES	○ NO	
☐ If No, include a copy of your program's Continuous Quality Improvement Plan (CQIP) that addresses the overall score below 4.50, including any classroom below 4.0. CQIP must also address how your program will improve these scores by the time of your program's next renewal.			



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1B - CURRICULUM		
3. Do you utilize a curriculum in your program that is aligned with the Illinois Early Learning Guidelines/Standards?	○ YES	○ NO
3a. If Yes, what is the name of the curriculum?		
3b. If <i>Yes</i> , is this curriculum on the list of approved curricula found on the ExceleRate Illinois website?	O YES	О ио
O If No, please include a narrative description of how the curriculum is aligned with the Illinois Early Learning Guidelines/Standards.		
1C - INSTRUCTIONAL QUALITY		
4. Using self-assessment results, did your program meet 4.75 on the "Interaction" and/or "Language Reasoning/ Listening and Talking" subscales?	○ YES	О мо
5. Using self-assessment results, did your program meet classroom subscale scores of 4.0 for "Interaction" and/or "Language Reasoning/ Listening and Talking?"	O YES	О ио
Olf No to either question above, include a copy of your program's CQIP that addresses "Interaction" and/or "Language Reasoning/ Listening and Talking" subscales scores below 4.75, including any classroom subscale score below a 4.0 AND how your program will improve these scores by the time of your program's next renewal. If covered in CQIP for 1A, it should not be duplicated.		
1D - CHILD SCREENING		
6. Did your program meet a score of 5.0 on Program Administration Scale (PAS) item #10?	O YES	○ NO
○ If No, include a copy of your program's CQIP that addresses the PAS item #10 score below 5.0.		



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1E	- CHILD ASSESSMENT			
	Did your program meet a score of 5.0 on Program Administration Scale (PAS) item #11?	YES	○ NO	
_	f <i>No</i> , include a copy of your program's CQIP that addresses the PAS item #11 score below 5.0.			
1F	- INCLUSION OF CHILDREN WITH SPECIAL NEEDS			
8.	Have all classroom teaching staff completed an ExceleRate- approved training on inclusion of children with special needs?	O YES	O NO	
9.	Does your program have a written Memorandum of Understanding (MOU) with the local Child and Family Connections (if serving children under 3)?	○ YES	О ио	N/A (Not serving children under age 3
	A statewide MOU is in development for CFC's to use with programs. Until a statewide MOU is available, this requirement is waived, but will be required at annual report.			
2A	- FAMILY & COMMUNITY ENGAGEMENT			
10.	Did your program meet a score of 5.0 on Program Administration Scale (PAS) items #16, #17, and #19?	YES	○ NO	
0	If No , include a copy of your program's CQIP that addresses the PAS items #16, #17, and/or #19 score (s) below 5.0.			





2B	- TRANSITIONS		
11.	Does your program implement policies and practices to provide general information about transitions and engage parents in discussions and/or activities addressing child and family transitions?	○ YES	О мо
0	If Yes, include a narrative and/or documentation of program's transition practice	2 8.	
3A	- PROGRAM ADMINISTRATION		
12.	Has your program completed a PAS self-assesment?	O YES	○ NO
\bigcirc	If Yes, include a copy of the PAS Profile sheet.		
13.	Did your program have four or more PAS subscale scores at 5.0 or higher (excluding Child Assessment, Family Partnerships, and Marketing and Public Relations)?		
0	If <i>No</i> , include a copy of your program's CQIP that addresses the PAS subscale scores below 5.0.		
3В	- GROUP SIZE AND STAFF/CHILD RATIOS		
14.	Is your program's Illinois Department of Children and Family Services (IDCFS) license in compliance?	O YES	O NO
	NOTE: Program would need to meet the stated ExceleRate Illinois standard at next renewal (when assessment and verification on-site can occur).		
3C	- CONTINUOUS QUALITY IMPROVEMENT		
15.	Has your program completed a Continuous Quality Improvement Plan using previous assessment results?	O YES	○ NO
0	If Yes, please enclose a copy of the program's Continuous Quality Improvement Plan.		





3D	- CULTURALLY AND LINGUISTICALLY APPROPRIATE PRAC	TICE	
16.	Did your program meet a score of 4.5 on ERS item "Promoting Acceptance of Diversity?"	○ YES	O NO
0	If No, include a copy of your program's CQIP that addresses the ERS "Promoting Acceptance of Diversity" item below 6.0.		
4C	- STAFF DEVELOPMENT		
17.	Do all classroom staff in your program have written individualized professional development plans?	○ YES	O NO
0	If Yes, submit copies of individual staff development plans for classrooms that NLU assessed on their last visit.		
18.	Have classroom staff in your program completed five hours of Gateways Registry-approved training?	YES	O NO

