

Attachment B. Sample Alignment of Organizational and Professional Standards with the Program Quality Assessment

High/Scope has aligned its curriculum and assessment tools with many state standards, national programs such as Head Start, and professional organizations such as the National Council of Teachers of Mathematics. As an example, below is the alignment of the Head Start Performance Standards with the Program Quality Assessment. Many Head Start programs use the PQA to prepare for their monitoring visits, as well as to assess program quality on an ongoing basis.

Introduction

The Program Quality Assessment (PQA; High/Scope 2003b) is an excellent tool for rating the quality of center-based Head Start programs and identifying the training needs of Head Start staff. Head Start has always aimed to be a national model of “best practices” in early childhood and family service programs. The PQA is also based on the field’s commonly held positions about best practices. In fact, the Head Start Performance Standards (HSPS; *Federal Register*, 1996; U.S. Department of Health and Human Services, 2002) were a primary reference in the development of the instrument. Consequently, the PQA is highly compatible with Head Start program goals and implementation strategies. Because of this alignment, the PQA has been used in a series of studies to evaluate staff qualifications and staff development in Head Start and to assess the relationship between program quality and Head Start’s effectiveness in promoting children’s development (e.g., Epstein, 1993 & 1999; Schweinhart, 2000; Schweinhart, Oden, Okoloko, Epstein, & Markley, 2000; Schweinhart, Epstein, Okoloko, & Oden, 1998.) These studies are described in the section on “Psychometric Properties” in the PQA Administration Manual.

Like Head Start, the PQA focuses comprehensively on children’s learning experiences, parent involvement and family services, staff development, and overall program management. Whether administered as a self-assessment or by a trained outside rater, the PQA can help Head Start programs identify and achieve optimum levels of quality in all these areas. The PQA provides Head Start programs with meaningful data as they conduct required self-assessments, prepare for onsite program reviews, develop plans for staff training and program development, and generally monitor and strive to improve the quality of their services. Moreover, unlike many compliance measures that score programs according to a simple yes-no dichotomy, the PQA measures quality along a five-point continuum. It clearly defines, in measurable terms, the conditions and practices that constitute low, moderate, and high quality implementation. This range allows Head Start programs to pinpoint their current status and their chart progress over time.

To maximize the usefulness of the PQA to Head Start programs, High/Scope has prepared this Head Start Guide to the PQA. The Guide maps the relationship between the PQA and the Head Start Performance Standards (HSPS). Many PQA items address more than one standard.

The Standards covered in whole or in part by the PQA are Definitions (1304.03), Child Health and Developmental Services (1304.20), Education and Early Childhood Development (1304.21), Child Health and Safety (1304.22), Child Nutrition (1304.23), Child Mental Health (1304.24),

Family Partnerships (1304.40), Community Partnerships (1304.41), Program Governance (1304.50), Management Systems and Procedures (1304.51), Human Resource Management (1304.52), and Facilities, Materials, and Equipment (1304.53). Because the Preschool PQA is designed to assess center-based preschool-age programs in general, the alignment does not include Standards limited to home-based or infant-toddler (Early Head Start) programs, or requirements unique to Head Start's organizational and committee structure.

The following pages contain: (a) a listing of the PQA items, (b) the relevant HSPS, and (c) the alignment of the PQA items with the Standard(s) addressed by that item.

Preschool Program Quality Assessment (PQA) Items

CLASSROOM ITEMS

I. Learning Environment

- I-A. The classroom provides a safe and healthy environment for children.
- I-B. The space is divided into interest areas that address basic aspects of children's play and development.
- I-C. The location of the interest areas is carefully planned to provide for adequate space in each area, easy access between areas, and compatible activities in adjacent areas.
- I-D. An outdoor play area (at or near the program site) has adequate space, equipment, and materials to support various types of play.
- I-E. Classroom areas and materials are systematically arranged, labeled, and accessible to children.
- I-F. Classroom materials are varied, manipulative, open-ended, and authentic and appeal to multiple senses (sight, hearing, touch, smell, taste).
- I-G. Materials are plentiful.
- I-H. Materials reflect human diversity and the positive aspects of children's homes and community cultures.
- I-I. Child-initiated work (work designed and created by children) is on display.

II. Daily Routine

- II-A. Adults establish a consistent daily routine. Children are aware of the routine.
- II-B. The parts of the daily routine include time for children to do the following: to plan; to carry out their plans; to recall and discuss their activities; to engage in small-group activities; to engage in large-group activities; snack or meal time; cleanup time; transition times; outside time and rest time.
- II-C. An appropriate amount of time is allotted for each part of the daily routine.
- II-D. The program has time each day during which children make plans and indicate their plans to adults.
- II-E. The program has time each day (e.g., work time, choice time, center time, free play) during which children initiate activities and carry out their intentions.
- II-F. The program has time each day during which children remember and review their activities and share with adults and peers what they have done.
- II-G. The program has a time each day for small-group activities that reflect and extend children's interests and development.
- II-H. The program has time each day for large-group activities that reflect and extend children's interests and development.
- II-I. During transition times, children have reasonable choices about activities and timing as they move from one activity to the next.
- II-J. The program has a set clean up time with reasonable expectations and choices for children.
- II-K. The program has a time each day for snacks or meals that encourage social interaction.
- II-L. The program has outside time each day during which children engage in a variety of physical activities.

III. Adult-Child Interaction

- III-A. Children's basic physical needs are met.
- III-B. Children's separation from home and daily entry to the program are handled with sensitivity and respect.
- III-C. Adults create a warm and caring atmosphere for children.
- III-D. Adults use a variety of strategies to encourage and support child language and communication.
- III-E. Adults use a variety of strategies to support classroom communication with children whose primary language is not English.
- III-F. Adults participate as partners in children's play.
- III-G. Adults encourage children's learning initiatives throughout the day (both indoors and outdoors).
- III-H. Adults support and extend children's ideas and learning during group times.
- III-I. Adults provide opportunities for children to explore and use materials at their own developmental level and pace.
- III-J. Adults acknowledge individual children's accomplishments.

- III-K. Adults encourage children to interact with and turn to one another for assistance throughout the day.
- III-L. Children have opportunities to solve problems with materials and do things for themselves.
- III-M. Adults involve children in resolving conflicts.

IV. Curriculum Planning and Assessment

- IV-A. Staff use a comprehensive and documented curriculum model or educational approach to guide teaching practices.
- IV-B. Staff use a team-teaching model and share responsibilities for planning and implementing program activities.
- IV-C. Staff maintain records on children and families including the following data on each child: name, birthdate, name of parent or guardian, home address and phone number; child immunization records, health and disability status, accident reports; assessment of child's progress; home visit documentation, parent/teacher conference documentation; family goals, treatment referrals and follow-up
- IV-D. Staff record and discuss anecdotal notes as the basis for planning for individual children.
- IV-E. Staff regularly use a child observation measure of proven reliability and validity to assess children's developmental progress.

AGENCY ITEMS

V. Parent Involvement and Family Service

- V-A. The program provides a variety of opportunities for parents to become involved in the program.
- V-B. Parents are represented on program advisory and/or policymaking committees.
- V-C. Parents are encouraged to participate in program activities with children.
- V-D. Staff and parents exchange information about the curriculum and its relationship to children's development.
- V-E. Staff and parents interact informally to share information about the day's activities and children's experiences.
- V-F. Staff and parents exchange information about how to promote and extend children's learning and social development at home.
- V-G. Staff members schedule home visits and formal parent conferences to share information with parents and seek input from parents about the program and their children's development.
- V-H. The program or its host agency provides diagnostic and special education services for special needs children.
- V-I. Staff provide parents with referrals and access to supportive services as needed.
- V-J. Program activities are coordinated with community agencies and/or the public schools to facilitate the delivery of services to families and/or children's transition to kindergarten.

VI. Staff Qualifications and Staff Development

- VI-A. The program director has the appropriate education, training, and experience.
- VI-B. Instructional staff have the appropriate education, training, and experience.
- VI-C. Support staff (e.g., cook, bus driver, secretary) and volunteers receive the appropriate orientation and supervision.
- VI-D. Staff participate in ongoing professional development activities such as conferences, workshops, college-level courses and seminars, compiling or consulting a resource library, teacher exchanges, observation, mentoring, and coaching.
- VI-E. Inservice training sessions are specific to early childhood and apply the principles of adult learning.
- VI-F. Instructional staff are regularly observed in the program setting and provided with feedback by someone familiar with the curriculum's goals, objectives, and methods for working with children.
- VI-G. The director and teachers are affiliated with a local, state, and/or national early childhood professional organization.

VII. Program Management

- VII-A. The program is licensed based on regulations passed by the state and/or local licensing agencies.

- VII-B. Program policies promote continuity of care by classroom adults (paid staff who work directly with children.)
- VII-C. Staff regularly conduct a program assessment and use the results to improve the program.
- VII-D. The program has a child recruitment and enrollment plan.
- VII-E. The program has a fully developed set of operating policies and procedures.
- VII-F. The program is accessible to those with disabilities.
- VII-G. The program is adequately funded.

Head Start Performance Standards¹ Addressed by the Preschool PQA

HSPS 1304.03 Definitions

5. The curriculum is consistent with the Head Start Performance Standards and is based on sound child development principles about how children grow and learn. Curriculum means a written plan that includes:
- i. The goals for children's development and learning
 - ii. The experiences through which they will achieve these goals
 - iii. What staff and parents do to help children achieve these goals
 - iv. The materials needed to support the implementation of the curriculum

HSPS 1304.20 Child Health and Developmental Services

- (a) Determining child health status
 1. Within 90 days of program entry, determine and arrange for ongoing health care
- (b) Developmental, sensory, and behavioral screening
 1. Within 45 days of program entry, conduct screening
 2. Obtain guidance from appropriate mental health or child development professional
 3. Use multiple sources of information about child including family, teachers, and other staff
- (c) Extended follow-up and treatment
 1. Establish system on ongoing communication with parents
 2. Assist parents in enabling medication, equipment, or other child health aids
 3. Enable prevention and treatment as recommended by dental professional
 4. Provide related services as specified in Individualized Education Plan (IEP) and Individualized Family Service Plan (IFSP)
- (d) Ongoing care -- Agencies must implement ongoing procedures (including observations from parents and staff) to identify new or recurring medical, dental, or developmental concerns so they can make appropriate referrals
- (e) Involving parents -- Agencies must
 1. Consult with parents immediately when problems are suspected or identified
 2. Explain diagnostic/testing procedures and results to parents
 3. Talk to parents about how to familiarize children with medical procedures
 4. Assist parents to enroll in system of ongoing family health care
- (f) Individualization of the program
 1. Agencies must use information from testing and parental/staff input to determine how to best respond to child's individual needs

HSPS 1304.21 Education and Early Childhood Development

- (a) Child development and education approach for all children
 1. To help children be prepared to succeed in their present environment and later responsibilities in school and life, agencies must
 - i. Be developmentally and linguistically appropriate
 - ii. Be inclusive of children with disabilities
 - iii. Support and respect gender, culture, language, ethnicity, and family composition
 - iv. Provide daily balance of child-initiated and adult-directed activities, including individual and small group activities
 - v. Allow and enable children to independently use toilet facilities
 2. Parents must be:
 - i. Invited to become integrally involved in the development of the program's curriculum and educational approach
 - ii. Provided with opportunities to increase child observational skills and share their assessments

¹Many of the Standards are quoted verbatim. However, for clarity and brevity, some items have been reworded or condensed, without changing the essence of the item.

- with staff
 - iii. Encouraged to participate in staff-parent conferences and home visits to discuss child's development and education
 - 3. Agencies must support social and emotional development by
 - i. Enhancing child's strengths by
 - A. Building trust
 - B. Fostering independence
 - C. Encouraging self-control by setting clear, consistent limits and having realistic expectations
 - D. Encouraging respect for the feelings and rights of others
 - E. Supporting and respecting child's home language, culture, and family composition
 - ii. Planning for routines and transitions so they occur in a timely and predictable manner
 - 4. Agencies must provide for development of children's cognitive and language skills by
 - i. Using various strategies (experimentation, inquiry, observation, play, and exploration) to support learning
 - ii. Ensuring opportunities for creative expression through such activities as art, music, movement, dialogue
 - iii. Promoting interaction and language use among children and between children and adults
 - iv. Supporting emerging literacy and numeracy development
 - 5. Agencies in center-based settings must promote physical development by
 - i. Providing sufficient time, indoor and outdoor space, materials and adult guidance for gross motor development
 - ii. Providing sufficient time, indoor and outdoor space, materials, and adult guidance for fine motor development
- (c) Child development and education approach for preschoolers
- 1. Agencies in collaboration with parents must implement a curriculum that
 - i. Supports each child's individual pattern of development and learning
 - ii. Provides for the development of cognitive skills that form a foundation for school readiness and later school success including age-appropriate literacy, numeracy, reasoning, problem-solving and decision-making skills
 - iii. Integrates all educational aspects of health, nutrition, and mental health services into program activities
 - iv. Helps children develop emotional security and facility in social relationships
 - v. Enhances child's understanding of self as an individual and as a member of a group
 - vi. Provides opportunities for success to help children' develop feelings of competence, self-esteem, and positive attitudes toward learning
 - vii. Provides individual and small group experiences both indoors and outdoors
 - 2. Staff must use a variety of strategies to promote learning and development based on observations and ongoing assessment of each child

HSPS 1304.22 Child Health and Safety

- (a) Health emergency procedures
 - 1. Posted emergency plans
 - 2. Emergency service and family contact information
 - 3. Evacuation routes
 - 4. Parental notification procedures
 - 5. Methods for handling/reporting child abuse & neglect
- (b) Conditions of short-term exclusion and admittance
 - 1. Agencies must temporarily exclude a child with short-term injury or contagious illness that cannot be readily accommodated in center-based programs if it imposes health or safety risk to child or others
 - 2. Agencies may not exclude child on long-term basis based on health care needs or medical requirements unless it poses a significant hazard
 - 3. Agencies must request that parents inform them of health or safety needs of child; must share necessary information with staff in accordance with program's confidentiality policy

- (c) Medication administration
 - 1. Labeling and storing
 - 2. Administering
 - 3. Written instructions and authorization
 - 4. Maintaining individual records
- (d) Injury prevention
 - 1. Agencies must ensure that staff and volunteers can demonstrate safety practices
 - 2. Foster safety awareness among children and parents through appropriate program activities
- (e) Hygiene
 - 1. Staff, volunteers, and children must wash hands with soap and running water at following times
 - i. Diapering and toilet use
 - ii. Food preparation and consumption
 - iii. When hands contaminated with bodily fluids
 - iv. After handling animals and pets
 - 2. Staff, volunteers, and children must wash hands with soap and running water at following times
 - i. Before and after giving medication
 - ii. Before and after treating injuries
 - iii. After assisting children with toileting
 - 3. Use of nonporous latex gloves
 - 4. Cleaning spills of bodily fluids
- (f) First aid kits
 - 1. Readily available and well-supplied, accessible to staff but out of children's reach
 - 2. Restocked after use; conduct inventory at regular intervals

HSPS 1304.23 Child Nutrition

- (a) Identification of individual, family, community, or cultural nutritional needs and practices
- (b) Nutritional services
 - 1. Programs must meet nutritional and feeding needs of children and consider cultural/ethnic preferences.
 - ii. Children in part-day centers must receive snacks and meals that meet nutritional needs
 - v. Serving sizes and content must meet USDA guidelines
 - vi. Food must be high in nutrition and low in fat, sugar, and salt
 - 3. Staff must promote effective dental hygiene in conjunction with meals
- (c) Meal service – Agencies must contribute to socialization of children by providing that
 - 1. A variety of food is served to broaden children's food experiences
 - 2. Food is not used as a punishment or reward
 - 3. Sufficient time is allowed for each child to eat
 - 4. Eating is family style for preschoolers and staff
 - 6. Medically-based diets or other dietary requirements are accommodated
 - 7. Children are involved in food-related activities as developmentally appropriate
- (e) Food safety and sanitation
 - 1. Compliance with licensing requirements

HSPS 1304.24 Child Mental Health

- (a) Mental health services
 - 1. Agencies must work collaboratively with parents by
 - i. Soliciting parental information, observations, concerns about their child's health
 - ii. Sharing staff observations with parents and information about separation and attachment issues
 - iii. Discussing with parents appropriate responses to their children's behavior
 - iv. Discussing how to strengthen nurturing environments at home and in the program
 - v. Helping parents better understand mental health issues
 - vi. Supporting parental involvement in mental health interventions
 - 2. Utilize on-site or referrals to community mental health services as needed

HSPS 1304.40 Family Partnerships

- (a) Family goal setting
 - 1. Referrals to community services as needed
 - 4. Variety of opportunities for interaction with parents throughout the year
 - 5. Meetings and interactions respectful of family diversity
- (b) Accessing community services and resources
 - 1. Agencies must work with families to access services and resources that include
 - i. Emergency/crisis assistance in food, housing, clothing, transportation
 - ii. Education and counseling programs on child abuse/neglect, substance abuse, domestic violence
 - iii. Continuing education and employment training
- (d) Parent involvement – general
 - 1. Agencies must provide opportunities in policy making, parent involvement, and education
 - 2. Program settings must be open to parents during all program hours; parents must be welcomed; all parent participation must be voluntary and not a requirement for child’s enrollment
 - 3. Agencies must provide parents with opportunities to participate in the program as employees or volunteers
- (e) Parent involvement in child development and education
 - 1. Agencies must include parents in the development of the curriculum and approach to child development
 - 3. Agencies must provide opportunities for parents to enhance their parenting skills and understanding of child development
 - 5. Center-based programs must conduct two home visits and at least two staff-parent conferences per year
- (f) Parent involvement in health, nutrition, and mental health education
 - 1. Agencies must provide education programs in health (medical and dental), nutrition, and mental health
- (g) Parent involvement in community advocacy
 - 1. Agencies must
 - i. Support and encourage parents to make community services responsive to their needs
 - ii. Establish procedures to provide parents with comprehensive information about community resources
 - 2. Parents must be provided with regular opportunities to work together on activities of interest to them
- (h) Parent involvement in transition activities
 - 1. Agencies must assist parents in becoming their child’s advocate as they transition into the program from home or another child care setting, and from the program to another preschool, child care setting, or elementary school
- (i) Parent involvement in home visits
 - 2. Teachers in center-based programs must make at least two visits per year to home of enrolled children (unless parent does not permit it)
 - 3. Home visits must be scheduled at times mutually convenient for families and staff
 - 4. Visits may take place at the program site or another safe location that affords privacy

HSPS 1304.41 Community Partnerships

- (a) Partnerships
 - 2. Agencies must take affirmative steps with community agencies to support responsiveness to child and family needs
- (c) Transition services
 - 1. Agencies must establish procedures with child care/school/other agencies to support successful transitions including
 - i. Coordination for transfer of records
 - ii. Outreach to encourage communication among all relevant staff
 - iii. Initiating meetings between parents and teachers
 - iv. Initiating joint transition-related activities

HSPS 1304.50 Program Governance

- (b) Policy group composition and formation
 - 7. Parents of enrolled children must be proportionally represented on established policy groups
- (d) Policy group responsibilities including
 - 1. Meeting with management to review following procedures:
 - iv. Setting programs goals
 - vii. Defining recruitment, selection, and enrollment criteria
 - viii. Annual program self-assessment
 - ix. Program personnel policies and standards of conduct
 - x. Hiring and firing director
 - xi. Hiring and firing other staff
- (e) Parent committee must carry out at least the following minimal responsibilities
 - 1. Advise staff in developing and implementing local policies and activities
 - 2. Plan, conduct, participate in formal and informal activities for parents and staff
 - 3. Participate in recruitment and screening of employees according to established policies

HSPS 1304.51 Management Systems and Procedures

- (a) Program planning
 - 1. Agencies must develop a systematic process of ongoing planning
- (b) General communication – Agencies must share information in a timely manner with parents, policy groups, staff, and the community
- (c) Communication with families
 - 1. Agencies must ensure effective and regular two-way communication between staff and parents
- (e) Communication among staff – Agencies must have a mechanism for communication among staff to facilitate quality outcomes for children and families
- (g) Record-keeping systems – Agencies must establish and maintain record-keeping systems to provide timely, accurate information and to ensure appropriate confidentiality of this information
- (i) Program self-assessment and monitoring
 - 1. At least once each year, agencies must conduct a self-assessment

HSPS 1304.52 Human Resource Management

- (a) Organizational structure
 - 1. Agencies must establish and maintain an organizational structure that addresses responsibilities assigned to each staff position and provide evidence of adequate mechanisms for staff supervision and support
- (b) Staff qualifications – General
 - 1. Agencies must ensure that staff and consultants have knowledge, skills, and experiences needed to perform assigned functions
 - 4. Staff and program consultants must be familiar with ethnic background and heritage of families in programs and be able to communicate, to the extent feasible, with children and families with limited English proficiency
- (c) Head Start director qualifications – Director must have demonstrated skills and abilities in a management capacity relevant to human services program management
- (g) Classroom staffing and home visitors – Agencies must meet requirements regarding
 - 1. Child-staff ratios
 - 3. Group size
- (h) Standards of conduct
 - 1. Agencies must ensure that staff, consultants, and volunteers abide by standards of conduct that specify
 - i. They will respect and promote the unique identity of each child and family and refrain from stereotyping on the basis of gender, race, ethnicity, culture, religion, or disability
 - ii. They will follow the program's confidentiality policies
 - iii. No child will be left alone or unsupervised while under their care
 - iv. They will use positive methods of child guidance and will not engage in corporal punishment, emotional or physical abuse, or humiliation; they will not employ discipline methods involving isolation, use of food as punishment or reward, or denial of basic needs

3. Personnel policies must include provision of penalties for violating standards of conduct
- (i) Staff performance appraisals – Agencies must at a minimum perform annual performance reviews for staff members and use results to identify staff training and professional development needs and assist each staff member in improving his/her skills and professional competencies
- (j) Staff and volunteer health – Agencies must ensure that each staff member and volunteer has an initial health and screening examination
- (k) Training and development
 1. Agencies must provide an orientation to all new staff, consultants, and volunteers that includes at minimum goals and philosophy of Head Start and ways in which they are implemented by the program
 2. Agencies must implement a structured approach to staff training and development, attaching academic credit whenever possible; this system should be designed to help build relationships among staff and assist staff in acquiring and increasing knowledge and skills needed to fulfill their job responsibilities
 3. Training must include information on reporting child abuse, helping families transition to/from Head Start

HSPS 1304.53 Facilities, Materials, and Equipment

- (a) Head Start physical environment and facilities
 1. Agencies must provide a physical environment and facilities conducive to learning and reflective of different stages of children’s development
 2. Agencies must provide appropriate space for conduct of all program activities
 3. Center space must be organized into functional areas that can be recognized by children and that allow for individual activities and social interactions
 5. Centers must have at least 35 sq. ft. of usable indoor space and 75 sq. ft. of usable outdoor space per child
 6. Facilities must meet licensing requirements
 7. Agencies must provide for maintenance, repair, safety, and security of all facilities, materials, and equipment
 8. Agencies must provide a center-based environment free of toxins
 9. Outdoor play areas must be arranged to prevent children from leaving premises; no unsupervised exposure to traffic areas en route to/from program
 10. Agencies must conduct safety inspections at least annually regarding space, light, ventilation, heat, and other physical arrangements consistent with children’s health and safety needs
- (b) Head Start equipment, toys, materials, and furniture
 1. Agencies must provide/arrange sufficient equipment, toys, materials, and furniture to facilitate participation of children and adult. Must be
 - i. Supportive of specific educational objectives of local program
 - ii. Supportive of cultural and ethnic backgrounds of children
 - iii. Age-appropriate, safe, and supportive of abilities and developmental level of each child, with necessary adaptation for children with disabilities
 - iv. Accessible, attractive, and inviting to children
 - v. Designed to provide a variety of learning experiences and encourage each child to experiment and explore
 - vi. Safe, durable, and kept in good condition
 - vii. Stored in safe and orderly fashion when not in use

Alignment of Preschool PQA and Head Start Performance Standards

PQA ITEM	RELEVANT HEAD START PERFORMANCE STANDARDS			
I. LEARNING ENVIRONMENT				
A. Safe and healthy environment	1304.22 (a, d, e, f)	1304.23 (e)	1304.53 (a, b)	
B. Defined interest areas	1304.53 (a)			
C. Logically located interest areas	1304.53 (a)			
D. Outdoor space, equipment, materials	1304.21 (a, c)	1304.53 (a)		
E. Organization and labeling of materials	1304.21 (a, c)	1304.53 (b)		
F. Varied and open-ended materials	1304.21 (a, c)	1304.53 (b)		
G. Plentiful materials	1304.21 (a, c)	1304.53 (b)		
H. Diversity-related materials	1304.21 (a)	1304.23 (a)	1304.40 (a)	1304.53 (b)
I. Displays of child-initiated work	1304.21 (a, c)			
II. DAILY ROUTINE				
A. Consistent daily routine	1304.21 (a, c)			
B. Parts of the day	1304.21 (a, c)			
C. Appropriate time for each part of day	1304.21 (a, c)			
D. Time for child planning	1304.21 (a, c)			
E. Time for child-initiated activities	1304.21 (a, c)			
F. Time for child recall	1304.21 (a, c)			
G. Small-group time	1304.21 (a, c)			
H. Large-group time	1304.21 (a, c)			
I. Choices during transition times	1304.21 (a, c)			
J. Cleanup with reasonable choices	1304.21 (a, c)			
K. Snack or meal time	1304.21 (a, c)	1304.23 (c)		
L. Outside time	1304.21 (a, c)			
III. ADULT-CHILD INTERACTION				
A. Meeting basic physical needs	1304.21 (a, c)	1304.23 (b, c)	1304.52 (h)	
B. Handling separation from home	1304.21 (a, c)	1304.24 (a)	1304.40 (e)	
C. Warm and caring atmosphere	1304.21 (a, c)	1304.52 (h)		
D. Support for child communication	1304.21 (a, c)			
E. Support for non-English speakers	1304.21 (a, c)	1304.52 (b, g)		
F. Adults as partners in play	1304.21 (a, c)			
G. Encouragement of child initiatives	1304.21 (a, c)			
H. Support for learning at group times	1304.21 (a, c)			
I. Opportunities for child explorations	1304.21 (a, c)			
J. Acknowledgment of child efforts	1304.21 (a, c)			
K. Encouragement for peer interactions	1304.21 (a, c)			
L. Independent problem-solving	1304.21 (a, c)			
M. Conflict resolution	1304.21 (a, c)			
IV. CURRICULUM PLANNING AND ASSESSMENT				
A. Curriculum model	1304.03 (5)	1304.21 (a, c)	1304.51 (a)	

PQA ITEM	RELEVANT HEAD START PERFORMANCE STANDARDS			
B. Team teaching	1304.51 (e)	1304.52 (g)		
C. Comprehensive child records	1304.51 (g)			
D. Anecdotal note-taking by staff	1304.21 (a, c)			
E. Use of child observation measure	1304.21 (a, c)			
IV. CURRICULUM PLANNING AND ASSESSMENT				
A. Curriculum model	1304.03 (5)	1304.21 (a, c)	1304.51 (a)	
B. Team teaching	1304.51 (e)	1304.52 (g)		
C. Comprehensive child records	1304.51 (g)			
D. Anecdotal note-taking by staff	1304.21 (a, c)			
E. Use of child observation measure	1304.21 (a, c)			
V. PARENT INVOLVEMENT AND FAMILY SERVICES				
A. Opportunities for involvement	1304.21 (a)	1304.40 (a, d-i)		
B. Parents on policy-making committees	1304.40 (d)	1304.50 (b, e)		
C. Parent participation in child activities	1304.21 (a)	1304.40 (d, e)	1304.51 (c)	
D. Sharing of curriculum information	1304.21 (a)	1304.40 (d, e)	1304.51 (b, c)	
E. Staff-parent informal interactions	1304.21 (a)	1304.40 (d, e)	1304.51 (c)	
F. Extending learning at home	1304.21 (a)	1304.40 (d, e)	1304.51 (c)	
G. Formal meetings with parents	1304.21 (a)	1304.40 (d, e, i)	1304.51 (c)	
H. Diagnostic/special education services	1304.20 (a-f)	1304.24 (a)		
I. Service referrals as needed	1304.24 (a)	1304.40 (a, b)	1304.41 (a)	
J. Transition to kindergarten	1304.40 (h)	1304.41 (c)		
VI. STAFF QUALIFICATIONS AND STAFF DEVELOPMENT				
A. Program director background	1304.52 (a, b, c)			
B. Instructional staff background	1304.52 (b, g)			
C. Support staff orientation & supervision	1304.52 (i, j)			
D. Ongoing professional development	1304.52 (k)			
E. Inservice training content and methods	1304.52 (k)			
F. Observation and feedback	1304.52 (a, i)			
G. Professional organization affiliation	1304.52 (k)			
VII. PROGRAM MANAGEMENT				
A. Program licensed	1304.22 (a-f)	1304.23 (e)	1304.52 (j)	1304.53 (a, b)
B. Continuity in instructional staff	1304.52 (g)			
C. Program assessment	1304.50 (d)	1304.51 (i)	1304.52 (k)	
D. Recruitment and enrollment plan	1304.40 (h)	1304.50 (d)	1304.51 (a)	
E. Operating policies & procedures	1304.22 (a-d)	1304.50 (d)	1304.51 (g)	1304.52 (h, k)
F. Accessibility for those with disabilities	1304.21 (a)	1304.53 (a)		
G. Adequacy of program funding	1304.40 (d-i)	1304.52 (b)	1304.52 (k)	1304.53 (a, b)