



Child Development Home

Level 2

Instructions for Completion

The forms referenced in this document are suggested, however, the content found on the forms is required. Forms can be found at <https://iowaccrr.org/providers/iq4k/>.

Nutrition and Physical Activity

Criteria	Required Documentation
<input type="checkbox"/> 1. The provider/program completes one of the following (choose ONE): a. Participates in CACFP OR b. Completes all of the following (as applicable per age served): ** 1. Iowa CACFP Steps to Success Module 2: lessons 1, 2, 3, 5, 6, 7, 8, 9, 10, 11, 15 & 17 only 2. Iowa CACFP Steps to Success Module 15 (parts 1 and 2): Feeding Infants in the CACFP 3. Iowa CACFP Wellness Module – Meaningful Mealtimes	<input type="checkbox"/> Ensure the training certificates are in i-PoWeR <input type="checkbox"/> Check the training requirements <ul style="list-style-type: none"> • Professional Development Requirements • Find training - Training Information & Links • CACFP Training Verification steps
<input type="checkbox"/> 2. The provider identifies and implements one physical activity goal from the completed action plan in Level 1.	<input type="checkbox"/> Suggested form for goal – Nutrition & Physical Activity Action Plan and Goals <input type="checkbox"/> Suggested goal form will need to be uploaded into the IQ4K application

Professional Development

Criteria	Required Documentation
<input type="checkbox"/> 3. The provider completes ChildNet training **	<input type="checkbox"/> This will be verified through i-PoWeR <input type="checkbox"/> Find information about ChildNet 3.0 training <input type="checkbox"/> Ensure your i-PoWeR account is current by following the i-PoWeR CDH Checklist
<input type="checkbox"/> 4. The provider completes 15 annual training hours of professional development **	<input type="checkbox"/> This will be verified through i-PoWeR by an IQ4K Specialist <input type="checkbox"/> Ensure your i-PoWeR account is current by following the i-PoWeR CDH Checklist
<input type="checkbox"/> 5. The provider completes the Medication Administration Skills Competency Course (or other training as approved by HHS) and holds a valid certification of completion. The provider also successfully completes a Competency Skills Evaluation Assessment Checklist (or HHS-approved equivalent) and holds a valid certification of	<input type="checkbox"/> Medication Administration training and Skills Test certificate from the CCNC will be uploaded into the IQ4K application <input type="checkbox"/> Medication Administration training is valid for five years <input type="checkbox"/> The skills test is valid for two years <input type="checkbox"/> Check the training requirements

Please partner with your CCR&R Child Care Consultant or IQ4K Specialist for completion of the IQ4K application.

<p>completion. There shall be one person who meets this criterion present onsite in the program at all times.</p>	<p>a. Professional Development Requirements b. Find training - Training Information & Links <input type="checkbox"/> Please contact your local CCNC for more information</p>
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****C2** - both provider and co-provider need to meet this requirement

Family and Community Partnerships

Criteria	Required Documentation
<input type="checkbox"/> 6. The program offers one conference with each family annually to discuss each child’s progress, strengths and needs in all developmental areas. The assessment information is shared with the family.	<input type="checkbox"/> Suggested form – Annual Conferences <input type="checkbox"/> Information can be typed into the text box or the suggested form can be uploaded
<input type="checkbox"/> 7. The program completes one additional activity annually that promotes partnerships (see Family and Community Partnership Activity Options)	<input type="checkbox"/> Family and Community Partnership Activity Options <input type="checkbox"/> Suggested form – Activity Summary <input type="checkbox"/> Information can be typed into the text box or the suggested form and supporting documents can be uploaded <input type="checkbox"/> Encouraged to utilize Activity Summary Guidance to support reflection

Environment

Criteria	Required Documentation
<input type="checkbox"/> 8. The program provides an environment supportive to, and encouraging of, culture, age, race, ability, special needs and gender diversity.	<input type="checkbox"/> Upload pictures of at least three different materials and how they are used in the program <input type="checkbox"/> Suggested form - Supporting Culture & Diversity
<input type="checkbox"/> 9. The program develops and implements a policy regarding Playground Equipment Stability and Fall Surfacing & Inspection (aligned with Caring for Our Children, Appendix Z).	<input type="checkbox"/> IQ4K Policy Guidance <input type="checkbox"/> At a minimum, policies must address each checkbox in the policy guidance <input type="checkbox"/> Policies can be typed into the text box or uploaded into the IQ4K application
<input type="checkbox"/> 10. The program develops and implements a tobacco/nicotine policy.	<input type="checkbox"/> IQ4K Policy Guidance <input type="checkbox"/> At a minimum, policies must address each checkbox in the policy guidance <input type="checkbox"/> Policies can be typed into the text box or uploaded into the IQ4K application
<input type="checkbox"/> 11. The program completes and annually updates the IQ4K Quality Improvement Action Plan.	<input type="checkbox"/> Required form - Quality Improvement Action Plan <input type="checkbox"/> Each category must be addressed with goals tied to requirements in that area <input type="checkbox"/> This completed form will be uploaded into the IQ4K application

****C2** - both provider and co-provider need to meet this requirement

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Provider Qualifications

Criteria	Required Documentation
<input type="checkbox"/> 12. The provider has (choose ONE): ** a. At least two years of child care experience OR b. At least six college credit hours in education specific to the age group for whom care is provided	<input type="checkbox"/> This will be verified through i-PoWeR <input type="checkbox"/> Ensure your i-PoWeR account is current by following the i-PoWeR CDH Checklist

Teaching and Learning

Criteria	Required Documentation
<input type="checkbox"/> 13. The program develops and implements a daily schedule with predictable routines that are developmentally appropriate for all ages served.	<input type="checkbox"/> Your daily schedule can be typed into the text box or uploaded into the IQ4K application <input type="checkbox"/> Remember to include an explanation of how your schedule fits the needs of all ages of children enrolled
<input type="checkbox"/> 14. The program develops and implements a policy that eliminates or severely limits expulsion, suspension, punitive or other exclusionary discipline.	<input type="checkbox"/> IQ4K Policy Guidance <input type="checkbox"/> At a minimum, policies must address each checkbox in the policy guidance <input type="checkbox"/> Policies can be typed into the text box or uploaded into the IQ4K application <input type="checkbox"/> Expelling Expulsion
<input type="checkbox"/> 15. The program develops and implements policies regarding the use of an approved developmental screening tool for all children in care within 60 days of enrollment and at least annually to identify children who may need additional evaluation and/or intervention strategies.	<input type="checkbox"/> Blank copy of the screening tool used will need to be uploaded into the IQ4K application - this cannot be self-created (i.e.- CDC Milestones, ASQ, ISU Ages & Stages) <input type="checkbox"/> The information can be typed into the text box or uploaded into the IQ4K application <input type="checkbox"/> Why is developmental screening important? <input type="checkbox"/> IQ4K Standards Policy Guidance

**C2 - both provider and co-provider need to meet this requirement