



## Child Development Home IQ4K® Annual Requirements

This document is a planning tool to help keep track of documentation that needs to be **completed annually** to maintain/reapply for an IQ4K® rating. Be sure and refer to the [IQ4K CDH Requirement Chart](#) to ensure you are meeting all required level criteria.

- If currently rated, one year of documentation would be needed if submitting a higher-level application after having a current rating for 12-17 months.
- Two years of documentation would be needed if submitting a higher-level application after having a current rating for 18 months or longer.
- If the rating has lapsed, the past two years of documentation would be needed if less than 6 months have passed since expiration.
- If more than 6 months have passed since rating expiration, documentation from the past year would be needed.

|                                                                                                                                                                                                                     | Year 1<br>_____ to _____<br>month/year                        | Year 2<br>_____ to _____<br>month/year                        |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------|---------------------------------------------------------------|
| <b>Professional Development</b>                                                                                                                                                                                     |                                                               |                                                               |
| Complete Professional Development Plan (Level 1) <ul style="list-style-type: none"> <li>• Upload annually into IQ4K application</li> <li>• Provider and co-provider (if applicable) need to complete</li> </ul>     |                                                               |                                                               |
| Annual Training Hours (Level 2-5) <ul style="list-style-type: none"> <li>• Hours needed for level of application: ____</li> <li>• Provider and co-provider must meet hours annually, verified in i-PoWeR</li> </ul> |                                                               |                                                               |
| <b>Family and Community Partnership</b>                                                                                                                                                                             |                                                               |                                                               |
| Family and Community Partnership Activity (Level 1-5) <ul style="list-style-type: none"> <li>• Upload annually into the IQ4K application</li> <li>• Number of activities will depend on level of renewal</li> </ul> | Level 1 -<br>Level 2 -<br>Level 3 -<br>Level 4 -<br>Level 5 - | Level 1 -<br>Level 2 -<br>Level 3 -<br>Level 4 -<br>Level 5 - |
| Conference with each Family once a Year (Level 2) <ul style="list-style-type: none"> <li>• Upload annually into the IQ4K application</li> </ul>                                                                     |                                                               |                                                               |
| <b>Environment</b>                                                                                                                                                                                                  |                                                               |                                                               |
| IQ4K Interaction and Relationship Self-Assessment (Level 1) <ul style="list-style-type: none"> <li>• Upload annually into IQ4K application</li> <li>• Provider and co-provider need to complete</li> </ul>          |                                                               |                                                               |
| IQ4K Program Assessment (Level 1) <ul style="list-style-type: none"> <li>• Upload annually into IQ4K application</li> </ul>                                                                                         |                                                               |                                                               |
| IQ4K Quality Improvement Action Plan (Level 2) <ul style="list-style-type: none"> <li>• Upload annually into IQ4K application</li> </ul>                                                                            |                                                               |                                                               |