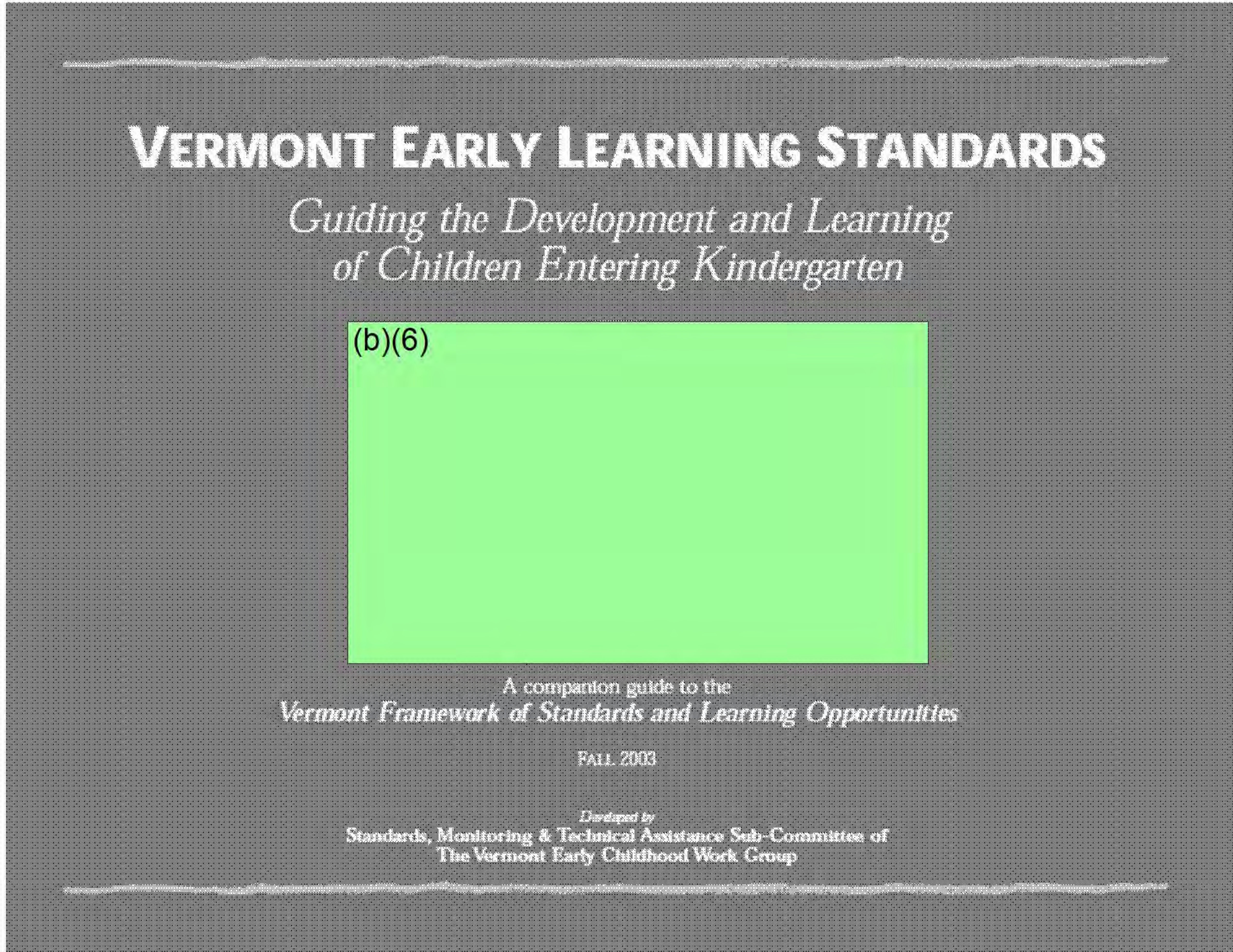


XVII. APPENDIX TABLE OF CONTENTS

The Appendix must include a complete Table of Contents, which includes the page number or attachment number, attachment title, and relevant selection criterion. A sample table of contents form is included below. Each attachment in the Appendix must be described in the narrative text of the relevant selection criterion, with a rationale for how its inclusion supports the narrative and the location of the attachment in the Appendix.

#	Attachment Title	Relevant Selection Criterion
A-Pg. 2	Vermont Early Learning Standards	C1, also alignment with B1, D1, and E1
B-Pg. 42	Report to the Vermont Legislature: Implementation of Prekindergarten Education in Accordance with Vermont's Act 62, January 2010 (STARS RULES)	A1, B1 also B4, related to C1, D1
C-Pg. 55	BBF Council Act, May 2010	A1 and A3, also E2
D-Pg. 64	BBF Facilities and License Plate Fund, 10/2011 and Innovative Early Learning and Development Funding Strategies in Vermont	A1, also A4
E-Pg. 65	VT STARS brochure	B1, also B2
F-Pg. 66	Promoting Health for Young Children and Families in Vermont	A1, also A3 and C3
G-Pg. 76	Supporting Children With Disabilities and Their Families: An Interagency Agreement Among Early Care, Health, and Education Programs and Agencies in Vermont	C4, also A1 and C3
H-Pg. 97	Mentoring, Advising, Teaching, Coaching, Helping	D2, also B2
I-Pg. 98	Foundations for Early Learning	D2, also A1 and C3
J-Pg. 99	Vermont Child Care Apprentice Program	D2, also A1
K-Pg. 100	NGA Data Readiness Project Plan	E2, also A1, A3 and C2
L-Pg. 103	Career Ladder	D1 and D2
M-Pg. 105	CIS Brief	C3, also A1
N-Pg. 106	CIS Recommended Psychosocial and Developmental Tools	C2, also C3
O-Pg. 117	Global Commitment	A3 and A4, also C3
P-Pg. 120	Child Care Financial Assistance Plan	A1, also B4
Q-Pg. 123	Northern Lights Core Competencies	D1, also D2, B3, and alignment
R-Pg. 169	Principles of Professional Development	D1 and D2
S-Pg. 170	DRAFT First Steps – Vermont Infant Toddler Learning Guidelines	C1
T-Pg. 185	Organizational Chart	A3
U-Pg. 186	Vermont ELD Comprehensive Assessment System	C2 aligned with E2
V-Pg. 187	Support Letters	A3 and A1

APPENDIX A



VERMONT'S VISION FOR YOUNG CHILDREN AND THEIR FAMILIES

*Every family in Vermont has the right
to comprehensive, high quality child
development services for its children.*

*Every Vermont community shall
nurture the healthy development of
young children and strengthen families.*

*To support communities, the state of
Vermont will create a unified system of
child development services which shares
common standards for quality and
respects the diversity and uniqueness of
individuals and programs.*

Richard Cate
Commissioner, Vermont Department of Education

Charles P. Smith
Secretary, Vermont Agency of Human Services

Standards, Monitoring & Technical Assistance Committee

Shawn Dubois, Rutland Head Start

Christina Manna, Vermont Agency of Human Services – Child Care Services Division

James Squires, Vermont Department of Education

Janice Stockman, Vermont Head Start – State Collaboration Office

Vermont Early Childhood Steering Committee

Brenda Bean , Program Planning Specialist, Department of Developmental and Mental Health Services	Joanne Pye , Early Educator, Rutland Northeast Supervisory Union
Julie Cadwallader-Staub , Director, Child Care Fund of Vermont	Madge Rossinoff , Coordinator, Orleans/Essex Success By Six
Linda Dean, Director , Sunrise Family Resources Center	Karen Ryder , Operations Administrator, Dept. of Prevention, Assistance, Transition & Health Access
Terri Edgerton , Director, Rutland County Parent Child Center	Sue Shepard , Public Health Nurse Specialist, Department of Health
Cherie Hammond , Coordinator, Lamoille County Success By Six/ Early Childhood Council	Betsy Shuey , Maternal Child Health Administrator, Department of Health
Kim Keiser , Deputy Commissioner, Department of Social and Rehabilitation Services	Jim Squires , Early Education Programs Coordinator, Department of Education
Helen Keith , Director, Family, Infant, Toddler Program, Depts. of Health and Education	Janice Stockman , Assistant Director, Vermont Head Start State Collaboration Office
Marianne Miller , Director, Central Vermont Action Council Head Start	Kay Van Woert , Public Engagement Coordinator, Vermont Parent to Parent
Leslie Mitrano , Coordinator, Rutland County Early Childhood Council	Roy Walker , Liaison, Administration of Children and Families, US Dept. of Health & Human Services
Daphne Moritz , Early Childhood Council of Orange/Windsor County	K.C. Whiteley , Director, Vermont Head Start State Collaboration Office

The Vermont Early Learning Standards were produced with generous support by the Vermont Department of Education, Vermont Agency of Human Services, and the Vermont Head Start-State Collaboration Office, and the A. D. Henderson Foundation.

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Introduction

The importance of quality early childhood education as the foundation for school success and life long learning has been demonstrated by research and in practice. Before children enter school, they have accumulated five years of learning experience with their families, in their communities and in settings with other children and adults outside their homes. These early childhood experiences can ensure that all children get a strong and healthy start in life, which leads to success in school. Throughout these five years, parents, caregivers, teachers, legislators, schools and community agencies all influence how prepared children are to enter school eager to learn and ready to succeed.

The Vermont Children's Cabinet, created by Executive Order from Governor Dean with support of the Vermont Legislature, is committed to the goal that *All Children Arrive at School Ready to Succeed* regardless of socio-economic status, home language, special health needs, disabilities, or family situation. With early care and education being provided in a wide variety of settings, in programs governed by different regulations, the Vermont Department of Education, Agency of Human Services, the Head Start State Collaboration Office and Vermont Early Childhood Work Group initiated a project to collaboratively develop a set of appropriate expectations for children as they exit preschool programs to enter kindergarten. It is firmly believed that a shared understanding of the knowledge, skills, and dispositions that children gain through high quality early childhood experiences leading to success in school should exist, regardless of where they may spend their waking hours. As parents and programs work from one set of child-focused standards across all settings, the opportunity to assure greater continuity across settings and form closer working partnerships will ultimately support the child's early learning experiences.

The task of developing a common set of child outcomes was assigned to the Standards, Monitoring and Technical Assistance Sub-Committee of the Vermont Early Childhood Work Group. The sub-committee consisted of practitioners drawn from early care and education programs, Head Start, public schools, state agencies, higher education, and parents. Information from several documents that are currently being used for the development of curriculum, instruction and assessment was incorporated to create a document that reflected the priorities of practitioners in Vermont. These resources included recommendations of the National Education Goals Panel, Head Start Child Outcomes, guidelines from the National Association for the Education of Young Children, the Vermont Frameworks of Standards and Learning Opportunities, The Work

Sampling System of Child Assessment, and standards from several other states. Rhode Island's Early Learning Standards was particularly useful because developers had engaged in a similar process of examining and consolidating various documents and instruments.

The resulting document, *Vermont Early Learning Standards: Guiding the Development and Learning of Children Entering Kindergarten (VELS)*, is based upon current scientific child development research and best practice. VELS has the potential to improve program effectiveness and serve as a means to direct information strategically to parents and technical assistance to early childhood programs. The immediate and ultimate purpose, however, is to benefit young children.

Uses of the Vermont Early Learning Standards

The *Vermont Early Learning Standards* is intended to provide guidance for families, teachers and administrators on what children should know and be able to do as they enter kindergarten. While VELS should be used to guide development of curriculum, it should not be used as a curriculum or assessment in and of itself. It should be noted that children may meet the standards at different times in a variety of ways. VELS is intended to be inclusive of all children. The standards are written to include children with special health care needs, children with disabilities, children living in disadvantaged environments, English language learners, and children who are typically developing. It is the educator's responsibility to appropriately adapt these standards to accommodate all children. There are several purposes of these standards:

VELS **SHOULD** be used to:

- Inform families about the development and capabilities of children who are about to enter kindergarten;
- Inform educators in the development of curriculum and educational strategies;
- Guide the selection of assessment tools that are appropriate for learners from a variety of backgrounds with differing abilities;
- Support referrals of children to qualified specialists when concerns about development become apparent;
- Provide a framework for administrators to oversee curricular practices and advocate for resources;

- Focus a conversation among families, community members and legislators about the education of young children; and,
- Link the development and learning of young children to the future curriculum goals and learning outcomes of public schools.

VELS **SHOULD NOT** be used to:

- Assess the competence of young children (VELS is not designed to function as a valid and reliable assessment instrument);
- Diagnose and “label” children;
- Mandate specific teaching practices or materials;
- Determine rewards or penalties for educational personnel or programs;
- Prohibit any child from entering kindergarten; or,
- Exclude any child from participating in early childhood programs.

Overview of the Vermont Early Learning Standards

The Vermont Early Learning Standards is comprised of two sections. The first describes a set of guiding principles that serve as the core for making informed decisions about what is appropriate for young children and learning standards. The second section describes the specific standards for children as they prepare to enter kindergarten. In addition, a section emphasizing the importance of play in children’s development is contained as well as referencing play in each of the general areas of children’s learning.

Guiding Principles

To ensure that the standards reflected an understanding of teaching and learning based upon current educational research and practice, a set of Guiding Principles was adopted. These principles frame the Learning Goals and Examples in ways that would be considered typical for four-year-old children in eight areas of learning. Although this document focuses on the learning goals for four year olds, VELS has significant value for persons involved with three-year olds and kindergartners as well. The Guiding Principles also address the roles played by families, communities, and policymakers in supporting the development and learning of young children.

Structure of the Standards

The Vermont Standards for Early Development and Learning are written using a four-tier structure:

Domains: general areas of learning

Learning Goals and Definitions: categories of knowledge and skills within each Domain

Examples: examples of behaviors that demonstrate competence in relation to each Learning Goal.

Support for Learning: descriptions of ways adults can interact with children and design environments conducive to children’s development and learning.

The eight domains in the Vermont Early Learning Standards overlap with the dimensions of school readiness identified by the National Education Goals Panel, the Head Start Child Outcomes Framework (HSCOF), and in standards used in other states. They also align closely with the Vital Results and Fields of Knowledge contained within Vermont’s Framework of Standards and Learning Opportunities (VFSLO) for PreK-Grade 12.

The eight domains include:

- I. Approaches to Learning
- II. Social and Emotional Development
- III. Language, Literacy and Communication
- IV. Mathematics
- V. Science
- VI. Social Studies
- VII. Creative Expression
- VIII. Physical Health and Development

Throughout the Vermont Early Learning Standards, relevant standards from both the Vermont’s Framework of Standards and Learning Opportunities and Head Start Child Outcomes Framework are cross-referenced and cited by the acronyms “VFSLO “ and ‘HSCOF’ respectively.

The Role of Play in Addressing the Standards

The sub-committee acknowledged the important role of play in how children learn by including it as a guiding principle and as the first Learning Goal in each of the domains. There is abundant evidence that children learn best through play. The sub-committee based its thinking about each domain on the understanding that children should be provided with opportunities to play in a learning environment that addresses their developmental needs for movement, problem-solving, creativity, and social interaction with adults and other children. Teachers and families can best guide learning in all domains by providing opportunities for children to explore and apply new skills in natural contexts. Responsive adults teach young children by interacting through play with each child according to the child’s interests, abilities, and cultural preferences. Through play, children enhance the learning of skills, knowledge and dispositions that guarantees success in later schooling. In VELS, therefore, play is one way that children can achieve the Examples described in each of the eight learning Domains.

Vermont Early Learning Standards

Guiding Principles

- u Child development provides a foundation for teaching that recognizes that learning is sequential, dependent upon experience, and based upon knowledge of the child, including the child's culture and individual differences.
- u All children will be regarded and respected as competent individuals who differ in their learning, their home lives, and in the ways that they understand and represent their world.
- u Children learn best in an environment where their physical and psychological needs are met because they feel safe, valued as unique individuals, and are actively engaged in acquiring new skills and knowledge.
- u A child's sense of responsibility to self and others is best supported when teachers design environments and select materials that take into consideration the ways that society and culture influence learning and support citizenship.
- u Educators will base their decisions upon current knowledge of predictable sequences of child development and how children learn, the differences among children and families, and subjects that are related to the interests of children.
- u Families are respected and supported as partners in the education and development of their child.
- u Educational programs will be developed in partnership with families, teachers, and the community in order to inspire children to acquire knowledge, build new skills, seek challenges and develop as citizens.
- u Teachers, families, and children employ play as a valuable way to develop the whole child, generate knowledge of the larger world, and support the development of qualities for lifelong learning.
- u Policymakers will take into consideration and be knowledgeable about the education, care and support of children and families when developing and assessing legislation, regulation, and funding of programs for young children.
- u Respect for and the well-being of children and families will be given the highest priority in the organization and planning of community action.

THE VERMONT EARLY LEARNING STANDARDS

*Guiding the Development and Learning
of Children Entering Kindergarten*

Approaches to Learning

As early as infancy, children display some of the dispositions and styles of learning that lead to success in school. Some children seem to be born well-organized and bursting with initiative while others require some structure and encouragement as they discover their unique capacity as learners. Some children participate readily in active, hands-on exploration while others may observe quietly as they learn new information. All children, regardless of innate abilities or the presence of disabilities, are able to learn and be successful. The ways in which they approach new learning opportunities,

however, will be as varied as the individuals themselves. It is important for children to develop a sense of wonder, a willingness to participate, persistence in their efforts, and the ability to connect past learning to new situations. These dispositions and skills will better enable children to construct meaning about the world around them and attain new levels of mastery. Adults must ensure that every child has the opportunity to direct his or her own learning in this process as the child nurtures initiative and habits for life-long learning.

DOMAIN

LEARNING GOALS & DEFINITION

EXAMPLES

I. Approaches to Learning

Children demonstrate positive attitudes, habits and learning styles.

VFSLO¹

Vital Results-Reasoning and Problem Solving

Learning Opportunities-Access, Instruction, Assessment & Reporting, and Connections, Best Practices

HSCOF²

Initiative & Curiosity, Engagement & Persistence, Reasoning & Problem Solving

1. Play

Children engage in play as a means to develop their individual approach to learning.

VFSLO A.3-5, B.1, B.3-5, D.1-2, E.1-3

2. Curiosity and Initiative

Children demonstrate curiosity and a willingness to participate in tasks and challenges.

VFSLO 2.6, 2.7, 2.8, 2.10 – 2.12, 2.14

3. Persistence

Children demonstrate an increased ability to show initiative, accept help, take risks, and work towards completing tasks.

VFSLO 2.9, 2.10, 2.11, 2.14, 3.14

4. Self-organization

Children demonstrate an increased ability to establish goals, develop and follow through with plans.

VFSLO B.4, C.3

5. Reasoning

Children demonstrate an increased ability to identify, evaluate and provide possible solutions to problems.

VFSLO 2.1 – 2.14

6. Application

Children use their prior experiences, senses, and knowledge to learn in new ways.

VFSLO B.4

- Initiate play with peers that is engaging and long lasting.
- Enter into and play cooperatively with other children.
- Choose from a variety of play activities.

- Demonstrate an eagerness and interest in learning through questioning and adding ideas
- Initiate questions about people, things, and the world around them.
- Choose to participate in an increasing variety of activities, tasks, and play areas.
- Engage in activities that are new and unfamiliar.

- Invest time in an activity and pursue it for a meaningful period of time despite distractions and interruptions
- Seek and/or accept help from another child or adult when encountering a problem.

- Increase their ability to understand a task as a series of steps.
- Increase their ability to organize themselves and materials.
- Follow through to complete tasks and activities.

- Increase ability to generate several approaches to carry out a task.
- Pursue alternative approaches to problem-solving.

- Reflect upon events and experiences.
- Use prior knowledge to understand new experiences.

¹Vermont Framework of Standards and Learning Opportunities

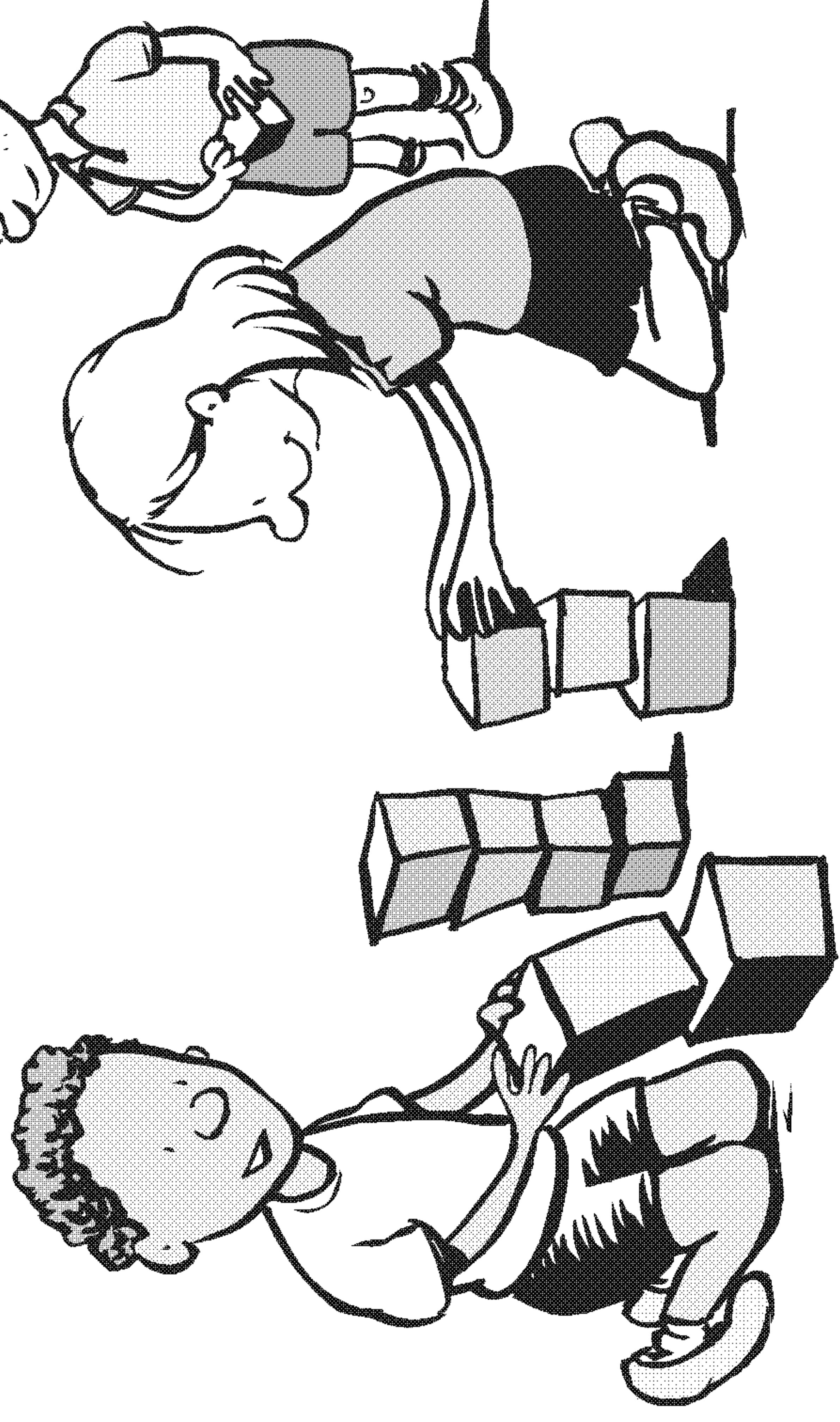
²Head Start Child Outcomes Framework

ADULTS CAN SUPPORT CHILDREN'S APPROACHES TO LEARNING BY:

- Encouraging children to try new experiences.
- Being responsive to children's questions, ideas, interests, and concerns.
- Serving as models in how to approach new situations and engage in learning.
- Being available as resources without interfering with children's opportunity to experience and discover things for themselves.
- Being knowledgeable about and sensitive to individual children's styles and dispositions and responding accordingly.
- Allowing children enough time to thoroughly investigate and complete tasks and projects to the children's satisfaction.

THE ENVIRONMENT CAN SUPPORT CHILDREN'S APPROACHES TO LEARNING BY:

- Offering children a variety of choices appropriate for the different levels of development.
- Being of sufficient interest to the children in order to encourage their engagement.
- Offering opportunities for children to explore interests in greater depth by having activities that expand over time.
- Evolving as time passes to capture interest, increasing in complexity and variety.
- Reflecting a sense of order and predictability.
- Displaying the efforts and accomplishments of children.
- Offering children opportunities to explore interests individually and in groups.



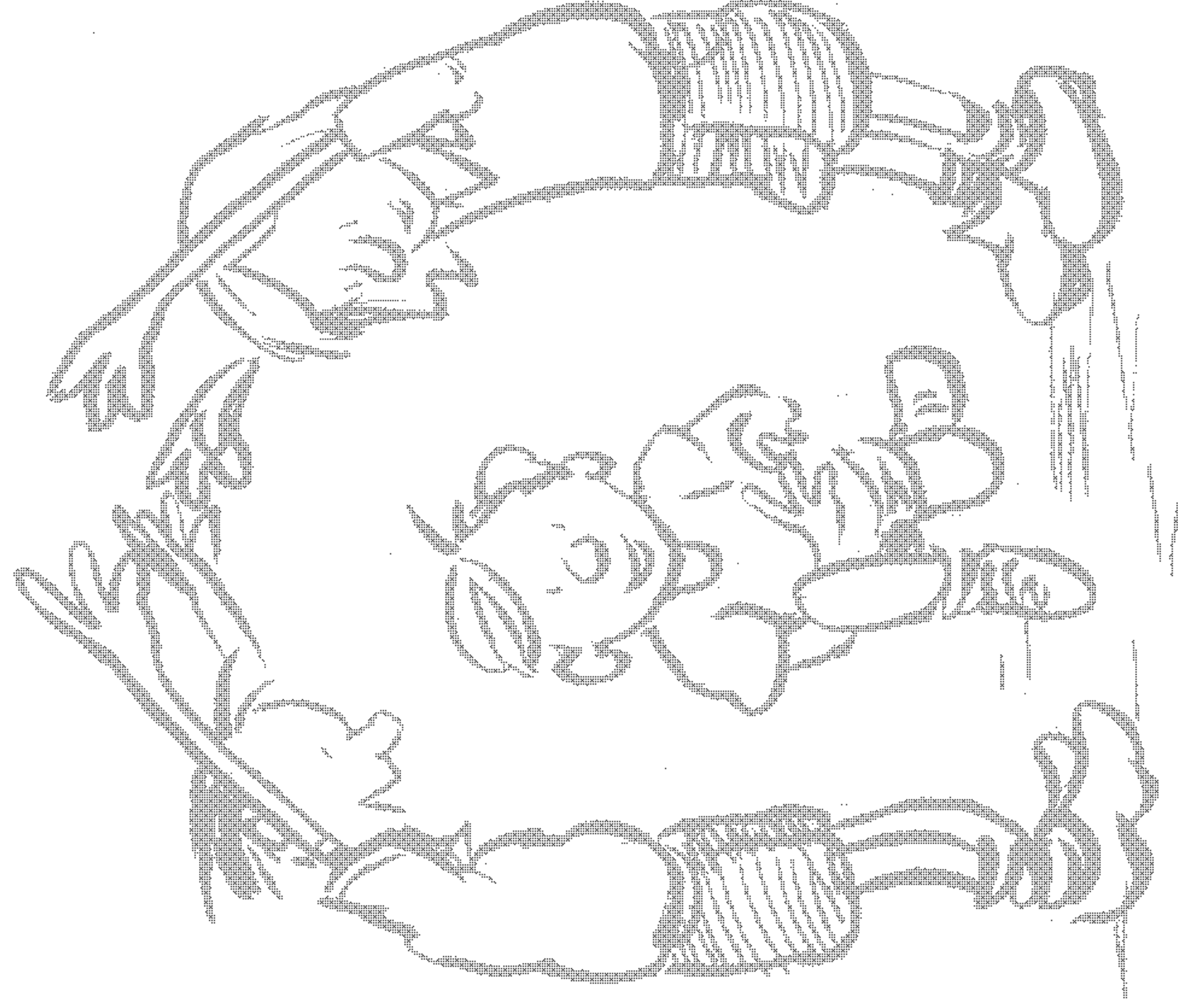
Social and Emotional Development

Social and emotional development are two distinct domains of children's development. Emotional development refers largely to how a child views oneself as a valuable and valued individual. Social development refers to ways the child relates to and interacts with others. Social and emotional development are typically grouped together, however, because of their reciprocal and intertwined relationship. A shift in one domain can have a tremendous impact on the other.

Although the roots of relationships begin during the child's first days of life, they evolve rapidly throughout the preschool years as the child's world expands beyond the home environment. Much of children's learning occurs through their interactions with others. Children who develop and maintain strong, positive relationships with other children and adults are better equipped to be active, successful learners. The quality of preschoolers'

relationships strongly influences how they feel about themselves, ways they interact with others, how they approach and respond to new and challenging tasks, and shape their attitudes toward school and life-long learning. When children feel good about themselves, they are more inclined to treat others with respect and care.

Children's interactions with their environment also influence their social and emotional development. When children are able to safely explore their world and be satisfied by what it has to offer, they will be more trusting and engaged. Similarly, when children are able to accomplish meaningful and appropriately challenging tasks presented to them by their environment, they are likely to gain a sense of achievement, self-worth, and positive self-esteem.



DOMAIN

LEARNING GOALS & DEFINITION

EXAMPLES

II. Social and Emotional Development**1. Play**

Children use play as a vehicle to build relationships and to develop an appreciation for their own abilities and accomplishments.

VFSLO 3.3, 3.10 – 3.13, 6.9, 6.12, D.3

- Participate in a variety of individual and group play experiences.
- Play cooperatively with others by developing rules, solving problems, and dealing with frustrations and limitations.
- Explore and understand new experiences and differences among people.
- Discover unique abilities and preferences through play.

Children demonstrate a strong and positive self-concept, and appropriate self-control, and growth in their awareness of their responsibilities when interacting with others.

2. Self Concept

Children demonstrate and express a positive awareness of self and confidence in their capabilities.

VFSLO 3.3- 3.5, 6.19

- Identify self according to such things as: gender, ethnicity and family membership.

- Separate from familiar people, places, or things.

- Demonstrate confidence in their range of abilities and express pride in accomplishments.

3. Self-Control

Children increase their capacity for self-control and for dealing with frustrations, and increase their awareness of their own capabilities.

VFSLO 3.3-3.7, 3.11, 3.12, 6.18

- Understand, accept and follow rules and routines within the learning environment.

- Begin to accept the consequences of their behavior.

- Use materials purposefully, respectfully, and safely.

- Effectively manage transitions between activities.

- Progress in expressing feelings, needs and opinions

- Begin to cope with frustration and disappointment.

HSCOF²**4. Interactions with Others**

Children develop successful relationships with other members of their learning community.

VFSLO 3.3, 3.10 – 3.13, 4.1-4.4, 6.9, 6.12, D.3

- Play, work and interact easily with one or more children and/or adults.

- Develop friendships with peers.

- Demonstrate empathy and caring for others.

- Develop ability to take turns and to interact without being overly submissive or directive.

- Participate in resolving conflicts and disagreements with others.

5. Sense of Community

Children increasingly demonstrate a sense of belonging to the classroom/program, family and community.

VFSLO 3.3, 3.10 – 3.13, 4.1-4.4, 6.9, 6.12, D.3

- Begin to understand the rights of others.

- Demonstrate a growing understanding and appreciation of the relationships, people and places that make up their communities.

- Participate in the maintenance of the classroom environment.

- Demonstrate progress toward an understanding and valuing of similarities and differences among people, including gender, race, culture, special needs, language and family membership.

- Recognize the needs of others and offer help.

¹Vermont Framework of Standards and Learning Opportunities

²Head Start Child Outcomes Framework

VERMONT EARLY LEARNING STANDARDS

ADULTS CAN SUPPORT CHILDREN'S SOCIAL AND EMOTIONAL DEVELOPMENT BY:

- Treating children with unconditional respect.
- Accepting and acknowledging children's feelings, and helping them to identify those feelings.
- Helping children express their feelings appropriately.
- Genuinely praising and encouraging children, appreciating them for who they are and what they try to do.
- Creating opportunities for children to interact cooperatively with other children and adults.
- Providing children with a sense of personal security and trust.
- Setting clear limits and expectations.
- Assuming responsibility for establishing positive relationships with every child.

THE ENVIRONMENT CAN SUPPORT CHILDREN'S SOCIAL AND EMOTIONAL DEVELOPMENT BY:

- Providing space and materials for children to be alone or with others.
- Displaying the contributions of each child through their work, photographs, and words.
- Incorporating important elements of children's lives outside of the program (e.g., their families, homes, etc.) into the curriculum, reflecting the diversity of the group.
- Inviting family members to visit the program to talk about special things (e.g., favorite recipes, occupations, new babies, etc.).
- Offering dramatic play opportunities for children to pretend and explore other roles.
- Providing children with opportunities to do meaningful work, experience success, and show their accomplishments.
- Allowing children to take responsibility for the care of their environment and other living things.

Language, Literacy, and Communication

Research confirms that language has an essential impact on the rapid development of a child's brain that occurs during the first years of life. When adults speak with children in a timely, responsive manner, the brain is shaped so that children understand the construction of speech, learn new words, and become capable conversationalists. It is important that young children have many opportunities to learn language and practice communication skills in order to obtain information and express themselves in a variety of ways and settings.

Children increase their language and communication skills by engaging in meaningful experiences that require them to effectively express their ideas and feelings, listen, and understand others. Teachers must plan for the many ways that children communicate verbally and/or non-verbally. Educators must respect and incorporate the rich diversity of families' languages and dialects into the educational environment as children make progress in speaking and understanding English.

Literacy is the foundation for creating a well-educated and responsible citizen. It is essential that each child arrive at kindergarten able to take advantage of the materials, activities, and interactions in classrooms that nourish literacy. The ways in which children learn to read and write are similar to how they develop language. In environments filled

with language, symbols, and books, children become excited about using pictures, letters, and words to communicate. At the same time, educators may employ intentional strategies to build children's literacy skills.

The printed word, whether in a storybook or in the environment, is the bridge that allows children to connect their own lives to distant places, quality literature, and to new ideas. Through natural exposure to books and print, and through conversations that prompt children to discuss the people and important events in their lives, children discover that written words are another way to share ideas. A child who enters school having recognized the joy of a storybook, a developing awareness of letters and sounds, and the ability to write a few letters, is a child well prepared to learn to read and write.

Language, literacy, and communication skills are not developed solely by focusing on reading, writing and conversation during circle time. There are many avenues for children to develop and refine their communication skills— when they play with others, engage in informal conversations during meal times, speak with their dolls, paint at the easel, and read street signs. It is important for children and adults to understand that communication can take many forms, and that all children can learn to effectively convey their thoughts, feelings, and desires to others in ways that they feel comfortable and confident.

DOMAIN

LEARNING GOALS & DEFINITION

EXAMPLES

III. Language, Literacy, and Communication

1. Play

Children engage in play as a means to develop their receptive and expressive language skills.

VFSLO A.3-5, B.1, B.3-5, D.1-2, E.1

Children engage in play as a means to develop early reading and writing skills.

VFSLO 1.1, 1.9, 1.13, 1.15, 5.4, 5.5, 5.7, 5.12, 5.13, 5.16, A.3, A.4, B.1, B.3-5, C.4, D.1-2

2. Listening and Understanding

Fields of Knowledge- Arts, Language & Literature Standards

Children develop skills in listening and in understanding language.

VFSLO 1.13, 1.14

a. Develop and experiment with conversation during daily activities and interactions.

b. Represent stories and experiences through play.

c. Think and talk about play experiences.

d. Create play ideas that come from favorite stories, poems, rhymes, songs and conversation .

e. Use symbols and forms of early writing to create more complex play.

f. Use writing tools and materials in all areas of the learning environment.

a. Listen to and understand stories, songs, and poems.

b. Listen and increasingly understand directions, conversations, and questions.

c. Follow directions that involve multiple steps.

d. Learn to wait and take turns during conversations.

e. Progress in listening and understanding English while maintaining home language.

¹Vermont Framework of Standards and Learning Opportunities

DOMAIN

**Learning Opportunities-
Access, Instruction, Assessment
& Reporting, Connections, and
Best Practices**

3. Speaking and Communicating

Children will use verbal and non-verbal language to express and to communicate information.
VFSLO 1.15, 2.1, 2.2, 5.17, 5.19

LEARNING GOALS & DEFINITION

EXAMPLES

- Communicate needs or thoughts through non-verbal gestures, actions, expressions or words.
- Participate in communication around a topic.
- Use more complex and longer sentences.
- Speak clearly enough to be understood by unfamiliar listeners.
- Begin a conversation with other children and adults.
- Understand an increasingly complex and varied vocabulary.
- Progress in communicating and using English while maintaining home language.
- Communicate with familiar and unfamiliar adults and children.

HSCOF²

**Language Development -
Listening & Understanding,
Speaking & Communicating**

Children develop skills in writing and reading while exploring print in books and in the environment.

4. Vocabulary

Children will acquire and use new words to increase their understanding and express ideas.

5. Early Writing

Children demonstrate an interest in and ability to use symbols to represent words and ideas.
VFSLO 1.5, 1.8, 1.9, 1.12, 1.17, 5.21

HSCOF²

**Literacy-
Phonological Awareness, Book
Knowledge & Appreciation,
Print Awareness & Concepts,
Early Writing, Alphabet
Knowledge**

6. Early Reading

Children demonstrate an interest in:

A. Phonemic and Phonological Awareness

Learning that language is comprised of distinct sounds and the combination of these sounds; discriminating sound and sound patterns.
VFSLO 1.1

B. Book Knowledge and Appreciation

Understanding and appreciating that books and other forms of print have a purpose.
VFSLO 1.1, 1.2, 1.3, 1.4, 1.7, 5.2, 5.3, 5.8 – 5.10, 5.12 – 5.15, 5.20

- Show increasing ability to discriminate and identify the sounds of language.
- Demonstrate growing awareness of the beginning sounds of words.
- Show growing ability to hear and discriminate separate syllables in words.
- Begin to associate sounds with words.
- Recognize and generate rhymes.

- Choose to read books for enjoyment without prompting.
- Begin to read or tell a story and predict what happens next in stories.
- Listen to and talk about a variety of types of literature.
- Retell parts of a story using props.
- Take care of and handle books in a respectful manner.

²Head Start Child Outcomes Framework

DOMAIN

LEARNING GOALS & DEFINITION

EXAMPLES

C. Print Awareness and Concepts

Recognizing the association between spoken and written words by following print as it is read aloud.
VFSLO 1.1

- a. Show curiosity about letters and words.
- b. Explore and investigate books and other forms of print.
- c. Understand that print carries a message.
- d. Show an increasing awareness of how books are organized and used.
- e. Show an interest and recognize some letters and words captured in books and in the environment.
- f. Recognize own name in print.

D. Alphabet Knowledge

Recognizing that symbols are associated with letters of the alphabet and that they form words.
VFSLO 1.1

- a. Know the names of some letters and words.
- b. Identify some letters in print.
- c. Know the names of most letters in own name.



ADULTS CAN SUPPORT CHILDREN'S LANGUAGE, LITERACY AND COMMUNICATION DEVELOPMENT BY:

- Providing a variety of rich experiences that will encourage children to talk, read, draw, and write.
- Having informal, meaningful conversations with children regularly throughout the day and extending rather than directing the conversation.
- Asking open-ended questions and encouraging children to ask questions and seek answers.
- Exposing children to varied and progressively more complex vocabulary.
- Talking with children beyond the "here and now", using language that extends their world beyond everyday experiences to provide information and explanations related to topics that are interesting to children.
- Making storybook reading and discussion a regular part of the day and talking about the stories.
- Noticing and commenting on letters and their sounds in the words children use and in the environment.
- Modeling the writing of simple notes, signs, children's names, children's conversations as a tool for communication.
- Modeling positive reading habits by reading for their own enjoyment and information.
- Taking children to libraries and bookstores to look at books together.
- Engaging in sound play through rhymes, stories and songs.
- Offering children opportunities to create their own books by writing their stories to pictures they have drawn.

THE ENVIRONMENT CAN SUPPORT CHILDREN'S LANGUAGE, LITERACY AND COMMUNICATION DEVELOPMENT BY:

- Providing a large variety of high quality children's books and reading materials.
- Providing appropriate spaces for children to use books independently, with peers, and with adults, including a comfortable book corner that is aesthetically and physically inviting.
- Offering materials such as felt boards, story gloves, puppets, and magnetic story boards.
- Including print and symbols that identify locations within the classroom, provide information, or communicate expectations.
- Building reading time into the schedule and routine of the day.
- Including pictures of places, people, and things reflective of the children's day-to-day lives as well as life beyond the "here and now."
- Having drawing and writing materials always available.
- Using computers and educational software selectively to promote children's development and learning.
- Displaying children's work with their dictated descriptions.
- Making available writing tools and literacy props throughout the entire environment.

Mathematics

Mathematics helps young children make sense of the world around them and understand their physical world. Children are inclined to make comparisons, notice similarities and differences in objects, and group their toys and materials. This ability to organize information into categories, quantify data, and solve problems helps children to learn about time, space, and numbers.

When children play in the sandbox, cook applesauce, and complete a puzzle, they are engaging in activities that allow them to develop the thinking skills that are naturally used in daily life. Children learn the uses of mathematics to describe and explore relationships among objects and materials in the environment. They increasingly develop the vocabulary and skills to measure, describe patterns, and to express order and position.

“Mathematics is the ability to think logically, to solve problems, and to notice relationships. It is one way to make sense of the world because it helps us find order and logic by noticing patterns, making predictions, and solving problems.” (Dodge, Colker & Heroman, 2000, p. 40)

“The foundation of children’s mathematical development is established in the earliest years. Mathematics learning builds on the curiosity and enthusiasm of children and grows naturally from their experiences. Mathematics at this age, if appropriately connected to a child’s world, is more than “getting ready” for school or accelerating them into elementary arithmetic. Appropriate mathematical experiences challenge young children to explore ideas related to patterns, shapes, numbers, and space with increasing sophistication.” (National Council of Teachers of Mathematics, *Principles and Standards for Early Childhood Mathematics*, 2000, p. 73).

DOMAIN

IV. Mathematics

Children develop ways to solve problems and to think about math.

VFSLO¹

Vital Results- Communication, Reasoning and Problem Solving

Fields of Knowledge- Science, Mathematics, & Technology

Learning Opportunities- Access, Instruction, Assessment & Reporting, Connections, and Best Practices

HSCOF²

Numbers & Operations, Geometry & Spatial Sense, Patterns & Measurement

¹*Vermont Framework of Standards and Learning Opportunities*

²*Head Start Child Outcomes Framework*

LEARNING GOALS & DEFINITION

1. Play

Children engage in play to develop and add to their mathematical thinking and problem solving.

VFSLO A.3-5, B.1, B.3-5, C.4, D.1-2, E.3

2. Numbers and Operations

Children show interest and curiosity in counting and grouping objects and numbers.

VFSLO 1.20, 2.2, 2.3, 2.5, 7.6, 7.8, 7.10

3. Geometry and Spatial Sense

Children show an interest in recognizing and creating shapes and an awareness of position in space.

VFSLO 7.7

4. Patterns and Measurement

Children show an interest in recognizing, creating, and predicting patterns; comparing objects; and measuring time and quantity.

VFSLO 1.21, 7.7, 7.11

EXAMPLES

- Begin to group and match objects indicating an understanding of same and different
 - Use counting and number vocabulary as a natural part of play.
 - Experiment with patterns and shapes.
 - Explore measurement, number, and quantity with various materials.
- Match, sort, put in a series, and regroup objects according to one characteristic.
 - Begin to use numbers and counting as a means for solving problems and measuring quantity.
 - Use one-to-one correspondence in counting objects and matching groups of objects.
 - Begin to associate a number of objects with the names and symbols for numbers.
 - Use such words as “more than/ less than” and “add/subtract” to express some number concepts.
- Describe and name common shapes found in the natural environment.
 - Use language to understand the arrangement, order, and position of objects such as: behind, on top of, next to, bottom, underneath, beside, and in front of, etc.
 - Group objects according to their shape and size.
- Group and name a number of similar objects into simple categories.
 - Begin to understand the concepts of time in terms of past, present, and future.
 - Begin to order, compare or describe objects according to size, length, height, and weight using standard or non-standard forms of measurement.
 - Place events in a logical sequential order.

ADULTS CAN SUPPORT CHILDREN'S MATHEMATICAL THINKING BY:

- Becoming knowledgeable about prekindergarten mathematical concepts, principles, and standards, including:
 - Numbers and Operations
 - Algebra
 - Geometry
 - Measurement
 - Data Analysis and Probability
 - Problem Solving
 - Reasoning
 - Communicating
 - Making Connections
 - Representing

(From: National Council of Teachers of Mathematics, *Principles and Standards for Early Childhood Mathematics*, 2000).

- Fostering mathematical thinking by providing environments rich in mathematical language and concepts through play, problem solving, and expression.
- Orchestrating early learning activities that engage children in mathematical experiences in individual, small group, and large group settings.
- Helping children to communicate mathematically and represent their thinking.
- Observing, listening to, and assessing children's level of mathematical thinking to plan developmentally effective experiences for all children.

THE ENVIRONMENT CAN SUPPORT CHILDREN'S MATHEMATICAL THINKING BY:

- Providing children with a variety of concrete materials to explore, manipulate, and organize (e.g., blocks, sand/water table, cubes, geoboards).
- Scheduling self-directed and teacher-guided activities to promote emergent mathematics understanding (e.g., circle time, explore time, snack time).
- Displaying abundant evidence of children's mathematical representation (e.g., numbers, graphs, patterns).
- Offering opportunities through a balanced and unhurried daily schedule to engage in and express evolving mathematical thinking in a manner integrated with other learning areas.
- Bringing mathematics outdoors during everyday activities. (e.g., gardening, "shapes" field trip, charting growth of plants)
- Supporting children working together to construct and refine mathematical thinking and expression through everyday activities (e.g., shopping, dialing the telephone, set table, sort laundry, cook following recipes).

Science

Children are captivated by the natural world and physical events. They insist that teachers and family members answer their questions about the world around them. By cultivating this sense of wonder, we help children to become scientific thinkers.

Children are natural investigators – as they try to make sense of the world, they develop hypotheses and theories. For young children, science is much more than learning facts and skills. It's about looking at things and making observations. It's about putting ideas together to form new ideas. It's wondering about something, forming questions, and then experimenting to see what happens. Then, it's about drawing conclusions about the world based on the results of those experiments. Children ask many questions about

how the world works, how insects fly, how to make a shadow, what happens if two paints are mixed together. Good teachers don't just provide children with answers; they use these opportunities to provide children with the resources, tools, and attitudes to "do what scientists do" – observe, experiment, record, explain, predict and conclude.

"The contribution of early childhood education toward scientific literacy is to lay a solid foundation for the continuing development of an interest in and an understanding of science and technology by ensuring that every child—regardless of gender, racial or cultural background, or disabilities—actively participates in science experiences and views (one)self as successful in this endeavor."

(Kilmer and Hofman, 1995)

DOMAIN

LEARNING GOALS & DEFINITION

EXAMPLES

V. Science

Children will understand and use the scientific method of asking questions, observing and recording their findings and discussing their conclusions.

VFSLO¹

Vital Results- Communication, Reasoning and Problem Solving

Fields of Knowledge- Science, Mathematics, & Technology

Learning Opportunities-

Access, Instruction, Assessment & Reporting, Connections, and Best Practices

HSCOF²

Scientific Skills & Methods, Scientific Knowledge

1. Play

Children engage in play as a means to develop their scientific skills.

VFSLO A.3-5, B.1, B.3-5, D.1-2, E.3

2. Scientific Knowledge

Children learn about the development of the natural and physical worlds, including: Space, Time and Matter; The Living World; The Human Body; The Universe, Earth, and Environment; and Technology.

VFSLO 7.12 – 19

3. Scientific Skills and Methods

Children begin to use scientific tools and methods to learn about their world, including design and technology.

VFSLO 1.18, 1.19, 1.20, 1.21, 2.1, 2.2, 2.3, 7.1-3, 7.16

a. Ask questions based upon discoveries made while playing.

b. Use play to discover, question, and understand the natural and physical world.

c. Use scientific tools as props in their play.

d. Investigate different natural habitats.

a. Collect, describe and learn to record information through discussion, drawings and charts.

b. Use tools and their senses to make observations, gather and record information, and make predictions of what might happen.

c. Investigate changes in materials and cause-effect relationships.

d. Answer questions through simple investigations.

a. Explore and describe the natural processes of growing, changing and adapting to the environment.

b. Make simple observations, predictions, explanations and generalizations based on real life experiences.

c. Explore describe time, temperature, and cause-effect relationships based on everyday experiences.

¹Vermont Framework of Standards and Learning Opportunities

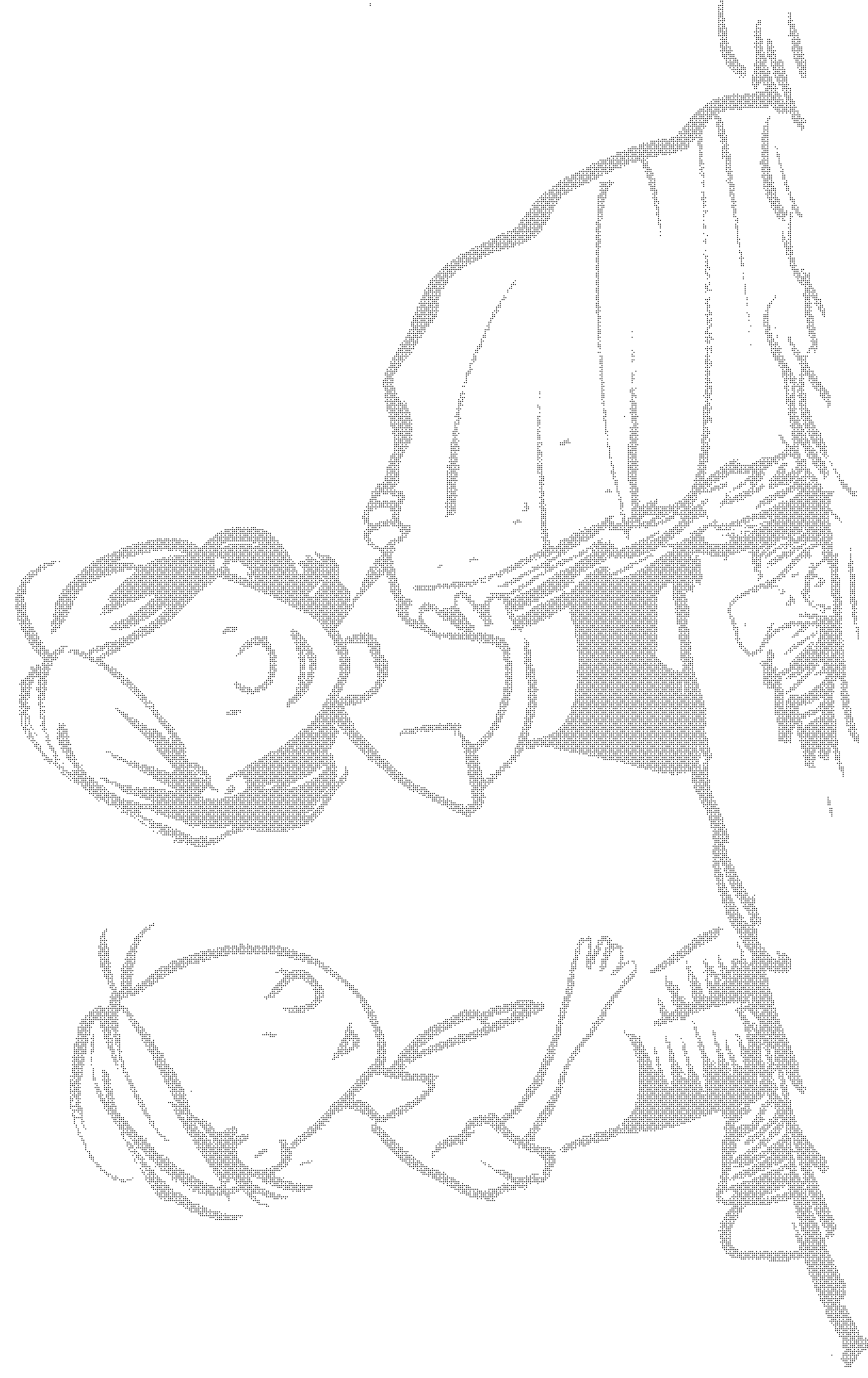
²Head Start Child Outcomes Framework

ADULTS SUPPORT THE DEVELOPMENT OF CHILDREN'S SCIENTIFIC THINKING BY

- Wondering out loud: "What do you think will happen if . . . ?" "What will work best here . . . ?"
- Describing changes taking place around us in the classroom, on the playground, in the woods.
- Waiting before answering children's questions; allowing children to discover things for themselves and with each other.
- Encouraging children to make a prediction and then comparing their response with the real-life outcome.
- Paying attention to children's interests and providing opportunities for them to investigate and think more deeply about what fascinates them—whether it's bubbles or worms or dinosaurs.
- Modeling how to use new equipment and materials at home and in the classroom to explore and understand their world more fully.
- Documenting evidence of children's scientific exploration and discoveries.

THE ENVIRONMENT SUPPORTS THE DEVELOPMENT OF CHILDREN'S SCIENTIFIC THINKING BY

- Having child-size tools available for children to do real work (e.g., digging, chopping, sweeping, transporting) and real tools (e.g. microscopes, magnifying glasses, magnets, scales and, pulleys) to aid in their investigation.
- Including living things that require care and feeding such as non-poisonous plants and fish.
- Giving children have access to the outdoors so they may explore changes in weather, amount of light, temperature, and seasons.
- Having sand or dirt, water, and other sensory materials available inside and outdoors to play and experiment with.
- Having materials like notebooks or clipboards accessible in learning areas so children can record their observations and display their documentation.
- Encouraging scientific thinking by incorporating a variety of tools in all learning centers - medicine droppers at the art table, plastic tubing at the water table, pulleys in the block area, stethoscopes and Band-Aids in the dramatic play area - and allowing space for objects to be observed over time.



Social Studies

Human beings are social creatures. Living in social settings, we develop customs and traditions that reflect who we are as a community in relation to our environment. Social studies builds upon a child's social development by exploring the child's broadening relationship to community, environment, and world. It examines how children and adults live together as a group, influenced by both the land they occupy and their moment in history.

“Social studies is the study of people and place and how each is connected to the other, now and in the past. Social studies is the study of people—how people live today and how they lived in the past, how they work, get along with others, solve problems, shape and are shaped by their surroundings... Every day experiences pertinent to children's lives are the foundation for learning social studies”
(Dodge, Colker & Heroman, 2000, p. 40)

Children depend upon their interactions with peers and adults to construct a sense of self and to view themselves as learners. They willingly explore similarities and differences among others as they mature. This natural curiosity about other people helps children to develop a strong sense of identity and provides teachers and families with opportunities to associate schools and programs with a child's home and community.

Ideas of citizenship are based upon meaningful daily events and a classroom environment that ensures that children are aware of and respect another person's interests, preferences, and cultural background. When children participate in activities that bring the community into the classroom, they feel good about themselves and find out about how different groups of children live. Teachers and family members who help children negotiate the rules, responsibilities, and challenging issues that characterize a vibrant learning environment can expose children to a community based upon kindness, equity and justice.

DOMAIN

LEARNING GOALS & DEFINITION

EXAMPLES

VI.

Social Studies

Children learn about their place in the world, their relationships with other people and the environment, and their connection to the past.

VFSLO¹

Vital Results-

Personal Development,

Civic/Social Responsibility

Fields of Knowledge-

History and Social Sciences

HSCOF²

Knowledge of Families and

Communities, Social

Relationships

1. Play

Children engage in play as a means to develop an understanding of social studies. VFSLO A.3-5, B.1, B.3-5, D.1-3

2. Spaces and Geography

Children will demonstrate an understanding of and appreciation for their physical environment. VFSLO 3.3, 4.5, 6.7, 6.8

3. People and How They Live

Children demonstrate skills related to understanding, communication, sharing, cooperation, and participation with others in a community. VFSLO 1.18, 2.2, 3.8, 3.10-15, 4.1-4, 6.4-6, 6.7, 6.12-15, 6.18-19

- a. Engages in play as a means of discovering and experimenting with their relationship to the environment, other people within the community, and the customs and traditions of people throughout the world and across time.
- a. Matches objects to their usual geographic location (e.g., dishes go in the sink, cars go on the street, cows live in the barn).
- b. Begins to create simple representations of their physical environment (e.g., making “maps” of buildings, murals of the neighborhoods, shoebox houses).
- c. Begins to use words to indicate spatial relationships (e.g., behind, near, far).
- d. Begins to understand how people can move from place to place.
- e. Describes different features of the Vermont landscape.
- a. Begins to understand family structure and roles.
- b. Begins to have an awareness of technology and how it affects us.
- c. Begins to have awareness of money and how it is used to buy things.
- d. Describes some jobs and what is required to perform them.
- e. Begins to understand rules, why they exist, how they are made, and who enforces them.
- f. Recognizes own characteristics and similarities and differences to others.

¹Vermont Framework of Standards and Learning Opportunities

²Head Start Child Outcomes Framework

DOMAIN

LEARNING GOALS & DEFINITION

EXAMPLES

4. People and Their Environment

Children demonstrate an awareness of and appreciation for people's relationship to the environment.
VFSLO 3.9, 3.13, 3.15, 4.6, 6.7-8

- a. Shows an interest in the environments where they live (e.g., classroom, neighborhoods, play yards, state)
- b. Participates in activities that demonstrate care and respect for their environment.
- c. Demonstrates an understanding of roles played by people within the community.
- d. Describes the reciprocal relationship between people and the environment.

5. People and the Past

Children demonstrate an understanding of past events and their connection to the present and future.
VFSLO 1.19, 4.3, 4.6, 6.4-6, 6.13, 6.19

- a. Begins to understand that there are different stages of time (e.g., yesterday, today, tomorrow, past, present, future.)
- b. Begins to be aware of how we measure time (e.g., clocks, calendars)
- c. Is aware of changes in self and others over time
- d. Describes basic similarities and differences of people's lives throughout time.

ADULTS CAN SUPPORT CHILDREN'S UNDERSTANDING OF SOCIAL STUDIES BY:

- Providing ample opportunities for children to explore their surroundings by taking field trips in their neighborhood and beyond.
- Discussing how people rely upon one another to live in families and communities, and the need to develop rules and customs for getting along.
- Inviting community members into the classroom to talk about their jobs.
- Modeling, teaching, and facilitating problem solving and conflict resolution.
- Helping children to notice and appreciate similarities and differences among people.
- Talking to children about their relatives, their heritage, and traditions.
- Reading stories and looking at photographs about other people living in different places and times.
- Providing opportunities for young children to participate in rule-setting and self-governance

THE ENVIRONMENT CAN SUPPORT CHILDREN'S UNDERSTANDING OF SOCIAL STUDIES BY:

- Displaying photographs of children, teachers, and their families.
- Exploring features that make where they live unique from other places (e.g., weather, geography, geology, cities).
- Exhibiting and letting children play with culturally diverse materials reflecting people and ways of living from all over the world.
- Supporting children's play in small and large groups and allowing them to construct rules for getting along.
- Scheduling ample, flexible dramatic play opportunities that allow children to assume different roles of families and others living in the community.
- Offering a variety of reading materials and posters reflecting human diversity, interdependence, and their relationship with the environment.
- Designing the learning space and schedule to promote predictability, order, and a respect for all materials and people sharing the space.
- Supporting recycling efforts.

Creative Expression

Investigating and appreciating the arts allows children to integrate a number of different domains. The arts provide each child with a way to creatively express one's ideas and feelings. Music, movement, drama, and visual art stimulate children to use words, manipulate tools and media, and solve problems in ways that simultaneously convey meaning and are aesthetically pleasing.

Through experimenting with sounds, colors, forms, motion and words, children communicate in ways that are distinctly their own and that reflect their individual learning style. Each painting, dramatic play scenario, and improvised tune provides teachers and families with insights into a child's interests and abilities and allows children to express what they know. In an environment that fosters the arts, children learn to

appreciate the contributions of other children and the works of others that reflect different experiences, cultures, and views.

Children learn by being actively engaged in the world around them. Children's imaginations are enhanced when given the opportunity to explore and create. They participate and experiment for the joy of creating and discovering. Children experience the world through their own eyes and they form their own meanings.

"Every child is an artist. The problem is how to remain an artist when he grows up."

— Pablo Picasso

DOMAIN

LEARNING GOALS & DEFINITION

EXAMPLES

VII. Creative Expression

Children enjoy, express themselves, create and learn about the arts through experiences with a variety of art forms and media.

VFSLO

Vital Results- Communication, Reasoning and Problem Solving, Personal Development

Fields of Knowledge- Arts, Language & Literature, History and Social Sciences

HSCOF

Music, Art, Movement, Dramatic Play

1. Play

Children engage in play as a means of self expression and creativity.

VFSLO A.3-5, B.1, B.3-5, D.1-3, E.1

2. Creative Expression

Children engage in individual or group activities that represent real-life experiences, ideas, knowledge, feelings and fantasy.

VFSLO 1.16, 5.22 – 24, 5.28 – 37

3. Tools

Children use a variety of tools and art media to creatively express their ideas.

VFSLO 1.16, 5.22 – 24, 5.28 – 37

a. Engage in pretend play using a variety of materials to dramatize stories and experiences.

b. Use movement, a variety of media, and music to represent stories, moods, and experiences while playing.

c. Bring musical instruments and tools from various art forms as props into dramatic play.

a. Explore various roles in dramatic play through the use of props, language, and fantasy roles with others.

b. Use movement and a variety of musical styles to express feelings, understand and interpret experiences.

c. Participate in musical activities using a variety of materials for expression and representation.

d. Plan and work cooperatively to create drawings, paintings, sculptures, and other art projects.

e. Demonstrate care and persistence when involved in art projects.

a. Experiment with different tools to creatively express and present ideas.

b. Select and use a variety of tools to accomplish tasks.

¹Vermont Framework of Standards and Learning Opportunities

²Head Start Child Outcomes Framework

DOMAIN

LEARNING GOALS & DEFINITION

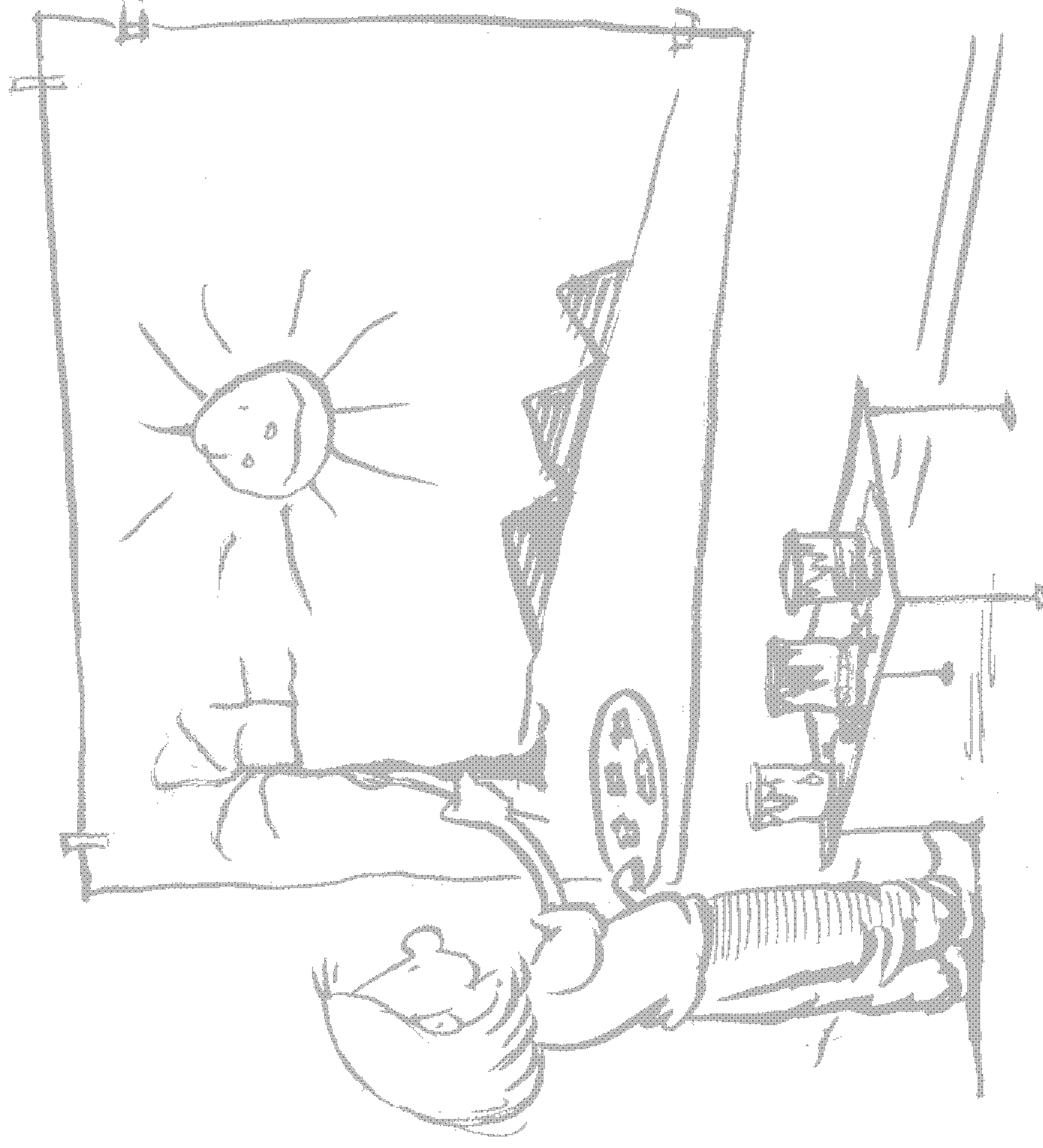
EXAMPLES

4. Appreciation of the Arts

Children express interest in and begin to build a knowledge base in the arts.

VFSLO 1.16, 5.14, 5.22 – 24, 5.28 –

- a. Begin to understand and to develop a vocabulary to share opinions about artistic creations and experiences.
- b. Enjoy participating in a variety of art experiences.
- c. Appreciate and demonstrate respect for the work of others.
- d. Enjoy looking at works of art from different cultures.



ADULTS CAN SUPPORT CHILDREN'S CREATIVE EXPRESSION BY:

- Offering materials that foster music and movement such as instruments, scarves, shakers through which children can experience a variety of music.
- Allowing children ample time to freely explore different ways of expressing themselves.
- Exhibiting a positive attitude toward creativity and serving as a role model for children by participating in, initiating, and demonstrating a creative process.
- Offering children opportunities to follow movements, repeat beats and patterns, and create new ones of their own.
- Encouraging children to experiment with a variety of materials (e.g., clay, playdough, glue, scissors, woodworking, papier mache', etc.) and talking about the process.
- Demonstrating the use of different tools or instruments yet allowing children to design and make their own creations.
- Acknowledging children's creative efforts.

THE ENVIRONMENT CAN SUPPORT CHILDREN'S CREATIVE EXPRESSION BY:

- Providing space to promote music and movement experiences, including headphones, cassette recorder, tapes, CD's, scarves, and instruments.
- Having tools and materials present that encourage the creative process such as blocks, drawing supplies, paint, dramatic play props, clay, play dough and providing opportunities to problem solve.
- Making the creative process a part of all learning centers. Putting snow in the sensory table, using music for transitions or recording children's solutions to problems.
- Having materials like tap shoes, shakers and wood blocks available so children can explore creating rhythm and patterns.
- Having a schedule that offers children enough time and materials to freely explore and manipulate on their own so they may see where their creativity leads them.
- Offering a schedule and space that permits children to continue their work over the span of several days or weeks.
- Having materials and supplies readily available and at children's reach.

Physical Development and Health

Children enthusiastically explore how to move their bodies. They investigate and practice with intensity the small motions that lead to the mastery of fine and large motor tasks that adults often take for granted. How a child learns to sit, walk, or hold a spoon has implications for how the child understands space, coordinates thinking, and holds a pencil. Children often describe their competence according to their physical accomplishments.

Children use their senses and bodies to explore their physical environment. Children may appear uninterested in nutrition and sensible health habits, but they appreciate learning how to enhance their strength, balance, muscle control, and coordination. When children

can take an active role in preparing nutritious snacks, maintaining a clean and healthy environment, and caring for their bodies, they feel a sense of pride and accomplishment in their independence.

All children will develop in individual and unique ways. No two children will be identical in body size, shape, or skills. Some children may never attain the capabilities that their peers achieve. Rather than focusing on what children can't do and pushing them to accomplish things that are not possible at that time or ever, it is important to build upon each child's individual physical capabilities, making accommodations when appropriate.

DOMAIN

LEARNING GOALS & DEFINITION

EXAMPLES

VIII. Physical Development and Health

Young children's future health and well-being are directly related to the development and strengthening of their large and small muscles, sensory experiences and practicing healthy behavior.

VFSLO¹

Vital Results-

Personal Development

Learning Opportunities-

Access, Instruction (Adaptive Learning Environments), and Connections

HSCOF²

Fine Motor Skills, Gross Motor Skills, Health Status & Practices

1. Play

Children engage in play as a means to understand healthy behavior and develop their physical bodies.
VFSLO A.3-5, B.1, B.3-5, D.1-3

2. Gross Motor

Children increasingly move their bodies in ways that demonstrate control, balance, and coordination.
VFSLO 3.4, A.3-5, B.1, B.3-5, D.1-3

3. Fine Motor

Children use their fingers and hands in ways that develop hand-eye coordination, strength, control, and object manipulation.
VFSLO 3.4, A.3-5, B.1, B.5, D.1-3

4. Senses

Children increase their understanding of the use of their eyes, ears, fingers, nose, and mouth, and how the senses work together.
VFSLO 3.4 – 3.6, A.3-5, B.1, B.5, D.1-3

5. Healthy Habits

Children begin to understand how daily activity and healthy behavior promote overall personal health and safety.
VFSLO 3.4-3.6, A.3-5, B.1, B.5, D.1-3

a. Participate in games, outdoor play, and other forms of play that enhance physical fitness.

b. Use their senses to explore materials and experience activities.

c. Begin to practice safe and healthy behaviors.

d. Initiate activities that challenge their bodies in new ways.

a. Build strength and stamina in movement activities.

b. Demonstrate body and space awareness to move and stop with control over speed and direction.

c. Develop coordination and balance with a variety of playground equipment.

a. Build strength and stamina to perform fine motor tasks.

b. Use eye-hand coordination to perform fine motor tasks with a variety of manipulative materials.

c. Show increased awareness and control of tools for various learning activities.

a. Discriminate between a variety of sights, smells, sounds, textures, and tastes.

b. Explore and learn to manage a wide variety of sensory input.

c. Combine and use different senses depending on the activity.

a. Demonstrate safety awareness when purposefully using materials.

b. Increasingly perform self-care skills independently when eating, dressing, toileting, and washing hands.

c. Care for many personal belongings.

d. Begin to understand that some foods have more nutritional value than others.

¹Vermont Framework of Standards and Learning Opportunities

²Head Start Child Outcomes Framework

ADULTS CAN SUPPORT CHILDREN'S
PHYSICAL DEVELOPMENT AND HEALTH BY:

- Helping children to understand their bodies, how they work, and how to care for them.
- Incorporating health practices (e.g., tooth brushing, hand washing, active play, rest) into the daily routine.
- Ensuring that there are ample hands-on opportunities and sufficient time for children to practice self-help skills.
- Being positive role models for healthy behaviors.
- Fostering awareness of different types of food and encouraging healthy, nutritious eating habits.
- Including discussions about health and personal safety in all kinds of learning.
- Including children during the pick-up and cleaning activities by modeling.
- Offering a balance of active and quiet activities throughout the day and permitting children the option of not participating if they do not feel well.
- Making appropriate accommodations in experiences and the environment so all children can participate in all activities.
- Helping children to be familiar and comfortable with community health helpers.
- Encouraging children to be physically active and challenge themselves while providing supervision that ensures their safety.

THE ENVIRONMENT CAN SUPPORT CHILDREN'S
PHYSICAL DEVELOPMENT AND HEALTH BY:

- Being safe, clean, and well-supervised.
- Providing hands-on health-related materials (e.g., toothbrushes, stethoscopes, scales, dramatic play props) to reinforce children's ideas about health.
- Giving children opportunities and time to explore health-related ideas and issues through dramatic play, art, movement, and other everyday experiences.
- Including spaces designed to accommodate relaxation and rest as well as safe, active physical play.
- Encouraging self-help skills and sound health practices by having child-sized equipment and easily accessible supplies (i.e., paper towels, tooth brush and paste, tissues).
- Having space dedicated to posting information on resources, health practices, and other related topics for parents and staff.
- Including materials, space, experiences and time to foster small and large muscle development.
- Providing healthy snacks and meals.

Vermont Early Learning Standards

DOMAIN	LEARNING GOALS	DEFINITION	VFSLO REFERENCE
I. Approaches to Learning <i>Head Start Child Outcomes Framework Initiative & Curiosity, Engagement & Persistence, Reasoning & Problem Solving</i>	1. Play	Children engage in play as a means to develop their individual approach to learning.	A.3-5, B.1, B.3-5, D.1-2, E.1-3
	2. Curiosity	Children demonstrate curiosity and a willingness to participate in tasks and challenges.	2.6, 2.7, 2.8, 2.10 – 12, 2.14
	3. Persistence	Children demonstrate an increased ability to show initiative, accept help, take risks, and work towards completing tasks.	2.9, 2.10, 2.11, 2.14, 3.14
	4. Self-organization	Children demonstrate an increased ability to establish goals, develop and follow through with plans.	B.4, C.3
	5. Reasoning	Children demonstrate an increased ability to identify, evaluate and provide possible solutions to problems.	2.1 – 14
	6. Application	Children use their prior experiences, senses, and knowledge to learn in new ways.	B.4
II. Social and Emotional Development <i>Head Start Child Outcomes Framework Self-Concept, Self-Control, Social Relationships, Cooperation, and Knowledge of Families & Communities</i>	1. Play	Children use play as a vehicle to build relationships and to develop an appreciation for their own abilities and accomplishments.	3.3, 3.10 – 3.13, 6.9, 6.12, D.3
	2. Self Concept	Children demonstrate and express a positive awareness of self and an awareness of limitations.	3.3- 3.5, 6.19
	3. Self Control	Children increase their capacity for self-control and to deal with frustrations, and increase their awareness of limitations.	3.3-3.7, 3.11, 3.12, 6.18
	4. Interactions with Others	Children develop successful relationships with other members of their learning community.	3.3, 3.10 – 3.13, 4.1 -4.4, 6.9, 6.12, D.3
	5. Sense of Community	Children increasingly demonstrate a sense of belonging to the classroom/program, family and community.	3.3, 3.10 – 3.13, 4.1 -4.4, 6.9, 6.12, D.3

DOMAIN	LEARNING GOALS	DEFINITION	VISLO REFERENCE
III. Language, Literacy & Communication <i>Head Start</i> <i>Child Outcomes Framework</i> <i>Language Development -Listening & Understanding, Speaking & Communicating</i>	1. Play	Children engage in play as a means to develop their receptive and expressive language skills.	A.3-5, B.1, B.3-5, D.1-2, E.1
		Children engage in play as a means to develop early reading and writing skills.	1.1, 1.9, 1.13, 1.15, 5.4, 5.7, 5.12-3, 5.16, A.3-4, B.1, B.3-5, C.4, D.1-2
	2. Listening and Understanding	Children develop skills in listening and in understanding language.	1.13, 1.14
	3. Speaking and Communicating	Children will use verbal and non-verbal language to express and to communicate information.	1.15, 2.1, 2.2, 5.17, 5.19
	4. Vocabulary	Children will acquire and use new words to increase their understanding and express ideas.	1.5, 1.8, 1.9, 1.12, 1.17, 5.21
	5. Early Writing	Children demonstrate an interest and ability in using symbols to represent words and ideas.	1.1
6. Early Reading	Children demonstrate an interest in: <i>Phonemic and Phonological Awareness</i> - Learning letters and the combination of letter sounds with letter symbols <i>Book Knowledge and Appreciation</i> - Understanding and appreciating that books and other forms of print have a purpose. <i>Print Awareness and Concepts</i> - Recognizing the association between spoken and written words by following print as it is read aloud. <i>Alphabet Knowledge</i> - Recognizing that symbols are associated with letters of the alphabet and that they form words.	1.1, 1.2, 1.3, 1.4, 1.7, 5.2, 5.3, 5.8 - 5.10, 5.12 - 5.15, 5.20 1.1 1.1	

VERMONT EARLY LEARNING STANDARDS

DOMAIN	LEARNING GOALS	DEFINITION	VFSLO REFERENCE
IV. Mathematics <i>Head Start Child Outcomes Framework Numbers & Operations, Geometry & Spatial Sense, Patterns & Measurement</i>	1. Play	Children engage in play to develop and add to their mathematical thinking and problem solving.	A.3-5, B.1, B.3-5, C.4, D.1-2, E.3
	2. Numbers and Operations	Children show interest and curiosity in counting and grouping objects and numbers.	1.20, 2.2, 2.3, 2.5, 7.6, 7.8, 7.10
	3. Geometry and Spatial Sense	Children show an interest in recognizing and creating shapes and an awareness of position in space.	7.7
	4. Patterns and Measurement	Children show an interest in recognizing and creating patterns, comparing, and measuring time and quantity.	1.21, 7.7, 7.11

DOMAIN	LEARNING GOALS	DEFINITION	VFSLO REFERENCE
V. Science <i>Head Start Child Outcomes Framework Scientific Skills & Methods, Scientific Knowledge</i>	1. Play	Children engage in play as a means to develop their scientific skills.	A.3-5, B.1, B.3-5, D.1-2, E.3
	2. Scientific Knowledge	Children learn about the development of the natural and physical worlds.	7.12 – 19
	3. Scientific Skills and Methods	Children begin to use scientific tools and methods to learn about their world.	1.18, 1.19, 1.20, 1.21, 2.1, 2.2, 2.3, 7.1-3

DOMAIN	LEARNING GOALS	DEFINITION	VFSLO REFERENCE
VI. Social Studies <i>Head Start Child Outcomes Framework No corresponding domain</i>	1. Play	Children engage in play as a means to develop an understanding of social studies.	A.3-5, B.1, B.3-5, D.1-3
	2. Spaces and Geography	Children will demonstrate an understanding of and appreciation for their physical environment.	3.3, 4.5, 6.7, 6.8
	3. People and How They Live	Children shall demonstrate skills related to understanding, communication, sharing, cooperation, and participation with others in a community.	1.18, 2.2, 3.8, 3.10-15, 4.1-4, 6.4-6, 6.7, 6.12-15, 6.18-19
	4. People and Their Environment	Children demonstrate an awareness of and appreciation for the environment.	3.9, 3.13, 3.15, 4.6, 6.7-8
	5. People and the Past	Children demonstrate an understanding of past events and their connection to the present and future.	1.19, 4.3, 4.6, 6.4-6, 6.13, 6.19

DOMAIN	LEARNING GOALS	DEFINITION	VFSLO REFERENCE
VII. Creative Expression <i>Head Start</i> <i>Child Outcomes Framework</i> <i>Music, Art, Movement,</i> <i>Dramatic Play</i>	1. Play	Children engage in play as a means of self expression and creativity.	A.3-5, B.1, B.3-5, D.1-3, E.1
	2. Creative Expression	Children engage in individual or group activities that represent real-life experiences, ideas, knowledge, feelings and fantasy.	1.16, 5.22 – 24, 5.28 – 37
	3. Tools	Children use a variety of tools and art media to creatively express their ideas.	1.16, 5.22 – 24, 5.28 – 37
	4. Appreciation of the Arts	Children express interest in and begin to build a knowledge base in the arts.	1.16, 5.14, 5.22 –24, 5.28 – 37

DOMAIN	LEARNING GOALS	DEFINITION	VFSLO REFERENCE
VIII. Physical Health and Development <i>Head Start</i> <i>Child Outcomes Framework</i> <i>Fine Motor Skills, Gross Motor Skills, Health Status & Practices</i>	1. Play	Children engage in play as a means to understand healthy behavior and develop their physical bodies.	A.3-5, B.1, B.3-5, D.1-3
	2. Gross Motor/ Large Muscle	Children increasingly move their bodies in ways that demonstrate control, balance, and coordination.	3.4.A.3-5, B.1, B.3-5, D.1-3
	3. Fine Motor/ Small Muscle	Children use their fingers and hands in ways that develop hand-eye coordination, strength, control, and object manipulation.	3.4.A.3-5, B.1, B.5, D.1-3
	4. Senses	Children increase their understanding of the use of their eyes, ears, fingers, nose, and mouth, and how the senses work together.	3.4 – 3.6, A.3-5, B.1, B.5, D.1-3
	5. Healthy Habits	Children begin to understand how daily activity and healthy behavior promote overall personal health and safety.	3.4-3.6, A.3-5, B.1, B.5, D.1-3

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Appendix 1

Early Learning Standards: Creating The Conditions For Success

A Joint Position Statement of

The National Association for the Education of Young Children (NAEYC) and
The National Association of Early Childhood Specialists in State Departments of Education (NAECS/SDE)

Approved November 19, 2002

Executive Summary

Introduction

Early childhood education has become part of a standards-based environment. More than 25 states have standards describing desired results, outcomes, or learning expectations for children below kindergarten age; Head Start has developed a Child Outcomes Framework; and national organizations have developed content standards in areas such as early literacy and mathematics. This movement raises significant educational, ethical, developmental, programmatic, assessment, and policy issues. Rather than writing a new set of standards, in this position statement NAEYC and NAECS/SDE address those issues, describing four features that are essential if early learning standards are to be developmentally effective. The recommendations in this position statement are most relevant to young children of preschool or prekindergarten age, with and without disabilities, in group settings including state prekindergarten programs, community child care,

family child care, and Head Start. However, the recommendations can guide the development and implementation of standards for younger and older children as well.

The Position

The first years of life are critical for later outcomes. Young children have an innate desire to learn. That desire can be supported or undermined by early experiences. High-quality early childhood education can promote intellectual, language, physical, social, and emotional development, creating school readiness and building a foundation for later academic and social competence. By defining the desired content and outcomes of young children's education, early learning standards can lead to greater opportunities for positive development and learning in these early years. The National Association for the Education of Young Children (NAEYC) and the National Association of Early Childhood Specialists in State

Departments of Education (NAECS/SDE) take the position that early learning standards can be a valuable part of a comprehensive, high-quality system of services for young children, contributing to young children's educational experiences and to their future success. But these results can be achieved only if early learning standards (1) emphasize significant, developmentally appropriate content and outcomes; (2) are developed and reviewed through informed, inclusive processes; (3) use implementation and assessment strategies that are ethical and appropriate for young children; and (4) are accompanied by strong supports for early childhood programs, professionals, and families.

Because of the educational and developmental risks for vulnerable young children if standards are not well developed and implemented, the recommendations in this position statement are embedded in and refer to the principles set forth in NAEYC's code of ethical conduct.

According to this code, early childhood professionals and others affecting young children's education must promote those practices that benefit young children, and they must refuse to participate in educational practices that harm young children. Thus, a test of the value of any standards effort is whether it promotes educationally and developmentally positive outcomes and whether it avoids penalizing or excluding children from needed services and supports.

Essential Features

A developmentally effective system of early learning standards must include four essential features:

1. Effective Early Learning Standards Emphasize Significantly Appropriate Content and Outcomes

- Effective early learning standards give emphasis to **all domains** of early

- development and learning.
- The content and desired outcomes of effective early learning standards are **meaningful and important** to children's current well-being and later learning.
- Rather than relying on simplifications of standards for older children, the content and desired outcomes of effective early learning standards are **based on research about the** processes, sequences, and long-term consequences of **early learning and development**.
- Effective early learning standards create **appropriate expectations** by linking content and desired outcomes to specific ages or developmental periods.
- The content of effective early learning standards, and expectations for children's mastery of the standards, must **accommodate variations** — community, cultural, linguistic, and individual—that best support positive outcomes. To do so, early learning standards must encompass the widest possible range of children's life situations and experiences, including disabilities.

2. Effective Early Learning Standards Are Developed and Reviewed Through Informed, Inclusive Processes

- The process of developing and reviewing early learning standards relies on relevant, valid **sources of expertise**.

- The process of developing and reviewing early learning standards involves **multiple stakeholders**. Stakeholders may include community members, families, early childhood educators and special educators, and other professional groups. In all cases, those with specific expertise in early development and learning must be involved.
- Once early learning standards have been developed, standards developers and relevant professional associations ensure that standards are shared with all stakeholders, creating multiple opportunities for **discussion and exchange**.
- Early learning standards remain relevant and research based by using a systematic, interactive process for regular **review and revision**.

4. Effective Early Learning Standards Require a Foundation of Support for Early Childhood Programs, Professionals, and Families

- Research-based standards for early childhood **program quality, and adequate resources** for high-quality programs, build environments where standards can be implemented effectively.
- Significant expansion of **professional development** is essential if all early childhood teachers and administrators are to gain the knowledge, skills, and dispositions needed to implement early learning standards.
- Early learning standards have the most positive effects if **families**—key partners in young children's learning—are provided with respectful communication and support.

¹ NCREST defines standards as “the broadest of a family of terms referring to expectations for student learning.” This position statement uses the term early learning standards to describe expectations for the learning and development of young children. Narrower terms included in standards and early learning standards are content standards (“summary descriptions of what it is that students should know and/or be able to do within a particular discipline” [McREL]); benchmarks (“specific description of knowledge or skill that students should acquire by a particular point in their schooling” [McREL]—usually tied to a grade or age level); performance standards (“describes levels of student performance in respect to the knowledge or skill described in a single benchmark or a set of closely related benchmarks” [McREL]). Important, related standards that are not included in this position statement’s definition of early learning standards are program standards—expectations for the characteristics or quality of schools, child care centers, and other educational settings. It should be noted that Head Start uses the term Performance Standards in a way that is closer to the definition of program standards, describing expectations for the functioning of a Head Start program and not the accomplishments of children in the program. A working group of representatives from NAEYC, CCSSO, ERIC, and other groups is developing a more complete glossary of terms related to standards, assessment, and accountability.

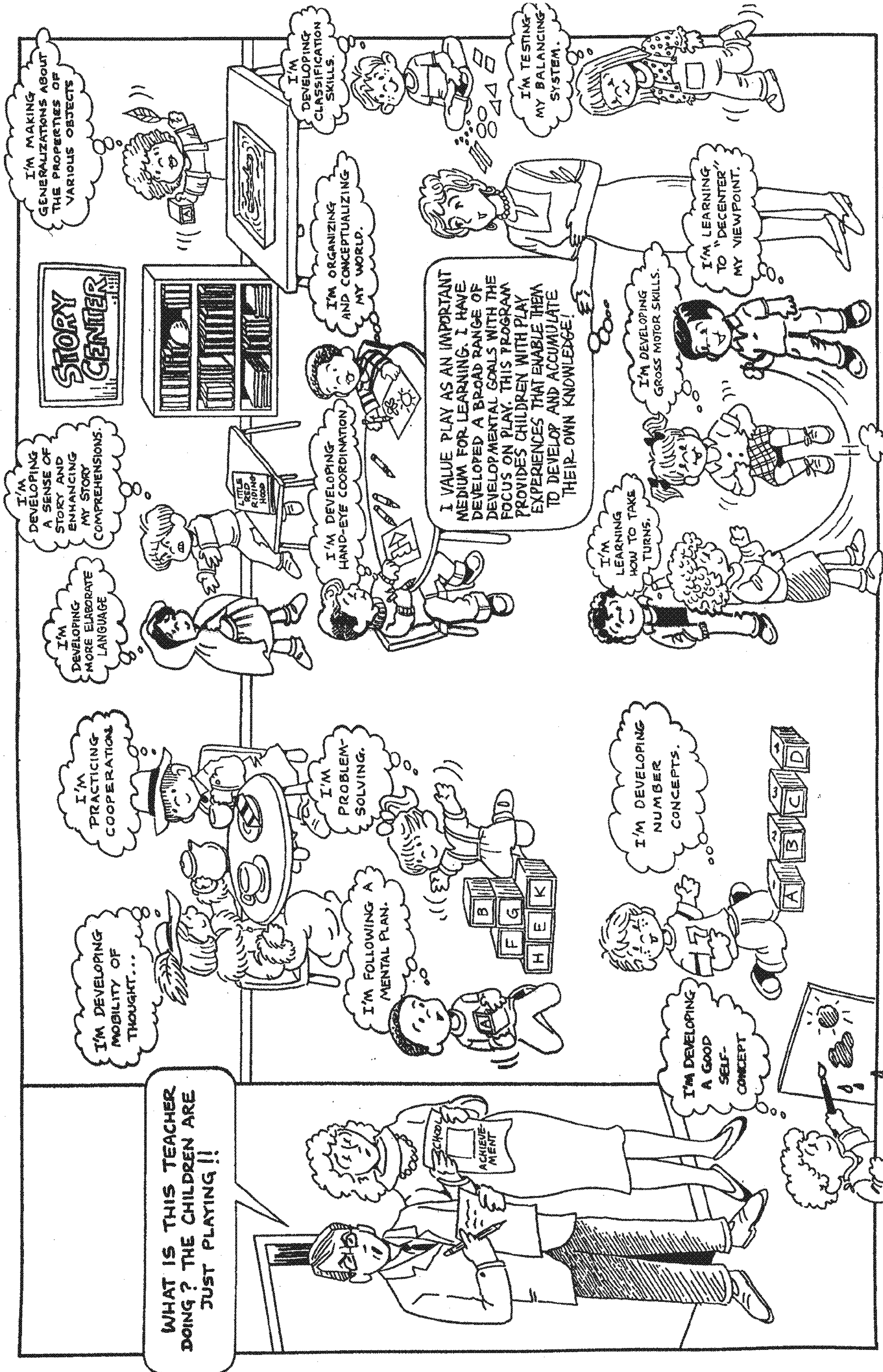
Appendix 1

Vermont Early Learning Standards Advisory Panel Members

The Vermont Early Learning Standards were reviewed by over 100 principals, early education coordinators, preschool teachers, child care providers, faith-based preschool educators, kindergarten teachers, educational consultants, higher education faculty, and parents.

Judy Adams	Early Education Coor.	Bennington Rutland SU	Irene Gilles	Kindergarten Teacher	Sherburne Elementary School
Robin Amber	Gt. 1-2 Teacher	Calais Elementary School	Theresa Gleason	Early Educator	Rutland Northeast SU
Christopher Ashley	Principal	White River School	Elaine Gordon	Early Educator	Westminster Central School
Catherine Audette	Student	Greenfield Community College	Carolyn Guest	Early Educator	Essex Caledonia SU
Christine Barnes	Principal	Twinfield Elementary School	Hope Hutchinson	Early Educator	Orange East SU
Judy Bartlett	Early Educator	Orange East SU	Birdi Kaplan	Early Educator	Orange East SU
Julie Benay	Asst. Principal	Swanton Elementary School	Bev Keck	Kindergarten Teacher	Union Elementary School / Mont.
Carol Birdsall	Early Educator	Addison Northeast SU	Beth Kinney	EEE Coordinator	Windham Southwest SU
Laura Brines	Director/Teacher	Springhill School	Paula Kitchel	Early Education Coor.	Caledonia Central SU
Mary Jane Broughton	Kindergarten Teacher	Bristol Elementary School	Joan Knight	Kindergarten Teacher	St. Albans Elementary School
Karen Burnell	Early Education Coordinator	Southwest Vermont SU	Mary Koen	Early Education Coor.	Rutland Northeast SU
Jane Cameron	Early Education Director	Good Shepherd Catholic School	Sharon Ladago	Early Educator	Rutland Northeast SU
Susan Cano	Dir. of Student Support	Lamoille North SU	Michele LaRouche	Early Educator	Bennington Rutland SU
Anne Cerasoli	Kindergarten Teacher	White River School	Susan Lavigne	Kindergarten Teacher	Charlotte Central School
Pat Chamberlin	Early Educator	Georgia Elementary School	Sally Lawyer	Kindergarten Teacher	St. Albans Elementary School
Mary Charbonneau	Early Educator	Bennington Rutland SU	Mary Leadbetter	Early Educator	Guildhall Elementary School
Martha Clavelle	Kindergarten Teacher	Calais Elementary School	Shauna Lee	Early Educator	Addison Central SU
Bonnie Coulter	Early Educator	Addison Central SU	Deb Lendway	Early Educator	Rutland Northeast SU
Elaine Daniels	Early Educator	Lamoille South SU	Marion Leonard	Early Educator	Addison Central SU
Kathy Davidow	Early Educator	Orange East SU	Susan Linskey	Coordinator	CVOEO Head Start
Linda Dean-Farrar	Director	Sunrise Parent Child Center	Ellen Livingston	Early Educator	Lamoille Family Center
Mary Drew	Kindergarten Teacher	Union Elementary School / Mont.	Mary Macomber	Early Educator	Miller's Run School (Sheffield)
Barbara Dune	Director	Magic Mountain Children's Center	Carol Mandracchia	Early Educator	Deerfield Valley Elem. School
Early Education Faculty		University of Vermont – PreK – Grade 3 Teacher Prep Program	Diane Marcoux-LaClair	Kindergarten Teacher	Hyde Park Elementary School
Cami Elliot-Knaggs	Early Educator	Putney Central School	Jean Mayer	Early Educator	Bennington Rutland SU
Elizabeth Fairchild	Early Education Coor.	Addison Northeast SU	Dona Meltzer	Early Educator	Randolph Elementary School
Lynn Fitzgerald	Kindergarten Teacher	Highgate Elementary School	Diane Minton	Early Educator	Lamoille North SU
Pat Fitzsimmons	Science Enrich. Teacher	Barre Town Schools	Sue Moore	Early Educator	Lamoille South SU
Carol Fjeld	Early Educator	Rutland Northeast SU	Carmen Murray	Principal	Brighton Elementary/Island Pond
Wendy Fjeld	Early Educator	Rutland Northeast SU	Patti O'Donohue	Early Educator	Addison Central SU
Joyce Gagne	Kindergarten Teacher	Richford Elementary School	Sue Owings	Early Educator	Deerfield Valley Elem. School
Cindy Gauthier	Early Educator	Berlin Elementary School	Jean Peterson	Kindergarten Teacher	Calais Elementary School
Julie Gebo	Early Educator	Addison Central SU	Carol Pickett	Principal	Bridgewater Elementary School
Theresa Giffin	Kindergarten Teacher	Union Elementary School / Mont.	Joann Pye	Early Educator	Rutland Northeast SU
			Rob Reade	Early Educator	Orange East SU

Amy Rider	<i>Kindergarten Teacher</i>	Georgia Elementary School
Sue Rogers	<i>Early Educator</i>	Chelsea Elementary School
Ellen Rose	<i>Kindergarten Teacher</i>	St. Albans Elementary School
Kathleen Rowe	<i>Early Educator</i>	Bennington Rutland SU
John Rowell	<i>Special Services Coord.</i>	Georgia Elementary School
Linda Rowell	<i>Kindergarten Teacher</i>	Georgia Elementary School
Lesley Rower	<i>Early Educator</i>	Orange East SU
Ebeth Scatchard	<i>Kindergarten Teacher</i>	Charlotte Central School
Allison Shantz	<i>Speech/ Lang. Pathologist</i>	Windham South SU
Chris Schillhammer	<i>Kindergarten Teacher</i>	Charlotte Central School
Vicki Shaw	<i>Parent / Success By Six</i>	Franklin County Success By Six
Sue Smiel	<i>Early Educator</i>	Rutland Northeast SU
Carolyn Smith	<i>Early Educator</i>	Lamoille North SU
Paulette Staats	<i>Early Educator</i>	Randolph Elementary School
Lesley Stanley	<i>Kindergarten Teacher</i>	Townsend Elementary School
Sue Stanley	<i>Child Care Trainer</i>	Family Center of NW Vermont
Mark Sustic	<i>Instructor</i>	University of Vermont
Deborah Tewksbury	<i>Reading Specialist</i>	Calais Elementary School
Sue Tougas	<i>Kindergarten Teacher</i>	Georgia Elementary School
Lowell VanDerlip	<i>Principal</i>	Berlin Elementary School
Early Education Curriculum Com.		
Cill Waterhouse	<i>Early Educator</i>	Washington West SU
Rebecca Webb	<i>Early Educator</i>	Bennington Rutland SU
Cathi Weist	<i>Early Educator</i>	Grand Isle SU
Beth West	<i>Early Educator</i>	Grand Isle SU
David White	<i>Science Consultant</i>	Vergennes Union Elem. School
Kate Williams	<i>Early Educator</i>	Vermont Institutes
Alice Worth	<i>Curriculum Coordinator</i>	Bennington Rutland SU
Wendy Wright	<i>Early Educator</i>	Orange East SU
		Brighton Elementary/Island Pond



WHAT IS THIS TEACHER DOING? THE CHILDREN ARE JUST PLAYING!!

I VALUE PLAY AS AN IMPORTANT MEDIUM FOR LEARNING. I HAVE DEVELOPED A BROAD RANGE OF DEVELOPMENTAL GOALS WITH THE FOCUS ON PLAY. THIS PROGRAM PROVIDES CHILDREN WITH PLAY EXPERIENCES THAT ENABLE THEM TO DEVELOP AND ACCUMULATE THEIR OWN KNOWLEDGE!

I'M MAKING GENERALIZATIONS ABOUT THE PROPERTIES OF VARIOUS OBJECTS

I'M DEVELOPING CLASSIFICATION SKILLS.

I'M TESTING MY BALANCING SYSTEM.

I'M ORGANIZING AND CONCEPTUALIZING MY WORLD.

I'M LEARNING TO "DECENTER" MY VIEWPOINT.

I'M DEVELOPING GROSS MOTOR SKILLS.

I'M LEARNING HOW TO TAKE TURNS.

I'M DEVELOPING A SENSE OF STORY AND ENHANCING MY STORY COMPREHENSIONS.

I'M DEVELOPING MORE ELABORATE LANGUAGE

I'M DEVELOPING HAND-EYE COORDINATION

I'M DEVELOPING COOPERATION

I'M LEARNING HOW TO TAKE TURNS.

I'M DEVELOPING NUMBER CONCEPTS.

I'M DEVELOPING MOBILITY OF THOUGHT...

I'M PRACTICING COOPERATION

I'M FOLLOWING A MENTAL PLAN.

I'M PROBLEM-SOLVING.

I'M DEVELOPING A GOOD SELF-CONCEPT

I'M DEVELOPING COOPERATION

I'M DEVELOPING A SENSE OF STORY AND ENHANCING MY STORY COMPREHENSIONS.

I'M DEVELOPING MORE ELABORATE LANGUAGE

I'M DEVELOPING HAND-EYE COORDINATION

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I'M FOLLOWING A MENTAL PLAN.

I'M PROBLEM-SOLVING.

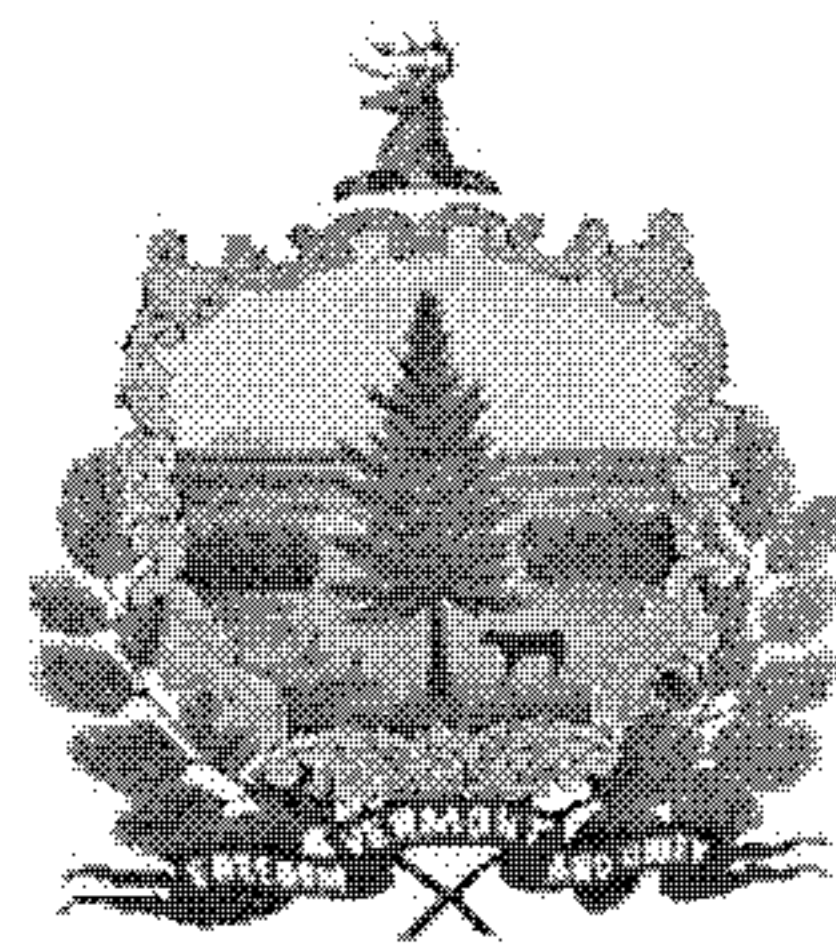
I'M DEVELOPING A GOOD SELF-CONCEPT

I'M DEVELOPING COOPERATION

(b)(6)

For additional copies, contact Jim Squires at the Vermont Department of Education,
jsquires@doe.state.vt.us or 802-828-3892
or visit the Vermont Early Childhood web site, www.ahs.state.vt.us/EarlyChildhood

APPENDIX B



STATE OF VERMONT

**Department for Children and Families
Child Development Division
103 South Main Street
Waterbury, VT 05671-5500**

1-800-649-2642 or 1-802-241-3110

<http://www.dcf.state.vt.us/cdd>

**STEP AHEAD RECOGNITION SYSTEM (STARS)
STANDARDS**

Effective Date: January 3, 2010

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STEP AHEAD RECOGNITION SYSTEM (STARS) STANDARDS

I Purpose

The purpose of these rules is to establish the Step Ahead Recognition System (STARS). The specific purpose of this quality recognition system is to promote, reward and recognize child care and education programs that achieve standards above the licensing requirements of the Department for Children and Families (DCF), Child Development Division (CDD). STARS is designed to be applicable to public and private programs regulated by DCF/CDD, including prekindergarten education programs in public schools.

II Authority

Authority for this program is Act 132 of 2008, 33 V.S.A. § 307, 16 V.S.A. § 829 and the federal Child Care Development Block Grant, 45 CFR Parts 98 and 99.

III Terms and Definitions

- III A "After school" means services to kindergarten and elementary school age children. After school services take place in diverse settings, and before and after school, school vacations, and summer.
- III B "Arena" means a specific core area of program operations.
- III C "Average Daily Membership" (ADM) is defined in accordance with 16 V.S.A. § 4001(1).
- III D "Child care" or "child care services" means developmentally appropriate care and supervision of a child under age 13 for fewer than 24 hours a day by a DCF/CDD regulated provider.
- III E "IPDP" is an Individualized Professional Development Plan that identifies personal learning needs and goals and how to achieve them. For teachers who hold a Department of Education (DOE) educator's license, an equivalent to this type of IPDP is a statement of annual professional development goals.
- III F "Licensed program" is an early childhood and/or after school program that provides care and education services in accordance with 33 V.S.A. § 306(b) and 33 V.S.A. § 3502(d).
- III G "Part-day/part-year program" is a program that children attend for fewer than 26 hours per week and fewer than 42 weeks per year.

- III H “Professional development” means documented learning experiences that provide a variety of ongoing opportunities for professionals to refine and expand their knowledge and skills.
- III I “Program staff” include the people who work for the early childhood, preschool or after school program and who are either counted in the staff-child ratios or serve a supervisory or administrative role.
- III J “Regulated provider” means a person or entity licensed or registered by the DCF/CDD to provide early care, education or school age care services.
- III K “School-operated” is a program for which the CDD license is applied for and maintained under the auspices of a public school, school district or supervisory union.
- III L “STARS” is the STep Ahead Recognition System, Vermont’s graduated system of quality recognition for child care, early education and after school programs.
- III M “Teaching staff” are those individuals responsible for planning, implementing, and/or evaluating the program’s curriculum and overall implementation.

IV STARS Framework

STARS is a graduated point system with five levels. Applicants determine the level of recognition their program has achieved according to the standards for each arena and submit evidence documenting their achievements on a regular basis.

IV A STARS Arenas

1. Regulatory Compliance History,
2. Teaching Staff Qualifications and Annual Professional Development,
3. Families and Community,
4. Program Practices, and
5. Administration.

Upon review and approval of the application materials, a certificate indicating the level of achievement and the date of achievement is awarded.

IV B Five Levels of Quality and Required Points

- One Star is achieved when the program obtains one to four points.
- Two Stars is achieved when the program obtains a total of five to eight points.
- Three Stars is achieved when the program obtains a total of nine to 11 points.
- Four Stars is achieved when the program obtains a total of 12 to 14 points including at least two points in the Program Practices Arena.
- Five Stars is achieved when the program obtains a total of 15 to 17 points.

IV C STARS Certificates

STARS certificates are valid for three years from the date of issue and a brief annual CDD/DOE approved report form must be submitted in which the program affirms maintenance of star level standards or formally reports changes. Documentation to reapply for STARS certification must be received at least 90 days prior to the expiration date of the valid certificate.

Holders of STARS certificates shall permit on-site visits, announced or unannounced, by representatives of the department for children and families and the department of education during the three year interval between renewals.

An applicant who fails to obtain any STARS after submitting an initial application may re-apply after a period of 6 months.

V Standards and Points

V A Regulatory Compliance History Arena of Action

Points in the Regulatory Compliance arena shall be awarded in accordance with the following criteria:

In Compliance means that the program is in compliance with all DCF/CDD regulations, a DCF licenser has conducted an onsite inspection within the last two years and any substantiated violations have been corrected.

1 Point:

The program is in compliance as defined above and within the past year has not had any substantiated violations resulting in a Parental Notification, and has not had any substantiated violations of the same nature or exhibited a general pattern of regulatory non-compliance.

2 Points:

The program is in compliance as defined above and within the past three years has not had any substantiated violations resulting in a Parental Notification, and has not had any repeated substantiated violations of the same nature or exhibited a general pattern of regulatory non-compliance.

3 Points:

The program is in compliance as defined above and within the past five years has not had any substantiated violations resulting in a Parental Notification, and has not had any repeated, substantiated violations of the same nature, or exhibited a general pattern of regulatory non-compliance.

V B Teaching Staff Qualifications and Annual Professional Development Arena of Action

Points in the Teaching Staff Qualifications and Annual Professional Development Arena shall be awarded in accordance with the following criteria:

In Compliance means that all program teaching staff or the registrant and any regular staff in his/her program meet applicable DCF/CDD and Department of Education (DOE) standards and regulations for qualifications and annual professional development. Any deficiencies have been remedied and any required corrective action has been completed.

1 Point:

- All teaching staff members or the registrant have an updated Individual Professional Development Plan (IPDP) or a statement of annual professional development goals.
- The program or registrant completes the DCF/CDD and DOE approved worksheet that assigns a numerical value to educational level, experience in the field and hours of participation in relevant professional development.
- The program's average score across all teaching staff, or the registrant's score, is between 0.31 and 1.3.

2 Points:

- All teaching staff members or the registrant have an updated Individual Professional Development Plan (IPDP) or a statement of annual professional development goals.
- The program or registrant complete the worksheet described for 1 point.
- The program's average score across all teaching staff, or the registrant's score, is between 1.31 and 2.3.

3 Points:

- All teaching staff members or the registrant have an updated Individual Professional Development Plan (IPDP) or a statement of annual professional development goals.
- The program or registrant complete the worksheet described for 1 point.

- The program's average score across all teaching staff, or the registrant's score, is between 2.31 and 3.0.

V C Families and Communities Arena of Action

In the Families and Community Arena, applicants achieve points as follows:

In Compliance means that the program meets DCF/CDD or Department of Education (DOE) Prekindergarten regulations related to parent/family handbooks and policies, and the program communicates with families as required. Any deficiencies have been remedied and any required corrective action has been completed.

1 Point:

The program's practices and policies support and strengthen families by:

- Collecting annual family satisfaction surveys and using the results to inform program practices or, if applicable, having a school action plan that meets DOE requirements and includes plans for improving the prekindergarten programs.
- Actively making resources and information available to families.
- Having a written philosophy about the relationship between families and the program.
- The program maintains connections with the professional community through participation in at least 4 professional networking activities each year.

2 Points:

The program adheres to all standards for one point (above) plus the program's practices and policies support and strengthen families by providing:

- Opportunities for families to meet with program staff and other parents through at least 2 social events and 1 group event annually designed to discuss specific content.
- Opportunities for families to be involved in the program throughout the year.
- A program that is prepared to serve children with special needs, including children who have been abused or neglected. The program is either a Specialized Services provider or a school-operated program that ensures all staff is trained in policies regarding the care of all children, including children who are at-risk, have disabilities, have been abused or neglected or are in the foster care system.

- A program that maintains connections with the community to support and advocate for children, families or the profession through participation in family service teams, community-based groups, and similar activities for a total of at least 24 hours per year. Part-day/part year programs may have a total of 12 hours a year.

3 Points:

The program adheres to all standards for two points (above) plus the program demonstrates its commitment to strong families, strong communities or a strong profession through:

- Annually assessing the program’s family-strengthening practices using a CDD/DOE approved tool that addresses strategies including: facilitating social connections among parents, parent education, response to families in crisis, connecting families to services and opportunities, support for children’s social-emotional development and response to early signs of abuse and neglect.
- Creating a continuous improvement plan to implement and maintain practices related to strengthening families’ protective factors (e.g., parental resilience, social connections, knowledge of parenting and child development)

~ OR ~

- Providing leadership in the profession through engagement in a variety of local, statewide or national activities and initiatives (e.g., activism, advocacy, teaching, mentoring).
- Having a written leadership philosophy for the program that details how staff leadership activities impact on the profession and quality of early childhood or afterschool care and education.

V D Program Practices Arena of Action

In the Program Practices Arena, applicants achieve points as follows:

In Compliance means that the program operates as required by DCF/CDD and DOE regulations, as applicable, related to curriculum, developmental appropriate activities, child guidance, child-adult interactions and care giving, use of the Vermont early learning standards or other age-appropriate learning standards, guidelines or frameworks. Any deficiencies have been remedied and any required corrective action has been completed.

1 Point:

The program completes a self-evaluation using a DCF/CDD and DOE approved self-assessment tool and writes an improvement plan based upon self-assessment findings. Staff is involved in the self-assessment, is informed of the results and provides input into the written improvement plan.

2 Points:

- The program completes a self-assessment and is evaluated using a DCF/CDD and DOE approved program assessment tool by an approved validator. Staff members provide input for and receive feedback on the assessment and the program submits a written improvement plan.
- Also, the program regularly uses observation and other forms of informal assessments to document children's strengths, needs, interests and growth. The program maintains records of this documentation and utilizes the results of this ongoing system of assessment to inform curriculum planning.

3 Points:

- The program completes a self-assessment and is evaluated by an approved validator using a DCF/CDD and DOE approved program assessment tool, and the program reaches a specified minimum score on the assessment. Staff members provide input during the evaluation process and receive feedback. The program submits a written improvement plan.
- Also, the program regularly uses observation and documents children's strengths, needs, interests and growth. The program maintains related records and utilizes the results of this ongoing system of assessment to inform curriculum planning.

4 Points:

- The program completes a self-assessment and is evaluated by an approved validator using a DCF/CDD and DOE approved program assessment tool, the program has obtained a specified minimum score on the assessment, and staff members have provided input and receive feedback during the evaluation process. The program submits a written improvement plan and evidence that actions specified in previous improvement plans have been completed.
- Also, the program regularly uses observation and documents children's strengths, needs, interests and growth through the use of a DCF/CDD and DOE approved tool at least twice a year. The program maintains records of this documentation and uses the results from child assessments to inform curriculum planning.

5 Points:

- The program holds a current DCF/CDD and DOE approved accreditation or other approved standard, has a written improvement plan based upon the findings of an annual self-assessment, and submits evidence that actions specified in previous improvement plans have been completed.

- Also, the program regularly uses observation and documents children's strengths, needs, interests and growth through use of a DCF/CDD and DOE approved tool at least twice a year. The program maintains records of this documentation and uses the results from the child assessment to inform curriculum planning.

V E Administration Arena of Action

In the Administration Arena of Action, applicants achieve points as follows:

V E 1 For Registered Homes:

In Compliance means that the program meets all DCF/CDD regulations related to business practices, policies, required certifications, permits, applications and re-application materials. Any deficiencies have been remedied and any required corrective action has been completed.

1 Point:

The program has a contract or other written agreement with parent signature and written policies for exclusions due to child illness, payment for services and daily routines for children.

2 Points:

The program adheres to all standards for one point (above) plus the program has established a fee structure. The program has clear policies for the registrant's vacation, sick, holiday and professional days. At least one person in the program is a member of a professional organization relevant to early childhood or after school professionals.

3 Points:

The program adheres to all standards for two points (above) plus has a parent handbook written specifically for this program. The handbook includes the registrant's program philosophy and guidance philosophy. The program operates a financially sound business that conforms to federal standards for small businesses. The program carries liability insurance.

V E 2 For Licensed Programs:

In Compliance means that the program meets all DCF/CDD regulations related to policies, required certifications, permits and business practices. Any deficiencies have been remedied and any required corrective action has been completed.

1 Point:

The program has an employee handbook detailing how professional development is supported and how Individual Professional Development Plans are incorporated into staff supervision. Staff members have opportunities to refine their skills through a system of regular feedback and guidance. Also, the program's employee handbook details policies on hiring and firing, benefits, advancement, grievance, sexual harassment and reporting on child abuse or neglect.

2 Points:

The program adheres to all standards for one point (above) plus staff working five or more hours per shift have paid breaks within the scheduled work day. Staff members responsible for planning curriculum are given at least one hour per week of paid planning time. Also, all program staff receive at least two of the following benefits: paid vacation, sick, personal or professional days.

3 Points:

The program adheres to all standards for two points (above) plus staff members are provided with written policies addressing a salary system that recognizes professional achievement. The median adjusted pay for all employees is at least 85% of Vermont's livable wage for a "single person without employer paid health benefits".

V E 3 For School-operated Pre-kindergarten Programs:

In Compliance means that the program meets all DCF/CDD and DOE regulations related to policies, required certifications, permits and business practices. Any deficiencies have been remedied and any required corrective action has been completed.

1 Point:

The teaching staff has a contract that includes terms of employment, access to benefits, and a salary scale. The staff supervision process is described and fully implemented. Staff is provided with information on policies related to sexual harassment.

2 Points:

The program adheres to all standards for one point (above) plus provides staff a description of their rights and grievance procedures.

3 Points:

The program adheres to all standards for two points (above) plus has an articulated and fully implemented process for staff supervision and professional development.

VI Financial Incentive and Maintenance Payments

VI A Incentives for Initial Achievement or Advancement of Stars

When a program initially achieves a star(s) or initially advances to a higher level of stars, the DCF may provide a one time financial incentive payment in an amount established at least annually by the DCF Commissioner. Initial incentive payments are subject to availability of funds and may otherwise be limited by these standards or by law.

VI B Incentives for Maintenance of Stars

When a program successfully maintains a star or stars level over time, the DCF may provide a financial maintenance incentive payment in an amount established at least annually by the DCF Commissioner. Maintenance incentive payments shall be subject to availability of funds and may otherwise be limited by these standards or by law. The Commissioner shall define annually the term “successive years” for purposes of maintenance incentive payments.

VI C Quality Factor Payments to STARS Participating Programs

When a program achieves a star level, the DCF may pay on behalf of an eligible child a quality factor amount above the CDD base payment. Such payments may be adjusted by the DCF Commissioner at least annually to coincide with available funding and may otherwise be limited by these standards or by law. Suspension, reduction or increase of these payments by the DCF Commissioner shall not require modification of these regulations through the rule-making process.

VI D Limits on Incentive Payments and Enhanced Rates

In the event that annual funds are insufficient to meet payment rates established at least annually by the DCF Commissioner, the Commissioner reserves the right to exercise discretion and limit or suspend award of one time financial incentive payments, maintenance incentive payments and enhanced rates otherwise payable under this program. If limitation or suspension of payments is necessary due to lack of funds, maintenance payments shall be limited or suspended before one time incentive payments.

The DCF Commissioner shall make reasonable efforts to notify any pending and prospective applicants prior to limitation or suspension of incentive payments and/or enhanced rates due to the lack of funding.

Financial incentives, including enhanced rates, awarded under this program are subject to re-payment if awarded in error or due to applicant fraud or misrepresentation. Financial incentives awarded under this program are subject to garnishment, recoupment, other attachment or legal remedy pursued by DCF, the State of Vermont, or as otherwise authorized by law.

VII Falsification of Information

An applicant or STARS participant who has interfered with, impeded, deterred, provided false information to or in any manner hindered the DCF or its agents in investigation or inspection of a regulated facility or program, or in the validation of a STARS application, shall not be eligible for participation in STARS for a period of at least three years.

Concern about misrepresentation or false information made on a STARS application may be referred to the CDD or DOE for investigation.

VIII Grievances

Applicants or program participants have the right to appeal rejection of their application materials or other adverse decision related to the STARS program, such as the suspension or revocation of a STARS certificate in connection with enforcement of licensing regulations, subsidy regulations or these standards.

Appeals must be in writing and received by the DCF Commissioner within 30 days of the date of rejection or other adverse decision. If the appeal is from a school-operated pre-kindergarten program, the Commissioner of the Department of Education shall join the Commissioner of the Department for Children and Families in deciding the appeal.

The applicant or grievant shall have the opportunity to present the appeal to a STARS grievance committee. The committee shall be appointed by the Commissioner(s), consist of at least three members including one from the regulated provider community, and provide the Commissioner(s) with a recommendation. The Commissioner(s) shall make a final decision on the grievance and provide the grievant with a written decision. The grievant may appeal the final decision of the Commissioner(s) to the Human Services Board within thirty days of the date of the final decision.

Financial incentives shall not be paid while an appeal is pending. If a successful final appeal results in a determination that a STARS program participant is due a financial incentive or maintenance payment, DCF will award payment in full within 60 days.

IX Effective Date

These rules shall become effective on January 3, 2010. Providers shall have a two year transition period during which they shall have the option to apply for or renew their stars participation under these new rules or under the procedures used prior to the adaptation of these rules. Beginning on January 3, 2012, all new star applications and renewals shall comply with these rules.

APPENDIX C**No. 104. An act relating to the building bright futures council.**

(S.268)

It is hereby enacted by the General Assembly of the State of Vermont:

Sec. 1. FINDINGS

The general assembly finds that:

(1) While Vermont has a wide range of high-quality programs for families and young children, a report issued by the Smart Start National Technical Assistance Center states, “Vermont’s early childhood system might be best described as many diverse patches, or pieces, ready to be linked and sewn together into a New England patchwork quilt.”

(2) In order to address issues of overlap and fragmentation, program accountability, and equitable access to services across the state, engaged community members, policy-makers, early childhood service providers, and advocates agree that there is a need for a comprehensive and integrated system for all children below the age of six and their families in Vermont who are in need of and desiring such services.

(3) Research shows that a child’s “environment of relationships” has a critical impact on developing brain architecture during the first months and years of life.

(4) There are approximately 39,000 children under the age of six in Vermont, including over 5,500 in poverty, 11,000 living in single-parent households, 20,489 living in two-parent households with both parents in the

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labor force, and approximately 1,300 young children with developmental delays.

(5) An estimated 23,000 children under the age of six are enrolled full- or part-time in over 1,900 registered or licensed child care programs funded by a combination of parent fees and public dollars such as the Child Care Financial Assistance Program and the Education Fund. Programs that receive no public funds generally have little to no formal connection to an overall early childhood system with established goals and policies for addressing the needs of young children.

(6) In addition to the care by their parents and families, thousands of Vermont children from a range of socioeconomic backgrounds receive services, support, or both from state, federal, and private programs. Many children are served by multiple programs with no mechanism in place to ensure a holistic, family-centered approach to service delivery. Early childhood services are important to the economic well-being of families throughout the state. They have a positive impact on the state's labor supply and influence the overall economic competitiveness of the state.

(7) Section 642B of the federal Improving Head Start for School Readiness Act of 2007 mandates that the governor “designate or establish a council to serve as the State Advisory Council on Early Childhood Education and Care for children from birth to school entry, and the Governor may

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designate an existing entity in the State to serve as the State Advisory Council.” The governor has designated the building bright futures state council as Vermont’s entity.

(8) In November 2009, the building bright futures state council adopted a conceptual framework based on the work of Dr. Jack Shonkoff, a Harvard University professor and one of the nation’s foremost experts on early childhood learning.

Sec. 2. 33 V.S.A. chapter 46 is added to read:

CHAPTER 46. BUILDING BRIGHT FUTURES COUNCIL

§ 4601. DEFINITIONS

As used in this chapter:

(1) “Early care, health, and education” means all services provided to families expecting a child and to children up to the age of six, including child care, family support, early education, mental and physical health services, nutrition services, and disability services.

(2) “Regional council” means a regional entity linked to the state building bright futures council to support the creation of an integrated system of early care, health, and education at the local level.

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§ 4602. BUILDING BRIGHT FUTURES COUNCIL

(a) The building bright futures program shall be governed by a statewide council comprising no more than 23 members. The building bright futures council's membership shall be as follows:

- (1) the secretary of human services or designee;
- (2) the secretary of commerce and community development or designee;
- (3) the commissioner of education;
- (4) the commissioner for children and families;
- (5) the commissioner of health;
- (6) the commissioner of mental health;
- (7) two members of the house of representatives, appointed by the speaker of the house;
- (8) at least one but no more than two members of the senate, appointed by the senate committee on committees;
- (9) the Head Start collaboration office director; and
- (10) 12 at-large members selected on the basis of their commitment to early childhood well-being and representing a range of perspectives and geographic diversity. One of the at-large members shall be a representative of a local Head Start program and one shall be a member of a school board, to be chosen by the Vermont school boards association.

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(b) In the event of a vacancy in one of the at-large member positions on the council, the remaining members shall endeavor to fill the vacancy with an individual representing a perspective or geographic area not currently represented on the council.

(c) Technical assistance to the council shall be provided by staff within the departments of health, of education, and for children and families.

(d) For council meetings held when the general assembly is not in session, the legislative members of the council shall be entitled to per diem compensation and reimbursement of expenses in accordance with section 406 of Title 2. Members of the council who are not state employees or whose participation is not supported through their employment or association may be entitled to compensation and reimbursement for expenses for attending meetings of the council under section 1010 of Title 32 to the extent funds are available.

(e) The council shall function as a public-private partnership with the ability to raise and disburse funds.

(f) The council shall support the establishment of, and maintenance of relationships with, regional councils providing regional capacity to further the council's goals.

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§ 4603. POWERS AND DUTIES

The council established by section 4602 of this title shall have the following powers and duties necessary and appropriate to effectuating the purposes of this chapter:

(1) Advise the administration and general assembly on the status and needs of the early care, health, and education system by conducting a review of the status of young children in Vermont and the care, health, and education services and systems that support them.

(2) Monitor overall system performance by regularly tracking and reporting system data on the well-being of young children and the performance of the system of care related to the council's commitments to children and selected indicators.

(3) Develop an early care, health, and education system plan for Vermont to serve as the basis for policy and funding recommendations.

(4) Review and formulate recommendations for amendments or revisions to policies, rules, or regulations that may impede the ability to address state and local priorities and the ability to ensure system effectiveness.

(5) Work with the secretaries of human services and of commerce and community development and the commissioner of education to ensure the coordination of existing budgets and policies that affect the care, health, and education of young children.

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(6) Identify and reduce duplication of services and of administrative approval processes and improve coordination across agencies.

(7) Work with the agencies of human services and of commerce and community development, the department of education, and the regional councils to coordinate and integrate the development of an early childhood budget that reflects alignment of funding with priorities identified in the system plan.

(8) Support the regional councils in their efforts to coordinate and implement services in accordance with identified priorities in system and regional plans.

(9) Contract with state agencies and departments to deliver services as agreed upon.

(10) Pursue and accept funding from diverse sources outside of state government to sustain, expand, and enhance the early care, health, and education system according to the early care, health, and education system plan.

(11) Disburse funds raised through fund development activities in accordance with priorities defined in the system plan.

(12) Convene members of the child care community, medical community, education community, and other organizations, as well as state

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agencies serving young children, to ensure that families receive quality services in the most efficient and cost-effective manner.

(13) Select the key indicators to be tracked in early childhood and identify priority strategies to improve outcomes.

(14) Ensure children from birth to six years of age are included in statistical data systems developed by the department of education and other state agencies and that all such systems are interoperable.

(15) Analyze data to assess progress in achieving outcomes consistent with No. 68 of the Acts of the 2009 Adj. Sess. (2010) and make recommendations for any necessary adjustments.

(16) Report to the governor and the legislative committees of jurisdiction during the first month of each legislative biennium on the council's findings and recommendations, progress toward outcomes consistent with No. 68 of the Acts of the 2009 Adj. Sess. (2010), and recommendations for priorities for the biennium.

§ 4604. LIMITATION OF SCOPE

Nothing in this chapter shall be construed to supersede or usurp the statutory powers or authority of any state agency or department or any school district.

No. 104

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Sec. 3. COMPOSITION OF COUNCIL

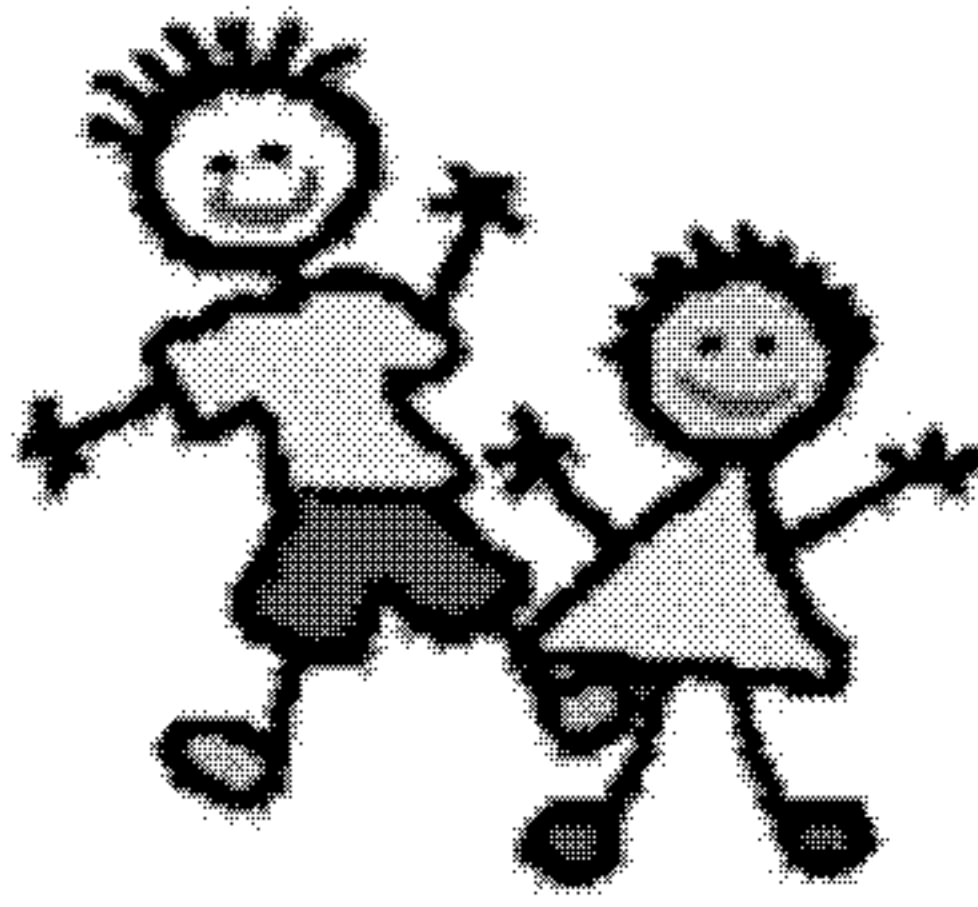
The members of the building bright futures council serving as of the effective date of this act shall continue to serve on the council after that date and shall adopt bylaws detailing the council's governance and procedures.

Sec. 4. EFFECTIVE DATE

This act shall take effect upon passage.

Approved: May 12, 2010

APPENDIX D



Building Bright Futures Facilities Fund
c/o Vermont Community Loan Fund
 PO Box 827
 Montpelier, VT 05601
 (802) 223-1448
www.investinvermont.org

Background

In 2001, the Building Bright Futures (BBF) License Plate and Facility Fund were created to assist new and existing child care and youth programs to expand the supply and improve the quality of care available to Vermont families. It enables programs to start, relocate, expand, or make improvements to their physical space.

Importance to Vermont's Child Care Industry, Children and Families

Building Bright Futures directly and effectively enhances the quality of child care in Vermont. The physical space in which our child care programs serve children is a central part of the quality equation.

Child care and youth programs often accept extraordinarily low facility and equipment standards and end up in structures designed for other uses (i.e. church basements). Yet to operate optimally and provide high-quality care, most programs need to reconfigure the space or change fittings and furnishings to meet the unique needs of those served. High-quality facilities also allow more staff interaction with children, add to the number of children or youth served, and contribute to staff retention.

Over 3,500 children have benefited from this initiative. To date, Building Bright Futures has made grants totaling more than \$800,000 to 66 child care programs and 3 programs serving youth. BBF grants have leveraged over \$30 million in additional project funding.

Funding

Building Bright Futures Fund is a grant resource that's financed by 3 sources:

1. a premium from each BBF License Plate registration;
2. appropriations from the Vermont Legislature; and
3. contributions from the general public.

For Building Bright Futures to have the social impacts and greatest success we all want to see, it's crucial that all three of these sources continue to provide financial support.


It was never expected that BBF License Plate registrations alone would fund the project. The Plates were meant largely to create public awareness and interest for BBF, and to provide one of several streams of money to adequately address the capital needs of early care and youth programs. More than 2,000 BBF Plates have been registered to date, generating about \$20,000 annually for youth and child care facilities.

The annual Legislative appropriation was to be the vehicle by which the state would contribute to early education/child care and youth facilities, working as a trigger to leverage far greater amounts. Without the annual Legislative appropriation to support Building Bright Futures, the majority of these of these projects likely would not have happened. Even with the appropriations, the need was so great that BBF is only able to fund less than 10% of projects that qualified for support in the most recent grant round.

Building Bright Futures provides critical support to Vermont's hard-working, quality-driven child care industry.

APPENDIX E

<p>What is STARS? STARS stands for the Step Ahead Recognition System. It is Vermont's system for recognizing and improving quality in:</p> <ul style="list-style-type: none"> Registered child care homes; Licensed family child care homes; Licensed early childhood programs; Licensed school-age care programs; Preschool (PreK) programs that receive public education funding; Non-recurring child care programs (i.e., child care at ski resorts); and Head Start and Early Head Start programs. 	<p>What do the points mean? Programs are awarded 1 to 5 stars, based on the total number of points earned.</p> <p>1-4 points = ★ 5-8 points = ★★ 9-11 points = ★★★ 12-14 points = ★★★★ 15-17 points = ★★★★★</p>	<p>Do programs have to participate in STARS? According to Vermont statute, programs that receive public education funding for preschool age children <i>must</i>:</p> <ol style="list-style-type: none"> Be nationally accredited; Have 4 or 5 stars; OR Have a plan in place to achieve 4 or 5 stars. <p>While other programs are not required to participate in STARS to become licensed or registered, participation has benefits for both parents and programs.</p>	<p>How does STARS benefit programs? Programs that participate in STARS get:</p> <ul style="list-style-type: none"> A higher reimbursement rate from the Child Care Financial Assistance Program (5% to 40% above base rate) based on the number of stars earned; Bonus payment for each level achieved ranging from \$250 to \$1,500; Help promoting their participation in STARS (e.g., listing on the STARS website, supply of STARS brochures, and a customized press release); The opportunity to apply for grants open only to programs that have stars or national accreditation; Discounts from some companies.
<p>How does it work? Programs may apply for recognition in five areas:</p> <ol style="list-style-type: none"> Regulatory history; Staff qualifications; Families and communities; Program practices; and Administration. <p>Programs can earn up to 5 points in program practices and up to 3 points in all other areas, for a total of up to 17 points.</p>	<p>One-star programs may be just starting on a path to improvement or may be stronger in one area.</p> <p>Two-star programs may have made some progress in many areas or more progress in one or three areas.</p> <p>Three-star programs have either made substantial progress in two or three areas or some improvements in all five.</p> <p>Four-star programs have documented quality in all five areas. Many are also nationally accredited.</p> <p>Five-star programs are outstanding in all five areas. Many are also nationally accredited.</p>	<p>How does STARS benefit me as a parent?</p> <ul style="list-style-type: none"> STARS can help you find a quality program for your child. You may pay less for child care if you receive child care financial assistance AND use a program that has stars. This is because the Child Development Division pays a higher rate to programs with stars. <i>Note: Financial assistance payments are made directly to providers.</i> You may qualify for a tax credit on your Vermont state income tax if you meet income guidelines AND use a program that has 3, 4, or 5 stars. 	<p>(b)(6)</p> <p>STARS builds confidence for you to try something new and to not be afraid. - Center Director</p>

<p>For Programs</p> <p>Who can apply? All programs registered or licensed with the Child Development Division may apply. However, programs need to be in regulatory compliance before applying.</p> <p>When should we apply? You may apply at any time. STARS is meant to begin where you are and help your program improve over time.</p> <p>How do we apply? You can either:</p> <ul style="list-style-type: none"> Download a STARS application at dcf.vermont.gov/cdd/stars or Contact the coordinators at (802)398-2037 or STARS@myvervt.org to request an application by mail. <p>You may apply for recognition in five areas: regulatory history, staff qualifications, families & communities, program practices, and administration.</p> <p>Certificates are good for three years. An annual report is required.</p> <p><i>"This is a wonderful way for providers to get recognized for their commitment in the field." - Registered Provider</i></p>	<p>For Parents</p> <p>What if my program is accredited? There is a streamlined application for:</p> <ul style="list-style-type: none"> Nationally accredited programs. These programs have already gone through an accreditation process and earned an accreditation certificate. Head Start programs that are in high compliance with national Head Start performance standards. <p>Is help available? Yes. Technical assistance is available. Contact a STARS coordinator at (802) 398-2037 or STARS@myvervt.org. The coordinator can explain how the program works and what you need to include with your application. You'll continue to have access to technical assistance after you have achieved a star level.</p>	<p>How can STARS help me find a program? Choosing the right program for your child is one of the most important decisions you'll face as a parent. STARS can help!</p> <p>STARS can make it easier for you to find a quality program for your child. STARS recognized programs have demonstrated their commitment to quality care and education. The more stars a program has, the more involved it is in a wide range of practices that support children, families, and professionals.</p> <p>How do I find STARS programs? Go to dcf.vermont.gov/cdd/stars or call the Child Development Division (CDD) at 1-800-643-2642.</p>	<p>(b)(6)</p> <p>STARS Information for Parents & Programs</p> <p> VERMONT AGENCY OF HUMAN SERVICES DEPARTMENT FOR CHILDREN & FAMILIES</p> <p>© Child Development Division</p>
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APPENDIX F**Vision:**

All Vermonters will live in communities that enable them to make healthy food choices and lead physically active lives.

Mission:

Statewide partners work together to encourage lifelong healthy eating and physical activity by:

- Developing community partnerships.
- Planning, implementing, and evaluating targeted interventions.
- Implementing policy and environmental changes.

Outcome objectives:

- Decrease prevalence of obesity.
- Increase physical activity.
- Improve dietary behaviors related to the burden of obesity and chronic diseases.

Impact objectives:

- Increase the number, reach, and quality of policies and standards set in place to support healthful eating and physical activity in various settings.
- Increase access and use of environments to support healthful eating and physical activity in various settings.
- Increase the number, reach and quality of social and behavioral approaches that complement policy and environmental strategies to promote healthful eating and physical activity.

AGENCIES AND ORGANIZATIONS

Agencies and organizations include local governments, health and human service agencies, and community organizations that focus on the health of populations. Agencies have the ability to establish policies and programs that support and promote positive behaviors, and reduce health disparities. Success requires collaborative efforts across multiple organizations.

Output Measure 1: Agencies and organizations will have collaborative agreements in place to meet the Fit and Healthy Vermonters objectives.

Strategies

- A. Collaboratively research, promote and implement evidence-based and existing best practice programs that facilitate healthful eating behaviors and regular physical activity across all age groups and populations.
- B. Create common messages for nutrition and physical activity that can be used in multiple programs across all age groups and populations.
- C. Commit public and private resources (funds and in-kind) to promote messages and services in multiple outlets addressing all other focus areas.
- D. Recognize, facilitate and support local and regional networks in Vermont communities working to address nutrition and physical activity.

Output Measure 2: Vermont agencies and organizations will provide leadership, active involvement and commitment to meet the Fit & Healthy Vermonters objectives within their own network and with their external partners.

Strategies

- A. Maintain and enhance the strength of coalitions working to promote nutrition and physical activity strategies. e.g., Farm to School Network, Governor's Council on Physical Fitness and Sports and State Nutrition Action Plan Committee
 - B. Ensure that obesity prevention is a priority in efforts to reach underserved populations e.g., work to reduce food insecurity, strengthen the local food system, and increase participation in and access to school meals
 - C. Public organizations will lead by example, with internal policies and practices that promote healthful nutrition and physical activity.
 - D. Create a public policy work group to coordinate and orchestrate legislative efforts.
-

HEALTH CARE

The health care sector is where access and delivery of services are controlled and health policies are established. It is a complex and broad system providing health care at the primary, secondary and tertiary levels.

Output Measure 1: Quality improvement measures will include evidence-based assessments and interventions to reduce the proportion of people who are obese.

Strategies

- A. Identify and disseminate evidence-based practices that meet quality assurance criteria.
- B. Insurers reimburse health care providers for calculating Body Mass Index (BMI), assessing health risks associated with overweight and obesity and counseling patients for weight management.
- C. Insurers and accrediting organizations provide incentives for including screening and obesity-preventive services in clinical practice and quality assessment measures.
- D. Insurers reimburse for management and follow up of obesity assessments, (BMI measurement, co-morbid conditions, and motivational level).
- E. Insurers will reimburse for nutrition counseling by state-certified dietitians, and evidence-based interventions that support weight management across the life span.

Output Measure 2: Primary care providers (pediatricians, family practice and internal medicine), obstetrics and gynecology providers, and related health-care professionals including registered dietitians, routinely measure and record BMI and provide counseling and/or referral for patients.

Strategies

- A. Implement “Promoting Healthier Weight in Adult Primary Care” and “Promoting Healthier Weight in Pediatrics” tool kits with resources for obesity screening, and education on prevention, assessment, treatment and referral.
- B. As part of quality improvement health care providers will monitor the consistency of BMI measuring and documentation in medical records.
- C. Health care providers will monitor BMI and arrange planned interventions. These include contracts for behavior change and referrals to registered dietitians, or appropriate community programs for counseling and support.
- D. Health care providers will include mental health screening, including screening for anxiety, depression and eating disorders.
- E. Training programs and certifying entities will require obesity prevention knowledge and skills in their curricula and examinations.

COMMUNITIES

Communities are made up of the people, institutions, services, and physical environments that can promote and support health. Assessments, planning and policies can help create healthy communities that support healthy lifestyles by providing opportunities for physical activity and good nutrition.

Output Measure 1: Municipalities in Vermont will include language that supports access to physical activity and healthy eating in comprehensive plans, zoning and subdivision ordinances, and other transportation planning and design projects.

Strategies

- A. Disseminate best practice guidelines, to town officials, planning commissions and zoning boards, for planning and implementing strategies that provide opportunities for physical activity and healthy eating.
- B. Utilize Health Impact Assessments to identify opportunities to increase the availability of opportunities for physical activity and healthy eating in the built environment.
- C. Provide training and technical assistance to town officials, planning commissions and zoning boards on ways to increase opportunities for physical activity and healthy eating through healthy community design.
- D. State agencies collaborate to increase funding and resources for opportunities for physical activity and healthy eating.

Output Measure 2: Vermont will have regional partnerships in place working to implement and/or increase policies and standards to support healthy eating and active living in a variety of settings.

Strategies

- A. Cities and towns have organized coalitions of agency representatives and citizens working to implement programs based on evidence-based practices e.g., develop safe routes to school, or walking school bus (a chaperoned walk to school group).
 - B. Communities will implement the Centers for Disease Control and Prevention Recommended Community Strategies and Measurements to Prevent Obesity in the United States to create environments conducive to active living and healthy eating. E.g. increase access to affordable healthy food through grocery stores, farmers markets, and community gardens.
 - C. Communities will implement evidence based strategies that reduce health disparities and assure health equity for all Vermonters.
 - D. Cities and towns will actively work to implement state and local policies that support healthy eating and physical activity, such as Complete Streets.
 - E. Cities and towns work with Department of Health District Office Prevention Teams to implement best practices and environmental/policy changes to support healthy eating and physical activity.
-

WORK SITE

Work sites have the ability to implement policies that influence behavior change. Both large and small employers can play a role influencing employees and their families.

Output Measure 1: Work sites have policies in place to promote healthy behaviors.

Strategies

- A. Employers assure that cafeterias and vending machines offer healthy food choices, and implement a price structure and/or promotions that favor more nutritious foods.**
- B. Develop policies for incentives to participate in physical activity e.g., allow flex time for physical activity and incentives for active commuting.**
- C. Implement policies for food served and sold in meetings, conferences and at celebrations following the Vermont Healthy Eating Guidelines.**
- D. Self-insured employers work with health plans to include coverage for BMI assessment, and counseling about weight, nutrition and physical activity for all employees.**
- E. Work with health plans to discount premiums for employers offering health promotion programs.**

Output Measure 2: Work site environments support accomplishment of Fit and Healthy Vermonters objectives.

Strategies

- A. Increase the reach and utilization of Vermont’s Worksite Wellness Resource tool kit of successful strategies to create a healthy work environment. Recognize model employers through the annual Worksite Wellness Awards.**
 - B. Ensure that stairs are safe for regular use and include point of decision prompts that advise workers about the benefits of using the stairs instead of the elevators.**
 - C. Encourage employers to offer comprehensive health and safety programs, including on-site screening and education.**
 - D. Employers will encourage employees to commute on foot or by bicycle e.g., install secure bicycle parking, provide incentives to employees who commute by walking or bicycling.**
 - E. Employers have employee assistance programs that provide employees a confidential place to address issues that may impact their diet and exercise, including health screening and motivational counseling.**
-

SCHOOLS

Schools offer a unique opportunity to reach school-age children. Messages youth receive in school need to be reinforced by families and communities. By promoting a system of learning in an environment conducive to healthy choices, schools can influence choices students will maintain throughout their lives.

Output Measure 1: Increase the quality and reach of Vermont school nutrition and physical activity policies which incorporate Fit and Healthy Vermonter objectives.

Strategies

- A. Adopt the Vermont Nutrition and Fitness Policy Guidelines, best-practice guidelines for physical activity and nutrition, throughout the entire school environment, including before- and after-school programs.
- B. Develop and maintain coordinated school health teams to assess, develop, implement and evaluate policies related to nutrition and physical activity.
- C. Vermont Department of Health District Office School Liaisons work with schools on the development and implementation of schools wellness policies and best practices.
- D. Increase participation in the annual School Wellness Awards recognizing schools that are implementing model policies and practices.
- E. Propose legislation as needed to implement policy changes.

Output Measure 2: Vermont schools implement programs or services based on their written nutrition and physical activity policy.

Strategies

- A. Utilize assessment tools of healthy student behaviors related to obesity prevention to prioritize programs e.g., Vermont Youth Risk Behavior Survey and School Health Index.
- B. Hold regional trainings for school staff on strategies related to implementing components of their nutrition and physical-activity policy.
- C. Enhance health curricula to promote nutrition, physical activity, reduce sedentary behaviors, and improve energy balance. Health curricula will include a behavioral skills focus and be integrated across school curriculum e.g., include health education on safe walking or bicycling.
- D. Implement school-based physical education programs with a goal of 50% of physical education class time spent in moderate to vigorous physical activity.
- E. Increase adoption of nutrition and physical activity programs that connect the community, and classroom e.g., Farm to School, and Safe Routes to School.

Output Measure 3: Vermont schools work with external partners to increase opportunities for nutrition and physical activity.

Strategies

- A. Work with health care providers and parents to assure that all children have a medical home for health care services and are seen for routine health screenings.

- B. Work with the community to provide students with safe ways to walk or bicycle to school including building schools within walking and bicycling distance of the neighborhoods they serve.
- C. Communicate with parents about healthy behaviors at home that support health education and messages taught in school.
- D. Make school facilities available to community members after school and on weekends for recreation through Joint Use Agreements.

CHILD CARE

The early years are a formative time in a child's growth and development. Behaviors established in childhood are often carried through to adulthood making this an ideal opportunity to establish healthy preferences. Behaviors modeled in childcare settings should be replicated at home.

Output Measure 1: All Vermont regulated childcare providers and early child care professionals will have nutrition and physical activity policies in place following evidence based standards.

Strategies

- A. Use best-practice guidelines to assure standards are in place for physical activity, active play and all foods served or offered in childcare and education settings. E.g. inclusion of nutrition and physical activity standards in Vermont Childcare licensing regulations.
- B. Use existing standards and guidelines to conduct assessments to identify strengths and weaknesses and prioritize changes within childcare settings.
- C. Conduct regional trainings of childcare providers on best practices, standards and policy development, utilizing existing resources such as Community Child Care Support Agencies.

Output Measure 2: All Vermont regulated childcare providers and early care professionals will implement best practices based on the written policy standards.

Strategies

- A. Disseminate best-practice programs that early childcare providers can implement e.g. I am Moving I am Learning, CATCH Early Childhood.
- B. Provide tools to assess the nutrition and physical activity environments in order to identify program priorities e.g., Nutrition and Physical Activity Self Assessment for Child Care, (NAP SACC).
- C. Provide incentives to all providers who model nutrition and physical activity best practices. E.g., STARS Vermont's Step Ahead Recognition System, funding for equipment, or recognition for achievements through awards for meeting certain standards.

Output Measure 3: All Vermont regulated child care providers will have the skills necessary to provide a healthy nutrition and physical activity environment for all children.

Strategies

- A. Review and align curriculum standards and core competencies for early education professionals E.g. Vermont Early Learning Standards (VELS) with evidence based standards for nutrition and physical activity.
- B. Provide training, education and programs on developmentally and age-appropriate foods and physical-activity requirements. E.g. through Community Child Care Support Agencies, Northern Lights Career Development Center and Child and Adult Care Food Program trainings.
- C. Provide parents with tools to increase their ability to reinforce healthy behaviors taught in regulated childcare settings.
- D. Integrate breastfeeding as a curriculum component of health education in childcare e.g. Ten Steps to Breastfeeding Friendly Child Care Centers.

BREASTFEEDING

Scientific evidence is clear that breastfeeding, especially exclusive breastfeeding for the first 6 months of life, followed by breastfeeding into the toddler years, has a positive effect in reducing obesity and rates of chronic disease. Among full term infants, lack of breastfeeding is shown to increase risk of obesity and type 2 diabetes. Breastfeeding mothers have reduced risk of breast and ovarian cancer, diabetes, hypertension, and cardiovascular disease.

Exclusive breastfeeding is the normal and preferred practice for feeding infants up to six months, and part of a healthy diet for a year or longer. Implementation of evidence-based practices is necessary to support exclusive breastfeeding for mothers and babies in order to decrease childhood, adolescent and adult obesity rates.

Output Measure 1: Increase policies and practices to support breastfeeding in health care, community, workplaces, and learning and child care settings.

Health Care Strategies: Health care, community, workplaces, and learning and childcare settings implement evidence-based practices, and policies that support breastfeeding.

- A. Provide coverage for lactation education and support services in standard, reimbursable perinatal care services, including International Board Certified Lactation Consultants (IBCLC).
- B. Create financially supported, walk-in breastfeeding clinics available to all new mothers in the community, staffed by International Board Certified Lactation Consultants (IBCLC) and other specialists in lactation medicine.
- C. Integrate lactation support services with home visitation programs to ensure that lactation problems are identified early and that mothers are referred for appropriate help and services.

- D. Require health plans to include prenatal classes on breastfeeding to all their members including online, web-based teaching resources for mothers and their partners.**

Community Strategies: Increase peer counseling programs.

- A. Expand peer counseling programs to all WIC district offices.**
- B. Increase access to peer counseling services women not eligible for WIC in addition to services offered to WIC participants.**
- C. Improve the quality of existing peer counseling services through increased contact hours, enhanced training and earlier prenatal visits.**
- D. Ensure and pay for the support and clinical supervision of peer counselors by an IBCLC.**

Workplace Strategies: Increase the percentage of employers who have worksite lactation programs.

- A. Establish a model lactation support program for all state employees.**
- B. Promote work site recognition programs to honor employers who support employees who breastfeed.**

Output Measure 2: Increase the number of 10 Step compliant or designated Baby-friendly hospitals.

Strategies

- A. Examine Vermont regulations for maternity facilities and evaluate their evidence base; revise if necessary.**
- B. Increase hospital staff participation in 20-hour training courses in breastfeeding and assure that maternity services are improved in all Vermont birthing hospitals to include evidence-based care that supports optimal infant feeding practices including breastfeeding.**
- C. Establish links between maternity facilities and community breastfeeding support networks.**
- D. Integrate maternity care into related Quality Improvement efforts including: consistent delivery of optimal care, improving patient flow, improving patient experience & loyalty, engaging physicians in a shared quality agenda, increasing staff efficiency; optimizing hospital-to-home transitions.**
- E. Include exclusive breastfeeding at hospital discharge as a quality improvement measure, utilizing the Joint Commission's Perinatal Care Core Measure set.**

SOCIAL AND BEHAVIORAL

Obesity prevention requires strategies that reflect influences on individual and family behaviors. Strategies must promote and support informed decision making and individual-based action. To effectively manage their health, individuals and families must be fully informed and have the skills to undertake lifestyle changes to prevent disease. Social relationships have a strong influence over individual behavior choices. Creating social networks that support healthy behaviors will help individuals to be successful. Communities provide a network of naturally occurring relationships between individuals, organizations, and families, providing a social identity that supports attitudes and behavior about health.

Output Measure 1: Increase individuals' and families' exposure to messages and tools that increase knowledge and skills for healthy eating and physical activity.

Strategies

- A. Develop marketing efforts that encourage individuals and families to increase healthy eating and physical activity, utilizing common messages developed by consumers.
- B. Increase the number of grocery stores, restaurants and fast food establishments that provide "point-of-purchase" information promoting the dietary guidelines.
- C. Support and/or expand programs that increase access and opportunities for physical activity and healthy eating e.g., Farm to Family coupons
- D. Conduct programs, challenges and events that encourage healthy behaviors e.g., Get Moving Vermont.
- E. Identify and implement strategies to engage parents to reinforce the messages and skills learned in schools, child care and health care.

Output Measure 2: Community organizations including faith based organizations, non-profit organizations and social clubs, provide support to members to increase healthy behaviors.

Strategies

- A. Community organizations ensure healthy food options are available at functions whenever food is served or sold.
- B. Organizations develop social support groups for members e.g., peer led walking groups
- C. Community organizations integrate the use of health messages into existing programs to increase healthy behaviors.
- D. Community organizations offer programs, services and resources for healthy behavior change, e.g. invite speakers, hold workshops, offer dance classes and dances and encourage other creative activities.

APPENDIX G

SUPPORTING CHILDREN WITH DISABILITIES AND THEIR FAMILIES

AN INTERAGENCY
AGREEMENT AMONG
EARLY CARE, HEALTH AND
EDUCATION PROGRAMS AND
AGENCIES IN VERMONT

2010

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PREVIOUSLY ISSUED: 1987, 1994, 1999, 2005

STATEMENT OF PURPOSE

THIS DOCUMENT ADVANCES THE GOALS OF BUILDING BRIGHT FUTURES, VERMONT'S OVERALL APPROACH TO SUPPORTING CHILDREN PRENATALLY THROUGH AGE SIX TO ASSURE THAT THEY ARE SAFE, HEALTHY AND SUCCESSFUL. TO THAT END, WE WILL BUILD AND COORDINATE A SYSTEM OF QUALITY SUPPORTS FOR YOUNG CHILDREN AND THEIR FAMILIES. AS A CRITICAL ELEMENT OF THAT SYSTEM OF SUPPORT, THIS DOCUMENT SERVES AS A GUIDE AND COMMITMENT TO SERVING CHILDREN WITH DISABILITIES AND THEIR FAMILIES.

THE PURPOSE OF THIS AGREEMENT IS TO ENSURE COORDINATION AND COLLABORATION AMONG VERMONT'S EARLY CARE, HEALTH AND EDUCATION PROGRAMS. THE VERMONT HEAD START STATE COLLABORATION OFFICE (VHSSCO) UPDATES THIS AGREEMENT ON BEHALF OF THE HEAD START/EARLY HEAD START PROGRAMS TO ENSURE THEIR COMPLIANCE WITH FEDERAL HEAD START PERFORMANCE STANDARDS.

THE ENDORSING PARTIES AGREE TO USE THE DOCUMENT TO ENSURE THAT HIGH-QUALITY EARLY CARE, HEALTH AND EDUCATION OPTIONS ARE AVAILABLE FOR ALL ELIGIBLE YOUNG CHILDREN AND THEIR FAMILIES.

THIS DOCUMENT IS INTENDED TO BE USED AS A GUIDE FOR STATE-LEVEL COORDINATION FOR DEVELOPING REGIONAL AND LOCAL AGREEMENTS, AND FOR STRENGTHENING RELATIONSHIPS BETWEEN AGENCIES AND PROGRAMS INVOLVED WITH YOUNG CHILDREN WITH DISABILITIES AND THEIR FAMILIES. THE DEVELOPERS OF THE AGREEMENT HAVE STRIVED TO USE LANGUAGE THAT IS CLEAR AND RESPECTFUL, AND THAT REFLECTS THE LEADERSHIP ROLE OF PARENTS OF CHILDREN WITH POTENTIAL OR ESTABLISHED DISABILITIES.

INTRODUCTION

THE 2010 EDITION OF *SUPPORTING CHILDREN WITH DISABILITIES AND THEIR FAMILIES* IS THE FOURTH UPDATE OF A STATEWIDE INTERAGENCY AGREEMENT FOR YOUNG CHILDREN WITH DISABILITIES IN VERMONT, AND SUPERSEDES EARLIER VERSIONS. PREVIOUS VERSIONS OF THE AGREEMENT WERE INITIATED BY THE VERMONT HEAD START STATE COLLABORATION OFFICE IN RESPONSE TO FEDERAL HEAD START REQUIREMENTS AND A COMMITMENT FROM OTHER STATE PARTNERS

TO ENSURE THAT SERVICES ARE OFFERED TO FAMILIES IN A COORDINATED, COLLABORATIVE FASHION IN LOCAL COMMUNITIES BASED ON A COMMON SET OF GUIDELINES.

THIS 2010 AGREEMENT REFLECTS THE CHANGES AND PROGRESS MADE IN VERMONT IN THE PAST FIVE YEARS TO INTEGRATE EARLY CHILDHOOD HEALTH, MENTAL HEALTH AND EARLY INTERVENTION SERVICES. THIS UNIQUE SERVICE DELIVERY MODEL IS NOW CALLED CHILDREN'S INTEGRATED SERVICES (CIS). THE CIS MODEL IS DESIGNED TO IMPROVE CHILD AND FAMILY OUTCOMES BY PROVIDING CLIENT CENTRIC, HOLISTIC SERVICES, EFFECTIVE SERVICE COORDINATION, FLEXIBLE FUNDING TO ADDRESS GAPS IN SERVICES, PREVENTION, EARLY INTERVENTION, HEALTH PROMOTION AND ACCOUNTABILITY.

IN THE PREVIOUS AGREEMENT (2005), EARLY CHILDHOOD HEALTH WAS KNOWN AS HEALTHY BABIES, KIDS AND FAMILIES (HBKF), EARLY CHILDHOOD MENTAL HEALTH WAS KNOWN AS CHILDREN'S UPSTREAM SERVICES (CUPS), AND EARLY INTERVENTION WAS KNOWN AS THE FAMILY, INFANT & TODDLER PROGRAM (FITP). THESE THREE SEPARATE STATE PROGRAMS HAVE NOW BEEN INTEGRATED INTO AN OVERALL APPROACH TO SERVICE DELIVERY CALLED CHILDREN'S INTEGRATED SERVICES. THE FORMER PROGRAM NAMES ARE NO LONGER USED IN THIS DOCUMENT. THESE SERVICES ARE REFERRED TO AS CHILDREN'S INTEGRATED SERVICES, AND ARE PART OF A CONTINUUM OF PREVENTION, EARLY INTERVENTION AND TREATMENT.

PRINCIPLES

WE RECOGNIZE THAT FAMILIES WITH CHILDREN WITH DISABILITIES HAVE ROUTINES, HOPES, DREAMS, AND NEEDS—JUST AS FAMILIES WITH CHILDREN WITHOUT DISABILITIES DO. IN FACT, THEIR ROUTINES, HOPES, DREAMS AND NEEDS ARE MORE ALIKE THAN THEY ARE DIFFERENT.

WE AGREE TO INFORM OURSELVES AND TO INFORM PARENTS OF THEIR LEGAL RIGHTS AS WE WORK TOGETHER TO COORDINATE AND/OR PROVIDE QUALITY EARLY CARE, HEALTH AND EDUCATION SERVICES. THESE RIGHTS ARE PRIMARILY BASED ON THE FOLLOWING LIST OF PRINCIPLES.

THESE PRINCIPLES WILL GUIDE THE PRACTICE OF ALL PARTIES TO THE AGREEMENT. FOR EXAMPLE: WHEN A PROGRAM IS PLANNING A PARENT INVOLVEMENT COMPONENT, IT WILL:

- ENSURE THAT THE PRACTICES ARE CENTERED ON THE FAMILY'S INTERESTS AND NEEDS, THAT THE SYSTEM IS ACCESSIBLE TO ALL FAMILIES,
- THAT RESOURCES ARE EQUITABLY DISTRIBUTED GEOGRAPHICALLY, ARE INCLUSIVE OF FAMILIES WITH DISABILITIES, AND ARE SENSITIVE AND A ENTIVE TO THE CULTURE OF THE FAMILY.

THE RIGHTS OF PARENTS AND THEIR CHILDREN WILL BE PROTECTED AS WE WORK TOGETHER TO COORDINATE AND/OR PROVIDE QUALITY EARLY CARE, HEALTH AND EDUCATION SERVICES.

IT IS INTENDED THAT THESE PRINCIPLES CHARACTERIZE THE INTERACTIONS OF ALL PARTIES TO THE AGREEMENT. THEY ARE FUNDAMENTAL IN GUIDING OUR WORK ON BEHALF OF CHILDREN AND FAMILIES AND IN RECOMMENDING CHANGES IN PRACTICE AND PROGRAM DESIGN.

WE BELIEVE:

FAMILY-CENTERED MEANS THAT WE VIEW CHILDREN IN THE CONTEXT OF THE ENTIRE FAMILY, AND WE VIEW THE FAMILY AS THE CENTER OF SERVICES AND SUPPORTS. THE BEST WAY TO MEET THE NEEDS OF INDIVIDUAL CHILDREN IS BY ADDRESSING THE NEEDS OF THE FAMILY. THE GOAL OF AGENCIES AND SERVICE PROVIDERS IS TO RECOGNIZE AND SUPPORT EACH FAMILY'S UNIQUE ACHIEVEMENTS AND GOALS AND THOSE OF THEIR CHILDREN. FAMILY-CENTERED SERVICES ARE BOTH A GOAL AND A PROCESS BY WHICH FAMILIES ARE SUPPORTED IN BEING ACTIVE PARTNERS IN PLANNING OUTCOMES AND

NECESSARY SERVICES THAT ADDRESS EACH CHILD'S NEEDS AND OVERALL FAMILY CONCERNS.

UNIVERSALLY DESIGNED SYSTEM MEANS THAT ALL CHILDREN AND FAMILIES HAVE EQUITABLE ACCESS TO AND MEANINGFUL PARTICIPATION IN SERVICES DELIVERED IN COMMUNITY-BASED SETTINGS.

EQUITABLE MEANS THAT QUALITY SERVICES AND RESOURCES DESIGNED FOR FAMILIES WITH YOUNG CHILDREN WITH DISABILITIES ARE AVAILABLE REGARDLESS OF WHERE THE FAMILY LIVES, THEIR SOCIAL OR ECONOMIC CLASS, OR THEIR KNOWLEDGE ABOUT HOW TO ACCESS INFORMATION.

STRENGTHS-BASED MEANS THAT WE IDENTIFY AND WORK WITH THE STRENGTHS AND CAPABILITIES OF FAMILIES TO HELP THEIR CHILD/REN. SUPPORTS AND SERVICES ARE RESPONSIVE TO AND BUILD UPON THESE STRENGTHS AND COMPETENCIES.

INCLUSIVE MEANS THAT YOUNG CHILDREN LEARN BEST WHEN PLACED IN GROUP SETTINGS WITH CHILDREN THEIR OWN AGE. CHILDREN BENEFIT FROM LEARNING AND DEVELOPING WITH OTHER CHILDREN WHO REPRESENT A WIDE RANGE OF ABILITIES AND BACKGROUNDS.

CULTURALLY COMPETENT MEANS THAT PROGRAMS AND STAFF ARE RESPONSIVE TO THE NEEDS OF INDIVIDUALS WITH DISABILITIES AND THE CHILD'S CULTURAL BACKGROUND AS DEFINED BY HIS/HER COMMUNITY, FAMILY HISTORY, AND FAMILY STRUCTURE.

DEVELOPMENTALLY APPROPRIATE MEANS THAT THE LEARNING WHICH TAKES PLACE FOR A CHILD OF ONE AGE OR SKILL LEVEL IS DISTINCT FROM THE LEARNING THAT TAKES PLACE FOR A CHILD OF ANOTHER AGE OR SKILL LEVEL.

UNDERSTANDABLE/USER-FRIENDLY MEANS THAT THE SERVICES, PROGRAMS AND RESOURCES MUST BE EASY TO ACCESS FOR ALL FAMILIES WITH YOUNG CHILDREN, AND THAT THE INFORMATION IS UNDERSTANDABLE AND PRESENTED IN FORMATS AND IN LANGUAGE THAT IS UNDERSTOOD BY ALL.

RESOURCE SHARING MEANS THAT THE COST OF RESOURCES AND SERVICES PROVIDED TO FAMILIES WITH CHILDREN WITH DISABILITIES IS A SHARED RESPONSIBILITY, AND SHOULD NOT PLACE AN UNDUE BURDEN ON COMMUNITIES AND/OR INDIVIDUAL PROGRAMS.

OUTCOME-BASED MEANS WE FOCUS ON THE RESULTS OR CONDITIONS OF WELL-BEING FOR CHILDREN, FAMILIES AND INDIVIDUALS. WE MEASURE OUR WORK AND ENGAGE IN CONTINUOUS IMPROVEMENT. SERVICES AND ACTIVITIES FOCUS ON THE RESULTS THAT FAMILIES, IN PARTNERSHIP WITH PROVIDERS, HOPE TO ACHIEVE.

COMMUNITY-BASED MEANS THAT SERVICES, PROGRAMS AND RESOURCES ARE BASED IN THE LOCAL COMMUNITIES WHERE YOUNG CHILDREN AND THEIR FAMILIES LIVE AND/OR SPEND A SIGNIFICANT PORTION OF EACH DAY.

COLLABORATION MEANS THAT IN ORDER TO BE RESPONSIVE TO THE WIDE RANGE OF NEEDS AND CONCERNS OF FAMILIES WITH YOUNG CHILDREN, WE CANNOT WORK ALONE. WHAT EACH OF US CONTRIBUTES HAS AN EFFECT UPON OTHER SERVICES, PROGRAMS AND RESOURCES.

CONFIDENTIALITY MEANS THAT FAMILIES CONTROL PERSONAL INFORMATION AND CAN RESTRICT ACCESS TO THIS INFORMATION CONSISTENT WITH FEDERAL AND STATE LAWS.

COMPREHENSIVE MEANS THAT SERVICES ARE PROVIDED AS PART OF A COORDINATED AND INTEGRATED EFFORT.

CONTINUITY OF CARE MEANS THAT WE RECOGNIZE HOW IMPORTANT CONSISTENT CAREGIVERS ARE FOR OPTIMAL CHILD DEVELOPMENT. NATIONAL RESEARCH CONFIRMS THAT CLOSENESS AND CONSISTENCY OF RELATIONSHIPS BETWEEN CHILDREN AND THEIR CAREGIVERS ARE CRITICAL FACTORS IN PREPARING CHILDREN FOR SCHOOL.

PRACTICES

THE FOLLOWING PRACTICES ARE GUIDED BY THE PRINCIPLES PREVIOUSLY DESCRIBED. THESE PRACTICES ARE STRATEGIC METHODS AND TECHNIQUES USED IN SUPPORTING CHILDREN WITH DISABILITIES AND THEIR FAMILIES. WE AGREE TO INFORM OURSELVES TO UNDERSTAND EACH OTHER'S PRACTICES, AND TO USE ALL OUR KNOWLEDGE, RESEARCH, EVIDENCE-BASED PRACTICE, EXPERIENCE AND AVAILABLE TECHNOLOGY. WE SHARE RESPONSIBILITY FOR IMPROVING OUR PRACTICES AS WE WORK TOGETHER TO COORDINATE AND/OR PROVIDE EARLY CARE, HEALTH AND EDUCATION SERVICES IN ORDER TO PROMOTE SUCCESS.

SPECIFIC TERMINOLOGY AND DESCRIPTIONS ARE CONSISTENT WITH, BUT ARE NOT LEGAL INTERPRETATIONS OF FEDERAL OR STATE RULES, REGULATIONS AND LAWS.

CHILD DEVELOPMENT

WE AGREE TO PROMOTE THE OVERALL DEVELOPMENT OF YOUNG CHILDREN WITH DISABILITIES, NOT ONLY IN THE AREA IN WHICH THEY HAVE SPECIAL NEED, BUT ACROSS ALL DEVELOPMENTAL DOMAINS, INCLUDING MOTOR, COMMUNICATION, SOCIAL/EMOTIONAL, COGNITIVE, AND ADAPTIVE, AND ACROSS A VARIETY OF SETTINGS.

PARENT INVOLVEMENT

WE RECOGNIZE THAT PARENTS AND GUARDIANS HAVE PRIMARY RESPONSIBILITY FOR THEIR CHILDREN AND ARE THEIR CHILDREN'S FIRST AND MOST IMPORTANT TEACHERS AND ADVOCATES. WE WILL PROVIDE FAMILIES WITH INFORMATION, RESOURCES, TRAINING, AND SUPPORT TO ASSIST THEM IN MAKING INFORMED DECISIONS THAT MEET THEIR NEEDS. WE ARE COMMITTED TO SUPPORTING THE LEADERSHIP ROLES OF PARENTS, GUARDIANS AND PRIMARY CAREGIVERS.

OUTREACH

WE WILL:

- UNDERSTAND AND SHARE INFORMATION ABOUT AVAILABLE SERVICES AND RESOURCES.
- INFORM FAMILIES ABOUT EARLY CARE, HEALTH AND EDUCATION SERVICES AND RESOURCES IN THEIR COMMUNITIES.
- PROMOTE PUBLIC AWARENESS OF ALL COMMUNITY RESOURCES AVAILABLE TO CHILDREN AND FAMILIES.
- ENSURE THAT FAMILIES HAVE ACCESS TO INFORMATION ABOUT HEALTH INSURANCE INCLUDING MEDICAID AND EARLY AND PERIODIC SCREENING, DIAGNOSIS AND TREATMENT (EPSDT).

OUTREACH/SCREENING

WE WILL:

- ESTABLISH AND COORDINATE CHILD-FIND ACTIVITIES FOR THE IDENTIFICATION OF CHILDREN WHO HAVE DISABILITIES OR ARE AT RISK OF DISABILITIES.
- PLAN AND CARRY OUT SHARED DEVELOPMENTAL AND HEALTH SCREENINGS IN OUR COMMUNITIES AND EXPLORE NEW OPPORTUNITIES FOR COLLABORATIVE SCREENINGS. IF SCREENINGS ARE CONDUCTED INDEPENDENTLY, RESULTS WILL BE SHARED WITH OTHER PROGRAMS AS

NEEDED WITH WRITTEN PARENTAL CONSENT.

MAKING REFERRALS

ANY CHILD WHO HAS OR MAY HAVE SPECIAL HEALTH NEEDS AND/OR DELAYS IN DEVELOPMENT SHOULD BE REFERRED TO THE CHILDREN'S INTEGRATED SERVICES (CIS) INTAKE TEAM (PRENATAL TO THREE) OR TO THE DEPARTMENT OF EDUCATION'S ESSENTIAL EARLY EDUCATION (3-5) PROGRAM WITH PARENTAL CONSENT. ADDITIONALLY, REFERRALS SHOULD BE MADE TO OTHER AGENCY OF HUMAN SERVICES RESOURCES THAT MAY BE NEEDED. (SEE CDD, DAIL, VDH IN GLOSSARY.)

WE WILL:

- MAKE REFERRALS TO NEEDED OR REQUESTED SERVICES WITH PARENTAL CONSENT.
- PROVIDE PARENTS WITH INFORMATION ABOUT THE PROGRAMS AND SERVICES TO WHICH THEY ARE BEING REFERRED.
- ACCEPT SELF-REFERRALS AND REFERRALS FROM PROVIDERS WITH PARENTAL CONSENT, UNDERSTANDING THAT A REFERRAL DOES NOT GUARANTEE ELIGIBILITY FOR A PROGRAM.
- NOTIFY THE REFERRAL SOURCE ABOUT THE STATUS OF REFERRALS.

INITIAL SCREENING & EVALUATION

ELIGIBILITY FOR SERVICES IS DETERMINED FOR DIFFERENT PROGRAMS IN A VARIETY OF WAYS. ONE WAY TO DETERMINE ELIGIBILITY IS THROUGH AN INITIAL SCREENING AND/OR EVALUATION. WE ENSURE THAT ONCE A REFERRAL IS RECEIVED, PROCEDURES FOR INITIAL SCREENING AND/OR EVALUATION TO DETERMINE ELIGIBILITY ARE CARRIED OUT BASED ON THE INDIVIDUAL PROGRAM'S REQUIREMENTS.

FOR EXAMPLE:

- CHILDREN'S INTEGRATED SERVICES/EARLY INTERVENTION (CIS/EI): IF AN INITIAL SCREENING DETERMINES A NEED FOR AN EVALUATION, CIS/EI WILL PROVIDE A MULTIDISCIPLINARY, ALL-DOMAIN ASSESSMENT. THIS EVALUATION MUST BE COMPLETED AND ELIGIBILITY DETERMINED WITHIN 45 CALENDAR DAYS OF REFERRAL.
- ESSENTIAL EARLY EDUCATION (EEE): AN INITIAL EVALUATION FOR EEE MUST BE COMPLETED WITHIN 60 CALENDAR DAYS OF PARENTAL CONSENT FOR THE EVALUATION. THE DECISION TO MOVE FORWARD WITH

- A COMPREHENSIVE EVALUATION OR BEGIN WITH AN INITIAL SCREENING PRIOR TO DETERMINING THE NEED FOR A COMPREHENSIVE EVALUATION RESTS WITH THE LOCAL EDUCATION AGENCY/SCHOOL DISTRICT.
- HEAD START: FOR EARLY HEAD START (EHS) AND HEAD START (HS) ENROLLED CHILDREN IN NEED OF EVALUATION, THE FIRST POINT OF REFERRAL IS EITHER CHILDREN'S INTEGRATED SERVICES OR ESSENTIAL EARLY EDUCATION. IF A PARENT REFUSES REFERRAL TO EITHER CIS OR EEE, HEAD START WILL CONTINUE TO WORK WITH THE FAMILY TO SEEK AN EVALUATION BY A QUALIFIED DIAGNOSTICIAN.

DEVELOPMENT AND IMPLEMENTATION OF CHILD AND FAMILY PLANS

- WE WILL ENSURE THAT PLANS ARE INTEGRATED TO THE DEGREE POSSIBLE. CIS AND HEAD START AGREE TO INTEGRATE PLANS FOR SHARED CHILDREN/FAMILIES.
- WE AGREE TO RECOGNIZE THE PRIMARY ROLE OF PARENTS/GUARDIANS IN THE DEVELOPMENT OF PLANS RELATED TO THE CHILD AND FAMILY'S GOALS, AND TO PROVIDE SUPPORT TO MAXIMIZE OPPORTUNITIES FOR FAMILY INVOLVEMENT IN THE PROCESS.
- WITH PARENT/GUARDIAN CONSENT, EARLY HEAD START AND HEAD START STAFF AND OTHER RELEVANT REPRESENTATIVES MAY PARTICIPATE IN THE DEVELOPMENT OF THE HEAD START ENROLLED CHILD'S INDIVIDUALIZED PLAN. SERVICE COORDINATORS AND/OR CASE MANAGERS WILL INVITE PROGRAM STAFF TO TEAM MEETINGS, AND WILL PROVIDE ADEQUATE NOTIFICATION OF MEETING DATE, TIME AND LOCATION. PROGRAM STAFF WILL PARTICIPATE IN THE DEVELOPMENT OF THE PLAN EITHER IN PERSON OR THROUGH OTHER MEANS.
- WE WILL ENSURE THAT THERE ARE MUTUALLY AGREED UPON TIMES TO SHARE INFORMATION, REPORT PROGRESS AND COORDINATE SERVICE DELIVERY WITH PARENTAL CONSENT. EVERY EFFORT WILL BE MADE TO ACCOMMODATE FAMILY SCHEDULES AND TO MEET IN HOMES OR OTHER NATURAL SETTINGS COMFORTABLE FOR PARENTS.
- USING A MULTIDISCIPLINARY ASSESSMENT, OBSERVATIONS AND OTHER RELEVANT INFORMATION, A CHILD'S CIS TEAM, WHICH INCLUDES THE FAMILY AND SERVICE PROVIDERS, DEVELOPS THE ONE PLAN. THE PLAN BUILDS ON THE STRENGTHS AND RESOURCES OF THE FAMILY AND INCLUDES HEALTH, MENTAL HEALTH AND WELL BEING, FAMILY SUPPORT AND SPECIALIZED INTERVENTION SERVICES NEEDED BY THE CHILD AND

FAMILY.

- WE WILL ENSURE THAT COPIES OF THE PLAN ARE PROVIDED TO STAFF FROM COLLABORATING AGENCIES IN A TIMELY MANNER WITH WRITTEN PARENTAL CONSENT.
- WE WILL IMPLEMENT SERVICES AND SUPPORTS IN NATURAL ENVIRONMENTS AND/OR INCLUSIVE SETTINGS IN ORDER TO ACHIEVE

OUTCOMES OF THE PLAN.

- WE AGREE TO INFORM FAMILIES THAT, FOR CHILDREN WITH A CIS/EARLY INTERVENTION PLAN, SERVICES ARE AVAILABLE YEAR-ROUND. EEE SERVICES ARE LIMITED TO THE SCHOOL YEAR UNLESS A CHILD QUALIFIES FOR EXTENDED-YEAR SERVICES. (SEE GLOSSARY)
- WHEN A HEAD START/EARLY HEAD START ENROLLED CHILD IS NOT ELIGIBLE FOR CIS EARLY INTERVENTION OR EEE, BUT IS STILL IN NEED OF SERVICES, OTHER PROVIDERS MAY CONTRIBUTE TO THE DEVELOPMENT OF A HEAD START GENERATED INDIVIDUAL CHILD SERVICE PLAN.

TRANSPORTATION

IF TRANSPORTATION IS A SERVICE IN A PLAN, IT MUST BE PROVIDED. SOME TRANSPORTATION MAY BE AVAILABLE THROUGH HEALTH INSURANCE (E.G. MEDICAID), PUBLIC SCHOOLS, PUBLIC TRANSPORTATION SYSTEM, ETC.

TECHNICAL ASSISTANCE SYSTEM/CONSULTATION

WE AGREE TO SUPPORT THE DEVELOPMENT OF A TECHNICAL ASSISTANCE AND CONSULTATION SYSTEM THAT BUILDS THE SKILLS OF FAMILIES AND PRACTITIONERS, AND INCLUDES PEOPLE AND RESOURCES REPRESENTING VARIOUS EARLY CARE, HEALTH AND EDUCATION DISCIPLINES AND EXPERTISE. THIS SYSTEM WILL SERVE MULTIPLE PURPOSES, INCLUDING MEETING THE SPECIFIC NEEDS OF INDIVIDUALS OR PROGRAMS; ASSURING PUBLIC POLICIES ARE IMPLEMENTED APPROPRIATELY AND EFFECTIVELY THROUGHOUT THE STATE; ASSISTING IN ADOPTING OR ADAPTING SPECIFIC INNOVATIONS OR PRACTICES; AND PROVIDING INFORMATION, TRAINING AND RESOURCES ON A TOPIC OR ISSUE.

CONSULTATION AND TECHNICAL ASSISTANCE SUPPORT SKILL BUILDING AMONG CAREGIVERS THAT CONTRIBUTES TO POSITIVE FUNCTIONING IN VARIOUS CHILD AND FAMILY ENVIRONMENTS. IT ALSO IMPROVES THE OVERALL QUALITY OF PROGRAMS AND THE PROGRAM STAFF WHO ARE RESPONSIVE TO CHILDREN'S

NEEDS AND SUPPORT THEIR HEALTHY DEVELOPMENT.

TRANSITION PLANNING

WE RECOGNIZE THE IMPORTANCE OF A CAREFULLY COORDINATED AND TIMELY TRANSITION FOR CHILDREN AND FAMILIES MOVING FROM ONE PLACEMENT TO ANOTHER. IT IS CRITICAL THAT FAMILIES BE FULLY INVOLVED IN THIS PROCESS AS WELL AS STAFF FROM THE CURRENT AND NEXT PLACEMENT. TRANSITION

PROCEDURES VARY FROM PROGRAM TO PROGRAM DEPENDING ON LOCAL POLICY AND THE INDIVIDUAL NEEDS OF CHILDREN AND FAMILIES.

WE AGREE TO SHARE THE RESPONSIBILITY FOR SMOOTHLY COORDINATED TRANSITION FROM ONE PROGRAM TO ANOTHER, AS REQUIRED BY LAW, FOR CHILDREN AND FAMILIES BY:

- ENSURING TIMELY TRANSITION PLANNING BEGINNING AT LEAST 3-6 MONTHS PRIOR TO TRANSITION,
- SHARING INFORMATION ABOUT INDIVIDUAL PROGRAM TRANSITION PROCEDURES WITH PARENTS AND COLLABORATING STAFF,
- SHARING INFORMATION ABOUT PROGRAM OPTIONS WITH PARENTS, AND
- TRANSFERRING RECORDS TO THE NEXT PLACEMENT WITH WRITTEN PARENTAL CONSENT.

OTHER RECOMMENDED PRACTICES MIGHT INCLUDE:

- ENSURING NEXT PLACEMENT ORIENTATION FOR FAMILIES,
- LINKING TRANSITIONING PARENTS WITH PARENTS WHO ARE FAMILIAR WITH THE TRANSITION PROCESS,
- OFFERING OPPORTUNITIES FOR THE CHILD TO EXPERIENCE AND BECOME COMFORTABLE WITH THE NEXT PLACEMENT,
- MEETING STAFF OF THE NEXT PLACEMENT, AND
- MEETING WITH PARENTS AND STAFF FROM ALL PROGRAMS TO ADDRESS CONCERNS AND DEVELOP AN EFFECTIVE TRANSITION PLAN.

PROFESSIONAL DEVELOPMENT

WE RECOGNIZE THE EXPERTISE OF STAFF AND PARENTS OF COLLABORATING PROGRAMS AND AGREE TO MAXIMIZE THESE RESOURCES WITH RECIPROCAL

TRAINING AND CONSULTATION. WE SEEK AND USE INFORMATION FROM THE NORTHERN LIGHTS CAREER DEVELOPMENT CENTER (NLCDC), VERMONT'S EARLY CHILDHOOD PROFESSIONAL DEVELOPMENT SYSTEM, AND THE BRIGHT FUTURES INFORMATION SYSTEM (BFIS) COURSE CALENDAR, CAREER PATHWAYS, CREDENTIALS AND CAREER ADVISING TO ENSURE PROFESSIONAL DEVELOPMENT OPPORTUNITIES THAT ARE INTEGRATED AND MEANINGFUL.

WE WILL SHARE RESPONSIBILITY FOR:

- PLANNING, FUNDING AND CONDUCTING JOINT IN-SERVICE AND ONGOING PROFESSIONAL DEVELOPMENT OPPORTUNITIES AT THE LOCAL, REGIONAL AND STATE LEVELS THAT ENABLE STAFF TO EARN CREDENTIALS AND RELEVANT CERTIFICATES,
- INFORMING PARTNER PROGRAMS ABOUT UPCOMING IN-SERVICE, TRAINING AND STAFF DEVELOPMENT OPPORTUNITIES.
- SEEKING AND SHARING OPPORTUNITIES TO ALIGN PROFESSIONAL DEVELOPMENT ACTIVITIES THAT ENABLE STAFF TO EARN CREDENTIALS (SUCH AS THE EARLY CHILDHOOD AND FAMILY MENTAL HEALTH CREDENTIAL) AND RELEVANT LEVEL CERTIFICATES.

PARTICIPATION WITH REGIONAL CHILDREN'S INTEGRATED SERVICES TEAMS AND REGIONAL BUILDING BRIGHT FUTURES COUNCILS

FOR THE PURPOSES OF SHARING INFORMATION AND COLLABORATIVE PLANNING AND PROBLEM-SOLVING, WE WILL PARTICIPATE IN THE ONGOING DEVELOPMENT AND EVALUATION OF THE EARLY CARE, HEALTH AND EDUCATION SYSTEM. WE WILL ENCOURAGE THE BROADER SYSTEM TO USE THE PRINCIPLES AND PRACTICES DESCRIBED IN THIS AGREEMENT.

AGREEMENT REVIEW

THE INTERAGENCY AGREEMENT AMONG EARLY CARE, HEALTH AND EDUCATION PROGRAMS AND AGENCIES IN VERMONT WILL BE REVIEWED AT LEAST EVERY THREE YEARS AND UPDATED AS NEEDED. IF IT IS NOT UPDATED DURING THAT TIME FRAME, THE CURRENT AGREEMENT WILL REMAIN IN EFFECT.

GLOSSARY

HEAD START AND EARLY HEAD START

HEAD START IS A COMPREHENSIVE CHILD AND FAMILY DEVELOPMENT PROGRAM AVAILABLE TO INCOME ELIGIBLE FAMILIES WITH PRESCHOOL CHILDREN AGE THREE TO FIVE. EARLY HEAD START SHARES THE HEAD START MISSION, BUT SERVES PREGNANT WOMEN AND FAMILIES WITH CHILDREN FROM BIRTH TO THREE YEARS. BOTH HEAD START AND EARLY HEAD START OPERATE IN ACCORDANCE WITH NATIONAL HEAD START PERFORMANCE STANDARDS AND THE 2007 HEAD START ACT. HEAD START SERVICES ARE AVAILABLE IN ALL COUNTIES. EARLY HEAD START SERVICES ARE AVAILABLE IN WASHINGTON, ORANGE, LAMOILLE, WINDHAM, CHI ENDEN, FRANKLIN/GRAND ISLE, ADDISON, CALEDONIA, ORLEANS AND ESSEX COUNTIES. FAMILIES CAN RECEIVE HEAD START SERVICES IN THEIR HOMES, IN HEAD START CENTERS, IN PUBLIC SCHOOLS, CHILD CARE CENTERS, COMMUNITY CENTERS, AND FAMILY CHILD CARE HOMES, ALTHOUGH NOT ALL SERVICE OPTIONS ARE AVAILABLE IN EACH COUNTY.

HEAD START INVOLVES PARENTS IN ALL ASPECTS OF THE PROGRAM, FROM INDIVIDUALIZING SERVICES FOR THEIR CHILDREN TO PROGRAM GOVERNANCE, AND IN PLANNING HOW SERVICES SUCH AS EDUCATION, TRAINING, HEALTH, NUTRITION, MENTAL HEALTH, DISABILITIES AND SOCIAL SERVICES WILL BE IMPLEMENTED.

HEAD START STAFF CONDUCT HEALTH, NUTRITION, AND DEVELOPMENTAL SCREENINGS FOR ALL ENROLLED CHILDREN AND REFER CHILDREN AS NEEDED TO APPROPRIATE RESOURCES FOR EVALUATION AND SERVICES. HEAD START WORKS IN PARTNERSHIP WITH A WIDE VARIETY OF OTHER EARLY CHILDHOOD PROGRAMS SUCH AS HUMAN SERVICE AGENCIES, CHILD CARE PROGRAMS AND SCHOOLS TO MEET THE NEEDS AND GOALS OF ENROLLED CHILDREN AND FAMILIES.

FOR MORE INFORMATION ABOUT HEAD START AND EARLY HEAD START VISIT THE VERMONT HEAD START ASSOCIATION WEBSITE AT [H P://VERMONTHEADSTART.ORG](http://vermontheadstart.org).

VERMONT DEPARTMENT FOR CHILDREN AND FAMILIES, CHILD DEVELOPMENT DIVISION (CDD)

THE CHILD DEVELOPMENT DIVISION'S GOAL IS TO INCREASE ACCESSIBILITY TO HIGH-QUALITY CHILD CARE AND CHILD DEVELOPMENT SERVICES. DIRECT SERVICES FOR CHILDREN AND FAMILIES INCLUDE REGULATING EARLY CHILDHOOD AND AFTERSCHOOL PROGRAMS; EARLY INTERVENTION SERVICES; INFORMATION, RESOURCE AND REFERRAL FOR FAMILIES; PARENT EDUCATION AND FAMILY SUPPORT SERVICES.

CDD PROVIDES TECHNICAL ASSISTANCE, PROFESSIONAL DEVELOPMENT AND MENTORING OPPORTUNITIES TO VERMONT'S EARLY CHILDHOOD AND AFTERSCHOOL WORKFORCE. CDD IS ALSO INVOLVED IN DEVELOPING EARLY CHILDHOOD AND AFTERSCHOOL SYSTEMS IN VERMONT.

INFORMATION ABOUT THE CDD AND THE CHILDREN'S INTEGRATED SERVICES PROGRAM IS AVAILABLE AT [HP://DCF.VERMONT.GOV/CDD](http://DCF.VERMONT.GOV/CDD).

CHILDREN'S INTEGRATED SERVICES (CIS)

CIS IS VERMONT'S UNIQUE MODEL FOR INTEGRATING EARLY CHILDHOOD HEALTH, MENTAL HEALTH, EARLY INTERVENTION SERVICES AND SPECIALIZED CHILD CARE SERVICES FOR PREGNANT WOMEN AND CHILDREN FROM BIRTH TO AGE SIX. THE MODEL IS DESIGNED TO IMPROVE CHILD AND FAMILY OUTCOMES BY PROVIDING FAMILY-CENTERED, HOLISTIC, PREVENTION, EARLY INTERVENTION, AND HEALTH PROMOTION SERVICES, EFFECTIVE SERVICE COORDINATION, AND FLEXIBLE FUNDING TO ADDRESS GAPS IN SERVICES.

FORMERLY KNOWN AS HEALTHY BABIES, KIDS AND FAMILIES (HBKF), NURSING AND FAMILY SUPPORT ACTIVITIES ARE FOCUSED ON PREVENTION AND EARLY INTERVENTION AND INCLUDE HEALTH EDUCATION AND COUNSELING, SCREENING AND ASSESSMENT, REFERRAL, ADVOCACY, RISK REDUCTION AND CASE MANAGEMENT. SERVICES ARE AVAILABLE TO PREGNANT AND POSTPARTUM WOMEN, AND INFANTS AND CHILDREN FROM BIRTH TO AGE FIVE WHO ARE ELIGIBLE FOR VERMONT'S DR. DYNASAUR INSURANCE.

FORMERLY KNOWN AS CHILDREN'S UPSTREAM SERVICES (CUPS), EARLY CHILDHOOD AND FAMILY MENTAL HEALTH PROMOTES HEALTHY SOCIAL AND

EMOTIONAL DEVELOPMENT FOR CHILDREN UP TO SIX YEARS OLD, THEIR FAMILIES, AND CHILD CARE PROGRAMS. THESE SERVICES INCLUDE INFORMATION

AND REFERRAL, DIRECT SERVICES WITH CHILDREN AND FAMILIES, PARENTING EDUCATION, AND TRAINING AND CONSULTATION FOR EARLY CARE, HEALTH AND EDUCATION PROVIDERS.

FORMERLY KNOWN AS THE FAMILY, INFANT AND TODDLER PROGRAM (FITP), EARLY INTERVENTION IS A FEDERALLY MANDATED (INDIVIDUALS WITH DISABILITIES EDUCATION ACT (IDEA)-PART C) SYSTEM OF INDIVIDUALIZED EARLY INTERVENTION SERVICES FOR YOUNG CHILDREN FROM BIRTH TO AGE THREE WITH, OR AT RISK OF, DEVELOPMENTAL DELAYS.

CIS COMBINES THESE THREE PREVENTION, EARLY INTERVENTION AND TREATMENT PROGRAMS INTO ONE CHILD DEVELOPMENT AND FAMILY SUPPORT SERVICES SYSTEM. THESE SERVICES ARE AVAILABLE STATEWIDE THROUGH MULTI-DISCIPLINARY CHILDREN'S INTEGRATED SERVICES TEAMS IN EACH OF THE TWELVE AGENCY OF HUMAN SERVICES REGIONS. THESE TEAMS PROVIDE A SINGLE POINT OF ACCESS TO A WIDE RANGE OF SERVICES THAT PROMOTE CHILDREN'S HEALTHY DEVELOPMENT AND ASSISTS FAMILIES TO PROMOTE THEIR CHILDREN'S DEVELOPMENT. THE MENU OF CIS SERVICES INCLUDES: SERVICE COORDINATION, HEALTH EDUCATION, CHILDBIRTH AND PARENTING EDUCATION, SPECIALIZED THERAPIES (E.G. SPEECH, PHYSICAL THERAPY, AUDIOLOGY, VISION, NUTRITION), CONSULTATION TO CHILD CARE, MEDICAL EVALUATION, MEDICAL SOCIAL WORK AND FAMILY SUPPORT.

THESE SERVICES RESULT IN POSITIVE OUTCOMES FOR PREGNANT AND POSTPARTUM WOMEN, CHILDREN BIRTH THROUGH AGE SIX, AND THEIR FAMILIES.

CHILDREN'S INTEGRATED SERVICES ONE PLAN

USING A MULTIDISCIPLINARY ASSESSMENT, OBSERVATIONS AND OTHER RELEVANT INFORMATION, A CHILD'S CIS TEAM, WHICH INCLUDES THE FAMILY AND SERVICE PROVIDERS, DEVELOPS THE ONE PLAN. THE PLAN BUILDS ON THE STRENGTHS AND RESOURCES OF THE FAMILY AND INCLUDES HEALTH, MENTAL HEALTH AND WELL BEING, FAMILY SUPPORT, SPECIALIZED CHILD CARE SERVICES AND SPECIALIZED INTERVENTION SERVICES NEEDED BY THE CHILD AND FAMILY.

VERMONT DEPARTMENT OF EDUCATION

THE VERMONT DEPARTMENT OF EDUCATION (DOE) IS COMMITTED TO HELPING STUDENTS, EDUCATORS, AND PUBLIC SCHOOLS MEET VERMONT'S HIGH STANDARDS. DOE OFFERS A WIDE VARIETY OF PROGRAMS AND SERVICES IN SUPPORT OF VERMONT'S STUDENTS, TEACHERS, EDUCATORS, ADMINISTRATORS, FAMILIES, AND COMMUNITY MEMBERS.

INFORMATION ABOUT DOE'S PROGRAMS AND SERVICES IS AVAILABLE AT [H P://EDUCATION.VERMONT.GOV](http://education.vermont.gov)

ESSENTIAL EARLY EDUCATION (EEE)

ESSENTIAL EARLY EDUCATION (EEE) IS VERMONT'S SYSTEM OF EARLY CHILDHOOD SPECIAL EDUCATION SERVICES FOR CHILDREN THREE TO SIX YEARS OLD WITH DISABILITIES.

EEE SERVICES MUST INCLUDE EARLY CHILDHOOD SPECIALIZED INSTRUCTION AND MAY INCLUDE RELATED SERVICES LIKE SPEECH AND LANGUAGE THERAPY, OCCUPATIONAL THERAPY AND PHYSICAL THERAPY THAT ARE PROVIDED BY LOCAL SCHOOL DISTRICTS TO CHILDREN AGED THREE TO FIVE WHO HAVE A DEVELOPMENTAL DELAY OR A MEDICAL CONDITION THAT MAY RESULT IN SIGNIFICANT DELAYS BY THE TIME THE CHILD ENROLLS IN ELEMENTARY SCHOOL. SERVICES ARE TYPICALLY PROVIDED IN PRESCHOOL CLASSROOMS, COMMUNITY-BASED EARLY CHILDHOOD PROGRAMS, CHILDREN'S HOMES AND/OR OTHER SETTINGS DEPENDING ON THE UNIQUE NEEDS OF THE CHILD AND THEIR FAMILY.

A CHILD MAY BE DETERMINED ELIGIBLE FOR EEE SERVICES IN ONE OF FOUR WAYS. A CHILD MAY:

1. HAVE RECEIVED SPECIAL INSTRUCTION, DEVELOPMENTAL THERAPY SERVICES, OR SPEECH SERVICES THROUGH THEIR CIS EARLY INTERVENTION PROGRAM BASED ON A CIS ONE PLAN (SEE CHILDREN'S INTEGRATED SERVICES ONE PLAN ABOVE) AT LEAST 30 DAYS PRIOR TO THEIR THIRD BIRTHDAY;
2. HAVE A MEDICAL CONDITION WHICH MAY RESULT IN SIGNIFICANT DELAYS AS DETERMINED BY A PHYSICIAN BY THE TIME OF THE CHILD'S SIXTH BIRTHDAY AND THE CHILD NEEDS SPECIAL EDUCATION;
3. BE DETERMINED TO NEED SPECIAL EDUCATION BASED ON AN EVALUATION

- BY AN EVALUATION AND PLANNING TEAM (EPT) FINDING THAT THE CHILD HAS A DISABILITY CAUSED BY A DEVELOPMENTAL DELAY;
4. MEET ELIGIBILITY CRITERIA FOR CHILDREN SIX THROUGH 21 YEARS OLD, INCLUDING DETERMINATION OF DISABILITY, ADVERSE EFFECT ON EDUCATIONAL PERFORMANCE AND NEED FOR SPECIAL EDUCATION.

INDIVIDUAL EDUCATION PROGRAM (IEP)

AN INDIVIDUAL EDUCATION PROGRAM (IEP) IS A WRITTEN STATEMENT FOR A CHILD WITH A DISABILITY THAT IS DEVELOPED, REVIEWED AND REVISED BY AN IEP TEAM WHICH CONSISTS OF PUBLIC SCHOOL REPRESENTATIVES, PARENTS OR GUARDIANS, RELATED SERVICE PROVIDERS (E.G. THERAPISTS), AND COLLABORATIVE PARTNERS (E.G. HEAD START). THE IEP ADDRESSES SPECIFIC EDUCATIONAL GOALS AND OBJECTIVES THAT FOCUS ON THE UNIQUE STRENGTHS AND NEEDS OF THE CHILD.

EXTENDED SCHOOL YEAR (ESY)

CHILDREN AGED THREE THROUGH 22 WITH AN IEP MAY BE ELIGIBLE FOR SERVICES THAT EXTEND BEYOND THE TYPICAL SCHOOL YEAR (E.G. SUMMER, WEEKENDS, HOLIDAYS, ETC.) THE CHILD'S IEP TEAM WILL CONSIDER AND DETERMINE IF ESY SERVICES ARE ESSENTIAL FOR THE CHILD TO REACH EDUCATIONAL AND/OR DEVELOPMENTAL GOALS AS STATED IN HIS/HER INDIVIDUAL EDUCATION PROGRAM (IEP). VARIABLES THAT SHOULD BE CONSIDERED IN DETERMINING ELIGIBILITY FOR EXTENDED SCHOOL YEAR SERVICES INCLUDE EVIDENCE OF REGRESSION DURING PREVIOUS BREAKS IN SERVICES, PROGRESS MADE DURING THE SCHOOL YEAR ON THE CURRENT IEP, THE CHILD'S DEGREE OF DISABILITY, BREAKS IN PROGRAMMING THAT WOULD PREVENT THE CHILD FROM ACHIEVING DEVELOPMENTAL MILESTONES HE/SHE WOULD OTHERWISE BE EXPECTED TO ACHIEVE, THE CORRELATION BETWEEN THE CHILD'S CHRONOLOGICAL AGE AND RATE OF DEVELOPMENT, AREAS IN THE CHILD'S PROGRAM THAT NEED CONSISTENT, ONGOING ATTENTION, ETC.

THE ESY RULES ARE FURTHER DESCRIBED IN SECTION 2361 OF THE "VERMONT DEPARTMENT OF EDUCATION SPECIAL EDUCATION REGULATIONS AND OTHER PERTINENT REGULATIONS," AND CAN BE FOUND ON THE WEB AT [HTTP://WWW.STATE.VT.US/EDUC/NEW/PDFDOC/BOARD/RULES/2360.PDF](http://www.state.vt.us/educ/new/pdfdoc/board/rules/2360.pdf)

ADDITIONAL SERVICES AVAILABLE THROUGH OTHER AHS DEPARTMENTS

DEPARTMENT OF DISABILITIES, AGING AND INDEPENDENT LIVING (DAIL)

DEVELOPMENTAL DISABILITY SERVICES – YOUNG CHILDREN WITH DEVELOPMENTAL DISABILITIES MAY BE ELIGIBLE FOR SERVICES THROUGH THEIR LOCAL DEVELOPMENTAL DISABILITY AGENCY. SERVICES INCLUDE CARE COORDINATION, FLEXIBLE FAMILY FUNDING, CRISES SUPPORTS AND, FOR CHILDREN WITH VERY SIGNIFICANT MEDICAL OR BEHAVIORAL ISSUES, COMPREHENSIVE HOME AND COMMUNITY-BASED SUPPORT.

CHILDREN'S PERSONAL CARE SERVICES – PERSONAL CARE SERVICES ARE AVAILABLE FOR MEDICAID ELIGIBLE CHILDREN WITH DISABILITIES WHO NEED ASSISTANCE WITH EATING, BATHING, DRESSING, PERSONAL HYGIENE AND OTHER BASIC ACTIVITIES OF DAILY LIVING.

THE HIGH TECHNOLOGY HOME CARE PROGRAM IS AN INTENSIVE HOME CARE PROGRAM THAT COORDINATES TREATMENTS, MEDICAL SUPPLIES, AND SOPHISTICATED MEDICAL EQUIPMENT AND PROVIDES SKILLED NURSING CARE FOR MEDICALLY INVOLVED CHILDREN WHO ARE TECHNOLOGY-DEPENDENT.

VERMONT DEPARTMENT OF HEALTH - CHILDREN WITH SPECIAL HEALTH NEEDS (VDH)

THE CHILDREN WITH SPECIAL HEALTH NEEDS PROGRAM AT THE DEPARTMENT OF HEALTH PROVIDES A LARGE SELECTION OF SERVICES TO CHILDREN WHO HAVE COMPLEX HEALTH CONDITIONS AND TO THEIR FAMILIES. BY "CHILDREN" WE MEAN VERMONT RESIDENTS, BIRTH TO AGE 21. A CHILD'S ELIGIBILITY FOR A SPECIFIC PROGRAM MAY DEPEND UPON A NUMBER OF FACTORS.

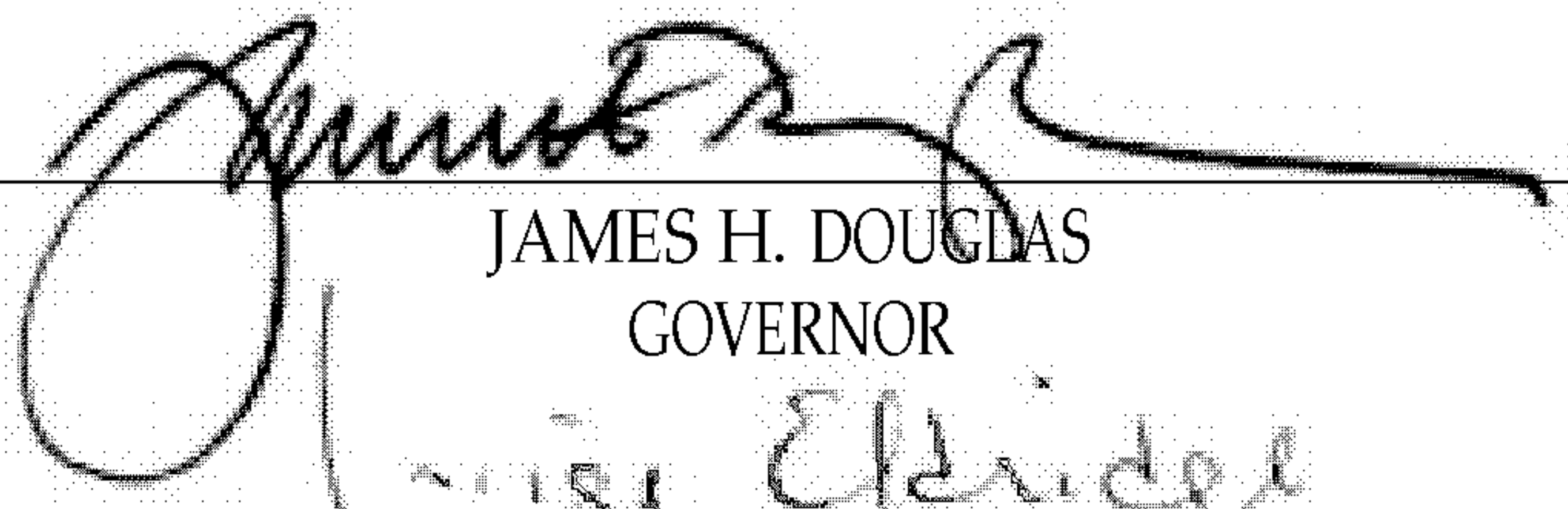
RULES, REGULATIONS AND LAWS RELATED TO YOUNG CHILDREN WITH DISABILITIES AND/OR SPECIAL EDUCATION

- THE INDIVIDUALS WITH DISABILITIES IMPROVEMENT ACT (IDEIA) OF 2004 (FEDERAL LAW AND FEDERAL REGULATIONS)
- SECTION 504 OF THE REHABILITATION ACT OF 1973
- VERMONT STATE BOARD OF EDUCATION MANUAL OF RULES AND PRACTICES (2360)
- ACT 117: AN ACT TO STRENGTHEN THE CAPACITY OF VERMONT'S

EDUCATION SYSTEM TO MEET THE EDUCATIONAL NEEDS OF ALL
VERMONT STUDENTS

- ACT 264: A LAW ON BEHALF OF CHILDREN AND ADOLESCENTS WHO HAVE A SEVERE EMOTIONAL DISTURBANCE AND THEIR FAMILIES.
- 2007 HEAD START ACT
- 2007 HEAD START ACT: 45 CFR 1308 (PRESCHOOL) AND 45 CFR 1304.20(F)(2) (INFANTS AND TODDLERS)
- ACT 62: A STATE LAW RELATED TO PREKINDERGARTEN EDUCATION, EFFECTIVE JULY 1, 2007, ACT 62 CODIFIED EXISTING PRACTICES USED BY SOME SCHOOL DISTRICTS TO INCLUDE THREE AND FOUR YEAR OLDS IN THEIR AVERAGE DAILY MEMBERSHIP (ADM) IN ORDER TO PROVIDE PUBLIC FUNDS TO SUPPORT PREKINDERGARTEN EDUCATION
- PREKINDERGARTEN RULES, EFFECTIVE JULY 1, 2008 AS REQUIRED BY ACT 62


WE, THE UNDERSIGNED, ENDORSE THE INTERAGENCY AGREEMENT AMONG EARLY CARE,
HEALTH AND EDUCATION PROGRAMS AND AGENCIES IN VERMONT



JAMES H. DOUGLAS
GOVERNOR



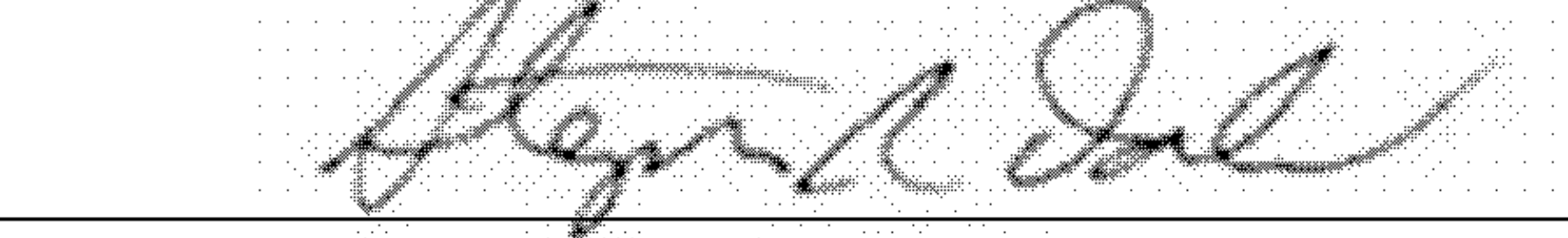
LOUISE ELDRIDGE, REGIONAL PROGRAM MANAGER
OFFICE OF HEAD START




ROBERT D. HOFMANN, SECRETARY
VERMONT AGENCY OF HUMAN SERVICES



ARMANDO VILASECA, COMMISSIONER
VERMONT DEPARTMENT OF EDUCATION




STEPHEN R. DALE, COMMISSIONER
DEPARTMENT FOR CHILDREN AND FAMILIES
AGENCY OF HUMAN SERVICES



REEVA SULLIVAN MURPHY, DEPUTY COMMISSIONER
CHILD DEVELOPMENT DIVISION
DEPARTMENT FOR CHILDREN AND FAMILIES



PAUL BEHRMAN, CHAIRPERSON
VERMONT HEAD START ASSOCIATION



KARIN EDWARDS, DIRECTOR
INTEGRATED SUPPORT FOR LEARNING (PRE-K - GRADE 8)
DEPARTMENT OF EDUCATION



KAREN GARBARINO, DIRECTOR
CHILDREN'S INTEGRATED SERVICES, CHILD DEVELOPMENT DIVISION



K.C. WHITELEY, DIRECTOR
VERMONT HEAD START STATE COLLABORATION OFFICE

APPENDIX G



The purpose of creating the MATCH Network in Vermont is:
 To enhance the competency, professional growth and satisfaction of individual practitioners, and to promote program quality through customized support for effective practices. These changes will positively impact the children and families in their care. →

This will be accomplished by a network of professionals who provide quality mentoring, consulting, coaching, technical assistance and information to professionals—and those seeking to be professionals, in the field of early childhood and afterschool services across Vermont. →

A MATCH Professional is a qualified professional with the knowledge, skills and dispositions to give individualized support to programs and professionals (or those entering the field), in early childhood or afterschool programs. MATCH Professionals work to support the process of change through:

- observation and reflection,
- assistance in planning and goal setting,
- helping to solve problems,
- providing information and resources, and
- responsive relationship building.

Knowledge and skills may be content specific, such as: knowledge of regulations, infectious diseases or grant writing; or skills in implementing play-based routines, toddler room arrangement or developing a program evaluation. The MATCH network is multidisciplinary, including professionals with a broad range of knowledge and skills across many disciplines. MATCH professionals share common positive dispositions and competencies that enable them to effectively customize support to individuals and programs using a variety of strategies.

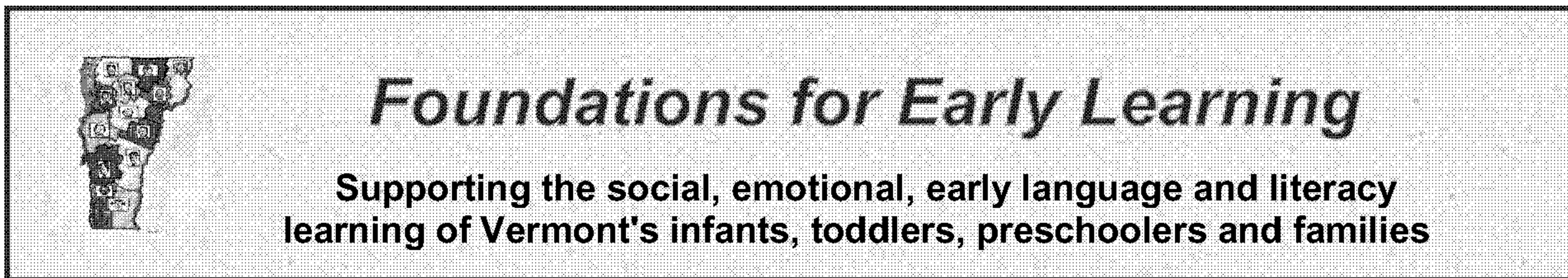
What is MATCH? It is Vermont's name for the professionals who provide individualized support to programs or to individuals working in early childhood or afterschool services. The name was created by a state-wide workgroup of 20 people with diverse roles. Each workgroup member also worked with someone else in the state who added their perspective and ideas to the workgroup. The workgroup, facilitated by Northern

Why not "mentor"? Or "coach"? Or "consultant"? The workgroup examined terms and definitions from other states, what terms research used and what Vermonters thought about these terms. We came to realize that there are conflicting definitions for each term, and many have the same definition. There are strong feelings for and against each of these terms. The person providing individualized support may use mentoring, then coaching and then provide technical assistance—all in one day with one person. We came to see these terms as strategies, rather than as roles. Finally, we wanted to include everyone—all those already called coaches, mentors, consultants, and others, no matter what term was used. For these reasons, we chose a new inclusive term: the MATCH professional who uses a range of strategies (mentoring, coaching, etc.) as needed. We hope this term will also help people think about the importance of the match, the relationship between the professional providing guidance and the person gaining support to develop and change.

What else did the workgroup do? They identified the scope and definitions of what we mean by individualized professional support. They also defined the skills, knowledge and dispositions needed by MATCH professionals; identified who provides the set type of supports to early childhood and afterschool professionals now in Vermont; and surveyed these professionals to learn more about their work, their training, and their needs. The survey identified that a MATCH network was valuable. Respondents also valued having competencies, support and training for MATCH network participants. The workgroup identified parameters and suggested criteria for those in a MATCH registry. They also generated evaluation questions, collected resources and research, made recommendations for financing MATCH professionals and defined next steps toward integrating MATCH professionals into the early childhood and afterschool professional systems in Vermont. They also had the ideas that created the first side of this document!

What's next? The next steps are to a) to continue to seek and expand partners in this work and hear from the field; b) finalize MATCH competencies and design training based on these competencies for those providing individualized support; c) to continue to find opportunities to integrate MATCH relationships into training and other supports that enhance professional development of the workforce; d) to recommend criteria to enable those receiving or providing individualized support to "count" these activities as professional development hours for child-care (licensing, STARS applications, etc.); e) to design and implement a MATCH registry aligned with the current instructor registry. The Professional Preparation and Development Committee and other groups, will oversee this work which will be facilitated by Northern Lights Career Development Center.

APPENDIX I



FEL Description

Vermont is the recipient of two technical assistance grants from nationally renowned training centers: the Center on the Social and Emotional Foundations for Early Learning (CSEFEL) and the Center for Early Literacy Learning (CELL). Vermont’s Foundations for Early Learning (FEL) represents the integration of these two grants that support the social-emotional development and early language and literacy learning of infants, toddlers and preschoolers.

Vermont has a strong history of excellence and commitment to early childhood education, intervention and mental health. These grants are representative of statewide efforts to address needs expressed by the field over the last two decades and reflect the efforts of the state’s Professional Development Committee, OSEP funded professional development and demonstration projects at UVM’s Center on Disability and Community Inclusion, CUPS, Northern Lights Career Development Center, and the Higher Education Collaborative.

The work of FEL is guided by an **interagency State Leadership Team**, comprised of liaisons from the two national centers and representatives from the Department of Education, University of Vermont, Vermont Family Network, and programs from Children’s Integrated Services including Early Intervention, Early Childhood and family Mental Health, and Maternal Child and Family Health, Head Start State Collaboration Office; and Northern Lights Career Development Center. The State Team also partners with regional representatives to plan and implement training.

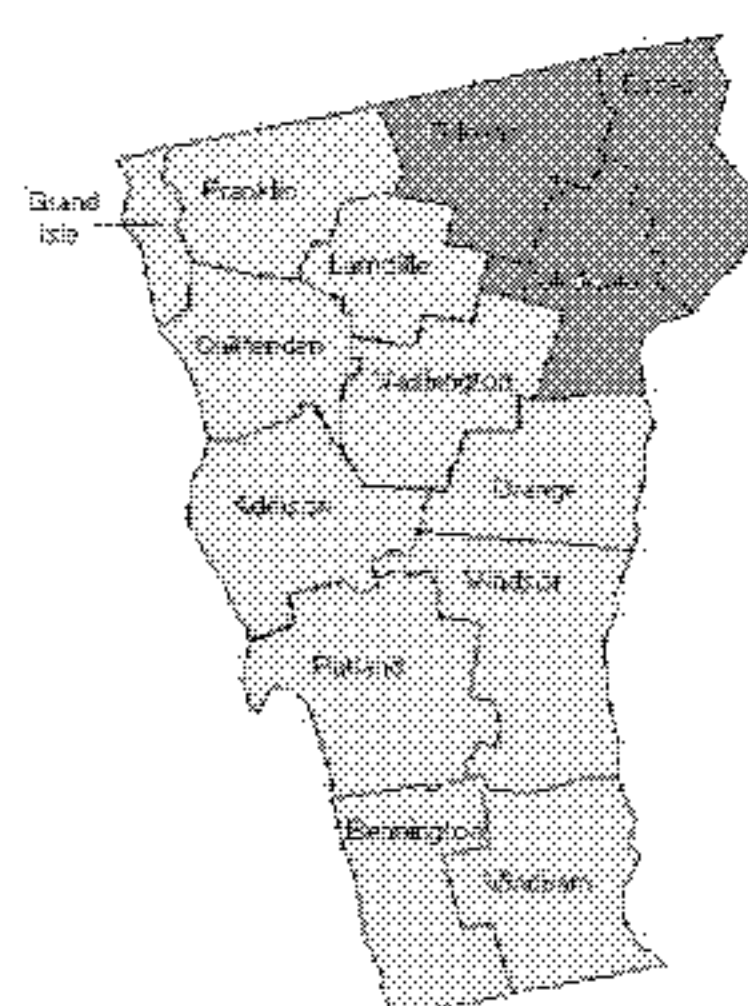
FEL Outcomes:

- Early childhood providers and families are competent in promoting social, emotional, and language and literacy development in all infants, toddlers and preschoolers.
- Early childhood providers are competent in addressing children’s challenging behaviors and, as a result, fewer children are expelled from child care.
- Statewide trainers, coaches and demonstration sites can teach and model evidence-based social, emotional and literacy practices and support sustainability.
- Young children, birth to age five, improve functioning in social, language and literacy skills.
- Young children enter kindergarten with the social, language and literacy skills necessary to succeed.

Statewide FEL Implementation

FEL is based on a multi-tier system of support commonly known as the ‘pyramid model’. Through this model FEL capitalizes on the effective use of an early childhood professional coach/trainer/consultant network to build, maintain and sustain a competent and confident early childhood workforce.

FEL has completed its third year of providing ‘Train the Trainer’ Institutes. In 2008-2009, FEL began in the Northeast Kingdom counties of Caledonia, Essex, and Orleans. FEL’s first training cohort is comprised of 63 early childhood professionals from across multiple agencies. In 2009-2010, FEL continued training in the central/southern counties of the state (Orange, Windsor, Windham, Addison, Rutland and Bennington). FEL training cohort 2 is comprised of 60 additional early childhood professionals.



- Year 1 2008-2009
- Year 2 2009-2010
- Year 3 2010-2011

In 2010-2011, cohort 3 focused on the Chittenden and Northwest region of the state and increased FEL trainer/consultant/coaches numbers up to 150!

APPENDIX J**Vermont Child Care Apprenticeship Program**

The **VT Child Care Apprenticeship Program (VCCAP)** is a training program that matches mentors (head teachers, assistant directors, program coordinators, directors, etc.) with less experienced staff (assistant teachers, individual aids, paraprofessionals, etc.) for formal training in the field of early care and education. VCCAP follows the tradition of registered apprenticeship, which combines supervised on-the-job training with 297 hours of formal training hours over a 2-year time period. These training hours include 6 tuition-free college courses (**18 credits!**) in the field of early care and education along with 4,000 hours of formal on-the-job training.

The **VT Child Care Apprenticeship Program** is managed through the efforts of the VT Child Care Industry and Careers Council (VCCICC), a statewide, not for profit organization, working in partnership with the VT Departments of Labor. VCCICC blends state and federal funding, private foundation and community grants, to pay for the college courses that are offered to benefit the child care workforce. Courses are offered tuition-free, on a first come, first serve basis, after enrollment of the child care apprentices. Course cycles are rotated around the state to provide access to higher education in various geographical areas.

Apprentices:

- Are employed and work a minimum of 30 hours per week
- Work in a licensed or registered child care program or Department of Education Setting
- Have a High School Diploma or GED
- Commit to on the job training with a qualified mentor for support, observations and assessment
- Earn 18 college credits, tuition-free, through the following six (6) tuition-free college courses, one offered each semester, over a 2 year period:
 - Communication in the Early Childhood Education Workplace (COM 1015)
 - Infant Toddler Development and Care (PSY 2020)
 - Development of the Young Child: Ages 3-8 (PSY 2025)
 - Curriculum Development for Early Childhood Education (EDU 2045)
 - Program Management for Early Childhood Education (EDU 2042)
 - Leadership, Mentoring and Supervision for Early Education Practitioners (EDU 2041)
- Receive textbooks for courses at no charge
- Access local training opportunities such as First Aid and CPR
- Participate in group meetings as organized by the VCCAP
- Gather all the tools needed to complete their Child Development Associate (CDA) credential after one year in apprenticeship.

Benefits of the Apprenticeship Program:

At the completion of the training program, apprentices receive a Certificate of Completion from the VT Department of Labor for the trade of Child Care Development Specialist. This professional credential is recognized nationwide as a Standard of Quality! Through the Northern Lights Career Ladder, completed apprentices are at Level IIIa, one step beyond the Child Development Associate (CDA) credential.

In the State of Vermont *Early Childhood Program Licensing Regulations*: a person holding this Certificate of Completion, with two years of relevant experience, is qualified to be Director for programs serving 59 or fewer children and/or a Teaching Associate.

APPENDIX K**Vermont's Early Childhood Comprehensive
Data Reporting Infrastructure
(VEC-CDRI)
October 2011**

In 2009, Vermont was one of six states that received a 10 month technical assistance award by the National Governor's Association Initiative *Supporting "Ready States: A Project to Develop Key Components of State Early Childhood Infrastructure*. Vermont selected developing a longitudinal and coordinated early childhood data system as its focus and defined its project's purpose as follows: Create a unified early childhood comprehensive, longitudinal data infrastructure to track results and drive continued improvement of children's well-being. This infrastructure will continually collect, analyze, and disseminate information and outcomes, track program participation through a universal early identifier, using a master person index approach, and protect child and family privacy.

While the technical assistance from NGA ended in December 2010, Vermont decided to continue the project, Vermont's Early Childhood Comprehensive Data Reporting Infrastructure (VEC-CDRI). The next steps included completing the project plan and transitioning the stewardship of the plan to its early childhood state advisory council, Building Bright Futures's newly formed Data and Evaluation Committee in the Fall 2011. As plans were being made to make this transition, Vermont's Governor Shumlin decided, given his commitment to early childhood, to apply for the Race to the Top, Early Learning Challenge Grant Program in October 2011. The RTT-ELC grant application included "*the implementation of comprehensive data systems and to use the data to improve instruction, practices, services and policies*" which aligned perfectly with the VEC-CDRI work.

The VEC-CDRI project used the National Early Childhood Data Collaborative process, *10 Fundamentals to a Coordinated State Early Childhood Data System*, Vermont and identified eleven **Key Policy Questions** and related data elements at the child, family, educator, program and community levels. This work provides the framework for the longitudinal data reporting infrastructure. These questions included

early care and education programs as well as other critical components of the early childhood system from health, early intervention and family support. The following are the policy questions:

Vermont's Key Policy Questions

1. Are our young children achieving optimal health and development? [BBF Commitment Statement reframed as a policy question]
2. Are children ages birth to six getting the nutritious food and opportunities for physical activity to be healthy during their school years? [modified BBF Commitment Statement reframed as a policy question]
3. Are children ages birth to six spending their days in quality environments¹? [modified BBF Commitment Statement reframed as a policy question]
 - 3(a) Is the quality² of early childhood programs³ improving?
 - 3(b) What approaches or curriculum models are implemented by adults in the environments where young children spend their days?
 - 3(c) What is the relationship between attendance in various early care and education programs and children's success in life⁴ during their school years?
 - 3(d) How skilled and stable is our early childhood workforce⁷?
4. Do our young children and their families have resources to meet their basic needs⁵? [BBF Commitment Statement reframed as a policy question]
5. Do our young children and their families experiencing adversity⁶ have early, timely, and highly skilled interventions? [BBF Commitment Statement reframed as a policy question]
6. What is the relationship between receipt of prevention or early intervention services and children's success in life during their school years?
7. Are we investing our early childhood dollars wisely⁸?

¹**environments:** includes home, early childhood programs and community

²**quality:** For early care and education programs: 4 to 5 Stars or national accreditation

³**early childhood programs:** Includes early care and education programs, CIS, EEE, and Head Start

⁴**success in life:** Multi-dimensional qualifier; includes social and emotional development, communication, physical health, as well as cognitive development, knowledge, and approaches to learning (e.g., enthusiasm for learning, persistence, curiosity)

⁵**basic needs:** As defined by the Legislative Joint Fiscal Office for Basic Needs Budget

⁶**adversity:** Includes developmental delay, impairments in vision or hearing, special health need, and/or toxic stress from recurrent child abuse or neglect, as well as parental challenges such as lack of resources, isolation, little education, mental health problems, substance abuse, and/or family violence. This question addresses vulnerable young children who are at risk for poor life outcomes (Harvard University, Center on the Developing Child, "A Science-Based Framework for Early Childhood Policy")

⁷**early childhood workforce:** Includes early educators, child care providers, early interventionists, early childhood program directors, personal care attendants, individual assistants, playgroup facilitators, summer camp staff and other professionals who care for, teach, and/or support young children

⁸ **wisely**: The rate of return exceeds the investment

The VEC-CDRI project includes Vermont's current early childhood data systems: Building Bright Futures Information System, Agency of Human Services and Department of Education Data Warehouses, Medicaid Management Information System and the Health Department's multiple data sources such as the birth and immunization registries. It also is engaged with Vermont's 4 major information technology initiatives that impact this project: 1. Agency of Human Services Challenges for Change IT Enterprise Infrastructure, 2. Department of Education Vermont Data Enhancement Project, 3. Vermont Health Information Technology Plan and 4. Children's Integrated Services: Vermont Family and Child Tracking System.

The project plan (with detailed activities and timelines) is organized around the following project deliverables:

1. Key policy questions and critical data elements that align with BBF commitments, outcomes and indicators,
2. Early Childhood Data Reporting System Map,
3. Linking Across Datasets Technology Approaches, and
4. Proposed Data Governance Structure.

The VEC-CDRI Project provided an opportunity to closely examine and build relationships among each of the stewards and stakeholders of VT's early childhood data systems. This has led to an increased understanding by non-early childhood leaders and planners of the comprehensiveness and inter-connectedness of the early childhood system and that we all share a common goal, that longitudinal and real-time data is necessary to support VT children's health, development and learning in their early years, through their school years and onward. While we share this common goal and a willingness to work together there still remains the lack of resources to take the unfolding concept of a unified early childhood data system to the next level. Vermont's Race to the Top-Early Learning Challenge grant application, if awarded, can provide the resources necessary to achieve this ambitious yet achievable goal and will bring VT 's early childhood data system to the next level.

APPENDIX L

Vermont Northern Lights Career Development Center (NL) Career Ladder
SEE FOOTNOTES on page 2

Level I	Level II	Level III	Level IV	Level V	Level VI
1. Fundamentals for Early Childhood Professionals course (45 hours) OR 2. NL approved equivalent: 45 hours of verified instruction and portfolio review OR 3. NL approved 3 related college credits ¹ in child development including early childhood + basic specialized care, introduction to licensing and one approved observation ⁴	1. Current Child Development Associate (CDA) Credential OR 2. NL approved equivalent: 120 hours of verified instruction and portfolio review OR 3. NL approved 12 related college credits ¹ in at least 2 VT Core Knowledge areas ³ and two approved observations of the practitioner ⁴	A) 1. Completed Vermont Child Care Registered Apprentice OR 2. CCV's Child Care Certificate program OR 3. Highly Qualified Paraprofessional ⁶ OR 4. NL approved equivalent: 21 related college credits ¹ in at least 3 of the VT Core Knowledge areas ³ B) 1. Associate's degree in early childhood education or a related field ¹ OR 2. Associates degree with 21 related college credits ¹ in at least 3 VT Core Knowledge areas ³	A) 1. Bachelor's degree in early childhood education or related field ¹ OR 2. Bachelor's degree with NL approved 30 related college credits ¹ within at least 3 of the VT Core Knowledge Areas ³ B) Above with VT Department of Education teaching license with endorsement in early childhood, early childhood special education or elementary education	A) Master's degree in early childhood education or related field ¹	Doctoral degree in early childhood education or related field ¹
Experience²: one year or more	2 years or more	2 years or more	2 years or more including student teaching	2 years or more	2 years or more

¹ Related fields/credits

All credits and degrees must be from an accredited, Northern Lights approved Institution of Higher Education. When a degree is required (Level IIIB, IV, V) then Related Fields refer to degrees with a major or concentration in one of the following areas:

- Early Childhood
- Child or Human Development
- Education (early childhood or elementary or special education)
- Child and Family Studies (including Home Economics)

Related Credits: When the individual's field of study is **not** one of the four areas above, or when college credits are an option to reach the Level, then credit-bearing coursework in one or more of the following areas will be accepted.

- Child or human development
- Education, including special education
- Health, including nutrition and nursing
- Psychology/ mental health/ child and family studies
- Sociology/ human services/ social sciences/social services
- Business / administration (related to instruction on early childhood or afterschool program management)

² Experience as an early childhood professional (not necessarily cumulative). Experience at Level I may be in any setting with groups of children who are not family members, at level II-VI must be in regulated child care setting.

³ VT Core Knowledge areas include: Families and Communities, Child Development, Healthy and Safe Environments, Teaching and Learning, Professionalism and Program Organization

⁴ Approved Observation of the Practitioner as approved and arranged between the regional Resource Development Specialist and Northern Lights Career Development Center

⁵ Highly Qualified Paraprofessional is a national designation given by a public school to paraprofessionals who meet defined criteria under No Child Left Behind.

You may take as long as you need to meet the Level requirements and you can apply for a Level certificate any time after achieving the education and experience listed. However, there ARE time limitations for when you can earn some credentials, endorsements, staff requirements in child care regulations, STARS staff qualifications and the Professional Recognition Bonus, all of which align with the Levels.

APPENDIX M



CIS SERVICES AVAILABLE

Vermont has created a unique model for integrating early childhood health, mental health, early intervention and specialized child care services for pregnant and postpartum women and children birth to age six. The model is designed to improve child and family outcomes by providing client-centric holistic services, effective service coordination, flexible funding to address gaps in services, prevention, early intervention, health promotion, and accountability.

Early Intervention Services
 Services for children from birth to age 3 with a developmental delay or medical condition that may lead to developmental delay.

Homeless and Family Support
 Services for pregnant and postpartum women and young children who have concerns about conditions or risk situations that impact healthy family development.

Early Childhood and Youth Mental Health
 Services for children from birth to age 6 with behavioral health concerns.

Specialized Child Care
 Services to ensure quality childcare for children in state custody, with a special health need, or for families experiencing short-term stresses.

CHILDREN'S INTEGRATED SERVICES

Service Delivery Reform

- A multi-disciplinary team review of all referred families and children
- A primary service coordinator as a single point of contact for families working with multiple service providers
- A One Plan with information on family goals and services provided to facilitate collaboration among providers

Payment Reform

- Payment based on meeting performance measures instead of units of service provided
- A bundled rate for each client served each month, regardless of type or frequency of services
- Claims submitted and reimbursed once per month for each client served instead of one per unit of service

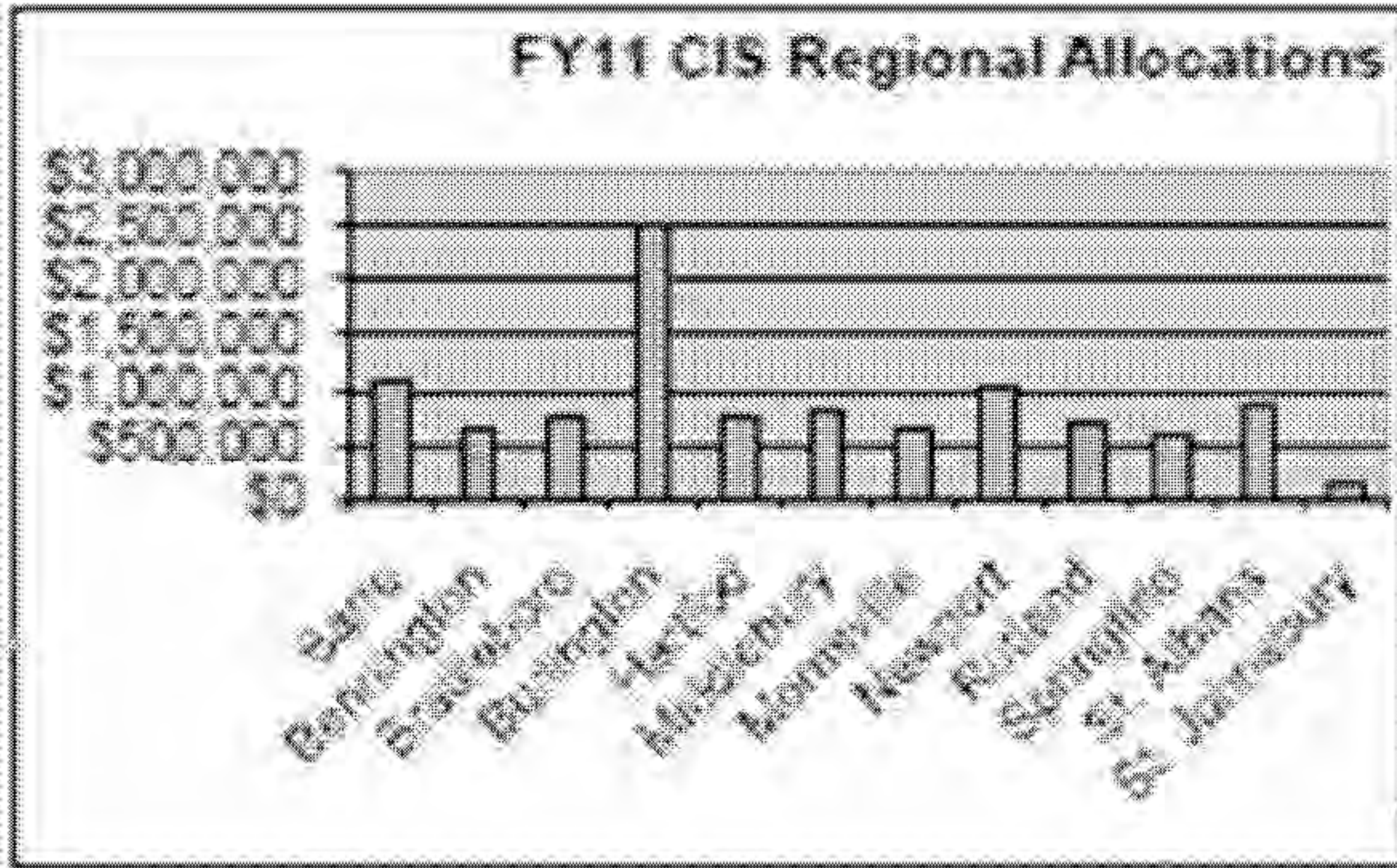
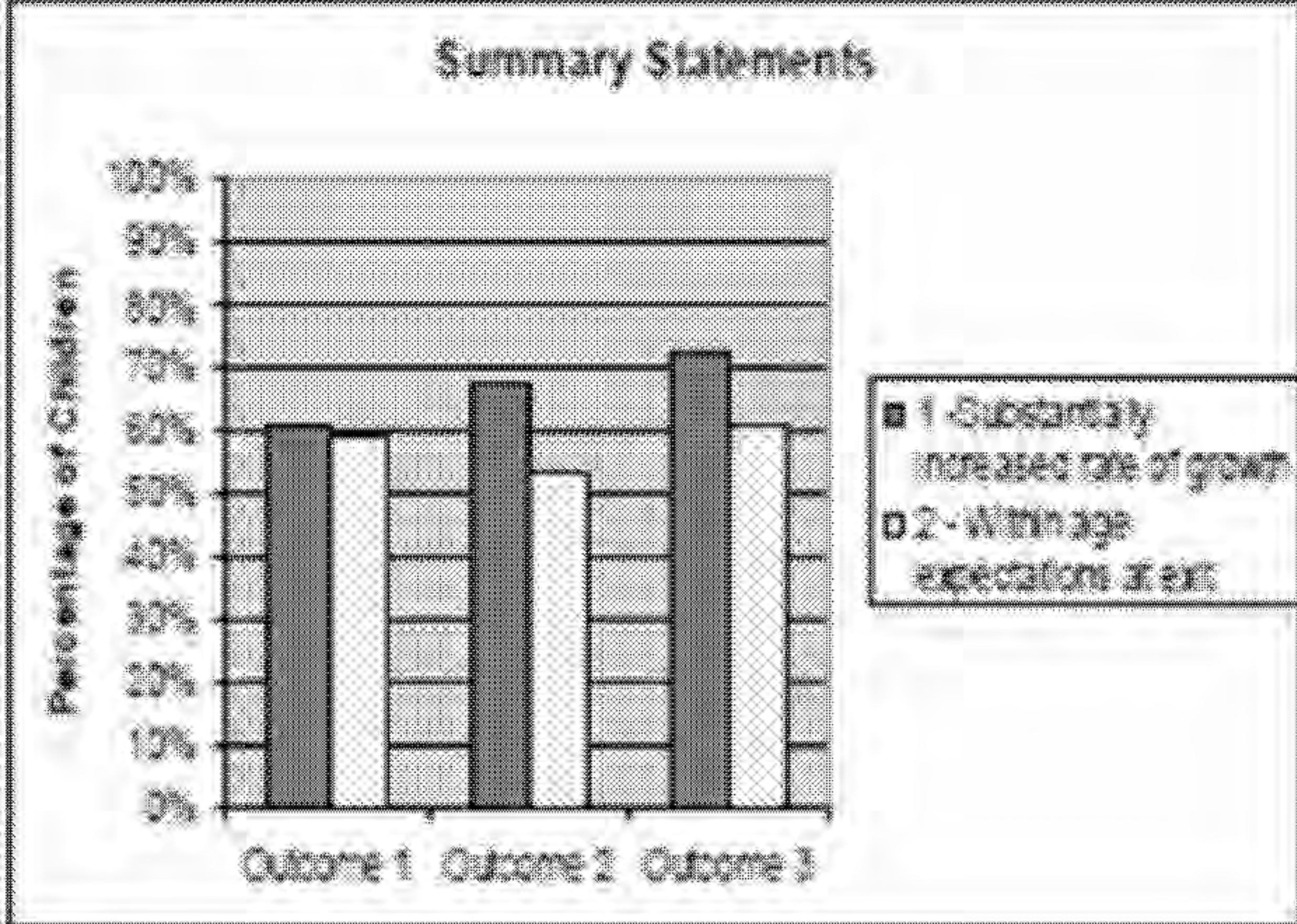
Financial Reform

- Regional allocations based on a formula instead of past history
- One fiscal agent responsible for ensuring delivery of all services
- Flexibility to re-allocate funds based on community service needs

MOVING CIS FORWARD

Legislation enacted in 2010 enabled the Child Development Division (CDD) to move forward with fully integrating CIS in three regions. Of the six that applied to be Phase 1 pilots, Lamoille, Rutland and St. Albans were selected. The State CIS team and representatives from the pilot regions developed a learning community and worked together over the summer to address implementation details. Full integration was implemented in these regions on November 1, 2010. Lessons learned were presented at a statewide conference held in December, 2010. CDD is prepared to continue the full integration process as regions are ready, with one region (Champlain) prepared to move forward in March, and an additional five in July.

Early Intervention Child Outcomes
 (1: Positive Emotional Skills; 2: Acquiring and using knowledge; 3: taking appropriate action to meet needs)





Children’s Integrated Services (CIS), Vermont Agency of Human Services
Guidelines for Using Recommended Psychosocial and Developmental Tools
With Pregnant/Postpartum Women and Children Birth to Six

INTRODUCTION:

Children grow, develop, and learn throughout their lives, beginning in pregnancy. A child’s development can be measured as they move about, play, learn, speak, and behave in the context of their family and their community. These actions are indicators of their developmental milestones. When a child does not reach age-appropriate milestones at the same time as other children the same age, this is considered a developmental delay. If a child is not developing as expected, there are steps that can be taken to help a child reach their full potential. Parents’ concerns are generally valid and are predictive of developmental delays.

Nationally, less than half of children with developmental concerns are identified before starting school. Significant behavioral or developmental delays may have already occurred and opportunities for treatment may have been missed. During this time, a child could have received assistance with these delays to help them be prepared to enter school ready to learn and succeed.

Developmental surveillance is an important, on-going method of detecting delays for all children. Appropriate surveillance requires the early childhood service provider to have up to date knowledge about developmental issues, risk factors, and links to community resources, as well as skills in observation, listening and actively seeking parent concerns.

Developmental screenings are done routinely at specific ages, as defined by the American Academy of Pediatrics *Bright Futures Guidelines for Health Supervision of Infants, Children, and Adolescent, (2008). Third Edition*. Selective screenings may also be used when a concern or change in a child’s behavior or risk situation is identified. Screening tools do not require extensive training, they are quick to administer, and can be done by professionals in healthcare, community, or school settings. Some screening tools may be completed by parents. The use of standardized developmental screening tools with all children at periodic intervals will increase accuracy in detecting delays. This can result in access to more intensive evaluation and earlier treatment during a child’s early years.

Developmental evaluations require a more complex process and usually follow screening results that indicate a delay. Use of these tools requires additional training and takes longer to administer, score and interpret the results. The results of an evaluation inform a follow-up and/or treatment plan for the child and/or family. See definitions of surveillance, screening and evaluation on page three.

USE OF THE GUIDELINES AND AUDIENCE:

1

Children’s Integrated Services (CIS) direct service providers should use this list of recommended screening and assessment tools when working with pregnant and postpartum women, children birth to six and their families. The CIS provider must acquire skills in administering a particular developmental tool, and interpreting and sharing the results. Using a culturally sensitive and family-centered approach, parental concerns about their child and observations of the child’s behavior and the parent child interaction are included in the screening and/or evaluation process.

The goals of these CIS Guidelines are to provide: 1) common definitions for early identification of developmental delays, risks or concerns; 2) a list of recommended psychosocial and developmental tools for use by CIS early childhood providers; and 3) a common framework for use of shared tools and language about child development across CIS regional team members and other community providers, for example, the medical home. It is important to coordinate the timing and share results of developmental screenings with parents, the medical home and early childhood providers to avoid duplication of effort, e.g., so a home visitor and a pediatric medical provider don’t both do an Ages and Stages screening for a 9 month old. This will require CIS outreach to pediatric providers to learn about their standard office practices for developmental screening and vice versa; to determine best ways to assure routine screening at specified ages that are non-duplicative; and to identify strategies for systematically communicating screening results with the medical home.

CIS Guidelines were developed using research findings about the validity and reliability of each tool. The list was developed with input from statewide health, mental health, early intervention, and child care practitioners; Vermont Agency of Human Services program and policy managers; The Vermont Child Health Improvement Program staff; and American Academy of Pediatrics-VT Chapter members.

The Guidelines contain four sections that list screening and evaluation tools for: 1) pregnant/parenting women; 2) infants and children; 3) child social-emotional behaviors; and 4) early childhood group care. All pregnant women, infants and children should be screened and parent concerns about their child’s development should be actively elicited, particularly throughout pregnancy and for the birth to three age group. The Individuals With Disabilities Education Act (IDEA) Amendments of 1997 mandate early identification of, and intervention for, developmental disabilities through the development of community-based systems, with the current focus being on infants and children from birth through 2 years of age.

Screening and evaluation tools that provide information about parental or family functioning, or information about the quality of child care environments are also included in the guidelines. Information for each tool specifies what type of provider might use that tool or if it can be self-administered; whether the tool is used for screening or evaluation purposes; which tool is appropriate for certain ages; and comments about the tools, such as how many questions, how long it takes to administer, or reading level. The use of standardized developmental screening tools at periodic intervals increases accuracy in detection of child delays.

The Vermont Agency of Human Services (AHS) common definitions for developmental surveillance, screening and evaluation that are applicable across CIS populations, individuals, ages, professions, and settings are:

2

Surveillance/Early Identification: This is the ongoing, longitudinal, cumulative process of recognizing children who may be at risk of developmental delays. Surveillance may occur in primary care practices, childcare settings or other environments applying population-based strategies for early detection of risk or problems.

Screening. This is the use of brief and objective standardized tools to identify children at risk of developmental delay. It is a formal process that occurs at defined intervals and points of entry into services and any time a child is identified at risk through surveillance. Screening may occur at a primary care practice, mental health or other early childhood or provider settings.

Evaluation. This is a more complex process aimed at identifying and refining the specific nature of a particular client problem and related complex or confounding factors. Together, this information forms the foundation for specific recommendations and, if appropriate, leads to an individualized integrated treatment plan. An evaluation consists of gathering key information, exploring problem areas, formulating diagnosis(es), identifying disabilities and strengths, and assessing the client’s readiness for change.

SUMMARY

The use of standardized developmental screening tools by CIS providers at periodic intervals will increase accuracy in the detection of delays. Early detection of a suspected or identified developmental delay through surveillance or screening is critical to linking the child and family with further evaluation and appropriate intervention or treatment. This can lessen the impact of the delay on the functioning of the child and improve child and family outcomes.

Children’s Integrated Services (CIS) Recommended Psychosocial and Developmental Tools For Use with Women and Children

Use of any screening or assessment instrument listed below requires that staff have received training in administering and scoring the tool, and interpreting and communicating the results

Tools for Women	Used By	Purpose	Target Population/ Age	Comments
To access and print screening tools for women, link to the VT Child Health Improvement Project (VCHIP) website <i>Improving Prenatal Care VT (IPC-V) Practice Toolkit</i> at: https://www.med.uvm.edu/vchip/TB2+RL+3L.asp?SiteAreaID=669. Select ‘ALL TOOLS’ in Green box (Right side)				
Postpartum Depression Predictors Inventory (PDPI) ¹	Health clinicians to interview pregnant & postpartum moms at 6-8 weeks	<i>Screening</i> for postpartum depression. Assists with planning interventions, referrals, etc. if the results are positive.	Postpartum moms Could also be used with Dads	Opportunity for a mom to discuss her experiences and any problems regarding identified risk factors. Interventions can be planned to address targeted risk factors. This is not a self-report questionnaire
Edinburgh Depression Scale ²	May be self-administered with provider review; health clinicians	<i>Screening</i> To assist health professional to detect mothers experiencing postpartum depression; Reflects how a woman has been feeling during the previous 7 days	Postpartum moms	May be useful to repeat after 2 weeks if there are doubtful results. A clinical assessment should be done to confirm a diagnosis. <i>Administrative Time:</i> Less than 5 minutes. All ten items must be completed

¹ Beck CT. Revision of the Postpartum Depression Predictors Inventory. JOGNN 63:4. July/Aug 2002

² Source: Cox, J.L., Holden, J.M., and Sagovsky, R. 1987. Detection of Postnatal depression: Development of the 10-item Edinburgh Postnatal Depression Scale. British Journal of Psychiatry 150-782-786.

Scale may be reproduced without further permission provided names of authors, title and source of paper are in all reproduced copies.
10.2010

Tools for Women	Used By	Purpose	Target Population/ Age	Comments
Pregnancy Tobacco Cessation Program	Health Clinicians with specific training in the 5 “A” methodology & counseling	<i>Screening</i> Identification of the level of tobacco use and which stage of change the woman is at	Early Pregnancy & on-going	Utilizes a 5 „A“s” approach – ask, assess, advise, assist, arrange. Identifies readiness to quit and includes follow-up & treatment resources
Alcohol & Drug Assessment Tool	Self-administered	<i>Screening</i> Identification of the variety and amount of substances consumed	Pregnant/ Postpartum and parenting women	Comprehensive review of substance use, including foods, tobacco, alcohol, prescription drugs & illegal drugs For positive results, needs careful follow-up for referral and on-going treatment/counseling.
Psychosocial Combined Clinical Tool. ³ Domestic Violence Assessment, Depression and Substance Use	Clinical/ Health Provider	<i>Screening</i> of immediate safety needs & risks; patterns & history of abuse; impact on well-being; tobacco and substance use	Administer during Pregnancy	Five questions, documents findings & assesses safety. Referral & reporting information Guidelines for use are helpful Meant to be used throughout pregnancy Positive findings require an appropriate referral
Infants & Children Developmental Tools				
Ages & Stages Questionnaire (ASQ-3) <i>Third Edition (2009)</i> www.agesandstages.com	Parents, CIS & child care providers, and medical providers	<i>Screening</i> Addresses 5 domains; has questions of general interest to parents. Needs coordination among providers to ensure non-duplication	1-66 months	Easy to use 4-6 th grade reading level New version covers all recommended ages <i>Administrative Time:</i> 10-15 minutes; 1-5 minutes to score

³ VT Network Against Domestic and Sexual Assault, 2003. 1-802-223-1302 or <http://www.vtmd.org>
10.2010

Tools for Infants & Children	Used By	Purpose	Target Population/ Age	Comments
<p>AEPS (Assessment, Evaluation, and Programming for Infants and Young Children, 1993)</p>	<p>Developmental Educators; other clinicians</p>	<p><i>Evaluation</i> CIS EI tool Addresses 5 developmental areas; Links test items with curriculum</p>	<p>1 month – 3 years; 3-6 years</p>	<p>Observation (preferred), direct test or report; New system for determining eligibility; Family Interview addresses family routines; Direct link between AEP test items and curriculum strategies, including goals and objectives <u>Administrative Time:</u> Initial evaluation takes 1-2 hours; Subsequent assessments take 15-60 minutes</p>
<p>HELP (Hawaii Early Learning Profile, 1997; revision)</p>	<p>Developmental Educators; other clinicians</p>	<p><i>Evaluation</i> CIS EI tool Curriculum-based assessment with direct links between assessment and curriculum</p>	<p>Birth to 3 years; 3 to 6 years</p>	<p>Addresses 5 developmental areas very thoroughly; Family interview included; Contains tools that demonstrate child progress over time; Useful when there is little question that a referral will lead to eligibility <u>Administrative Time:</u> Dependent on child’s age. Initial assessment takes 1 to 2 hours.</p>
<p>IDA (Infant-Toddler Developmental Assessment, 1995)</p>	<p>Developmental Educators; other clinicians</p>	<p><i>Evaluation</i> CIS EI tool Addresses 8 developmental areas with strong social-emotional component</p>	<p>1 to 42 months</p>	<p>Families are central to the assessment process; Utilizes structured eliciting, observation and parent report; Supplements include articles regarding child development, family support and assessment process; Assessment items can be modified if not culturally appropriate <u>Administrative Time:</u> Suggest 2 home visits, including parent interview</p>

Tools for Infants & Children	Used By	For	Target Population/ Age	Comments
Social Emotional Tools				
<p>Modified Checklist for Autism in Toddlers (MCHAT) (1999) http://www.firstsigns.org/screening/tools/rec.htm#asd screens</p>	<p>Parents; pediatric health care providers, developmental educators, paraprofessionals</p>	<p><i>Screening</i> Supplemental to ongoing general developmental screening. Early identification & referral for further evaluation if initial screening demonstrates risk for autism spectrum disorder; improves long-term prognoses</p>	<p>16-30 months</p>	<p>23 parent-report items; easy to use Over identifies kids with language and developmental delays. Use of a follow-up questionnaire decreases positive findings for developmental delays Refer to pediatrician for evaluation if two critical or three non-critical items are positive. High reading level; formatting may not be user friendly; <i>Administrative Time:</i> 5-10 minutes</p>
<p>Ages & Stages Social- Emotional Questionnaires (ASQ:SE) www.agesandstages.com</p>	<p>Parents, professionals with expertise in health, family support, mental health, early intervention</p>	<p><i>Screening</i> tool that focuses solely on a child’s social/emotional behavior, i.e., self-regulation, compliance, communication, adaptive functioning, autonomy, affect, and interaction with people; helps to identify delays as early as possible</p>	<p>6-66 months</p>	<p>Parent report Easy to use Simply worded and appropriate for families of diverse backgrounds. Valid, reliable, quick & easy <i>Administrative Time:</i> 10-15 minutes</p>

Tools for Infants & Children	Used By	For	Target Population/ Age	Comments
<p>Child Behavior Checklist (CBCL); Part of the ASEBA (Achenbach Assessment System)</p> <p>Achenbach, T.M. and Edelbroc, C. 1991</p>	<p>Primary caregiver in mental health, social work, medicine, schools, child and family services, public health agencies, caregivers, etc.</p>	<p><i>Evaluation</i></p> <p>Comprehensive approach to assessing adaptive/maladaptive functioning and behavioral, emotional, and social problems.</p> <p>Strong interest for widespread use in VT</p>	<p>18 months to 5; (6-18 years)</p>	<p>Provides professionals with user-friendly tools. Requires some training and interpretation. 4-page questionnaires for obtaining parents' reports of their child's competencies and problems over the past 6 months, which includes 118 questions and additional open ended questions.</p> <p>Contains 8-9 subscales, which can be collapsed into Internalizing, Externalizing and Total Problems score, including strengths.</p> <p>Validity and reliability are well established.</p> <p>Teacher report also available for older children.</p> <p><u>Administrative Time</u>: lengthy for parents to complete</p>
<p>Trauma Symptom Checklist for Young Children (TSCYC)</p> <p>Briere, J. 2000</p>	<p>Caregivers and Parents (different versions available)</p>	<p><i>Evaluation</i></p> <p>The instrument contains eight clinical scales:</p> <ul style="list-style-type: none"> Posttraumatic Stress-Intrusion (PTSI), Posttraumatic Stress-Avoidance (PTS-AV), Posttraumatic Stress-Arousal (PTS-AR), Sexual Concerns (SC), Dissociation (DIS), Anxiety (ANX), Depression (DEP), and Anger/Aggression (ANG). 	<p>Children between 3-12 years</p>	<p>54 items; takes less than 20 minutes to complete; Strong evidence for reliability and validity;</p> <p>The instrument rates symptoms on a 4-point scale, based on how frequently they have occurred in the last month</p>

Tools for Infants & Children	Used By	For	Target Population/ Age	Comments
Early Childhood Group Care Tools				
Parenting Stress Index	Parents	<p style="text-align: center;"><i>Screening</i></p> <p>Early identification and prevention of problems in the family and characteristics that fail to promote normal development. (see comments).</p>	3 mos. to 10 years	<p>Short form includes: 1. Parental Distress (the level of stress a parent is experiencing related to his or her role as a parent), 2. Parent-Child Dysfunctional Interaction (the parent's perception of how reinforcing interactions with the child are), and 3. Difficult Child (the parent's perception of basic characteristics of the child that make him/her easy or difficult to manage). 5th grade reading level Primarily intended for preschool-aged children, 101-item test; takes 20--25 minutes for the parent to complete. Must be scored by hand or can be electronically scored using a purchased computer program <i>Administrative Time: 30 minutes</i></p>

Tools for Infants & Children	Used By	For	Target Population/ Age	Comments
Devereaux Early Childhood Assessment (DECA)	Parents, family care givers, early childhood professionals (preschool teachers and child care providers), and mental health providers.	<i>Screening & Evaluation</i> Of all children to promote healthy social and emotional growth; assessment of resilience in preschoolers with social and emotional problems or significant behavioral concerns;	Age 2 to 5	Assessment of 27 positive behaviors & protective factors. Integrated program for strengthening protective factors in children. Most useful with early childhood/child care programs. Requires staff to be trained (approx. 3 days) in the use of the assessment and tools. <u>Administrative Time:</u> 10 min. plus observation time
Early Childhood Environmental Rating Scale Revised Edition (ECERS) (One of a series of four scales which share same format and scoring system)	Child care providers, supervisors, directors, curriculum specialists, early consultants, early interventionists	<i>Screening & Evaluation</i> Monitoring and evaluating the quality of group early childhood environments including use of space, materials and experiences, to enhance children's development, daily schedule, and supervision. Primary focus is on physical environment and safety.	Age 2 ½ through 5	In use since 1980, with revisions. Consists of 43 items organized into 7 subscales Contains inclusive and culturally sensitive indicators for many items. <u>Administrative Time:</u> 3-4 hours including observation and interviews
Infant/Toddler Environment Rating Scale, Revised Edition (ITERS) (One of a series of four scales which share same format and scoring system)	Child care providers, supervisors, directors, curriculum specialists, consultants	<i>Screening & Evaluation</i> Monitoring & evaluating the environment for protection of children's health and safety, appropriate stimulation through language and activities, and warm, supportive interaction.	Birth to 2 ½	Consists of 39 items are organized into seven subscales. Draws from three main sources: research evidence from a number of relevant fields (health, development, and education), professional views of best practice, and the practical constraints of real life in a child care setting. See ECERS above <u>Administrative Time:</u> 3-4 hours including observation and interviews

Tools for Infants & Children	Used By	For	Target Population/ Age	Comments
<p>Family Child Care Environment Rating Scale Revised Edition (FCCERS) (One of a series of four scales which share same format and scoring system)</p>	<p>Child care providers, supervisors, directors, curriculum specialists, consultants</p>	<p><i>Screening & Evaluation</i> Monitoring and evaluating family child care programs conducted in a provider's home</p>	<p>Infancy through school-age</p>	<p>Consists of 38 items organized into seven subscales. See ECERS above <i>Administrative Time:</i> 3-4 hours including observation and interviews</p>
<p>The School-Age Care Environment Rating Scale (SACERS) (One of a series of four scales which share same format and scoring system)</p>	<p>Child care providers, supervisors, directors, curriculum specialists, consultants</p>	<p><i>Screening & Evaluation</i> Monitoring and evaluating center-based, group-care programs for children of school age</p>	<p>Ages 5-12</p>	<p>Scale consists of 49 items, including 6 supplementary items for programs enrolling children with disabilities; also organized into seven subscales. See ICERS above <i>Administrative Time:</i> 3-4 hours, including observation and interviews</p>

APPENDIX O

OVERVIEW OF GLOBAL COMMITMENT TO HEALTH 1115 DEMONSTRATION WAIVER**April, 2011**

The State of Vermont has partnered with the Centers for Medicare and Medicaid Services (CMS) to develop and operate an innovative and comprehensive health reform model under Section 1115 Demonstration authority. The majority of Vermont's Medicaid program operates under the Global Commitment to Health Demonstration, with the exception of its Children's Health Insurance Program (CHIP), individuals enrolled in Vermont's Section 1115 long-term care Demonstration (Choices for Care) and Vermont's Disproportionate Share Hospital (DSH) program. More than 95 percent of Vermont's program participants are enrolled in the Global Commitment Demonstration. The Demonstration began in October, 2005 and was recently renewed to extend until December 31, 2013.

The Global Commitment Demonstration operates under a managed care model that is designed to provide flexibility with regard to the financing and delivery of health care in order to promote access, improve quality and control program costs. The Agency of Human Services (AHS), as Vermont's Single State Agency, is responsible for oversight of the managed care model. The Department of Vermont Health Access (DVHA) is responsible for operation of the managed care model, and has sub-agreements with the other state entities that provide specially care for Global Commitment enrollees (e.g., mental health services, developmental disability services).

Under the current waiver structure, AHS pays DVHA a monthly per member per month (PMPM) estimate using prospectively derived actuarial rates for the waiver year. This capitation payment reflects the State's monthly need for federal funds based on estimated Global Commitment expenditures for the month. Also on a monthly basis, AHS reconciles the federal claims from the monthly payments to the underlying Global Commitment expenditures on the CMS-64 filing. As such, Vermont's payment mechanisms function similar to those used by state Medicaid agencies that contract with traditional managed care organizations to manage some or all of the Medicaid benefits.

The Global Commitment's Special Terms and Conditions (STCs) provide authority and guidance regarding operation and oversight of the Demonstration. Per the STCs, Vermont operates its managed care model in accordance with federal managed care regulations, found at 42 CFR 438. Program requirements and responsibilities are delineated in an inter-governmental agreement (IGA) between AHS and DVHA. In accordance with the IGA and managed care regulations, AHS oversees the managed care model by monitoring DVHA's compliance with managed care requirements (which includes contracting with an independent External Quality Review Organization [EQRO]). CMS reviews and approves the IGA annually to ensure compliance with Medicaid managed care contract requirements. Under this approach, DVHA serves a unique "dual role," responsible for both operation of the managed care model and the traditional Medicaid program:

- *Managed Care Model* - Per the STCs, "DVHA shall comply with federal program integrity and audit requirements as if it were a managed care organization for services and populations covered under the Demonstration." (STC #14) DVHA has modified operations to meet managed care program integrity and audit requirements, including requirements related to network adequacy, access to care, beneficiary information, grievances, quality assurance and quality improvement. Per the EQRO's findings, DVHA has achieved a very high rate of compliance with these requirements.

- *Traditional Medicaid Program* - In its role as the designated unit responsible for operation of the traditional Medicaid program (including long-term care, CHIP and DSH), DVHA is responsible for meeting requirements defined in federal regulations at 42 CFR 455.

One of the major drivers for entering into the Global Commitment waiver was to help bend the curve on Vermont's Medicaid costs – a goal that has been achieved. Prior to its inception in 2005, Vermont was facing a five hundred (500) million dollar deficit in the Medicaid program. Under the waiver agreement, the negotiated aggregate spending limit was \$4.7 billion for first five years (through September 30, 2010) and is \$4.26 Billion for the 3.25 additional years, producing an aggregate spending limit of \$8.96 billion over the 8.25 years of the waiver through calendar year 2013. However, Vermont's actual spending over the 8.25 years of the waiver is projected to be \$8.4 billion -- \$500 million less in expenditures than projected without the waiver (i.e. demonstration savings). In addition, while other states have reduced or eliminated coverage for optional Medicaid services and beneficiary groups over the past few years, the Global Commitment waiver has enabled Vermont to sustain and expand its Medicaid program.

There are a number of ways the Global Commitment waiver has helped Vermont achieve this success. First, the waiver provides the state with the ability to be more flexible in the way it uses its Medicaid resources. This flexibility has enabled Vermont to fund creative alternatives to traditional Medicaid services that have helped improve quality of care and control costs. Examples of this flexibility include new payment mechanisms (e.g., case rates, capitation, combined funding streams) rather than fee-for-service, the ability to pay for services not traditionally reimbursable through Medicaid (e.g., pediatric psychiatric consultation), and investments in programmatic innovations for Medicaid beneficiaries (e.g., the Vermont Blueprint for Health multi-payer advanced primary care practice program).

In addition, provided that DVHA meets its contractual obligation to the populations covered under the Demonstration, any excess capitation revenues may be used for the following purposes:

- Reduce the rate of uninsured and or underinsured in Vermont;
- Increase the access of quality health care to uninsured, underinsured, and Medicaid beneficiaries;
- Provide public health approaches and other innovative programs to improve the health outcomes, health status and quality of life for uninsured, underinsured and Medicaid eligible individuals in Vermont; and
- Encourage the formation and maintenance of public-private partnerships in health care, including initiatives to support and improve the health care delivery system

Through this mechanism, each year, the state has been able to use between \$53.5 and \$65 million dollars to pay for services or other needs under these four categories. As such, this mechanism has brought an average of \$36 million in additional federal dollars into Vermont each waiver year. Examples include respite services for families with disabled children; substance abuse treatment services for uninsured and underinsured Vermonters; mental health peer support and education; tuition support for health professionals under short supply in Vermont, such as nurses, primary care physicians, nurse practitioners, dentists, nurse faculty and dental hygienists; and support for development of standards and training for medical emergency care. All of these investments help improve the health care provided within Vermont, and thereby helps the Medicaid program with its medical cost trends.

The managed care model also encourages inter-departmental collaboration and consistency across programs, which have enabled the state to:

- support a holistic approach to serving individuals and families and ensure the coordination of services when multiple interrelated needs exist.
- ensure maximum communication and collaborative planning when more than one service is being provided to a single consumer or family.
- provide a continuum of services capable of adapting and responding to changing needs and unique situations, including transitional stages.
- create more efficient administrative processes and requirements;
- identify and eliminate duplicative business processes, program monitoring and reporting requirements; and
- prioritize program development or expansion initiatives.

As an additional benefit, work with the State Finance and Management Office as well as Vermont's Legislative Joint Fiscal Office pre-Global Commitment involved individual departmental budgets, appropriations, trends and projections. Post Global Commitment, a process has been put into place to develop consensus documents and agreements between the Executive and Legislative branches on the total Global Commitment expenditures. This detailed level of consensus building is unique between the branches of state government, and while initially a more consuming process, has yielded a much more productive and collaborative discussion of the pressures on our public and private health care delivery systems.



Restructuring Vermont's Child Care Financial Assistance Program

Goals for Restructuring:

Increase affordable access to high quality child care services for Vermont's low income working families

- ❖ Update Vermont's rates and eligibility into greater alignment with Federal standards
 - *Federal guidelines recommend that rates support affordable access to 75% of child care providers for assisted families by meeting or exceeding rates they charge. Vermont's rates met or exceeded rates for only 41% of providers prior to January changes.*
 - *Vermont's Sliding Fee Scale prior to January used the State Median Income from the year 2000 as a standard for determining eligibility*
- ❖ Provide fair and equitable access to family benefits for all participants
 - *Prior to the changes, about 25% of the families with child care subsidies received full support in paying for child care but much of this was accessed through variances to the rules which had risen to unacceptable levels and through use of special contracts for reserved spaces in a limited number of child care programs.*
- ❖ Reinforce provider incentives to provide quality services
- ❖ Sustain child care providers committed to providing high quality services to families challenged by adversity
- ❖ Support continuity of care for children through change process

Summary of Changes Implemented January 3, 2010

- ❖ In order to increase affordable access to all participants in the Child Care Financial Assistance Program, Reserved Space Agreements, Infant Toddler grants and the use of variances to reduce co-payment were ended and the Specialized Services differential paid to providers caring for children with special needs was adjusted from 15% of the base rate to 7% of the full rate paid to providers
- ❖ Revised and Updated the sliding fee scale that establishes eligibility and cost sharing for families to allow eligibility for assistance to families with incomes up to 200% of the Federal Poverty Level.
 - Eligibility limit for 100% benefit for a family of 3 increased from \$14,148 to \$18,300 in gross family income
 - Eligibility limit for 10% benefit for a family of 3 increased from \$35,484 to \$36,600 in gross family income
- ❖ Increased provider rates and revised quality incentives in the rate structure

- Rates were raised across all age groups and regulated provider types.
For example:

Comparison of Weekly Rate for Preschool Child in Licensed Care at 100% benefit						
	Base rate*	1 STAR	2 STARS	3 STARS	4 STARS	5 STARS
December 2009	\$114.14	\$118.71	\$123.29	\$127.84	\$134.37	\$136.97
January 2010	\$129.60	\$136.08	\$142.56	\$155.52	\$168.48	\$181.44

- New rates for a four STAR provider support affordable access to 75% of regulated child providers in Vermont
- Significantly increased differential paid to STARS programs – that is the percent added to the weekly base rate for each subsidized child in care

Comparison of rate differential for STARS programs					
	1 STAR	2 STARS	3 STARS	4 STARS	5 STARS
December 2009	4%	8%	12%	\$17.5%	20%
January 2010	5%	10%	20%	30%	40%

- ❖ Implemented new Strengthening Families grant program
 - A grant program for high quality center based programs providing comprehensive early care and education and after school services for children and families challenged by economic instability and other environmental risk factors was created
 - Priority for these grants in SFY 2010 & 2011 is to mitigate the impact of financial assistance changes for programs transitioning from Reserved Spaces Agreements and Infant Toddler grants
- ❖ Provided a ‘soft landing’ for families with decreased benefits
 - 288 children receiving assistance in December 2009 (3.7 %) had a net reduction in benefits due to ending reserved spaces and variances. Co-payments for these children were limited to less than \$20 per week through June 2010 to allow families to remain with their current provider and adjust to the changes

Results

- ❖ **Increased benefits for families**
 - Benefits were adjusted for 7,669 children currently receiving assistance in January 2010
 - All children’s benefits increased by at least 10% - average increase was 13%
 - 1000 children (13%) increased from less than 100% benefit to 100% benefit
- ❖ **Increased access & affordability for high quality child care services**
 - 282 more children began receiving benefits from Financial Assistance Program between January and March 2010

- 2% increase in overall number of assisted children as compared to 2009 (7,999 children in March 2009 compared to 8,155 children in March 2010)
- Significant increase in Financial Assistance Program rates for STARS programs – assisted families will usually pay less out of pocket for programs with STARS than they would pay to licensed exempt or unrated programs
- Decrease in co-payments for families in STARS programs by counting quality differentials as part of their share of payment
- Increasing enrollment of assisted children STARS rated programs

Percent of children receiving financial assistance enrolled in STARS programs						
	LECC* & Unrated	1 ★	2 ★★	3 ★★★	4 ★★★★★	5 ★★★★★★
March 2009	74%	2%	3%	5%	7%	9%
March 2010	68%	3%	3%	6%	8%	12%

** Legally Exempt Child Care providers paid in Financial Assistance Program*

- ❖ Increased provider rates and incentives to improve and sustain quality
 - Higher rates for all Registered Home and Licensed providers for services provided to children in the financial assistance program
 - Increase in average monthly per child payment to a provider for subsidized child care services by \$30 per month in four STAR settings and by \$80 month in five STAR settings
 - Increasing provider participation and advancement in STARS program

Percent of regulated programs receiving financial assistance payments by STAR rating						
	Unrated*	1 ★	2 ★★	3 ★★★	4 ★★★★★	5 ★★★★★★
March 2009	80%	1%	2%	5%	7%	5%
March 2010	77%	1%	1%	6%	9%	6%

** Registered Homes and Licensed Programs only – no LECC included*

- ❖ Sustained support for providers committed to providing high quality services to families challenged by adversity
 - \$985,845 in Strengthening Families grants awarded to 32 child care providers who had previously had Reserved Spaces Agreements or Infant Toddler grants
 - 85% of providers with Reserved Spaces agreements prior to January 2010 receive an equal or higher weekly rate per child from CDD in the new rate structure
 - Support for continuity of care for subsidized children was built into Strengthening Families contracts
- ❖ Changes were implemented while containing program expenditures within SFY 2010 budget allocations

APPENDIX Q

CORE COMPETENCIES

for Early Childhood Professionals

*The foundation for Vermont's
unified professional development system*

(b)(6)

2008

**Vermont Northern Lights
Career Development Center**

Of the Community College of Vermont and the Vermont Child Care Industry and Careers Council.
Funded by the Child Development Division, Vermont Agency of Human Services.



EARLY CHILDHOOD CAREER LADDER FOR ADVISING

Levels	I	II	III	IV	V	VI
Education completed	High school diploma or GED, or higher education degree in an unrelated field with no early childhood education courses, and Fundamentals for Early Childhood Professionals course (45 hours) or equivalent	Level II Vermont Northern Lights course series (about 90 hours) or equivalent or Child Development Associate (CDA) Credential	<p>A) Vermont Child Care Apprenticeship Program (18 credits plus 4,000 hours) or CCV's Child Care Certificate program (24 credits) or Paraprofessional certificate (26 credits) or equivalent</p> <p>B) Associate degree in early childhood education (60 credits)</p>	Bachelor's degree in early childhood education or related field	Master's degree in early childhood education or related field	Doctoral degree in early childhood education or related field
Experience as an early childhood professional (not cumulative)	1 year	2 or more years	<p>A) 3 or more years</p> <p>B) 4 or more years</p>	1 or more years including student teaching	3 or more years including student teaching	3 or more years

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This entire document can also be downloaded at no cost from the Vermont Northern Lights Career Development Center website: <http://northernlightscdc.org> The core competencies grids (section III) are also available on our website as writable PDF documents to download and use.

Core Competencies for Early Childhood Professionals became effective on August 1, 2005 and were reviewed in 2007-08. These revised competencies became effective July 1, 2008 and remain in effect until further notice. To ensure continued quality and relevance, this document will be reviewed before the end of 2013.

VERMONT NORTHERN LIGHTS CAREER DEVELOPMENT CENTER CORE COMPETENCIES FOR EARLY CHILDHOOD PROFESSIONALS

I. INTRODUCTION

Welcome to the Northern Lights Career Development Center's core competencies for Vermont's early childhood professionals. This book provides information about the competencies and can be used as an assessment tool as well.

The Northern Lights Career Development Center is Vermont's unified system of professional development for early childhood and afterschool professionals. Its goal is to support and enhance the development of a quality, statewide professional development system. This system should be consistent, accessible and comprehensive in meeting the needs of early childhood and afterschool professionals from entry to advanced levels.

Northern Lights Career Development Center welcomes learning about your experiences using this document and the core competencies. We are collecting them to put on our website for others to see and share. You can send us an email at: vtlight@ccv.edu or call 802-241-4661.

A. WHAT ARE CORE COMPETENCIES?

Core competencies are one of the basic tools of professionals – those who work with children and their families and those who support them.

Who is a professional? All professionals have:

- a base of knowledge
- defined standards of practice
- the ability to adapt as the standards and knowledge base grow and change
- connection with a defined community of colleagues within that profession

Core competencies provide the knowledge base and standards of practice all professionals need and share.

The 'core' is the foundation. Many professionals who have been in the field a long time also develop more advanced skills and even specialties beyond the core. Credentials and endorsements are examples of specialties that come from the core knowledge base.

What does a "core competency" include?

Actually, "core competencies" are the essential components in a framework that describes the knowledge and skills needed by professionals in the field.

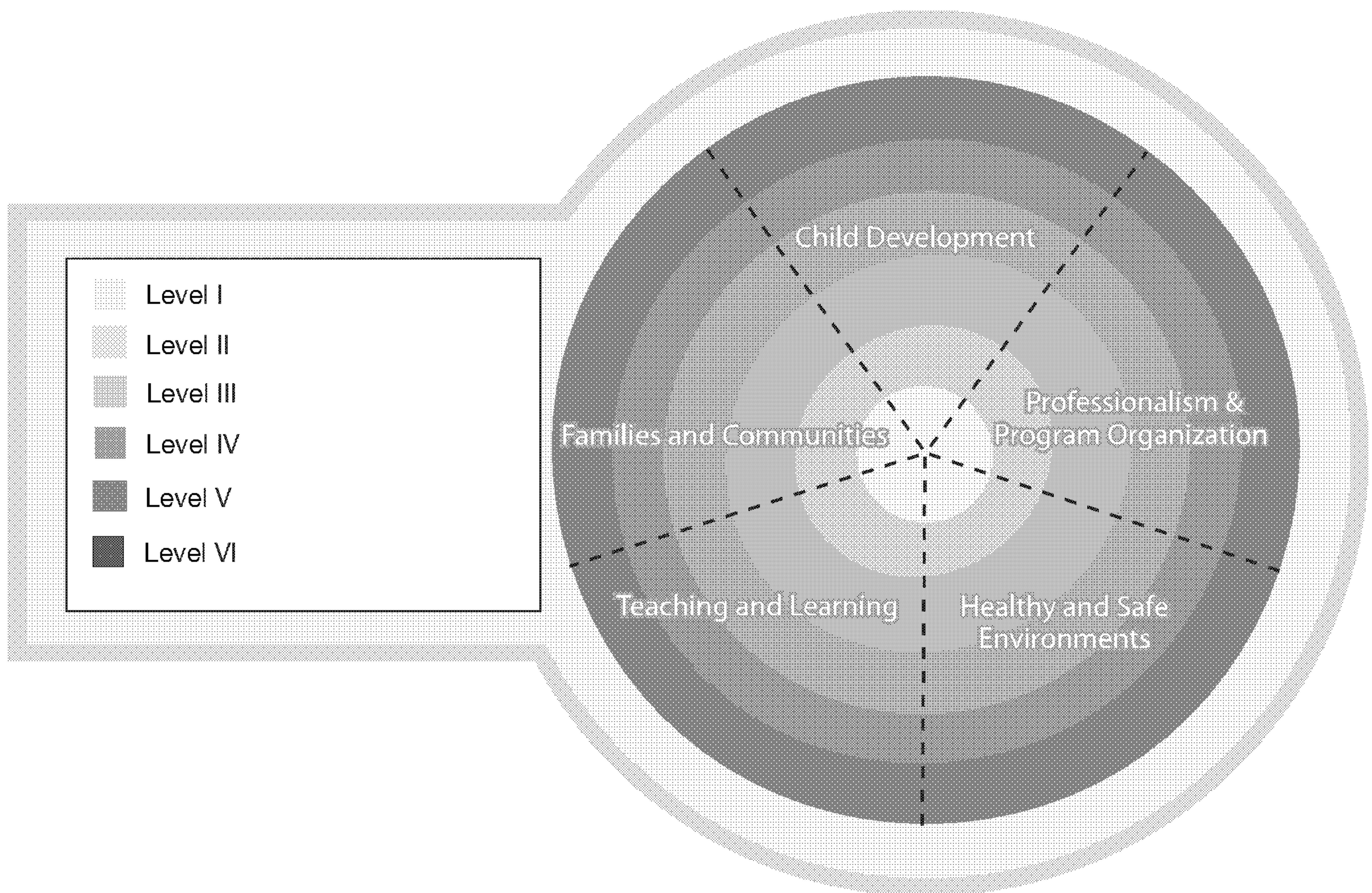
Core knowledge refers to the big chunks: the knowledge needed by professionals to effectively work with young children and their families. There are 5 core knowledge areas that encompass Vermont's core competencies for early childhood professionals.

Subheadings are helpful in breaking the core knowledge areas into smaller chunks. They describe the component parts that make up the core knowledge area.

Core competencies are the smallest pieces. They describe the core knowledge specifically. They are also called standards of practice. Core competencies are concrete and achievable. They detail the observable skills, values and attitudes needed by professionals in order to provide high quality services. In this book we also added examples of how you might see these core competencies in practice.

Levels sort the core competencies in order from entry level to advanced. This document details level I, II and III core competencies and describes Level IV, V and VI competencies. Inside the front cover of this document is the Northern Lights Career Ladder, which shows the education and experience related to each level.

This diagram illustrates how each of the 5 core knowledge areas make up the whole and how each level builds on and expands from the level below it.



Can you show me the core competencies in a nutshell?

Not quite, but the table below shows an overview of the early childhood core competencies. Here you will see the five core knowledge areas (the big chunks), the subheadings (the smaller chunks) and the levels (that relate to the career ladder). The numbers below represent each core competency, listed sequentially by level within core knowledge area.

CORE KNOWLEDGE AREA	LEVEL I	LEVEL II	LEVEL III
Child Development			
How children develop	1 – 7	18 – 26	38 – 41
Influences on child development	8 – 13	27 – 31	42 – 47
Individual variance	14 – 17	32 – 37	48 – 53
Families & Communities			
Relationships	1 – 4	14 – 19	27 – 32
Communication	5 – 9	20 – 23	33 – 36
Community involvement & resources	10 – 13	24 – 26	37 – 38
Teaching & Learning			
Interactions	1 – 8	30 – 37	61 – 67
Learning environment	9 – 15	38 – 47	68 – 73
Curriculum & content	16 – 25	48 – 54	74 – 81
Assessment	26 – 29	55 – 60	82 – 85
Healthy & Safe Environments			
Healthy environments & health needs	1 – 5	25 – 29	45 – 49
Safe environments	6 – 12	30 – 33	50 – 53
Nutrition	13 – 21	34 – 40	54 – 60
Physical activity	22 – 24	41 – 44	61 – 63
Professionalism & Program Organization			
Professionalism	1 – 11	23 – 33	50 – 57
Working with staff and colleagues	12 – 15	34 – 39	58 – 63
Program organization & administration	16 – 22	40 – 49	64 – 72

How do you get core competencies?

You can attain or develop core competencies in many different ways. Some of these are:

- Work experience with regular reflection on that work experience
- Participation in professional development activities such as workshops, conferences, in-service trainings, seminars, or college courses
- One-on-one learning activities such as receiving guidance and coaching from a supervisor or mentor

B. WHERE DO CORE COMPETENCIES COME FROM?

Core knowledge and core competencies are based on what the professional community and research indicates is the basic set of skills, knowledge and attitudes necessary to work with young children and their families.

The Northern Lights Core Competencies for Early Childhood Professionals were originally released in August 2005. They were researched and written by a workgroup of the Professional Preparation and Development Committee, a subcommittee of the Early Childhood Workgroup.

In September 2007 a new, interdisciplinary committee was convened to review the competencies and the booklet and make recommendations based on how the materials have been received and used. Drafts were again reviewed by members of the Professional Preparation and Development Committee. The current document reflects these committees' input and efforts.

The groups used a variety of resources, including the professional development work of several other states, national health and safety standards, national professional recognition standards and the Vermont Department of Education early childhood educator endorsement competencies.

The participants from both groups are listed at the end of this booklet and specific resources consulted are in the bibliography.

C. WHY DO WE HAVE THEM?

The core competencies are one part of the system defining quality early childhood and afterschool services in Vermont. The core competencies connect to other standards for quality services. Just as regulations are part of the standards for programs, and learning standards are part of the standards for children's outcomes, the core competencies are an important part of the standards for professionals. Information about how core competencies and other standards of quality inter-connect are found near the end of this document in Section V, part D.

Core competencies can strengthen the whole professional development system. Core knowledge areas and core competencies play an essential role in creating a consistent professional development system statewide. When professionals have and use well-defined competencies, it means there is agreement about the expectations of the professionals working with young children.

D. WHO ARE THEY FOR?

The core competencies can be used by everyone working in the field of early childhood - classroom teachers, home visitors, adult instructors, mentors, family child care providers, para-educators, special educators, supervisors, sponsors of professional development, presenters and others. They apply to you whether you are working with young children, assessing your learning needs, developing job descriptions, providing supervision, organizing a program, planning to teach a class or otherwise supporting an early childhood or afterschool professional.

Practitioners and professionals working directly with children and families (teachers, providers, caregivers, home visitors, paraprofessionals and others) can use the competencies to assess their own skills, knowledge and attitudes, then identify their learning needs and strengths and create professional development plans to address those needs and strengths.

Supervisors, administrators, mentors and others who provide support to practitioners can use the competencies to provide orientation; develop job descriptions; evaluate performance; assess strengths, challenges and learning needs; and support individuals in creating professional development plans.

Instructors and those who sponsor or plan professional development can use the competencies to design and evaluate course content, and to organize professional development opportunities so that participants have a range of opportunities to develop their core competencies.

Early Childhood Core Competencies are also useful to *home visitors*. Home visitors include a wide range of prevention and early intervention professionals who come from different disciplines such as early intervention, education and special education, health, mental health, family support and social services. They are welcomed into the homes of families with young children in order to provide information, support and resources. Though home visitors share many of the skills, knowledge and dispositions required of early childhood professionals who work with young children in groups, they need additional expertise for many reasons.

Home visitors are in contact with families – and often with many members of a family, more frequently than other early childhood professionals. Therefore, they often develop close relationships with them. Home visiting requires professionals to be skilled adult educators, as well as child educators. The core knowledge areas of teaching and learning,

health and safety are framed differently when the professional, the family members and their home and their routines are all contributing to the child's development. Family-centered and family-driven practices should be used. Finally, when the family's home is also the work setting, professional boundaries may need to be considered differently.

Though this document cannot fully include all of the guidance needed for home visitors, these competencies can steer their practice. Please also go to the Northern Lights Career Development Center website (<http://northernlightscdc.org>) and use the Home Visiting link to find other resources for home visitors.

About competencies and employment

It is important to keep in mind that core competencies are not a job description.

The core competencies provide preparation for the full range of positions and settings in the profession, at each level. However, a specific position may not require a professional to use all the competencies for that level. On the other hand, a position may require additional specific, specialty competencies to be effective in a job. It depends on the situation.

It is useful to seek to have competence in as many of the core competencies as you can, because then you have a strong foundation in the field of early childhood and may have more options for different job responsibilities.

Employers may find the core competencies useful in creating or more clearly defining job descriptions. They might also be useful during performance evaluations. Employers may review their job descriptions to consider how they align with the levels of the career ladder and the corresponding core competencies.

E. HOW DO CORE COMPETENCIES CONNECT WITH CREDENTIALS?

The “core” refers to the skills, knowledge and attitudes that are central to the profession and should be mastered by all professionals in the field. There are two core competency documents in Vermont: one for early childhood professionals and one for afterschool professionals.

The competencies for *early childhood* apply to all professionals working with young children and their families. In this book, competencies are described for a range of knowledge and skill levels, from entry level staff through seasoned staff with many years of experience and education.

The competencies for *afterschool* apply to professionals working with school age children, beginning with the kindergarten year, providing services in before-school, afterschool or summer programs. They are designed to serve entry level staff persons and build up to competencies typical of afterschool program administrators.

There are also two specialty competency documents in Vermont.

The competencies for *early childhood and family mental health* describe specialty competencies that overlap with and enhance the core competencies. They apply to service providers working to support families with young children ages birth to eight. These competencies range from foundation level to specialist.

The competencies for *program directors* describe specialty competencies that overlap with and enhance the core competencies for early childhood and afterschool professionals. They will be completed in 2009.

As people specialize in a particular role or job, they add more field-specific competences to their core competencies. Specialties are based on the core competencies with additional skills and knowledge added. For example, those wanting to specialize in program administration could first look at the professionalism and program organization core knowledge area, then continue their professional development by completing the program director credential, which is based on the program director specialty competencies.

All of these competency documents and information about specialized credentials can be found at the Northern Lights web site at <http://northernlightscdc.org> which is updated regularly.



F. HOW CAN THIS DOCUMENT BE USED?

This document is useful as a reference for anyone wanting to learn about competencies, their purpose, how they are structured and how they are used. The frequently asked questions sections, list of resources, glossary and other parts of the introduction will also be useful to readers. The entire document is available for download on the Northern Lights website <http://northernlightscdc.org> under core competencies.

The core competencies themselves, the heart of this document, are formatted in a grid to use as an assessment tool for Level I, Level II or Level III competencies. People can use it to assess themselves, and mentors or supervisors can use it to assess and guide other professionals. In each core knowledge area (for example, Child Development), the Level I competencies are listed first, then Level II and then Level III.

For each area, examples are provided to illustrate how different professionals at the different levels in different settings may show how they use their competence. *These are only examples* – and are not meant to be exclusive or complete, but merely to show some of the possibilities that might exist.

At any level, a person could find his or her skills or knowledge of that competency to be

- “new” – the competency is not something the person is familiar with
- “emerging” – the competency is familiar but not always evident
- “solid” – the competency is well established and routinely evident

The appropriate box can be checked, perhaps with a date, to indicate a person’s strengths and areas for further growth. These pages are also available as writable PDF documents on the Northern Lights website, so you can download, save and type in them yourself.

In using the assessment tool, it is important to know that even experienced professionals might not be “solid” with each competency at each level.

Competency is gained over time from a combination of education, experience and reflection. Even after taking a Level I, II or III professional development activity you might not yet be “solid” with the competencies at that training level. An honest, accurate assessment is the most useful way to help plan future professional development. The self-reflection that is part of the self-assessment process, also can inform individuals about the best ways one learns.

Earlier in this introduction, (section D, “Who are they for?”) there is information about the different professionals who would use these core competencies and how they might use them.

Some other ways competencies can be used:

- Instructors ask their adult students to do the self assessment in class or as homework and bring it back to discuss. Then the students together, review their self-assessments, and start the process of identifying priorities, professional development goals, and action steps to create Individual Professional Development Plans (IPDP).
- At a staff meeting of a large early childhood program, each team takes one core knowledge area and assesses their teams’ knowledge and skills in that area, adding examples from their practice. Teams report back to the rest of the staff and reflect on their combined skills and areas for growth. A plan is made for how those staff members with the most knowledge and skills in an area, might share them with the group. Skills and knowledge that many staff need are also identified and added to a staff training schedule.
- In planning to do a presentation or course for adults, instructors use the core competencies to identify objectives they will address, based on the level of the students they will teach.

- Documentation of professional development forms are created before each presentation or workshop, with the core knowledge areas and subheadings to be addressed identified on them. After the workshop, participants get a signed copy to have a record of the content of that workshop and on the back of the form, have room to write their reflections about the workshop and how they will apply what they learned.
- An organization that sponsors training uses the core competencies as a framework to review past trainings and plan future trainings. Were all core knowledge areas and subheadings addressed? Which areas should be addressed in the future?
- A curriculum is assessed to learn which core competencies are included. This informs the sponsor or instructor how this particular curriculum fits with the other training within the field of early care and education.
- A new certificate recognizing a specialty area of knowledge and skills is being developed. The committee creating this certificate first identifies the competencies necessary to be awarded this certificate and how they will be assessed. Then current training is identified that already includes these competencies. If needed, new training is created to address competencies not yet addressed.
- A review committee is seeking to recognize people's skills and knowledge for equivalent coursework or experience, outside of a prescribed course of study. The review committee can assess the skills and knowledge of the candidate on the basis of whether they have met the competencies that align with the prescribed course work.

Northern Lights Career Development Center welcomes learning about your experiences using this document and the core competencies. We are collecting them to put on our website for others to see and share. You can send us an email at: vtlight@ccv.edu or call 802-241-4661.



II. THE CORE KNOWLEDGE AREAS, SUBHEADINGS AND LEVELS

A. THE CORE KNOWLEDGE AREAS AND SUBHEADINGS

There are five core knowledge areas (“the big chunks”), each of which has a number of subheadings (“the smaller chunks”). Together they provide the structure for the core competencies. They are defined below.

Core knowledge area 1: Child Development

Early childhood professionals have an understanding of how children develop and the factors that are involved in development. They use their understanding of child development combined with their knowledge of each child as an individual to support children’s overall development.

This knowledge area is divided into three subheadings:

- A. *How Children Develop* addresses the principles and process of development, developmental norms and milestones, and the theoretical explanations of development.
- B. *Influences on Development* addresses the environmental factors that play a role in development, including the family culture and relationships.
- C. *Individual Variance* addresses the factors within the child that play a role in development, including temperament and resiliency.

Core knowledge area 2: Families and Communities

Early childhood professionals understand that children are members of a family and that both the family and the program are part of a community. They work in partnership with families by communicating respectfully and by sharing information and resources that support children and families.

This knowledge area is divided into three subheadings:

- A. *Relationships* addresses the central role of the family and the importance of relationships with and between families that recognize family culture and family strengths.
- B. *Communication* addresses communication practices that build respectful relationships.
- C. *Community Resources and Involvement* addresses the role of the early childhood program in connecting the family with the community and the resources it holds, within a team philosophy.

Core knowledge area 3: Teaching and Learning

Early childhood professionals understand that the substance of teaching and learning is in the combination of interactions, routines, and experiences in children’s daily lives.

This knowledge area is divided into four subheadings:

- A. *Interactions* addresses the role of relationships with children as the foundation of their ability to explore, play and learn.
- B. *Learning Environment* addresses environments for children that are age appropriate, predictable, understandable and rich in materials that support growth and learning.
- C. *Curriculum and Content* addresses the strategies used to create programs for children that match each child’s unique approach to learning and include the subject areas of early childhood education with age-appropriate learning standards.
- D. *Assessment* addresses the use of observation and reflection to plan, develop and assess curriculum and to assess children’s growth and learning.

Core knowledge area 4: Healthy and Safe Environments

Early childhood professionals use practices that protect children and promote health, including good nutrition and physical activity.

This knowledge area is divided into four subheadings:

- A. *Healthy Environments and Health Needs* addresses strategies to create and maintain environments that are free of health hazards, knowledge of and collaboration with community health resources, and practices to meet the health needs and health issues of children and families.
- B. *Safe Environments* addresses strategies to create and maintain environments that are free of safety hazards with respect to the age and abilities of the children, knowledge of and collaboration with community safety resources, and practices to meet the safety needs of children.
- C. *Nutrition* addresses the development of eating skills, standards of nutritional needs and serving size for different ages, safe and age-appropriate food service and knowledge of and collaboration with community resources regarding food and nutrition
- D. *Physical Activity* addresses the role of physical activity and rest in children's growth and learning and collaborating with families to support children's physical needs.

Core knowledge area 5: Professionalism and Program Organization

Early childhood professionals understand they have the responsibility to provide services that meet or exceed standards of practice and support positive outcomes for children, families and professionals, including themselves, staff and other colleagues.

This knowledge area is divided into three subheadings:

- A. *Professionalism* addresses the policies and practices for ethical conduct, including confidentiality, reporting child abuse, professional demeanor, and reflective, thoughtful planning for professional growth.
- B. *Working with Staff and Colleagues* addresses strategies to create strong professional relationships with colleagues and defining the variety of roles colleagues play with one another.
- C. *Program Organization and Administration* addresses the components of sound business practices such as regulatory compliance, budgeting, administration and program evaluation.

B. CORE COMPETENCIES: LEVELS

The core competencies are arranged in levels corresponding to the levels of the Northern Lights Career Ladder. This ladder (shown inside the front cover) outlines a general progression through six levels, each of which includes both education and experience. Professionals may enter the field of early childhood at different levels of this ladder; some start at level I and others at level III for example. The Career Ladder is a guide, and a tool for tracking and planning professional growth.

The levels build on each other. Level II includes the competencies of Level I, Level III includes both Levels I and II, and so forth. People achieve a level on the career ladder when they complete all of the requirements of that level: both education and experience.

The core competencies describe the knowledge, skills and attitudes that are expected from someone at that level. Progress from one level to another occurs through a combination of education, experience, and reflection.

Level I competencies include the knowledge, skills, and attitudes necessary for entry-level professionals, working under supervision or with support from networks or organizations. Level I training includes the course, Fundamentals for Early Childhood Professionals, or an equivalent. This course is offered through the community child care support agencies and some other sponsors of professional development.

Level II competencies include Level I competencies plus the knowledge, skills, and attitudes associated with the Level II Northern Lights coursework, the Child Development Associate credential or an equivalent.

Level III competencies include Levels I and II competencies plus the knowledge, skills, and attitudes associated with completion of the Apprenticeship Program, or the Child Care Certificate from Community College of Vermont, or an associate's degree in early childhood education or a related degree, or an equivalent.

Levels IV, V and VI competencies include Levels I, II, and III competencies plus the knowledge, skills and attitudes associated with achieving a bachelor's, master's or doctoral degree. Professionals at this level may or may not also have a Department of Education teaching license with an endorsement in early childhood or early childhood special education.



III. NORTHERN LIGHTS CORE COMPETENCIES: LEVEL I, II AND III

See grid on following pages.

CORE KNOWLEDGE AREA: Child Development

Early childhood professionals have an understanding of how children develop and the factors that are involved in development. They use their understanding of child development combined with their knowledge of each child as an individual to support children's overall development.

Core Knowledge Area & Subheading

Competency

Assessment Tool

Example of What You Might See in Practice

CHILD DEVELOPMENT: LEVEL I COMPETENCIES

	new	emerging	solid	
<p>A. How Children Develop</p> <ol style="list-style-type: none"> 1. Describes principles of growth and development 2. Identifies and defines developmental domains (physical, cognitive, social-emotional, communication) 3. Identifies basic developmental milestones of children prenatal through middle childhood 4. Identifies several ways that children are different from adults in learning, thinking, behavior and needs 5. Recognizes that the progression of feeding skills is an indicator of development, especially in infants and toddlers 6. Describes the role of play and exploration in children's overall development 7. Recognizes the importance of observing and documenting children's development; begins to keep observation-based records and communicates with others about the observations 	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<p>I know that children develop in a sequential way, starting with crawling, then first steps and then on to walking.</p> <p>I know that when the children play with the toys and materials it helps them grow and learn.</p> <p>In the program we all watch the children and keep notes to give to parents to let them know what went on during the day.</p>
<p>B. Influences on Child Development</p> <ol style="list-style-type: none"> 8. Defines adult-infant attachment and explains how it is important in supporting exploration and later development 9. Describes the relationship between fulfilling children's basic needs and its impact on growth and development 10. Recognizes the progression of age-appropriate eating skills and the attachment and social/emotional development that occurs during feeding. 11. Understands that children's families and other social environments play important roles in supporting and shaping development 12. Identifies factors in the environment that impact development, including prenatal factors, media factors, pollutants and contaminants 13. Recognizes that stress resulting from trauma, abuse, neglect, poverty, and other factors impacts children's development and behavior in individual ways 	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<p>I realize that when children are rested, well fed and feel safe, they are best able to play, explore and learn – whether they are home, in the program or somewhere else.</p> <p>The program has brochures available with information on how pregnant women might want to be careful about eating well and not smoking.</p>
<p>C. Individual Variance</p> <ol style="list-style-type: none"> 14. Defines temperament and the role it plays in how children respond to people and the environment 15. Identifies children's basic needs, such as nutrition, trust, safety, attention and belonging 16. Distinguishes between typical and atypical development, recognizing that there is a range of ages at which children acquire skills 17. Defines resiliency as it applies to children and names characteristics of a resilient child 	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<p>It is interesting to watch Ben. He watches kids for awhile and plays near them, but he won't go right up to them. He smiles when kids come up to him though.</p>

Core Knowledge Area & Subheading	Competency	Assessment Tool			Example of What You Might See in Practice
		new	emerging	solid	
CHILD DEVELOPMENT: LEVEL II COMPETENCIES					
A. How Children Develop	18. Identifies major theories and theorists of child development	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	One child in my program doesn't move around the same way as the other ones who are the same age. I asked about this and it was explained to me how he is developing in a normal way. I often find that if I use materials such as play dough or water play, all the children can participate at whatever level they are. I understand that the brain research talks about letting children repeat favorite activities, helps them grow and learn.
	19. Identifies 3 – 4 main aspects of one's own personal philosophy about how children grow and learn	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	20. Explains how exploration and play is a driving force in children's development	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	21. Explains how findings from brain development research apply to early care and education practices	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	22. Describes the sequence of communication development	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
B. Influences on Child Development	23. Describes the sequence of physical development, including gross and fine motor skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Attachment is the strong bond between the child and the adult. It lets Sally feel safe enough to leave my side to go off and play for awhile. When I provide a safe space for children to play in and I am a warm, caring, responsive person, I know children will benefit from my care. I noticed after Jamie's grandfather died, he would sometimes be really quiet and sad and at other times he would be angry and run around a lot.
	24. Describes the sequence of cognitive development in children, including language and communication	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	25. Describes the sequence of social and emotional development in children	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	26. Chooses observation strategies appropriate to observing and recording developmental changes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	27. Describes different patterns of attachment and the ways that adult interactions support the development of healthy attachment relationships	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
C. Individual Variance	28. Identifies characteristics of people and environments that promote and support development	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	When Tim isn't his usual self – crying more often and wanting to be alone, his parents and I usually suspect an ear infection and are often correct. We have several books on child development with a chart of milestones that I use. If I suspect a delay I talk with my supervisor.
	29. Describes specific ways that environment factors influence development, including prenatal factors, media factors, pollutants and contaminants	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	30. Describes specific ways that stress due to trauma, abuse, neglect, poverty and other factors impacts children's development and behavior	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	31. Explains the variety of ways children experience grief and loss	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	32. Considers temperament and other individual differences when explaining individual children's development and behavior	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
C. Individual Variance	33. Identifies the needs of children based on observation, understanding individuals and their cues, signals and communications	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	When Tim isn't his usual self – crying more often and wanting to be alone, his parents and I usually suspect an ear infection and are often correct. We have several books on child development with a chart of milestones that I use. If I suspect a delay I talk with my supervisor.
	34. Describes factors influencing resiliency in children	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	35. Identifies aspects of children's health status that impact behavior, interactions and learning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	36. Recognizes when to seek the help of others in understanding and addressing children's atypical development	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	37. Identifies resources for acquiring information about atypical development	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Core Knowledge Area & Subheading	Competency	Assessment Tool			Example of What You Might See in Practice
		new	emerging	solid	
CHILD DEVELOPMENT: LEVEL III COMPETENCIES					
A. How Children Develop	38. Compares and contrasts major theories of child development, identifying underlying processes and sources of influence in different theories	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The program has a statement in the handbook that talks about Jean Piaget's theories about children learning through play; I think this makes sense.
	39. Applies knowledge of the sequence of development (across all domains) to anticipate children's interests and needs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	40. Uses observation strategies to analyze children's play, interests and actions and record developmental changes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	41. Names a variety of practices that support brain development in infants and toddlers and chooses appropriate practices within the program	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
B. Influences on Child Development	42. Supports children in creating healthy attachment relationships with significant adults	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In our infant/toddler area there is a particularly fussy 14 month old and we really try to let her snuggle with the adults as much as we can. The contact with adults helps her feel better. I took a course on observing and recording and found many different ways to document the children's play. In addition to daily notes, I can do running records, tallies or use the camera to capture their play on film.
	43. Employs strategies that support and optimize the healthy development of children	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	44. Considers the impact of stress (due to trauma, abuse, neglect, poverty and other factors) when addressing the needs of individual children	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	45. Identifies environmental factors influencing development in individual children, including prenatal factors, media factors, pollutants and contaminants	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	46. Analyzes physical or behavior changes in children as possible indicators of the presence of stress and takes appropriate action	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	47. Responds appropriately to the variety of ways children experience grief and loss	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	48. Integrates information on child development with an understanding of individual children's needs and interests to tailor the program to each child	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
49. Monitors children's health status and intervenes appropriately when it impacts their behavior, interactions and learning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
50. Incorporates practices that support children's resiliency into the program	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
51. Identifies strengths, needs, and interests of each child and develops strategies to support each child's growth and development	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
52. Identifies and discusses issues in child development arising from differences in gender, race, culture, and class	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
53. Collaborates with parents in seeking the help of specialists in assessing, understanding and addressing their children's atypical development	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
C. Individual Variance					

CORE KNOWLEDGE AREA: FAMILIES & COMMUNITIES

Early childhood professionals understand that children are members of a family and that both the family and the program are part of a community. They work in partnership with families by communicating respectfully and by sharing information and resources that support children and families.

Core Knowledge Area & Subheading	Competency	Assessment Tool	Example of What You Might See in Practice
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FAMILIES & COMMUNITIES: LEVEL I COMPETENCIES

	new	emerging	solid	
A. Relationships	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<p>I know that having a strong relationship with a family is important for me and it helps us talk about the child openly.</p> <p>When a new family comes to my group, I start by asking the parent what he likes best about his child.</p>
B. Communication	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<p>I realize I feel comfortable talking to parents most of the time but I get flustered when something unexpected happens and I need to deal with it quickly.</p>
C. Community Involvement & Resources	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<p>I participate in my local provider network and we often have speakers come in to talk about services and resources. I keep a list of their names handy and will call them if necessary.</p>

FAMILIES & COMMUNITIES: LEVEL II COMPETENCIES

A. Relationships	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<p>The parents and I meet at least twice a year about their child's progress and what they want to see before the child leaves my program. I also write notes home describing things their child accomplished this week.</p>
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Core Knowledge Area & Subheading	Competency	Assessment Tool			Example of What You Might See in Practice
		new	emerging	solid	
B. Communication	20. Uses a variety of methods to maintain communication with all families in the program	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	I ask parents for input and feedback about what they like and don't like about the program in different ways, such as surveys and suggestion boxes.
	21. Applies a variety of communication strategies and techniques to support and build trusting relationships with children and families	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
C. Community Involvement & Resources	22. Utilizes a variety of strategies with families that encourage feedback, evaluation, and involvement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	I put up a place for parents to share their best snack ideas and now parents are also using it to ask each other for things – like where are good playgrounds.
	23. Describes and implements policies that foster respect and inclusion of all children and families	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
FAMILIES & COMMUNITIES: LEVEL III COMPETENCIES					
A. Relationships	24. Utilizes community resources within the program that support children and families	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	I have a wide range of resources available for families to use and sometimes I help parents make a connection to the ones they need.
	25. Refers families to appropriate community resources	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
B. Communication	26. Assists families in making their own referrals and requests for services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	I listen to what is important to the parents when I talk with them about their child. I believe what matters to them, matters to me.
	27. Employs strategies to build networks among families in the program and community	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
C. Community Involvement & Resources	28. Fosters parents' abilities to notice and appreciate their child's development and individuality	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	I work hard to have a good connection with the families and because they are all so different, I make sure that I am aware of what works best for each one.
	29. Creates opportunities for families to engage in the program and to interact with one another	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
A. Relationships	30. Plans or participates in parent and community involvement activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	I schedule a meeting with each family twice a year. I prepare information I have collected about their child and I have questions for them as well.
	31. Monitors at-risk parents and assists parents in accessing appropriate resources as necessary	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
B. Communication	32. Articulates and values a strengths-based, family-centered philosophy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	I participate in the IEP meetings as often as I can. It really gives me a lot of information about the child as well as the resources available for other children.
	33. Evaluates a variety of communication techniques and selects appropriate methods to support and build trusting relationships with each family	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
C. Community Involvement & Resources	34. Integrates children's home cultures and languages into the program as appropriate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	35. Monitors relationships with families and selects strategies that insure feedback, evaluation, and involvement with all families	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
A. Relationships	36. Uses a system of multiple communication techniques throughout the program to accommodate a wide range of families' needs or styles	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	37. Participates in teams that are coordinating services for children and families	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
B. Communication	38. Maintains a family-centered philosophy when working with others in the community	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	39. (Empty)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

CORE KNOWLEDGE AREA: TEACHING & LEARNING

Early childhood professionals understand that the substance of teaching and learning is in the combination of interactions, routines, and experiences in children's daily lives.

Core Knowledge Area & Subheading

Competency

Example of What You Might See in Practice

Assessment Tool

TEACHING & LEARNING: LEVEL I COMPETENCIES

new emerging solid

	new	emerging	solid	
<p>A. Interactions</p> <ol style="list-style-type: none"> 1. Demonstrates warm, positive, nurturing, and respectful interactions with children 2. Understands the importance of trusting relationships with children where they feel safe, secure and valued 3. Identifies a variety of positive guidance techniques 4. Monitors children's relationships and is aware of their involvement with each other 5. Facilitates and participates in children's play without taking over the activity 6. Communicates with others in positive, respectful ways as a model for children 7. Responds to children's initiations and requests, including the nonverbal cues of infants and toddlers 8. Uses care-taking activities, such as diapering and dressing, as an opportunity to foster healthy development through positive adult/child interactions 	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<p>Before picking the infants up, I talk to them and tell them what I am going to do.</p> <p>I make it a point to greet each child in a way that they like. Some children like to be hugged and some like a pat on the back.</p> <p>When I am sitting at the sandbox and the children are the 'cooks', I pretend to eat the food they give me.</p>
<p>B. Learning Environment</p> <ol style="list-style-type: none"> 9. Describes the elements of a welcoming, supportive, healthy and enriching learning environment 10. Distinguishes between daily schedules and routines that are rigid, flexible, or random 11. Provides opportunities for children to explore their own interests 12. Describes how to use television, videos, computers, video games and adaptive technologies in appropriate and meaningful ways (e.g., screen time is not appropriate for infants) 13. Identifies key toys and materials necessary in programs for infants, for toddlers and for preschoolers 14. Describes how environments support children's independence, exploration and positive behavior 15. Identifies how routine activities (such as diapering, toileting or dressing) and daily transition times are important parts of the program 	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<p>The rooms are big and the children have many toys and materials to play with whenever they want to.</p> <p>In the parent agreement, it states that TV and computers are used infrequently and only 'educational' videos are used.</p>

Core Knowledge Area & Subheading	Competency	Assessment Tool			Example of What You Might See in Practice
		new	emerging	solid	
C. Curriculum & Content	<ul style="list-style-type: none"> 16. Recognizes the primary role that sensory experiences, free exploration and play have in children's growth and learning 17. Identifies where sensory experiences, free exploration and play occur during the program 18. Demonstrates knowledge of the Vermont Early Learning Standards 19. Defines "curriculum" as it applies to programs for infants, toddlers and preschoolers 20. Identifies aspects of the program that support children's emergent literacy, language and communication 21. Reads to children and involves the children through questions and conversations 22. Identifies the components of the content areas of math, science, social studies, the arts and literacy for infants, toddlers and preschoolers 23. Encourages creative expression and identifies how the creative process supports children's growth 24. Identifies where children's interests and needs are incorporated into the program 25. Practices observing children to identify their interests and needs 	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>A VELS poster is taped to the wall above the art sink and I read it as I wash out paint brushes.</p> <p>I understand that toddlers are doing math and science when they are playing and stacking the soft blocks.</p>
D. Assessment	<ul style="list-style-type: none"> 26. Describes different ways to assess children and different purposes of assessment 27. Describes different methods for observing and recording children's behavior 28. Identifies several documentation strategies that provide evidence of children's development 29. Understands that information regarding child assessments cannot be discussed or shared without parent permission (release of information) 	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>Watching children gives me ideas about what they like to do so I write it down on the daily notes to parents.</p> <p>Each year our program has an in-service on confidentiality. It is a good reminder to be careful when and with whom I am discussing children's issues.</p>
TEACHING & LEARNING: LEVEL II COMPETENCIES					
A. Interactions	<ul style="list-style-type: none"> 30. Uses a variety of positive guidance strategies that respect children and teach appropriate social skills 31. Provides opportunities for children to listen, interact, and communicate freely with other children and adults 32. Has reasonable expectations about children's needs, abilities, and interests 33. Promotes positive, pro-social relationships among children and helps each child feel accepted in the group 34. Supports children in recognizing and expressing feelings in both themselves and others 35. Guides children to resolve interpersonal conflicts and solve problems with others 36. Asks open-ended questions and encourages children to ask questions 37. Develops plans to transition children into and out of the program and involves families in the plans 	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>Occasionally when the children are playing in the dramatic play area the children won't want someone to play. I help them find a role for the child and ways to include that child.</p> <p>Instead of asking Ethan how was his day, I will ask him to "tell me about your day" – that way he doesn't answer, "good" and stop talking.</p>

Core Knowledge Area & Subheading	Competency	Assessment Tool			Example of What You Might See in Practice
		new	emerging	solid	
B. Learning Environment	38. Creates an environment – using the space, the materials and the routine – that encourages play, exploration and learning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This week a child came in with a book on people who are blind and showed a booklet with words in Braille. We stopped what we were doing and spent time feeling the Braille letters.
	39. Follows a daily plan that balances individual, large and small group activities, child-directed and teacher-directed activities, and indoor and outdoor activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	40. Has a daily routine that is predictable yet allows flexibility to support children's interests and needs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	41. Provides key toys and materials necessary in programs for infants, for toddlers and for preschoolers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	42. Identifies characteristics of environments that have cultural, ethnic, racial and linguistic diversity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	43. Provides opportunities for children to engage in extended periods of free exploration and spontaneous play within the daily routine	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	44. Uses television, videos, computers, video games and adaptive technologies in appropriate and meaningful ways	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	45. Develops strategies for facilitating routine activities (diapering, dressing) and daily transition times	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	46. Changes toys and materials to support and reflect children's changing needs and interests	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	47. Arranges materials and space so that it is organized and supports independence and positive behavior	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
C. Curriculum & Content	48. Describes how children learn specific content (math, literacy, etc.) through their sensory experiences, play, exploration, interactions and inquiry	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	We have a restaurant theme in the dramatic play area and I am amazed at how this area includes math, science, social studies and literacy. They write out the food orders and the bill, they talk about different foods and how the waitresses and waiters should do their job. I wanted to do a unit on different foods around the world and used the VELs standards to get ideas about appropriate materials.
	49. Provides various sensory experiences and opportunities for play and exploration	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	50. Creates learning experiences appropriate to the developmental level and interests of the children	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	51. Uses Vermont Early Learning Standards in planning and evaluating programs for preschoolers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	52. Adapts the curriculum, the environment and the materials to meet the needs of individual children	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	53. Makes a wide variety of engaging, age-appropriate books easily accessible to children	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	54. Plans a program that supports learning in all the specific content areas (math, literacy, communication, science, social studies, health, etc.) and is appropriate for the developmental level of the children	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	55. Collects and organizes information from parents and direct observation that provides evidence of the development of each child	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
D. Assessment	56. Identifies appropriate methods of documentation and assessment according to specific purposes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	I use sticky notes that I jot down during the day, along with the date, so when I write in the children's notebooks each week, I can include that information.
	57. Identifies appropriate methods of observing and recording according to specific purposes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	58. Collects documentation of children's activities and work as evidence of accomplishing curriculum goals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	59. Maintains accurate records of observations and assessments	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	60. Communicates observations and interpretations with parents and, with parental consent, with colleagues and other professionals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Core Knowledge Area & Subheading	Competency	Assessment Tool			Example of What You Might See in Practice
		new	emerging	solid	
TEACHING & LEARNING: LEVEL III COMPETENCIES					
A. Interactions	61. Encourages children to develop independence by providing physical and emotional security and opportunities for children to master new skills, experience success, and safely take risks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Jennifer forgets to hang up her coat when she comes in and a simple reminder, "coat" works for her, yet Brenda responds better to "I need you to pick up your coat".
	62. Evaluates a variety of positive guidance techniques and selects appropriate methods for the specific situation or child	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	By spring we have spent a lot of time using conflict resolution with the kids and they can talk with each other, discuss the problem and come to an agreement without much help from the
	63. Designs and implements behavior plans to guide children towards appropriate behavior in cooperation with parents and other involved adults as appropriate for individual children	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	64. Effectively de-escalates emotional and behavioral situations with children in supportive ways	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	65. Monitors the children's interactions and adjusts the program to support all children in listening, interacting, and communicating freely with others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	66. Takes a role of facilitator or observer when supporting children in resolving conflicts with each other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	67. Uses a consistent procedure, in partnership with families, to transition children into and out of the program	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
B. Learning Environment	68. Plans and creates indoor and outdoor environments that are safe, stimulating, engaging, and intentionally designed to support curriculum goals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	We had noticed, through observations, that the block area wasn't being used very much by the children. We added some construction vehicles to the block area and interest has really picked up.
	69. Observes the program, evaluates how the environment is meeting the needs and interests of the children and makes changes as appropriate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	We have families from many countries and so we asked everyone to bring in pictures, clothes, books and recipes from their
	70. Creates environments that have cultural, ethnic, racial and linguistic diversity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	71. Uses routine activities (diapering, dressing) and daily transition times to support curricular goals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	72. Adjusts the routine and environment to provide numerous opportunities for children to engage in extended periods of free exploration and spontaneous play within the daily routine	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	73. Observes the environment and makes adjustments to reduce behavior issues and maximize appropriate use of materials	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
C. Curriculum & Content	74. Adjusts teaching practices based on individual children's developmental accomplishments and needs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The children are interested in space. I asked them what they thought about space and listened to their questions. I used these to decide what to add about space in the room - aluminum foil to make space ships, books on space, and we used flashlights, boxes and black paper to explore stars and light.
	75. Implements an integrated curriculum that addresses the various content areas (i.e., language arts, science, mathematics, social studies, the arts) and is based on children's needs and interests	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	I like to be outside in nature and my interest spills over to the children's. I have scales, magnifying glasses, bug boxes, clip boards and plastic containers. The children are always looking to see what they can explore.
	76. Uses the Vermont Early Learning Standards in planning and evaluating curricula, learning environments, and materials for preschoolers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	77. Plans appropriate learning experiences based on observations and analyses of children's behaviors and activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	78. Provides opportunities for children to raise questions about the world around them and to explore their questions using the scientific method	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	79. Provides open-ended activities that foster curiosity, exploration, and problem solving appropriate to the children's developmental levels	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	80. Participates in implementing service plans and making accommodations for children with special needs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	81. Analyzes curriculum models along with their rationales and limitations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Core Knowledge Area & Subheading	Competency	Assessment Tool			Example of What You Might See in Practice
		new	emerging	solid	
TEACHING & LEARNING: LEVEL III COMPETENCIES					
D. Assessment	82. Uses a variety of methods to systematically observe, document and monitor children's development, behavior and wellness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Each child has a folder with samples of their work – art work (paintings, drawings, etc) and when we talk with parents, they can see the differences as time goes on.
	83. Analyzes different methods of observation, documentation and assessment and selects appropriate techniques according to the desired purpose	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	84. Routinely collects, organizes and interprets documentation of children's activities and work as evidence of accomplishing curriculum goals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	85. Routinely shares observations and documentation with families to demonstrate children's development, interests, and achievement of curriculum goals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

CORE KNOWLEDGE AREA: HEALTHY & SAFE ENVIRONMENTS

Early childhood professionals use practices that protect children and promote health, including good nutrition and physical activity.

Core Knowledge Area & Subheading	Competency	Assessment Tool			Example of What You Might See in Practice
		new	emerging	solid	
HEALTHY & SAFE ENVIRONMENTS: LEVEL I COMPETENCIES					
A. Healthy Environments & Health Needs	1. Understands minimum standards for healthy environments within the program licensing regulations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The regulations are tacked to the bulletin board for all of us to see and read. Posters on diapering and hand washing are posted in the appropriate areas. I make sure I wash my hands and the children's hands after coming inside.
	2. Follows universal precautions to avoid the spread of infectious illnesses and blood-borne pathogens	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
B. Safe Environments	3. Follows procedures that reduce contamination and the spread of infectious illnesses, such as in hand washing, diapering, toileting, washing tables, and cleaning toys	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	I practice fire drills every month and write it down on the calendar. Every day after the children leave I look around the playground and pick up toys, throw away anything that is broken and make sure everything is safe.
	4. Identifies local health care professionals, health services, and health resources available to children and their families	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	5. Practices appropriate health information documentation procedure according to the program and licensing regulations.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	6. Has knowledge of CPR and is prepared to implement techniques	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	7. Responds to injuries using appropriate first aid techniques	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	8. Monitors indoor and outdoor toys, materials and equipment and maintains them in safe condition	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	9. Monitors children to prevent injuries	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	10. Identifies environmental hazards and removes them, such as broken toys, choking hazards, poisonous plants and secondhand smoke.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	11. Identifies characteristics of safe environments for all ages of children	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	12. Understands and follows emergency procedures as defined by the program	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Core Knowledge Area & Subheading	Competency	Assessment Tool			Example of What You Might See in Practice			
		new	emerging	solid				
C. Nutrition	13. Follows program licensing regulations intended to ensure good nutrition and safe food preparation and service 14. Recognizes and avoids health hazards in meals (choking, allergies, burns, etc.) 15. Provides meals for children with special dietary needs as instructed 16. Identifies community programs and federal nutrition benefits to supplement family food resources 17. Lists components of a healthy diet for infants, toddlers and preschoolers (Child and Adult Care Food Program meal patterns), including the nutritional superiority of breast milk for infants 18. Follows individualized schedules for eating and resting with infants 19. Understands that a healthy eating environment for infants includes responding appropriately to an infant's feeding cues 20. Understands that a healthy eating environment for toddlers and preschoolers includes structured meal times, expectations of appropriate behavior and family style meals with a pleasant social atmosphere that includes adults 21. Recognizes that there is a division of responsibility in feeding – that adults are responsible for what and how food is presented and that children are responsible for whether and what they eat	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	The enrollment form asks the family if the child has any special dietary needs. I use the guidelines from the Food Program and follow the suggested menus.			
		D. Physical Activity	22. Recognizes the importance of, and provides time and space for, active play for all children 23. Recognizes the long-term health risks of extended periods of screen media and other passive activities 24. Provides appropriate periods of rest and safe sleeping environments	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	The children have at least 20 minutes of outdoor time every morning, weather permitting. If they can't go outside we often push back some furniture and turn on the dancing music.	
				HEALTHY & SAFE ENVIRONMENTS: LEVEL II COMPETENCIES				
				A. Healthy Environments & Health Needs	25. Recognizes potentially unhealthy practices and acts to correct them 26. Encourages routine hygiene practices (brushing teeth, combing hair, and washing hands) 27. Explains rationale behind policies regarding exclusion and readmission of sick children 28. Receives and shares information from health and mental health professionals about both healthy growth and development of children as well as current health risks 29. Provides information to families about the development of children's health needs (toileting, feeding, dental/doctor visits, immunizations, etc.)	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

Core Knowledge Area & Subheading	Competency	Assessment Tool			Example of What You Might See in Practice
		new	emerging	solid	
B. Safe Environments	30. Adapts the indoor and outdoor environment to the developmental needs and abilities of the children, including children with special needs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Parents were invited to a car seat check with the local health department. Each car seat was inspected and parents were there to see how to properly install the car seat.
	31. Teaches simple safety precautions and rules to children and enforces rules consistently (including emergency procedures such as fire drills)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	32. Conducts periodic safety assessments of the program and environment, and makes recommendations for appropriate modifications	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	33. Offers information to families about safety and injury prevention for children and adults (such as toy recalls, car seat usage, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
C. Nutrition	34. Provides space and options for breastfeeding in privacy or storage and preparation of pumped breast milk, as appropriate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A few people were opposed to the idea of offering an extended snack time for the 3, 4 and 5 year olds but once it got going, it made snack time more peaceful, the children ate more and the children felt a sense of independence. When the children and I sit together for snack we often talk about the different food everyone brings in and it is a way for the children to notice foods that
	35. Provides meals and snacks that are appealing, nutritionally balanced, and developmentally appropriate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	36. Creates a healthy eating environment for infants where infants' cues are responded to appropriately	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	37. Creates a healthy eating environment for toddlers and preschoolers with structured, pleasant, family style meals where appropriate behavior is expected.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	38. Uses appropriate foods to encourage the development of eating skills and social/emotional development	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	39. Teaches children about healthy food choices	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
D. Physical Activity	40. Communicates with families about healthy food choices, while respecting cultural preferences	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The infants and toddlers are able to move around freely throughout the day with very little restriction. We have soft ramps to climb on, mirrors for them to look at and busy boxes secured on the wall.
	41. Plans a variety of age appropriate ways that children can be physically active throughout the program day	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	42. Provides information for families about children's need for physical activity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	43. Limits children's exposure to screen media and other passive activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
HEALTHY & SAFE ENVIRONMENTS: LEVEL III COMPETENCIES	44. Plans a variety of age appropriate ways that children can have adequate rest or quiet time throughout the program day	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	One child likes to have the book it's My Body read to her. We have several books about healthy bodies to choose from. The program requires a current immunization form on file and I often remind parents, every fall, either in person or a note, to bring in updated records.
	45. Documents illness and knows when to communicate with public health agencies about outbreaks of communicable disease	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	46. Creates collaborative, cooperative relationships with parents regarding sick children	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	47. Recognizes children's interest in their bodies (healthy sexual development) and integrates this interest into the curriculum appropriately	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	48. Provides opportunities for children to brush teeth, comb hair, wash hands and other practices that promote personal health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
A. Healthy Environments & Health Needs	49. Works with families to maintain accurate immunization records, health history, and emergency contact information	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Core Knowledge Area & Subheading	Competency	Assessment Tool			Example of What You Might See in Practice
		new	emerging	solid	
B. Safe Environments	50. Reviews emergency evacuation policies and procedures and makes recommendations for changes according to program's needs or current standards 51. Assesses safety and preparedness issues when planning field trips and uses appropriate practices on field trips 52. Creates environments for children that are safe, yet support independence and accommodate the needs of the children 53. Works with families to minimize the risk of injury and provide safe environments for their children in and out of the program	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Volunteers and parents assist with field trips to keep the number of children being watched by each adult small.
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
C. Nutrition	54. Partners with staff and parents to assist children in the progression of age-appropriate eating skills and the healthy social/emotional development that occurs during feeding 55. Recognizes that successful feeding in children requires the coordination and normal development of many systems: neuro/muscular, sensory, and social/emotional 56. Plans and evaluates menus that fulfill Child and Adult Care Food Program guidelines to ensure they are nutritious, and recognizes when a child's extreme pickiness may endanger their health 57. Involves children in menu planning and snack preparation 58. Involves families in activities promoting good nutrition and oral hygiene routines and refers parents and staff to community resources and references 59. Collaborates with parents and specialists to create individualized feeding plans for children with special health needs 60. Collaborates with parents in seeking the help of specialists in assessing, understanding and addressing their children's delays in feeding skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The children like to cut up fruits and vegetables for snack and often ask if they can do it again. When visiting with a family, parents often ask about eating habits and if this is a problem. We discuss the ages and stages of each individual child and together decide what is typical for that age.
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
D. Physical Activity	61. Monitors physical activity of the children and provides a variety of materials and opportunity to engage all children in gross motor activity 62. Engages in physical activities with the children throughout the program day 63. Shares resources with families about physical activities appropriate for their children and opportunities in the community	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	I use a "follow the leader" game with lots of movement and music during transition times like cleaning up.
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

CORE KNOWLEDGE AREA: PROFESSIONALISM & PROGRAM ORGANIZATION

Early childhood professionals understand they have the responsibility to provide services that meet or exceed standards of practice and support positive outcomes for children, families and professionals, including themselves, staff and other colleagues.

Core Knowledge Area & Subheading	Competency	Assessment Tool			Example of What You Might See in Practice
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PROFESSIONALISM & PROGRAM ORGANIZATION: LEVEL I COMPETENCIES

		new	emerging	solid	
A. Professionalism	1. Demonstrates knowledge of ethical standards, specifically the NAEYC Code of Ethics 2. Defines and maintains rules of confidentiality related to children, families and colleagues 3. Uses Release of Information protocol appropriately 4. Practices self-reflection with support from supervisors, mentors and other experienced professionals 5. Reflects on professional goals and creates an Individual Professional Development Plan (IPDP) with support from a supervisor, mentor or other experienced professional 6. Participates in learning opportunities (such as workshops, training, or classes) for professional and personal growth 7. Defines what it means to have a philosophy and the role it plays in early education, care, guidance and health 8. Articulates the steps to take when child abuse or neglect is suspected, as is necessary as a mandated reporter 9. Reports or causes a report to be made when child abuse or neglect is suspected 10. Exhibits a professional appearance as defined by program practices 11. Demonstrates good work habits as appropriate to program practices	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	I know that it is important not to discuss children or family issues at drop off and pickup time since other people are around. I read the local newsletter from the Parent Child Center to find out what trainings are being offered. The policies state what clothing cannot be worn and I make sure that when I get ready for work, I don't wear those things.
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
B. Working with Staff & Colleagues	12. Identifies different communication strategies for use with colleagues 13. Recognizes the characteristics of collaborative, cooperative working relationships with staff, colleagues and co-workers 14. Interacts positively and professionally with staff, colleagues and co-workers 15. Establishes and participates in relationships with experienced colleagues such as supervisors, mentors and other professionals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	I took a communication workshop and as a result I have tried to listen first and talk second. When I seem to be in conflict with another staff person, my supervisor helps me with ideas of how to work this out in a positive way.
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
C. Program Organization & Administration	16. Follows state regulations appropriate to the program (licensed, registered, etc.) 17. Completes required documentation (for employer, local, state, and federal government) 18. Follows basic business or financial regulations with local, state and federal regulations 19. Identifies the purpose of contracts and policies 20. Shows commitment to the program's goals 21. Describes program's philosophy and mission 22. Identifies components of Specialized Child Care Services as defined by the Child Development Division	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	There are contracts and policies written specifically for the program and I let parents know why they are important. This program values serving children with special needs and I understand that this includes children who have been abused or neglected.
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Core Knowledge
Area & Subheading

Competency

Assessment Tool

Example of What You
Might See in Practice

PROFESSIONALISM & PROGRAM ORGANIZATION: LEVEL II COMPETENCIES

	new	Assessment Tool		solid	
		emerging	solid		
A. Professionalism	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	I have a copy of the NAEYC code of ethics that I got from a recent training. I think I am confidential when I talk with others.
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	When another teacher was hesitant to call the District Office to talk about a potential case of neglect I really encouraged her to call because it could hurt the child more if she didn't.
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	I look over my IPDP every September and see what I want to work on this year based on what I have already done.
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
B. Working with Staff & Colleagues	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	We work in a small area together and it makes is difficult when people don't get along. We try to work it out with each other and when that doesn't work we ask someone to facilitate a discussion.
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	My supervisor and I look over the newsletters from the local Child Care Support Agency and the Parent Child Center to help me figure out which sessions would be interesting and most helpful.
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Core Knowledge Area & Subheading	Competency	Assessment Tool			Example of What You Might See in Practice
		new	emerging	solid	
C. Program Organization & Administration	40. Identifies main sources of program income and main categories of expenses	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>I keep the adult/child ratio lower than allowed by regulations and although I don't have openings, many people call because they like the idea of smaller groups for their children.</p> <p>I adjusted my rates so that I could operate a sound business even though I might not be fully enrolled at all times.</p> <p>One of the parents was willing to look over the updated handbook to see how other parents would respond to the new policies.</p>
	41. Identifies key factors that impact programs' financial stability (things that effect income and expenses)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	42. Names characteristics of the program that could be used in marketing and recruitment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	43. Reflects on the program's practices and how they align with the program's mission statement or goals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	44. Identifies a variety of program evaluation and assessment tools and understands their purpose	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	45. Shows awareness of quality assessment and improvement programs such as national accreditation and STARS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	46. Explores a variety of resources for obtaining materials and equipment and evaluates choices for best value	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	47. Describes and discusses the concept of reasonable accommodations for children with special needs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	48. Presents program policies to parents and other adults	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	49. Monitors program for adherence to laws and regulations pertaining to early care, health, guidance and education and addresses noncompliance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
PROFESSIONALISM & PROGRAM ORGANIZATION: LEVEL III COMPETENCIES					
A. Professionalism	50. Acts to maintain ethical standards in oneself and others as defined by the NAEYC Code of Ethics	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>When a parent asked me about another child's behavior and how it was affecting his child Sal, I talked about Sal and didn't give information about the other child.</p> <p>I have called both of my local legislators a few times and talked about the importance of continuing to fund the subsidy program and other benefits for providers and families that were at risk of being cut.</p>
	51. Evaluates current trends and research in early care, health, and education and adjusts practice as appropriate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	52. Articulates a personal philosophy of early care, health, and education	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	53. Incorporates program and personal philosophies into practices	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	54. Evaluates the benefits and challenges of mentoring and supervisory relationships for both parties	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	55. Practices self-assessment and consulting with others (e.g., mentors, other professionals, technical assistance) to refine skills, knowledge and values	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	56. Participates in advocacy activities that benefit children, families, and early childhood professionals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
57. Monitors children and maintains appropriate records to support reports of suspected child abuse or neglect.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

Core Knowledge Area & Subheading	Competency	Assessment Tool			Example of What You Might See in Practice
		new	emerging	solid	
B. Working with Staff & Colleagues	58. Routinely reviews professional development resources and shares information with staff and other colleagues 59. Monitors relationships with other professionals and uses strategies to strengthen collaborative, cooperative working relationships 60. Participates in reflection and problem solving to address ethical dilemmas with integrity and a humane attitude 61. Participates in assessing one's self and other staff members using the program's processes and tools 62. Participates in and initiates problem solving and conflict resolution with staff and colleagues 63. Participates in job interviews – as an interviewer or in pursuing employment – in an appropriate, professional manner	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	I feel confident about mentioning confidentiality issues with other people when I feel like something is being discussed that shouldn't be. I wouldn't feel right otherwise.
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Staff meetings are a good time to discuss problems we all seem to be facing. It helps me understand everyone else's point of view and we work to find a solution that works for all of us.
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
C. Program Organization & Administration	64. Demonstrates ability to create program policies and tools (such as handbooks, contracts and forms) 65. Maintains supplies, materials and equipment within one's program or group and replaces according to program practices 66. Demonstrates ability to develop and manage an annual budget within one's program or group 67. Identifies resources for grants and other sources of program funding 68. Initiates quality assessment and improvement programs such as national accreditation and STARS 69. Participates in program evaluation and assessment 70. Participates in creating, reviewing or revising program's mission statement, goals or program policies 71. Communicates effectively with advisory or governance boards as appropriate 72. Employs strategies to maintain and uphold program contracts and policies	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	We wanted to have food at a parent meeting and I applied to the local grocery store for a donation and we got it!
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	I was asked by my director to attend a community meeting just to talk with potential new candidates for the board of directors.
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Sometimes I will sit down with a parent and help them complete the forms that are required in order for the child to attend the program.
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

IV. NORTHERN LIGHTS COMPETENCIES: LEVEL IV, V AND VI

Level IV Competencies include Levels I, II and III plus the knowledge and skills associated with completing a bachelor’s degree either a) in early childhood or a related field, or b) with Vermont Department of Education (DOE) teaching license with an endorsement in early childhood or early childhood special education.

Level V Competencies include Levels I through IV plus the knowledge and skills associated with completing a master’s degree either a) in early childhood or a related field, or b) with Vermont Department of Education teaching license with an endorsement in early childhood. Many Level V professionals also have specialized knowledge and skills.

Level VI Competencies include Levels I through V plus the knowledge and skills associated with completing a Ph.D. or Ed. D. in early childhood education, a related field or an equivalent credential. Most Level VI professionals have additional specialized knowledge and skills related to their area of expertise.

The chart below shows how other professional standards align with the Northern Lights Core Competencies at Level IV and V.

In what ways do the Northern Lights Core Competencies align with the Vermont Department of Education Teaching License?

First, it is important to know some information about Vermont’s professional standards for all educators. (see the Department of Education website: <http://education.vermont.gov/>)

To become a licensed teacher in Vermont you must meet the requirements of the Vermont Department of Education (DOE). To earn an educator license, the Department of Education requires candidates to demonstrate the knowledge and performance standards of the **endorsement**. Each licensed teacher holds endorsement(s) that authorize what the teacher is eligible to teach. There are two early childhood endorsements. Early Childhood Education (endorsement #36) includes age ranges birth to grade three or can be limited to cover only ages birth to five. The early childhood special educator endorsement (#80) covers work with children with special needs ages three through six.

Most candidates demonstrate their knowledge and ability through successful completion of college courses. The DOE has authorized specific Vermont colleges and universities to recommend candidates for licensure after the students complete an approved course of study.

Northern Lights Core Knowledge Areas	Related standards (competencies)
<p style="text-align: center;">Child Development Families & Communities Teaching & Learning Healthy & Safe Environments</p>	<p>Vermont Department of Education Licensure with an endorsement in early childhood or early childhood special education</p>
<p style="text-align: center;">Professionalism & Program Organization</p>	<p>Northern Lights Competencies for the Program Director Credential for early childhood and afterschool professionals (these competencies will be on the Northern Lights website by March 2009)</p>

Other professionals demonstrate their knowledge and ability by creating a portfolio that demonstrates that they have met the licensure competencies. The portfolio documents a combination of work experience, professional development, and successful completion of coursework through the DOE Peer Review Alternative Route to Licensure.

There are a number of competencies one must successfully demonstrate before being recommended for a teaching license. These are listed in the grid on the next page. The left column shows how the Northern Lights Core Knowledge areas and subheadings align with these competency areas.

In addition to course work, a practicum, or the equivalent, in early childhood education or early childhood special education is required for each developmental level the endorsement covers.

A practicum is defined as a minimum of 60 clock hours of supervised field experience. The kind of practicum experience needed depends on the endorsement the candidate wants. Also, if you are seeking a DOE teaching license for the first time, you need to reach a certain score on the Praxis I test. This test is designed to assess your skills in the areas of reading, mathematics, and writing. Also, if you plan to teach in public schools, you will need to pass Praxis II Subject Assessment in Elementary Education.

The following two pages show the alignment between the four applicable Northern Lights Core Knowledge areas/subheadings, and the Vermont Department of Education topics (for an early childhood endorsement birth through grade three).



THE CORE COMPETENCIES - LEVEL IV, V, VI

<p>Northern Lights Early Childhood Core Knowledge Area <i>subheading</i></p>	<p>Vermont Department of Education topic Endorsement: children birth through grade three</p>
<p>Child Development <i>How children develop Influences on child development Individual variance</i></p>	<p>Knowledge of:</p> <ul style="list-style-type: none"> • the progression of prenatal through middle childhood growth and development and ability to apply this knowledge to all aspects of Early Childhood practice • biological, genetic, environmental, cultural and familial factors in children's development and their impact on exceptionalities
<p>Families & Communities <i>Relationships Communication Community involvement & resources</i></p>	<p>Knowledge of family systems theory and ability to implement family centered practice</p> <p>Knowledge of and ability to incorporate and use community resources</p>
<p>Teaching & Learning <i>Assessment Interactions Learning environment Curriculum content</i></p>	<p>Knowledge of and ability to:</p> <ul style="list-style-type: none"> • appropriately assess young children's learning and development • implement Vermont's learning standards for young children • develop and implement appropriate early childhood curriculum and instruction • develop and implement appropriate early childhood learning environments • integrate the arts and creative expression in the early childhood curriculum • integrate the arts and creative expression in the early childhood curriculum <p>English Language Arts:</p> <p>Knowledge of:</p> <ul style="list-style-type: none"> • the processes, principles, and dimensions of oral language and literacy development • a wide variety of young children's literature and media • the purposes and elements of language • the developmental progression of phonological awareness, spelling, and morphological analysis

Teaching & Learning (continued)

*Assessment
Interactions
Learning environment
Curriculum content*

- the processes and components of reading comprehension and fluency
- the process of writing development and the components of effective written expression

Knowledge of and ability to:

- implement in a comprehensive literacy program instructional strategies that support development of oral and written language, literature appreciation and analysis, decoding and word analysis, written expression, and reading comprehension and fluency
- assess the various dimensions of literacy development and adapt literacy instruction to meet the needs of individual students

Mathematics:

Knowledge of the process of children's early numeracy development, common misconceptions in the mathematical reasoning of young children, and implications for instruction

Knowledge of and ability to:

- apply state and national standards and content, concepts, and skills in the areas of number and operations, algebra and functions, geometry and measurement, and data analysis, statistics, and probability
- implement appropriate early childhood mathematics teaching methods

Social Studies:

Knowledge of and ability to:

- apply state and national standards and content, concepts, and skills in the areas of history; cultural geography; diversity, unity, identity, and interdependence; and citizenship
- implement appropriate early childhood social studies teaching methods

Science:

Knowledge of and ability to:

- apply state and national standards and content, concepts, and skills in the areas of the life sciences; physical sciences; earth, environmental, and atmospheric sciences; and living and non-living systems
- implement appropriate early childhood science teaching methods

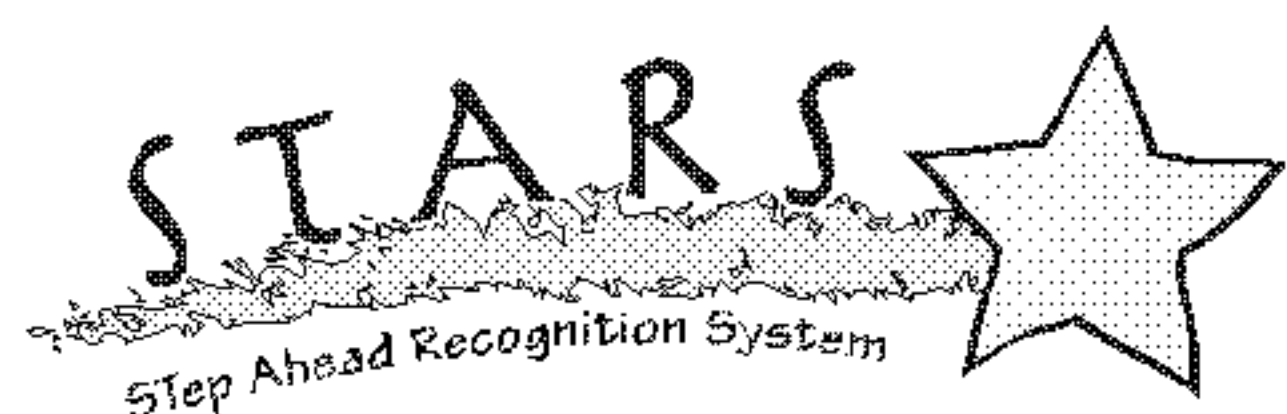
Healthy & Safe Environments

*Healthy environments & health needs
Safe environments
Nutrition
Physical activity*

Knowledge of and ability to incorporate health and safety issues, procedures, and regulations

Level IV and V Options

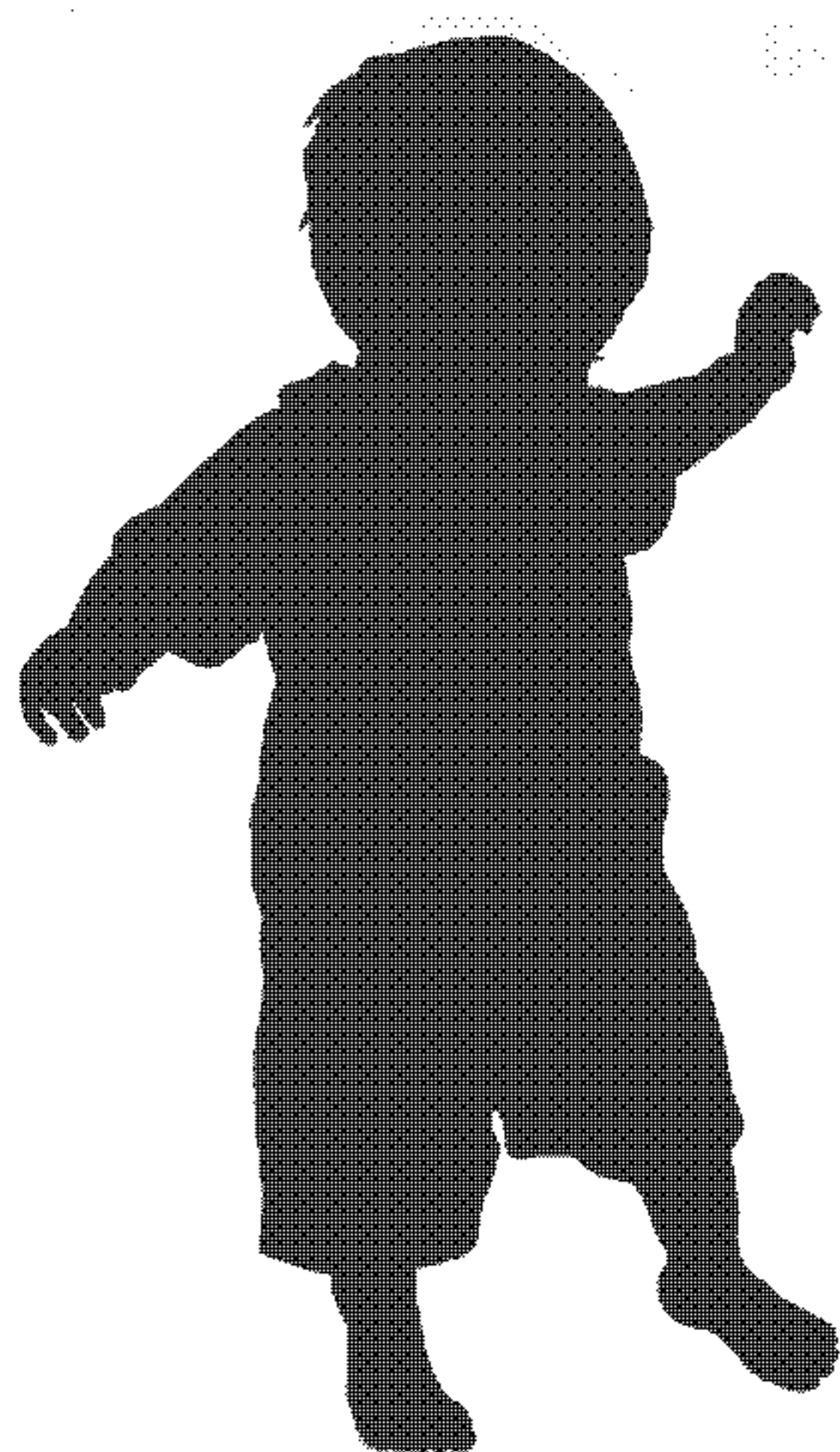
Some professionals have a bachelor's or master's degree in a field unrelated to early childhood, and without an early childhood teaching license and endorsement – but love working in the field of early childhood. Some key early childhood program standards have defined how these professionals can be included in meeting staff requirements.



STARS (STep Ahead Recognition System) is Vermont's program quality and improvement system. It recognizes professional development as part of its program rating for regulated afterschool, licensed centers and registered family child care. A bachelor's degree in an unrelated field meets the STARS standard if the person has completed a total of 30 credits that are in a relevant subject area.

To achieve program accreditation from the **National Association for the Education of Young Children (NAEYC)**, program staff need a total of 36 early childhood credits if their bachelor's degree is not in early childhood or child development.

To work in **Head Start** in the future, staff will need six college courses in early childhood or child development ages birth to six, if their degree is not in early childhood or child development.



IV. ADDITIONAL INFORMATION

A. GLOSSARY OF TERMS AND ACRONYMS

Accreditation – a process that insures that a program has met a specific set of quality standards set forth by a national or state governing body

Afterschool – the collective range of supervised settings for age-appropriate activities and programs that school aged children (approximately 5 to 18 years) engage in during their out-of-school time

Articulate – accurately put into words

Attachment – An enduring emotional bond between a baby and specific, important people (mother, father) which supports later emotional relationships

Atypical development – patterns of development that do not follow known timelines – this includes developmental delays and other deviations

Assessment – a process of comparing a person or program to a known standard, such as using a standardized tool to evaluate a child's ability or skill at a given point in time

CDA - Child Development Associate Credential – a nationally recognized credential designed to improve the quality of early childhood professionals by assessing performance through coursework, portfolios and observation

Child-directed, child-initiated – learning experiences or activities where the child makes the decisions about the outcome or direction of the activity

Confidentiality – the protection of personal information from persons not authorized to see or hear it (entrusted with private information not to be shared with others)

Collaboration – to work jointly with others or to cooperate with an agency with which one is not immediately connected – working together to achieve mutually agreed upon outcomes in response to the needs and concerns of families and children

Core competency – observable skills, values and attitudes needed by professionals in order to provide high quality services

Core knowledge – knowledge needed by professionals to effectively work with young children and their families

Credential – A combination of specified requirements that when considered together formally recognize individuals for their proven competency within a specified area of knowledge and skills. Over time the term has come to be interchanged with “certificate” or “license”. Only approved professional boards or associations can award “certification” of an individual, however.

Curriculum – for children: a planned set of activities and experiences consistent with the developmental needs of children, or for adults: a planned set of activities and experiences around a specific topic or learning area organized to meet adult learning needs.

Developmental domains – different aspects of children that can be studied, such as social, emotional, physical, intellectual, self-help and language

Developmentally appropriate practice – practices that are responsive to each child’s individual strengths, interests and needs which are based on knowledge of child development and learning, knowledge of the child and the cultural context in which the child lives

Early childhood education – services to children under the age of six that provide developmentally appropriate learning and nurturing care.

EEE – Essential Early Education – special education services provided to children 3 to 6 years of age

Family centered practice – a strength-based approach to working with families that allows the family to drive the planning process and therefore focuses on the priorities defined by the family

FITP – Family Infant Toddler Program – services to support families who have children under age 3 with special needs

IPDP – Individual Professional Development Plan – a personalized plan for increasing one’s knowledge and improving skills by assessing current knowledge and skills, indentifying specific areas for improvement, developing strategies and resources to address those areas and providing opportunities to reflect on and demonstrate personal growth

Mandated reporter – a person who is legally obligated to report suspicions of child abuse and neglect to the proper authorities (the district office of the Department of Children and Families, Child Protective Services), including all those the early childhood care and education profession

NAA – National Afterschool Association

NAEYC – National Association for the Education of Young Children

NAFCC – National Association for Family Child Care

Objective – the goal or outcome of the learning activity for adult students or children

Open ended – materials or activities that do not have a specific end point or goal

Outcome – the result of the learning experience for children or adult students

Positive guidance, positive discipline – a process of guiding children to develop internal prosocial behavior through supportive, consistent use of the following: modeling appropriate behavior, active listening, limit setting, redirection, and modifying the environment

Pre-Kindergarten education program – services designed to provide developmentally appropriate early development and learning experiences to children who are 3, 4 or 5 years old and to 5 year old children not eligible for kindergarten

Reflective practice, self-reflection – to purposefully think about and consider actions, results, a specific subject matter, an idea, or the purpose of something

Regulations – rules or orders issued by an executive authority or regulatory agency of a government and have the force of law

Release of Information protocol – a procedure to obtain written permission from people to release or share information, such a parent giving permission for specialists to talk to each other about the child

Resilience – the ability to recover from the adverse effects of early experience or persevere in the face of stress or adversity with no apparent negative psychological consequences

Staff supervision – a system of feedback and guidance to provide oversight and support people in refining their skills

Syllabus – An outline and description of a course of study for adults including objectives, materials needed, requirements, schedule, etc.

Teacher-directed, teacher-initiated – learning experiences or activities where the adult makes the decisions about the outcome or direction of the activity

Temperament – the term for individual ways of responding to the environment that appear to be consistent across situations and stable over time – typically included are such characteristics as activity level, intensity of reaction, mood changes, response to novelty and sociability

Typical development – patterns of development that follow known timelines with no major delays or deviations

Universal precautions – the practice of avoiding contact with bodily fluids, such as blood or vomit, by the wearing of nonporous gloves or using other barriers

VELS – Vermont Early Learning Standards – state recognized performance standards and learning outcomes for 3, 4 and 5 year old children

B. RESOURCES FOR PROFESSIONAL DEVELOPMENT

The Northern Lights Career Development Center has published the *Career Advising Guide for Early Childhood Professionals* and *Planning Your Professional Growth for Early Childhood and Afterschool Professionals*. These two documents contain a wealth of resource information and can be downloaded from the Northern Lights website. Hard copies can be obtained from the local child care resource development specialist or from the Northern Lights Career Development Center.

*Vermont Northern Lights Career Development Center
P.O. Box 120, CCV: Wasson Hall
Waterbury, VT 05676-0120
802.241.4661*

The Northern Lights Career Development Center website has links to a large variety of professional development resources and activities throughout Vermont and beyond. Go to <http://northernlightscdc.org> and especially the Resources link for more information about:

- Career Advising Ladder
- Special events and link to a current calendar of trainings, workshops and conferences
- Colleges, universities and technical schools in Vermont
- Financial support for professional development
- Licensure, certification and accreditation
- Technical assistance through community child care support agencies
- Links to professional organizations
- Vermont committees that address professional development and other resources

C. FREQUENTLY ASKED QUESTIONS

1. How do the core competencies fit into a system that is growing more complex by the minute? How will they improve the situation for everyone?

The core competencies provide a foundation on which everything else rests. In the short term, it helps you consider what you know, what you need to know and what you want to learn. It organizes the knowledge in the field so you can see a direct connection between the workshop or the course offered and the areas of professional development. The examples in this book also help you see how you would apply that knowledge in your work. In the long term, competencies lay out progress along a professional development continuum towards credentials and degrees. It provides more meaningful and purposeful learning.

For planner and sponsors, it helps you identify what professional development is needed to address the full range of knowledge and skills in the field of early childhood. For presenters and instructors the core competencies help you align instruction, to ensure that your teaching directly applies to the skills, knowledge and attitudes practitioners need.

The Standards section at the end of this booklet, explains how core competencies (or professional standards) inter-connect with other standards of quality as the foundation for a quality early care and education system for young children and their families.

2. The CDA (Child Development Associate) is a popular credential in our area. Are the competencies related to the CDA credential?

Yes. Core competencies are a way to organize together various professional development and training programs that already exist. The core competencies are aligned with the CDA credential and the CDA credential is included in the Northern Lights Career Ladder. Those with a CDA credential have attained Level II of the career ladder (mastering Level I and Level II). So if you have a CDA credential, you can look at the Level III competencies to set goals for your own professional growth.

3. There are a lot of competencies! Do I need to know all this to do my job?

Probably not. Core competencies are the foundation for all the knowledge and skills needed in early childhood settings, regardless of your work setting or job requirements. They are not a job description. For your job, you likely need many of the core competencies, but may not need all of them. You may also need other specific skills that only apply to your job, but are not in the list of core competencies. It is useful to seek to have competence in as many of the core competencies as you can, because then you have a strong foundation in the field of early childhood and may have more options for different job responsibilities.

4. For whom are these core competencies designed? Do they apply to home visitors, early interventionists, early childhood special educators and para-educators, playgroup leaders, and such?

Yes, they apply to all the positions in the field. Core competencies define the fundamental knowledge,

skills and attitudes that all people working with young children should possess.

They also provide the foundation for more advanced and more specialized competencies. When you specialize in a particular skill or seek to fulfill a specific job requirement, more field-specific skills and knowledge need to be added to your core competencies. For example, a Healthy Babies home visitor may have a foundation in many of the competencies at a certain level, and more specialized or advanced skills in the knowledge area of working with families. If you want to specialize in program administration, you would start with the professionalism and program organization core competencies, then look at the program director competencies, and eventually seek a program director credential. Credentials or endorsements are based on the core competencies plus additional skills and knowledge.

5. How can the competencies be used to enhance other kinds of professional development like mentoring, supervision and inservice training?

Well defined competencies are a tool to guide all kinds of individual professional development. They can be used by staff as a self-assessment of their skills and knowledge. Mentors and supervisors can then use this self-assessment as basis for discussion of training needs, performance evaluation or the foundation for an Individual Professional Development Plan (IPDP). Mentors and supervisors can observe staff with these competencies in mind, and be in a better position to guide staff toward higher levels of competence, as well as more effective and collaborative, goal setting.

At the community level, professional development agencies, programs, and councils can assess competency-based training needs. This can guide the planning of professional development activities so that they meet the needs and skills of early childhood professionals.

D. CORE COMPETENCIES & STANDARDS OF QUALITY

Standards are a way to measure whether we are providing quality services to people. In a service system, standards give us a common way to talk about what we mean by quality and how we know when we reach it.

When we provide care and education to young children and their families, we are providing a service. There are three basic parts to any service system:

- the **program** that delivers the services;
- the **people who receive** the services; and
- the **people who provide** the services.

So, the standards of quality relate to these three parts. Like gears, these different standards need to connect in order to work.



The organization or entity that delivers the services is guided by **program standards**. At an ice cream store for example, program standards could measure: is the store clean; is

the food fresh; are the staff ready to work; does the store open and close on time? In the world of early childhood, program standards measure things like: is the environment safe and healthy; are the staff prepared and ready to care for the children; are families welcomed and involved in the program; is the budget balanced?



The people who receive the services are the consumers. In the ice cream store these standards might measure: are the customers satisfied with the food; did they get waited on

promptly; will they come back again? In the world of early childhood, we talk about **learning standards**. They measure how the children and their families are doing and how responsive we are to meeting their needs. For example, early childhood learning standards measure: are children engaged in play that is helping them develop their skills and knowledge; are children using a variety of ways to express their own ideas; are children engaging with others?

What are the early childhood learning standards? We have Vermont Early Learning Standards (VELS) for children ages three to five. By 2009 Vermont will also have learning guidelines for infants and toddlers. Some of the ways learning standards are used is to guide curriculum, guide learning plans for individual children, and inform families and others about children's development.

Finally, we consider the *people who provide the services*.

We call the standards that guide them, professional standards. At the same ice cream store, professional standards help us measure knowledge, skills and attitudes of the staff, such as: do the staff follow the health requirements; do they scoop ice cream efficiently; do they like their work and work well with others?



In the world of early childhood we also have **professional standards.**

Whether you call yourself a teacher, childcare provider, day care provider, or consultant you are important

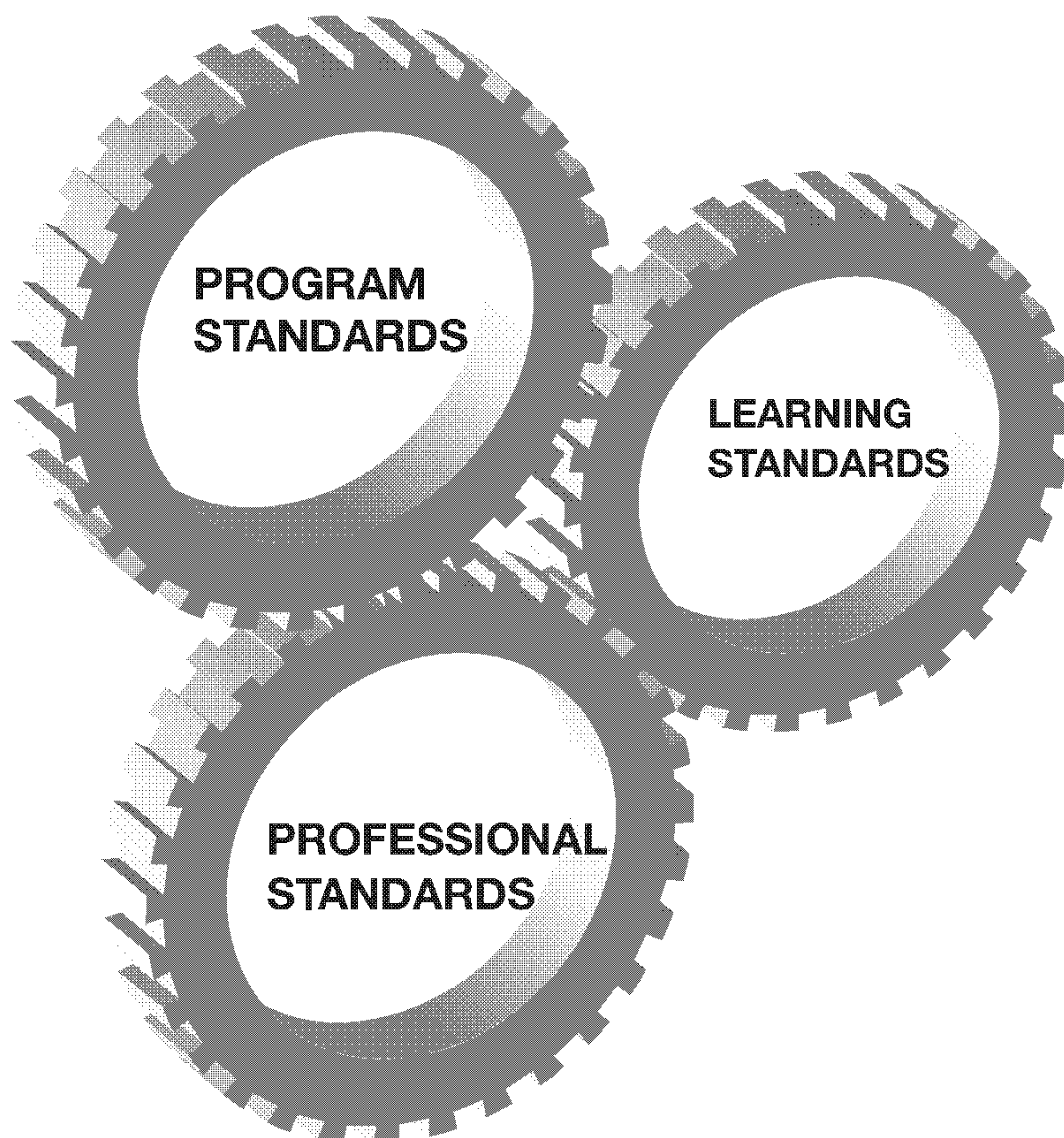
in the lives of young children and have a major influence on their development and growth. Because of this responsibility, we consider all those who recognize the importance of their work with young

children, and seek to keep learning how best to provide quality care and education to young children – professionals. Our professional standards help us consider such questions as: do the teachers know what to expect of children; do they know community resources and share them with families; do they know how to set up engaging activities for young children; do they know how to work in a team with other adults?

What are the professional standards in early childhood? This booklet, the Northern Lights Early Childhood Core Competencies, are the foundation of professional standards for our field. They define the knowledge, skills and attitudes professionals in our field should develop. The introduction to this book gives a lot more information about how these competencies can be used. In Vermont there are also professional standards set by the Department of Education for licensed teachers, some of whom work with young children.

These three types of standards work together.

Like gears, they are interdependent. I may use the core competencies to plan the course I am teaching college students, but I also need to know the Vermont Early Learning Standards and program standards – since I plan to teach about these to my students. I need to use program standards to make my child care become a high quality program, but I also use professional standards to help my staff grow and learning standards to plan the curriculum. These three types of standards connect to help us define our goals, work toward achieving quality and measure how well we are doing.



E. ACKNOWLEDGEMENTS

The Northern Lights Core Competencies for Early Childhood Professionals were originally researched and written by a workgroup of the state-wide Professional Preparation and Development Committee. The original committee consisted of representatives from child care support agencies, the Vermont Department of Education, the Head Start State Collaboration Office, Northern Lights Career Development Center and the Vermont Child Care Industry and Careers Council.

Following the development of a draft document by the workgroup, the Vermont Northern Lights Career Development Center accumulated public feedback through a survey in the spring of 2005. The final document, released in August 2005, was a result of the workgroup's dedication and the advice of various constituents from the early childhood field.

From September to December 2007 a committee reviewed the competencies and the booklet, taking into account use of the document and competencies over the past two years, and current state and national standards and models from other states. Revisions were begun based on their recommendations and additional feedback was sought and received on nutrition, home visiting services and Department of Education teacher licensing. In April 2008 the Professional Preparation and Development committee reviewed the document in process and made additional recommendations. Final changes were made based on all of these recommendations. The current document was prepared by the Northern Lights Career Development Center and reflects the input and effort of many people.

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The groups consulted documents from a variety of resources, including:

- Other states, including Nevada, Florida, Connecticut, Kansas, Missouri, Maine and New Hampshire
- The Wheelock College Institute for Leadership and Career Initiatives
- The CDA competencies and functional areas
- Vermont Department of Education's early childhood educator endorsement competencies
- National Health and Safety Standards
- National Association for the Education of Young Children (NAEYC)

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<http://www.brightfutures.org/nutritionfamfact/>

Child Development Associate Credential, Competencies and Functional Areas, www.cdacouncil.org/CDA

Child and Adult Care Food Program, Food and Nutrition Services, United States Department of Agriculture, <http://www.fns.usda.gov/CND/Care/>

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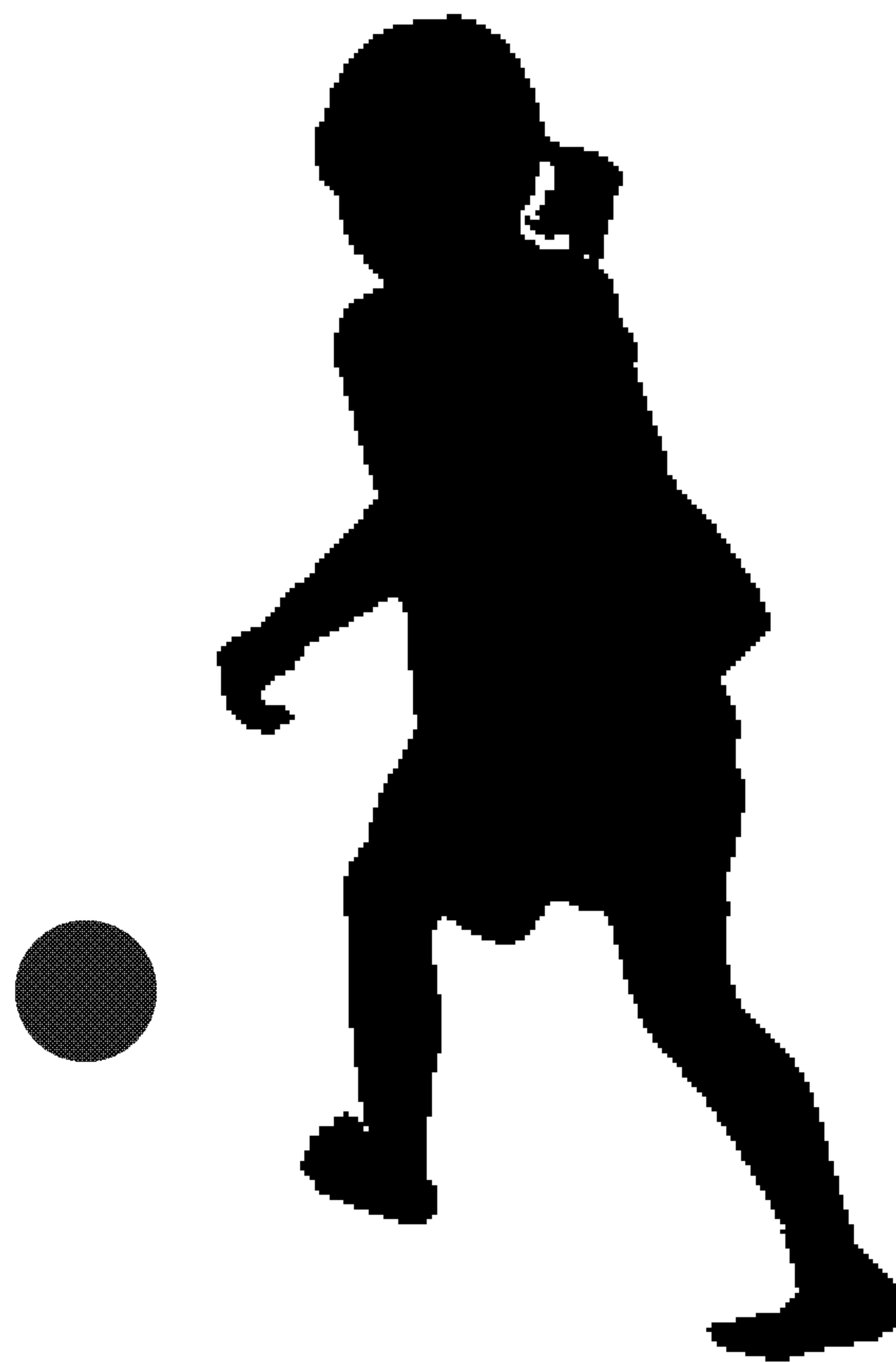
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Vermont Early Learning Standards (VELS) (2003), developed by the Standards, Monitoring and Technical Assistance Subcommittee of the Vermont Early Childhood Workgroup, published by the Vermont Department of Education, http://education.vermont.gov/new/pdfdoc/pgm_earlyed/pubs/vels_03.pdf



THE VERMONT EARLY CHILDHOOD CAREER LATTICE

		<i>Level I</i>	<i>Level II</i>	<i>Level III</i>	<i>Level IV</i>	<i>Level V</i>	<i>Level VI</i>
CAREER LEVELS	<i>Education plus</i>	Fundamentals for early childhood professionals	COA credential or equivalent	<ul style="list-style-type: none"> completed child care apprentice or COV child care certificate or associate degree 	Bachelor Degree in early childhood or related field; with or without VT teaching license/early childhood endorsement	Master Degree	Doctoral degree in early childhood or related field
	<i>Experience</i>	1 year	2 years	3 - 4 years	1 year	3 years	4 years
<i>Revised terms: early childhood program licensing regulations*</i>		teaching assistant	teaching associate	teaching associate	teacher	master teacher	master teacher
COMMON SETTINGS WHERE PEOPLE WORK	<i>Home business</i>	registered home child care provider, subsidized & legally exempt child care provider	registered home child care provider	peer mentor, registered home child care provider	independent consultant, mentor/advisor, registered home child care provider	independent consultant, mentor/advisor	independent consultant, mentor/advisor
	<i>Licensed child care facility</i>	teaching assistant	teacher	teacher, peer mentor, director	director, early childhood special educator	director, early childhood special educator	
	<i>Elementary school</i>	volunteer	teaching assistant	paraeducator, teaching assistant	teacher, early childhood special educator	principal, special services coordinator, early childhood special educator	
	<i>Parent Child Center/ Family Center</i>	volunteer	teaching assistant, home visitor	early childhood special education aide	program coordinator, outreach worker, teacher	director, early childhood special educator	
	<i>Head Start</i>	volunteer, classroom aide	USDA food program specialist	home visitor, family services worker, teacher	director, manager, teacher	state collaboration coordinators	
	<i>Community Children Support Agency</i>			program director, resource development, referral & subsidy specialists	program director, resource development, referral & subsidy specialist	executive director	
	<i>State Offices</i>		licensing commission	licensing specialist, family child care home assessor	licensing supervisor, USDA food program coordinator	State (CDD and CIOE) employees administrators & consultants	State of VT (CDD and CIOE) administrators & consultants
	<i>Other Common Settings</i>	playgroup facilitator			community health nurse, early interventionist, BCF regional director	college adjunct faculty, FTF related services, early childhood mental health consultants	faculty at colleges & universities

The Career Lattice is a frame of reference to help you consider how career levels connect to different work settings in general. Many people have a higher level of education than listed for that setting. This is not a complete description. Please check actual job requirements and the Vermont child care licensing regulations for specific information. Across the top of the grid is the Early Childhood Career Ladder. Both education and experience working with young children is needed to reach each level.*



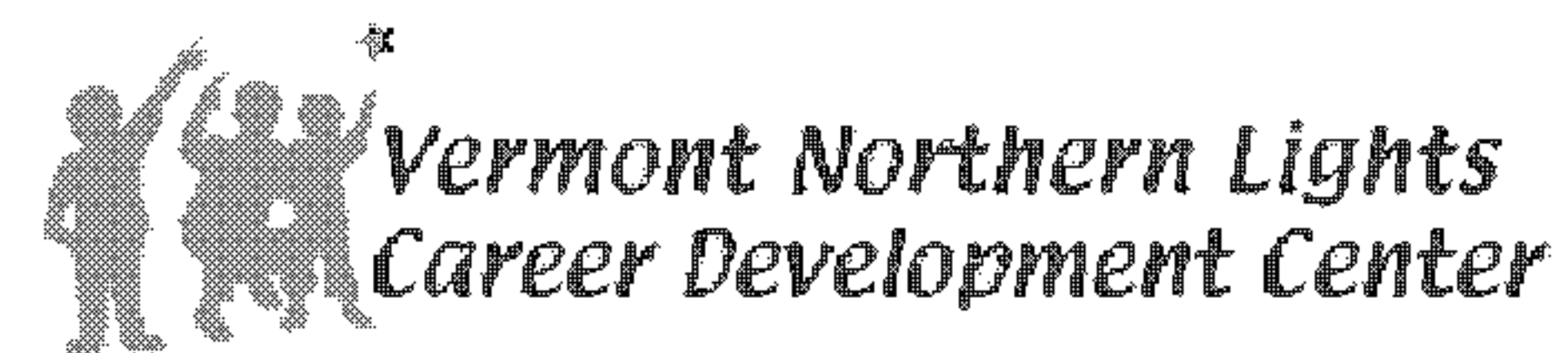
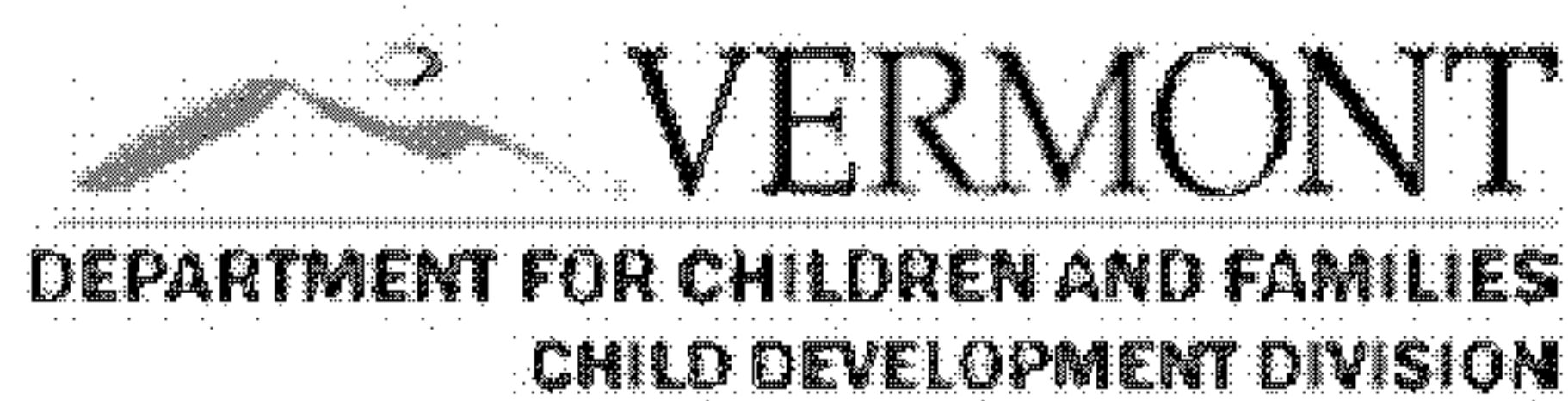
Vermont Northern Lights Career Development Center

Of the Community College of Vermont and the Vermont Child Care Industry and Careers Council.
Funded by the Child Development Division, Vermont Agency of Human Services.

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APPENDIX R

**PRINCIPLES of VERMONT'S PROFESSIONAL DEVELOPMENT SYSTEM**

Adopted 3-4-2011

The following principles serve as a framework for developing as well as evaluating Vermont's Professional Development System for early childhood and afterschool professionals.

These principles have been developed collaboratively and are approved by the Child Development Division and partners throughout the state including the Professional Preparation and Development Committee.

Sponsors of training and education services may use the principles to help plan and deliver professional development opportunities. Ultimately, it is the practitioner and the children who should benefit from a professional development system that incorporates these principles.

Vermont's Professional Development System for early childhood and afterschool professionals is:

1. Clear and Known

Practitioners know there is a professional development system that is available to them.

2. Supportive of Professional Growth

Learning opportunities build upon knowledge and skills in systematic and meaningful ways. Professionals who attain enhanced knowledge and skills are recognized and compensated for achievements along their professional career pathways.

3. Research-based and Relevant

Useful professional development content and instructional practices are based on recognized and effective standards that support best practice.

4. Integrated and Aligned

Professional development is articulated so that it is recognized and meaningful across different systems and work settings.

5. Accessible

Professional development opportunities and pathways are designed with a variety of delivery options, to be flexible and available to diverse populations and skill levels.

6. Financially supported

Sufficient and dependable funding, both public and private, is available to support quality professional development that reflects these principles and related practices.

7. Evaluated on all of the above criteria

These principles are used to evaluate professional development activities and the system as a whole in order to ensure an increasingly proficient workforce.

APPENDIX S**DRAFT FIRST STEPS Vermont's Infant Toddler Learning Guidelines¹ 10-2011****INTRODUCTION**

Babies learn from the moment they're born. Research shows that interactions with people and objects feed baby's developing brain.² Our hope is for Vermont babies to have early experiences that teach them the world is a safe, interesting and caring place. *First Steps: Guiding the Development and Learning of Vermont's Infants and Toddlers* offers ideas to nurture babies' healthy development within the wide range of Vermont's early care settings.

GUIDING PRINCIPLES**The child's identity**

1. Uniqueness - Each child has a unique life-story. From the start, she is an active learner. She grows up as a member of a family and community. She is part of a culture with particular traditions and ways of life.

Children and their connections with others

2. Relationships - Babies need to be with other people. They develop through loving relationships with adults and other children. They learn how to communicate and face challenges. They develop ideas of how the world works. They learn trust and respect through responsive and predictable relationships.
3. Parents, family and community - Parents are the most important people in children's lives. The care and education that children receive from their families greatly influences their development. Community also has an important role.
4. The adult's role - Early learning takes place through relationships with adults. Adults vary the type and amount of support they provide as the child grows.
5. It is everyone's responsibility – families, teachers, caregivers, neighbors, friends, schools, communities, policy makers, and society at large—to support and nurture our youngest citizens. Community structures and policies should support the hopes that families hold for their infants and toddlers.

How children learn and develop

6. Integrated learning – The areas of development described in *First Steps* - exploration, communication, well being and belonging - happen together during the many experiences babies have throughout the day. For example, baby communicates

¹ *Aistear: the Early Childhood Curriculum Framework*, National Council for Curriculum and Assessment, Dublin, Ireland, 2009. **Note:** Some of the Guiding Principles section of *First Steps* directly quotes *Aistear*; other sections of this document are based on *Aistear* as well.

² *Starting Smart: How Early Experience Affect Brain Development*. Zero to Three, The Ounce of Prevention Fund.

by crying, and her caregiver responds. So baby has a sense of well being and belonging. She feels the security she needs to explore and learn about the world around her.

7. Play and active learning - Active learning is learning by doing. Babies use their senses to explore the materials around them and interact with the people they meet.

Much of children's early learning and development takes place through play and hands-on experiences.

8. Communication and language - Language helps children think about and make sense of their world. Babies communicate through their actions. By observing what infants and toddlers do, adults can understand what babies are thinking, feeling, and learning.

9. The learning environment – A safe and inviting environment encourages children to explore. Vermont's outdoors provide rich learning opportunities for infants and toddlers test out ideas about the world.

WHAT FIRST STEPS IS and HOW TO USE IT

There are many child developmental checklists available to parents and caregivers. *First Steps* is different from those. It can help you understand, in broad terms, what babies are learning and what you can do to support their growth. *First Steps* contains only a sample of infant-toddler abilities. It creates a sketch of a thriving baby and his environment, for a wide audience to consider.

First Steps is primarily for direct service care providers in state regulated settings. This includes staff at the management level. *First Steps* can also be helpful to parents and family members; teachers and caregivers, administrators, supervisors, adult educators, consultants, and specialists; community members, advocates and policy makers. (See Appendix I for more information on ways that *First Steps* can be used.) *First Steps* provides common vocabulary and ideas for caregivers in different settings to communicate with each other about babies.

First Steps presents the content of young children's learning and development using four domains.³ These domains are:

- **Belonging** – children develop a positive sense of who they are. They feel that they are valued and respected as part of a family and community.
- **Communication** – children share their experiences, thoughts, ideas and feelings with others in a variety of ways.
- **Exploration** – children investigate and make sense of the things, places and people in their world.

³ *Aistear: the Early Childhood Curriculum Framework*, National Council for Curriculum and Assessment, Dublin, Ireland, 2009.

- **Well-being** – children are confident, happy and healthy.

First Steps describes some of the things children do when they are developing well in these domains. It gives practical suggestions for supporting that development. It's important to remember that the development of a young child is unpredictable. So apply these guidelines with flexibility. Infants and toddlers with who are bridging cultures, have experienced high degrees of stress, or have special needs may make progress on a different timeline and with variations.

The domains are presented in three age groups:

- Infants** (birth – 11 months)
- One Year Olds** (12 – 23 months)
- Two Year Olds** (24 – 36 months)

BRIDGE TO VERMONT'S EARLY LEARNING STANDARDS

First Steps is one of several resources in Vermont that provides information about important aspects of child development, and ideas for supporting children's growth. It is one of a series of early learning standards. *First Steps* is the first set of standards in the series. Other Vermont documents include: _____. The domains described in *First Steps* are the beginning of school readiness. They bridge the world of infants and toddlers to traditional educational domains, such as _____.

Communication Domain

Infants

Birth to 11 months

PHOTOS HERE □

KEY IDEA

Babies learn to communicate through relationships and everyday experience. Communication includes facial expressions, gestures, tone of voice, and words that convey feelings and ideas.

Communication is rooted in culture, family history, community, and individual differences.

What To Look For

Uses different types of cries to express different needs

Turns toward familiar voices and makes eye contact

Uses sounds, facial expressions, and movement to show feelings

Shows interest in books by holding them, patting pages, and looking at pictures

Smiles, laughs or babbles when playing familiar interactive games such as peek-a-boo

Makes sounds during pauses in another’s conversation

Activities To Support Growth

Make eye contact with babies, speak to them when interacting, and pause giving them a turn

Repeat babies’ sounds. Use short phrases, simple words, and a slow pace when talking

Watch for signs that babies are concentrating on something they see, hear, feel, or taste

Model conversation by asking simple questions and providing answers

Name everyday objects. Narrate routine activities

Tell simple stories and sing simple songs with repeating and rhyming words

Communication Domain

One year olds

12 to 23 months

PHOTOS HERE □

KEY IDEA

Babies learn to communicate through relationships and everyday experience. Communication includes facial expressions, gestures, tone of voice, and words that convey feelings and ideas.

Communication is rooted in culture, family history, community, and individual differences.

What To Look For

Uses language to give and receive information, and ask questions

Has words and simple phrases for meaningful people and objects, like “Mama”; “Dada, ball!”

Says “hi” and “bye” along with waving

Imitates words heard in conversation

Knows and can make some animal sounds

Uses a variety of materials like crayons and markers in an enjoyable way

Points to body parts such as nose, eyes, belly

May shake head or use sign language to indicate wants

Activities To Support Growth

Describe and comment on what is happening around baby, for example noises, colors, weather, and activities

Attend to toddler when he speaks or uses signs

Expand language, such as when baby says “dog”, adult says, “That dog is barking!”

Share books and encourage baby to lift flaps, feel textures, and press buttons to hear sounds

Play a variety of music and encourage baby to respond, for example clapping and swaying

Communication Domain Two-Year Olds 24 to 36 months

PHOTOS HERE □

KEY IDEA

Babies learn to communicate through relationships and everyday experience. Communication includes facial expressions, gestures, tone of voice, and words that convey feelings and ideas.

Communication is rooted in culture, family history, community, and individual differences.

What To Look For

Use language to interpret experiences, to solve problems, and to clarify thinking, ideas and feelings

Use books for fun, to gain information and broaden understanding of the world

Share their feelings, thoughts and ideas by story-telling, making art, moving to music, role-playing, problem-solving, and responding to these experiences

Listen to and respond to a variety of types of music, sing songs and make music using instruments

Get frustrated when not understood

Laugh when told a silly rhyme or story

Follow simple directions like “Go get your boots”

Activities To Support Growth

Create opportunities through pretend play, for toddlers to retell their experiences or stories read to them. For example, making a ‘bus’ and setting off on a journey collecting passengers on the way, or setting up a vet’s office where they treat their sick pets

Provide a variety of art materials for children to use in sharing their thoughts, feelings and ideas

Explore the characteristics of objects, and notice similarities and differences, for example the height and color of flowers, the size and shape of stones

Teach language for the expression of feelings

Ask open-ended questions and allow two-year olds time to respond

Talk with toddlers about what the adult is doing and why, and narrate what is happening around you both

Exploration Domain
Infants
Birth to 11 months

PHOTOS HERE □

KEY IDEA

Children have an innate drive to get to know the workings of their world. Infants and toddlers learn about the world through active exploration and play, using all of their senses.

Every aspect of young children’s surroundings and daily interactions serve as a setting for exploration.

What To Look For:

Reacts to sounds and voice by turning in that direction

Handles objects in a variety of ways such as mouthing, shaking, banging or dropping

Explores own body (e.g. grabs foot or looks at hands)

Makes discoveries with objects, such as moving a rattle and hearing its noise, then trying it again and again

Anticipates events like getting excited before a tickle

Crawls and shows interest in their surroundings, like pulling pots and pans out of cupboard

Activities To Support Growth:

Be responsive and available so infants have a secure base from which to explore

Strike a balance between what adults and babies initiate, regularly following the baby's lead

Affirm infants' exploration, smile, clap hands, and describe what the infant has done

Create opportunities for babies to explore using all of their senses, like listening to music and feeling different textures

Take babies outdoors in all seasons

Exploration Domain

One-Year Olds

12 to 23 months

PHOTOS HERE

KEY IDEA

Children have an innate drive to get to know the workings of their world. Infants and toddlers learn about the world through active exploration and play, using all of their senses.

Every aspect of young children's surroundings and daily interactions serve as a setting for exploration.

What To Look For

Moves away from trusted caregiver to explore new things then checks back by looking or showing the object

Imitates behaviors seen elsewhere, like talking on the phone or pretending to drive a car

Understands how familiar objects are used (e.g. spoon in a bowl; socks on feet)

Recognizes patterns, makes connections and associations between new learning and what they already know

Picks up small objects with thumb and fingers

Responds to music with body motion

Understands that objects still exist while out of sight (e.g. looks for a toy hidden under a blanket)

Activities To Support Growth

Allow time for toddlers to practice new ways of moving such as climbing stairs with adult support

Encourage play like stacking blocks, things that fit together and come apart, things that fill and empty

Provide opportunities for toddlers to make discoveries without adult intervention using safe, everyday objects like jar lids, cardboard tubes, and pinecones

Ask open-ended questions like “What can fit inside that tube?”

Expose toddlers to different environments and experiences like a trip to the library or a ride in a wagon

Exploration Domain Two-Year Olds 24 to 36 months

PHOTOS HERE

KEY IDEA

Children have an innate drive to get to know the workings of their world. Infants and toddlers learn about the world through active exploration and play, using all of their senses.

Every aspect of young children’s surroundings and daily interactions serve as a setting for exploration.

What To Look For

Seeks interaction with other children

Asks simple questions like why, what, where

Uses objects as a means to an end (e.g. carries blocks in a bucket)

Begins to represent ideas with materials (e.g. paint, clay)

Uses creativity and imagination to think of new ways to solve problems

Notices how items or people are the same and different: “Laura is a baby and I’m big” or “Both balls are blue.”

Uses body to get to know new spaces, like climbs up on small loft or into large box

Activities To Support Growth

Encourage children to remember and reflect on things and events.

Talk about things that are going to happen, for example: “When your sister comes home from school, we’ll go to the park.”

Provide opportunities to climb and see the world from different perspectives

Observe and expand play, like introducing tubes to children playing with toy cars and ramps

Pose questions about how things happen and why: “I wonder why the ice cream melted outside?”

Provide opportunities for simple decision-making. For example, when possible, offer two options of clothes to wear

Well being Domain
Infants
Birth to 11 months

PHOTOS HERE

KEY IDEA

Well-being for infants and toddlers, means **they** feel confident, safe and healthy. This happens when they have a supportive environment and enduring, positive relationships. A sense of well-being is both physical and psychological. Infants and toddlers need opportunities to develop their physical abilities. They also need to express and learn to manage their feelings in order to handle life’s challenges.

What To Look For

Drinks and eats until satisfied

Has periods of contentment when needs are met

Grasps and reaches for objects

Explores own body: grabs foot, puts finger in ear, pulls hair

Uses sense of sight, hearing, taste, touch and smell to explore the world

Accepts comfort from others

Experiences a variety of states such as sleep, calm, activity and distress

Activities To Support Growth

Regularly touch, hold, carry and rock babies

Respond to infants' vocalizations and movements; learn their different cries

Share information regularly with family to get to know about babies' experiences

Provide space for infants' developing physical abilities

Establish relaxed routines for sleep and other daily activities

Support babies' attempts to try new things

Well being Domain

One-Year Olds

12 to 23 months

PHOTOS HERE

KEY IDEA

Well-being for infants and toddlers, means **they** feel confident, safe and healthy. This happens when they have a supportive environment and enduring, positive relationships. A sense of well-being is both physical and psychological. Infants and toddlers need opportunities to develop their physical abilities. They also need to express and learn to manage their feelings in order to handle life's challenges

What To Look For

Has increasing confidence in taking reasonable risks like climbing up and down one or two stairs

Recovers from small falls while walking

Cries or clings to a familiar adult in new situations

Claps for self and looks around for others to share in pride

Helps with dressing by pushing arms or legs into clothing

Displays distress when separating from parent or other significant caregiver

Activities To Support Growth

Redirect child from undesirable activity to a more acceptable one

Provide support during transitions

Acknowledge child's emotions

Conduct a daily safety check of the environment

Allow time for toddler to actively participate in routines such as dressing, feeding and washing

Well being Domain

Two-Year Olds

24 to 36 months

PHOTOS HERE

KEY IDEA

Physical well-being is important for learning and development as this enables children to explore, to investigate, and to challenge themselves in the environment. A growing awareness of their bodies and abilities is also part of this. Adults support children's psychological and physical well-being by helping them to make healthy choices about nutrition, hygiene and exercise.

What to look for

Begins to recognize safe situations and avoid unsafe ones

Enjoys time outdoors daily

Takes care of toileting needs in a variety of ways: seeks privacy, communicates need, toilets independently

Drinks from a cup

Eats a variety of foods in age appropriate amounts

Asserts preferences

Activities to support growth

Arrange regular interactions with people of all ages

Provide structures and spaces for different types of movement

Promote independence in daily tasks such as hand-washing

Model for and encourage toddlers to solve problems

Provide opportunities to try things out and see what happens

Help toddlers learn a variety of ways to express feelings

Belonging Domain

Infants

Birth to 11 months

PHOTOS HERE

KEY IDEA

Human beings develop in the context of relationships. We are all part of a family, a community, and a culture.

When children can trust their caregivers to consistently respond their needs, they develop a sense of belonging. When they feel pride in their family, they feel secure.

Then, they are better able to deal with difficulties. This creates an important foundation for learning and development.

What To Look For

Forms bonds with their primary caregiver

Smiles at familiar adults and children

Shows signs of trust like crawling over to lean on caregiver when tired

Looks toward familiar adults when feeling uncertain

Seeks comfort when distressed

Watches and listens to other children

Belonging Domain
One-Year Olds
12 to 23 months

PHOTOS HERE □

KEY IDEA

Human beings develop in the context of relationships. We are all part of a family, a community, and a culture.

When children can trust their caregivers to consistently respond their needs, they develop a sense of belonging. When they feel pride in their family, they feel secure.

Then, they are better able to deal with difficulties. This creates an important foundation for learning and development.

What To Look For

Enjoys being helpful

Imitates adult behaviors in play

Demonstrates interest or concern when other babies are distressed

Smiles at and likes being close to other toddlers

Smiles and interacts happily with caregivers

Copies other toddlers

Activities To Support Growth

Observe and listen actively to what children do and say

Read children's favorite stories

Provide cozy, cuddly spaces

Help toddlers play safely and happily together

Offer opportunities for children to help like singing to a little baby, wiping off the table

Support sibling connections through visit times while at childcare

Belonging Domain
Two-Year Olds
24 to 36 months

PHOTOS HERE □

KEY IDEA

Human beings develop in the context of relationships. We are all part of a family, a community, and a culture.

When children can trust their caregivers to consistently respond their needs, they develop a sense of belonging. When they feel pride in their family, they feel secure.

Then, they are better able to deal with difficulties. This creates an important foundation for learning and development.

What To Look For

Joins in simple group activities like clapping, singing and dancing

Anticipates daily routines (nap time is after lunch)

Knows names of other children

Spontaneously shows their work (drawings, etc.) to others

Notices similarities and differences in people (“We’re all big.”)

Tells others about family members and events (“Grandma took me to the park.”)

Encourage children to help each other and adults

For dramatic play, provide objects that are similar to what the toddler's parents use at home or work

Show empathy when children are afraid or sad

Teach children what they can do while waiting for a turn

Chat with toddlers while taking a neighborhood walk

Anticipate things that may frustrate toddlers and helps them cope

Refer to group identity and norms

Activities To Support Growth

Respond to babies' feelings, like comforting them when upset

Exhibit genuine care and affection for each baby

Understand each baby's rhythms and routines

Know a few words (or more) in baby's native language or sign language

Make obvious your respect and interest in the children's parents

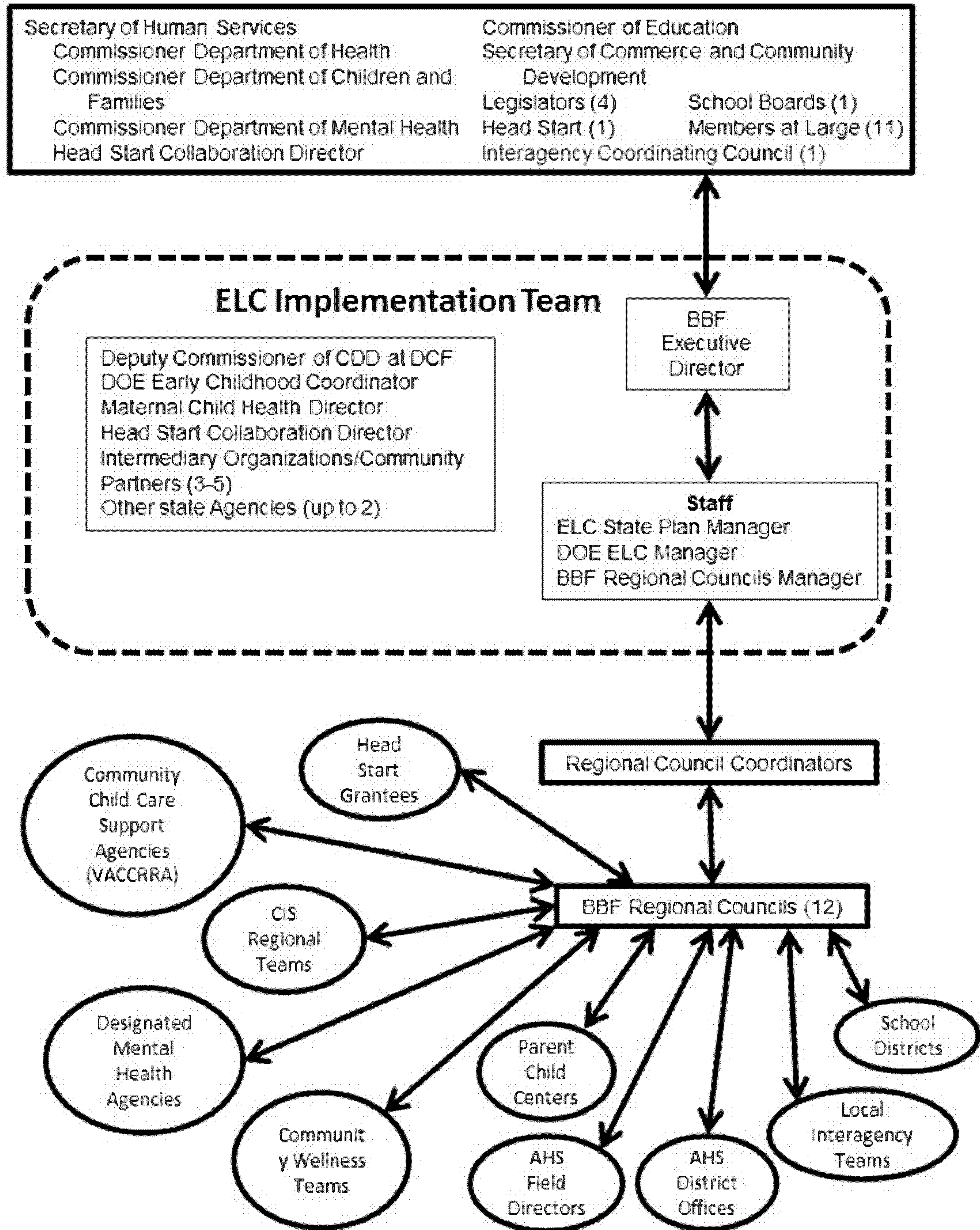
Use music from child's culture

Foster babies' emerging identities by using mirrors at baby height to help them recognize their reflection

Have photos of baby's family at crawling level

APPENDIX T

Vermont Early Learning Challenge State Plan Governance Structure
Building Bright Futures Council



APPENDIX U

VT's Early Learning and Development Comprehensive Assessment System

Screening, Formative Assessments, Environmental Quality, Adult-Child Interactions
 Valid, reliable for its specified purpose and population with which it will be used
 Uses the National Research Council's Early Childhood Assessment: Why, What and How as a Guide

Pre-natal, Birth, 6 months, 9 months, 1 year, 1 1/2 yrs, 2 yrs, 2 1/2 yr, 3 yrs, 4 yrs, 5 yrs, 6 yrs, 7 yrs, 8 yrs

**Child
Family**

Informs parents of their child's developmental status and how they are progressing

Guides parents in how to parent and support their child's development and learning

Guides parents re opportunities for continued development and learning

Guides parents to seek support and/or services when their child's development and learning is not progressing

**Program
Services**

Helps early childhood educators to make informed instructional and programmatic decisions

 Helps service providers to make informed anticipatory guidance and intervention decisions

Informs early childhood educators how to guide parents in their parenting

 Informs service providers how to guide parents in their parenting

Informs early childhood educators when to refer and connect parents to specific development and learning opportunities, support and services

 Informs service providers when to refer or deliver specific development and learning opportunities, support and services

**Community
State**

Informs communities of their children's (aggregated data, de-identified) developmental status and progress over time

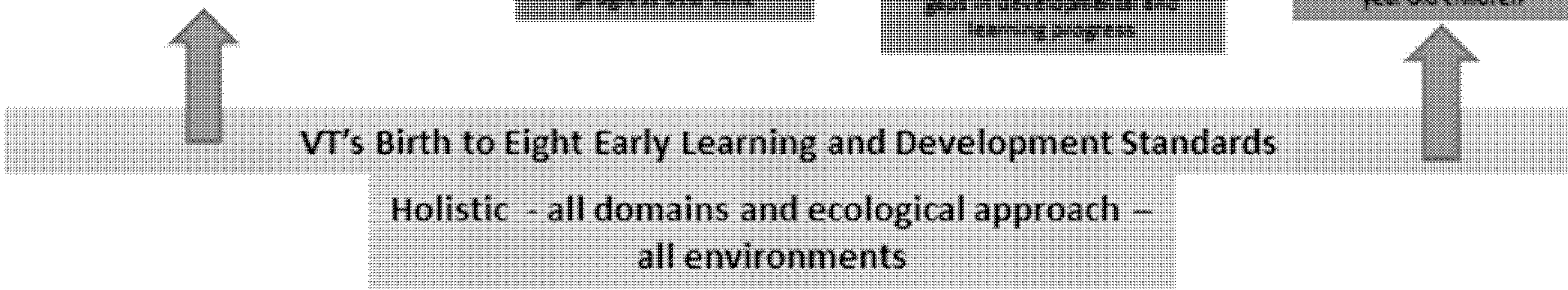
 Informs the State of Vermont of 0-8 year old developmental status and progress over time

Provides a springboard for communities to create evidence based, local solutions to address gaps in developmental and learning progress

 Provides a springboard for the State to create evidence based state-level solutions to address gaps in developmental and learning progress

Informs other communities and the state of their learning in addressing achievement gaps in 0-8 year old children

 Informs other states of their learning in addressing achievement gaps in 0-8 year old children



APPENDIX V

Congress of the United States
Washington, DC 20510

October 14, 2011

The Honorable Arne Duncan
Secretary, U.S. Department of Education
400 Maryland Avenue, SW
Washington, D.C. 20201

Dear Secretary Duncan:

The State of Vermont has submitted a grant application to raise the quality of and increase access to early learning programs through the Race to the Top – Early Learning Challenge (RTT-ELC) program. We are writing to voice our very strong support of this proposal.

With this requested RTT-ELC funding, Vermont would be able to further develop and maintain the many diverse initiatives that support the early learning and development of children from birth to age five. Our state has already made significant progress in improving the quality of these programs by creating dynamic partnerships and implementing a rigorous quality rating and improvement system. Indeed, Vermont's state and local agency leaders, families, and policy makers have collaborated to draft and implement numerous outstanding programs that are essential to establishing an effective early learning and development system. For example, even as we are faced with an increasingly difficult budget environment, VT STARS, Vermont's quality monitoring system, continues to receive funding for expansion as it supports high quality education that serves the real, and often challenging, needs of rural communities.

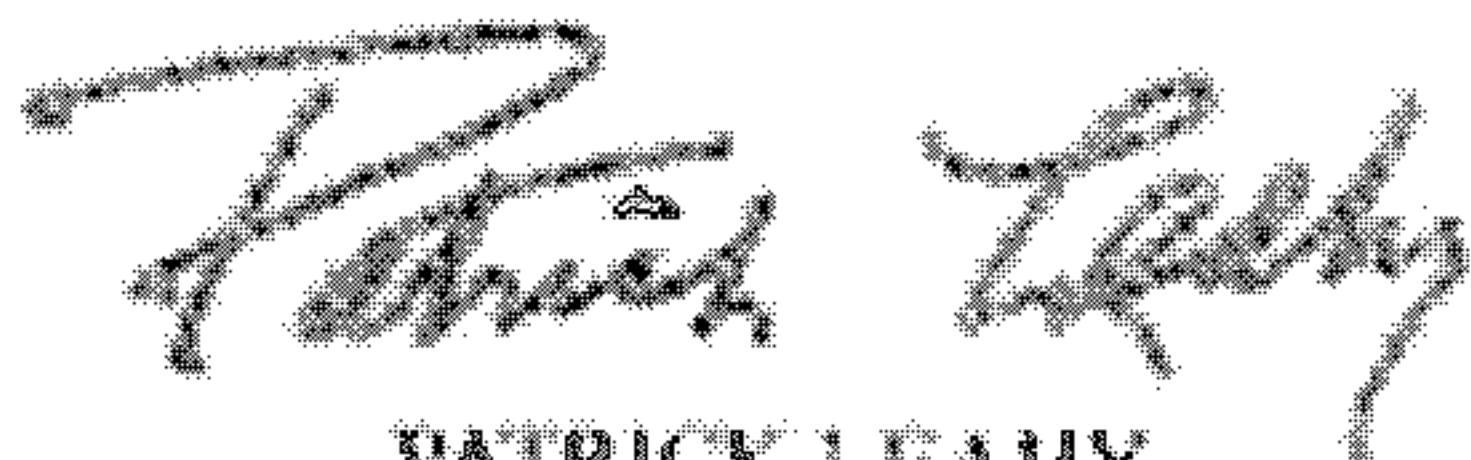
Vermont has a long history of fostering solid relationships between state agencies and organizations in order to promote and strengthen early learning; and it is these partnerships that will allow Vermont to meet the RTT-ELC goals. The state's commitment is further exemplified by Vermont's advisory council, Building Bright Futures, a public/private partnership, which now has the authority of legislative statute.

Vermont also leads the nation in assuring access to health insurance for children. This care has been combined with other services to fully address the specific challenges of children with special needs. Children's Integrated Services is a model of service integration that is improving outcomes for young children and their families, while working within financial constraints.

Our delegation strongly believes that education is the key to creating a stronger and healthier nation. To that end, it is imperative that we invest in our children as early as possible and the resources from this grant would allow Vermont to continue to build upon and expand these efforts. We are proud that Vermont is a leader in this area and steadfastly support this effort to advance their progress through the RTT-ELC state application.

Thank you for giving this request the serious consideration it deserves. If you have any questions, or if we can provide further evidence of our support for this proposal, please do not hesitate to contact us.

Sincerely,



PATRICK LEAHY
United States Senator



BERNARD SANDERS
United States Senator



PETER WELCH
United States Representative



P.O Box 1002 Williston, VT 05495

To Whom It May Concern:

The Vermont Child Care Providers Association (VCCPA) is pleased to offer its support for Vermont's Early Childhood Challenge Race to the Top application. The membership of the organization has been informed about the Race to the Top opportunity and has provided input as the application has developed.

The VCCPA is an organization of primarily, but not exclusively, family home providers. The VCCPA strives to support the work of family child care providers and bring their voices to the table of decision and policy making as much as possible.

Many of our members have appreciated the existing system of quality resources such as bonuses for achieving credentials and/or assistance in paying for college coursework and we look forward to an even more comprehensive system to support professional development.

We also support the goal of increased participation in STARS through a variety of strategies including regular bonuses for achieving and maintaining high quality care. The VCCPA looks forward to a comprehensive system to achieve this goal including peer support to apply for STARS and a public awareness campaign to increase the overall awareness of the importance of quality care for children.

Sincerely,

Cheryl Wells, President



CHAMPLAIN COLLEGE

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fax (802) 860-2750
www.champlain.edu

September 28, 2011

Governor Peter Shumlin
109 State Street, Pavilion
Montpelier, VT 05609

Dear Governor Shumlin:

This letter indicates our enthusiastic support for Vermont's Race to the Top – Early Learning Challenge Application. We appreciate your administration's commitment to early learning and development and the critical role high quality programs and services play in ensuring that all children enter school ready to learn and succeed in life.

Vermont's work over the past two decades to build a truly collaborative and coordinated early learning and development system puts us in an excellent position to take integration to the next level with this timely opportunity.

Vermont's state and local agency leaders, families and policy makers have collaborated to design and implement many of the components essential to an effective early learning and development system;

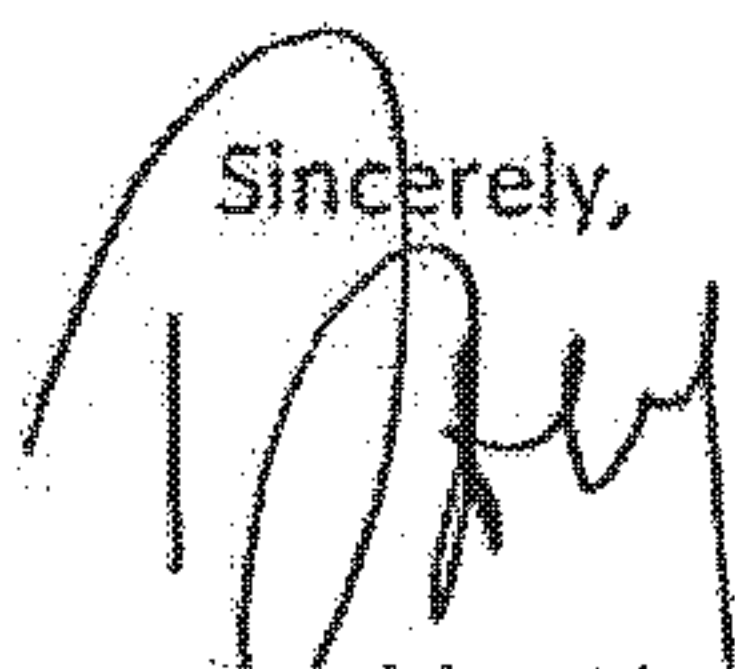
- Our quality rating and improvement system – VT STARS - has been in place for five years and continues to receive critical state funding for expansion, demonstrating Vermont's strong commitment to supporting high quality programs during a time of budget restrictions;
- Vermont's state advisory council, Building Bright Futures, a public/private partnership, now has the authority of legislative statute, as does our state Pre-K program;
- Vermont's continuum of integrated services for children with special needs - Children's Integrated Services - is a model of service integration and blending of funds that is improving outcomes for young children and their families while working within financial constraints;
- Vermont leads the nation in assuring access to health insurance for all children;
- A long-standing commitment in Vermont to state and local partnerships which are dynamic and genuine, ensures that state policy and practice is informed and guided by what is happening on a local level, a critical foundation for working together effectively in a rural environment; and
- Active engagement of private partners whose interests and investments in early learning and development complement and support the goals of this application.

With each of these innovative efforts and strategies, ensuring access and high quality services to children with high needs has been and remains an unchanging priority.

We have reviewed the five areas of reform and agree that they are the cornerstones of an effective and comprehensive reform agenda. Our particular interest lies in the preparation and development of early education teachers and we are eager to lend our expertise and experience to help implement the state plan.

Please call on us to assist in whatever ways are needed and count on our support.

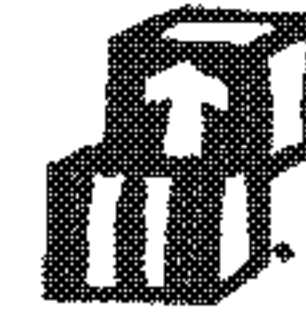
Sincerely,


David F. Finney
President

Many thanks for your support on this Race!



Vermont Head Start Association



September 28, 2011

Governor Peter Shumlin
109 State Street, Pavilion
Montpelier, VT 05609

Dear Governor Shumlin:

This letter is to express the support and commitment of the Vermont Head Start Association for Vermont's Race to the Top – Early Learning Challenge Application. We appreciate your administration's commitment to early learning and development and the critical role high quality programs and services play in ensuring that all children enter school ready to learn and to succeed in life. Vermont's work over the past two decades to build a truly collaborative and coordinated early learning and development system puts us in an excellent position to take integration to the next level with this timely opportunity.

Vermont's state and local agency leaders, families and policy makers have collaborated to design and implement many of the components essential to an effective early learning and development system:

- Our Quality Rating and Improvement System – VT STARS – has been in place for five years and continues to receive critical state funding for expansion, demonstrating Vermont's strong commitment to supporting high quality programs during a time of budget restrictions;
- Vermont's state advisory council, Building Bright Futures, a public/private partnership, now has the authority of legislative statute, as does our state Pre-K program;
- Vermont's continuum of integrated services for children with special needs – Children's Integrated Services – is a model of service integration and blending of funds that is improving outcomes for young children and their families while working within financial constraints;
- Vermont leads the nation in assuring access to health insurance for all children;
- A long-standing commitment in Vermont to state and local partnerships which are dynamic and genuine, ensures that state policy and practice is informed and guided by what is happening on a local level, a critical foundation for working together effectively in a rural environment; and
- Active engagement of private partners whose interests and investments in early learning and development complement and support the goals of this application.

With each of these innovative efforts and strategies, ensuring access and high quality services to children with high needs has been and remains an unchanging priority.

We have reviewed the five areas of reform and agree that they are the cornerstones of an effective and comprehensive reform agenda. Our particular interest lies in the area of Promoting Early Learning and Development Outcomes, inclusive of Family Engagement strategies and best practices, and we are eager to lend our expertise and experience to help implement the state plan. We will also assist in ensuring that families play a key role in the planning and implementation of Vermont's ELC State Plan, knowing that families and communities are the key to sustaining the ongoing success of our efforts. Please call on us to assist in whatever ways are needed and count on our support.

Sincerely,

Paul Behrman, Chair
Vermont Head Start Association

State of Vermont
Department of Labor
5 Green Mountain Drive
P.O. Box 488
Montpelier, VT 05601-0488
www.labor.vermont.gov

[phone] 802-828-4000
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October 5, 2011

Honorable Governor Peter Shumlin
109 State Street - Pavilion
Montpelier, VT 05609

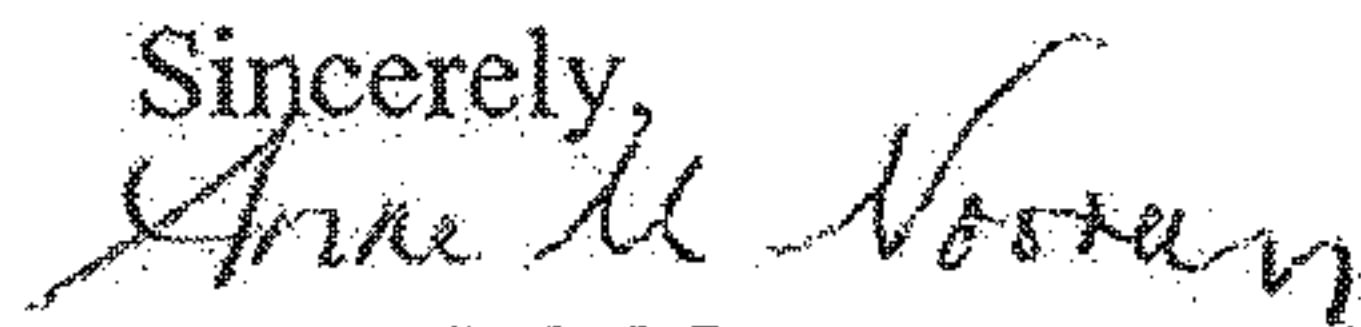
Dear Governor Shumlin:

As Commissioner of Labor, I have recently been asked to support Vermont's Early Learning Challenge Application. The Department of Labor is willing and ready to lend its expertise, experience and resources in making the Race to the Top Early Learning Challenge a great success.

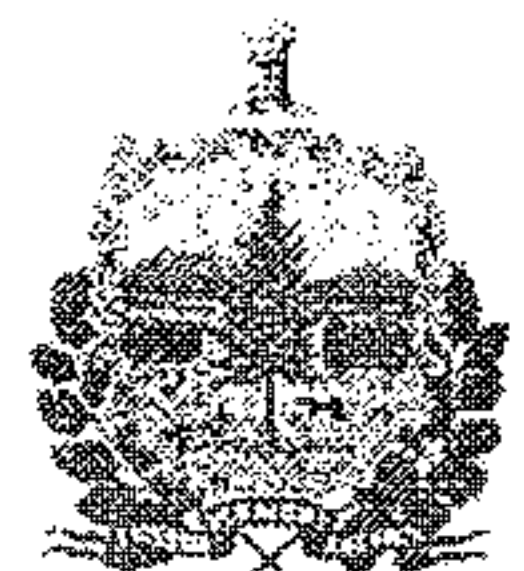
The Vermont Department of Labor is the statutory agency for the Vermont Registered Apprenticeship Program. In collaboration with the Vermont Child Care Industry and Careers Council, (VCCICC), the Department has registered many apprentices as Child Care Development Specialists. The apprentices receive 4,000 hours of on-the-job training and attend challenging classes, primarily through Community College of Vermont. We currently have 43 registered apprentices in the Child Care program, and additional funding would enable Vermonters across the state to have access to this valuable program.

Your commitment to early learning and development, as well as to ensuring quality programs and provider services, will help ensure that Vermont children enter school ready to learn and succeed.

Sincerely,



Anne M. Noonan
Commissioner



*Vermont Parent/Child Center Network
P.O. Box 646
Middlebury, VT 05753*

October 17, 2011

To Whom It May Concern:

On behalf of the Vermont Parent/Child Center Network, I am writing in support of Vermont's application for Race To The Top Early Learning Challenge proposal. The Vermont Parent/Child Center Network is dedicated to helping to improve the system of high quality childcare and developmental services in the state

The mission of the Vermont Parent Child Center Network is to create and support a statewide network of designated family centered programs in order to help all families get off to a healthy start.

All Centers share a commitment to family-centered practice and offer eight core services: home visiting, early childhood services, parent education, parent support, on site programs, playgroups, information and referral, and community involvement. In addition, each Parent Child Center provides a welcoming place in the community for families with young children.

The VPCCN was created in 1986 with four centers and now includes fifteen centers and covers the entire state. In thirteen years, we have grown in many ways and accomplished a great many things including the creation of a statewide network of designated Parent Child Centers, a state general fund appropriation for each PCC, a comprehensive peer review process, a Community-Based Child Abuse Prevention grant all the Centers and incorporation and 501(c)(3) status.

This history provides a rich context for statewide collaboration. We look forward to helping to promote the needs in our local communities in relation to this exciting funding opportunity and to creating a stronger foundation on which Vermont children thrive.

Sincerely,

Donna Bailey

Chairperson, Vermont Parent/Child Center Network

October 14, 2011



P.O. Box 464
Waterbury, VT 05676

Governor Peter Shumlin
109 State Street, Pavilion
Montpelier, VT 05609

Dear Governor Shumlin,

This letter indicates our support for Vermont's Race to the Top – Early Learning Challenge Application. We appreciate your administration's commitment to early learning and development and the critical role high quality programs and services play in ensuring that all children enter school ready to learn and succeed in life.

Vermont's work over the past two decades to build a collaborative and coordinated early learning and development system puts us in an excellent position to take integration to the next level with this timely opportunity. Vermont's state and local agency leaders, families and policy makers have collaborated to design and implement many of the components essential to an effective early learning and development system;

- Our quality rating and improvement system – VT STARS - has been in place for five years and continues to receive critical state funding for expansion, demonstrating Vermont's strong commitment to supporting high quality programs during a time of budget restrictions;
- Vermont's state advisory council, Building Bright Futures, a public/private partnership, now has the authority of legislative statute, as does our state Pre-K program;
- Vermont's continuum of integrated services for children with special needs - Children's Integrated Services - is a model of service integration and blending of funds that is improving outcomes for young children and their families while working within financial constraints;
- Vermont leads the nation in assuring access to health insurance for all children;
- A long-standing commitment in Vermont to state and local partnerships which are dynamic and genuine, ensures that state policy and practice is informed and guided by what is happening on a local level, a critical foundation for working together effectively in a rural environment; and
- Active engagement of private partners whose interests and investments in early learning and development complement and support the goals of this application.

With each of these innovative efforts and strategies, ensuring access and high quality services to children with high needs has been and remains an unchanging priority.

We have reviewed the five areas of reform and agree that they are the cornerstones of an effective and comprehensive reform agenda. Our particular interest lies in the **High Quality Accountable Programs and A Great Early Childhood Workforce** areas and we are eager to lend our expertise and experience to help implement the state plan.

Please call on us to assist in whatever ways are needed and count on our support.

Sincerely,

Melissa Riegl-Garrett

Executive Director,
Vermont Association for the Education of Young Children



VERMONT BUSINESS ROUNDTABLE

October 17, 2011

The Honorable Peter Shumlin
Governor of Vermont
Pavilion Building
109 State Street, Pavilion
Montpelier, VT 05609

Dear Governor Shumlin,

On behalf of the members of the Vermont Business Roundtable, let me again extend our appreciation for your administration's commitment to early learning and development and the critical role that high quality programs and services play in ensuring that all children enter school ready to learn and succeed in life. This letter indicates our enthusiastic support for Vermont's Race to the Top – Early Learning Challenge Application.

Vermont's work over the past two decades to build a truly collaborative and coordinated early learning and development system puts us in an excellent position to take integration to the next level with this timely opportunity.

Vermont's state and local agency leaders, families and policy makers have collaborated to design and implement many of the components essential to an effective early learning and development system;

- Our quality rating and improvement system – VT STARS - has been in place for five years and continues to receive critical state funding for expansion, demonstrating Vermont's strong commitment to supporting high quality programs during a time of budget restrictions;
- Vermont's state advisory council, Building Bright Futures, a public/private partnership, now has the authority of legislative statute, as does our state Pre-K program;
- Vermont's continuum of integrated services for children with special needs - Children's Integrated Services - is a model of service integration and blending of funds that is improving outcomes for young children and their families while working within financial constraints;
- Vermont leads the nation in assuring access to health insurance for all children;
- A long-standing commitment in Vermont to state and local partnerships which are dynamic and genuine, ensures that state policy and practice is informed and guided by what is happening on a local level, a critical foundation for working together effectively in a rural environment; and
- Active engagement of private partners whose interests and investments in early learning and development complement and support the goals of this application.



October 17, 2011
Governor Shumlin

Page 2

With each of these innovative efforts and strategies, ensuring access and high quality services to children with high needs has been and remains an unchanging priority.

We have reviewed the five areas of reform and agree that they are the cornerstones of an effective and comprehensive reform agenda. Our particular interest lies in the whole child development (prenatal to age 6) and we are eager to lend our expertise and experience to help implement the state plan.

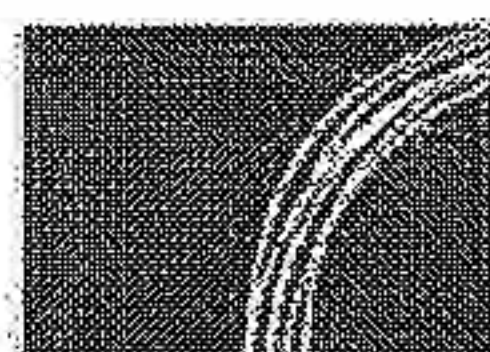
With our current interest in Evidence-based Home Visiting, we also initiatives that ensure that families play a key role in the planning and implementation of Vermont's ELC State Plan, knowing that they are the key to sustaining the ongoing success of our efforts.

Please call on us to assist in whatever ways are needed and count on our support.

Sincerely,


Lisa Mentriss

(b)(6)





The University of Vermont

September 28, 2011

Governor Peter Shumlin
109 State Street, Pavilion
Montpelier, VT 05609

Dear Governor Shumlin,

This letter indicates our enthusiastic support for Vermont's Race to the Top – Early Learning Challenge Application. We appreciate your administration's commitment to early learning and development and the critical role high quality programs and services play in ensuring that all children enter school ready to learn and succeed in life.

Vermont's work over the past two decades to build a truly collaborative and coordinated early learning and development system puts us in an excellent position to take integration to the next level with this timely opportunity.

Vermont's state and local agency leaders, families and policy makers have collaborated to design and implement many of the components essential to an effective early learning and development system;

- Our quality rating and improvement system – VT STARS - has been in place for five years and continues to receive critical state funding for expansion, demonstrating Vermont's strong commitment to supporting high quality programs during a time of budget restrictions;
- Vermont's state advisory council, Building Bright Futures, a public/private partnership, now has the authority of legislative statute, as does our state Pre-K program;
- Vermont's continuum of integrated services for children with special needs - Children's Integrated Services - is a model of service integration and blending of funds that is improving outcomes for young children and their families while working within financial constraints;
- Vermont leads the nation in assuring access to health insurance for all children;
- A long-standing commitment in Vermont to state and local partnerships which are dynamic and genuine, ensures that state policy and practice is informed and guided by what is happening on a local level, a critical foundation for working together effectively in a rural environment; and
- Active engagement of private partners whose interests and investments in early learning and development complement and support the goals of this application.

COLLEGE OF EDUCATION AND SOCIAL SERVICES

Office of the Dean, 309 Waterman Building, 85 South Prospect Street, Burlington, VT 05405-0160

(802) 656-3424 • fax: (802) 656-0855

<http://www.uvm.edu/~cess/>

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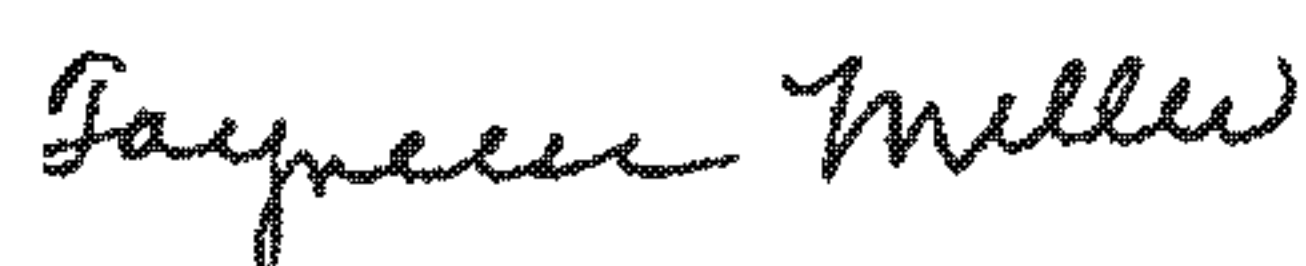
With each of these innovative efforts and strategies, ensuring access and high quality services to children with high needs has been and remains an unchanging priority.

We have reviewed the five areas of reform and agree that they are the cornerstones of an effective and comprehensive reform agenda. Our particular interest lies in working with the state in *Promoting Early Learning and Development Outcomes for Children, Top-Quality Early Childhood Education Workforce, and Measuring Outcomes and Progress*. We have faculty expertise that can help with creating assessments to address behavioral health needs and inform families. We can also support professional development and training through our existing high quality programs in early childhood and early childhood special education. As our faculty have significant expertise in high quality interdisciplinary research, we can also collaborate in the development of research designed to measure integrated outcomes and progress. We are eager to lend our expertise and experience to help implement the state plan.

We will also assist in ensuring that families play a key role in the planning and implementation of Vermont's ELC State Plan, knowing that families and communities are the key to sustaining the ongoing success of our efforts.

Please call on us to assist in whatever ways are needed and count on our support.

Sincerely,



Fayneese Miller, PhD
Dean

October 17, 2011

Governor Peter Shumlin
109 State Street
Montpelier, VT 05609

Dear Governor Shumlin,

This letter indicates our enthusiastic support for Vermont's Race to the Top – Early Learning Challenge Application. We appreciate your administration's commitment to early learning and development and the critical role high quality programs and services play in ensuring that all children enter school ready to learn and succeed in life.

Vermont's work over the past two decades to build a truly collaborative and coordinated early learning and development system puts us in an excellent position to take integration to the next level with this timely opportunity.

Vermont's state and local agency leaders, families and policy makers have collaborated to design and implement many of the components essential to an effective early learning and development system;

- Our quality rating and improvement system – VT STARS - has been in place for five years and continues to receive critical state funding for expansion, demonstrating Vermont's strong commitment to supporting high quality programs during a time of budget restrictions;
- Vermont's state advisory council, Building Bright Futures, a public/private partnership, now has the authority of legislative statute, as does our state Pre-K program;
- Vermont's continuum of integrated services for children with special needs - Children's Integrated Services - is a model of service integration and blending of funds that is improving outcomes for young children and their families while working within financial constraints;
- Vermont leads the nation in assuring access to health insurance for all children;
- A long-standing commitment in Vermont to state and local partnerships which are dynamic and genuine, ensures that state policy and practice is informed and guided by what is happening on a local level, a critical foundation for working together effectively in a rural environment; and
- Active engagement of private partners whose interests and investments in early learning and development complement and support the goals of this application.

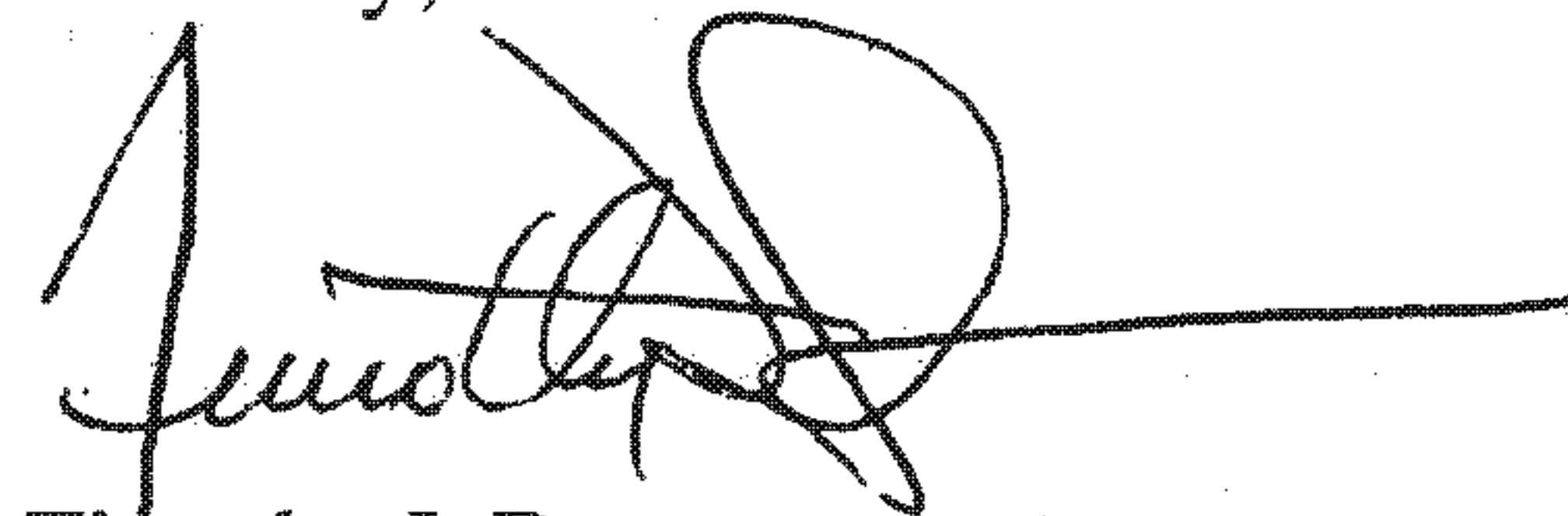
With each of these innovative efforts and strategies, ensuring access and high quality services to children with high needs has been and remains an unchanging priority.

We have reviewed the five areas of reform and agree that they are the cornerstones of an effective and comprehensive reform agenda. Our particular interest lies in the preparation and development of early education teachers and we are eager to lend our expertise and experience to help implement the state plan.

Please call on us to assist in whatever ways are needed and count on our support.

Sincerely,

Sincerely,

A handwritten signature in black ink, appearing to read "Timothy J. Donovan", with a long horizontal line extending to the right.

Timothy J. Donovan
Chancellor

**Vermont School Boards Association
Vermont Superintendents Association
Vermont Principals' Association
Vermont Council of Special Education Administrators**

October 17, 2011

Governor Peter Shumlin
109 State Street, Pavilion
Montpelier, VT 05609

Dear Governor Shumlin:

On behalf of the Vermont School Boards, Superintendents and Principals' Associations and the Vermont Council of Special Education Administrators, we are writing to convey our strong support for Vermont's Race to the Top - Early Learning Challenge Application. We commend your administration's commitment to early learning and development and the critical role high quality programs and services play in ensuring that all children enter school ready to learn and succeed in life.

Vermont's work over the past two decades to build a collaborative and coordinated early learning and development system puts us in a tremendous position to create an even stronger system in support of children, families, communities and the state overall.

Vermont's policy makers, state agencies, regional and local providers and families have worked together to develop and implement many of the essential features of an effective early learning and development system.

For example:

- Our quality rating and improvement system – VT STARS - has been in place for five years and continues to receive essential state funding for expansion, demonstrating Vermont's strong commitment to supporting high quality programs during a time of budget constraint;
- Vermont's state advisory council, Building Bright Futures, a public/private partnership, now has the authority of legislative statute, as does our state Pre-K program;
- Vermont's continuum of integrated services for children with special needs - Children's Integrated Services - is a model of service integration and blending of funds that is improving outcomes for young children and their families while working within financial constraints;
- Vermont is a national leader in assuring access to health insurance for all children;
- Vermont has a longstanding and enduring commitment to state and local partnerships that are authentic, ensure that state policy and practice is collaborative and responsive to local needs; and
- Active participation by public and private partners, whose mutual interests in early learning and development complement and support the goals of this application.

With each of these innovative efforts and strategies, ensuring access and high quality services to children with high needs has been and remains an unchanging priority.

We have reviewed the five areas of reform and agree that they are the essential components of a strategy to assure Vermont's position as a national leader in early learning and development supports for the state's children. Through this initiative, Vermont can continue to improve its educational outcomes, the well-being of children and families, the vibrancy and vitality of its communities – all of which will contribute to a stronger economy and a better quality of life for all.

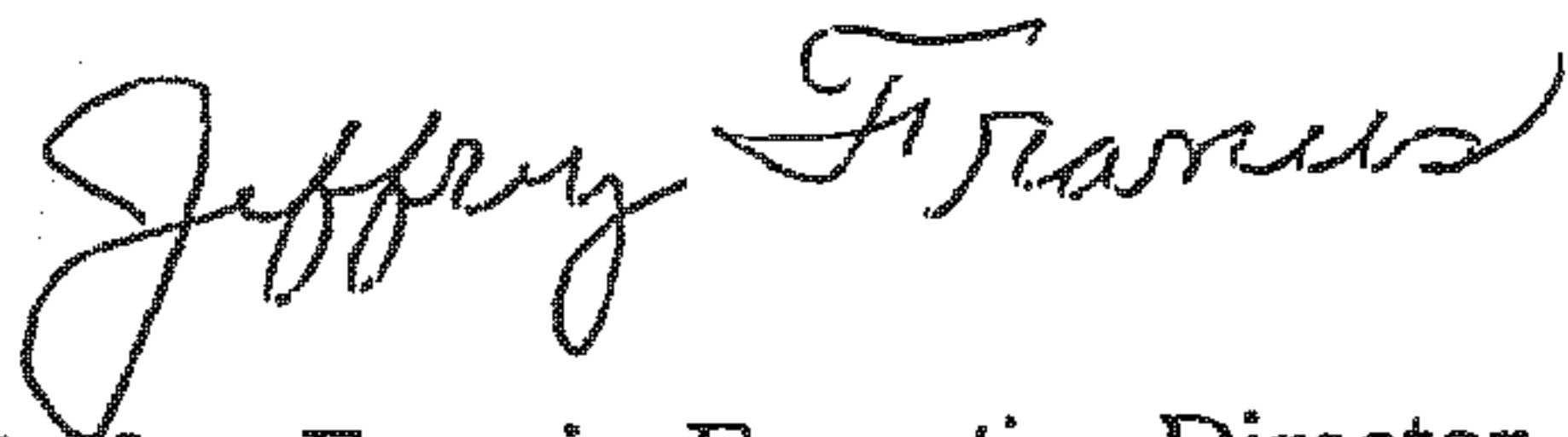
Our Associations are committed to doing our parts to assure that Vermont's system of early learning and development is improved through the planning, development and execution of Vermont's ELC State Plan. In doing so, we will emphasize collaboration, communications and an emphasis on local involvement.

Please call on us to assist in whatever ways are needed and count on our support.

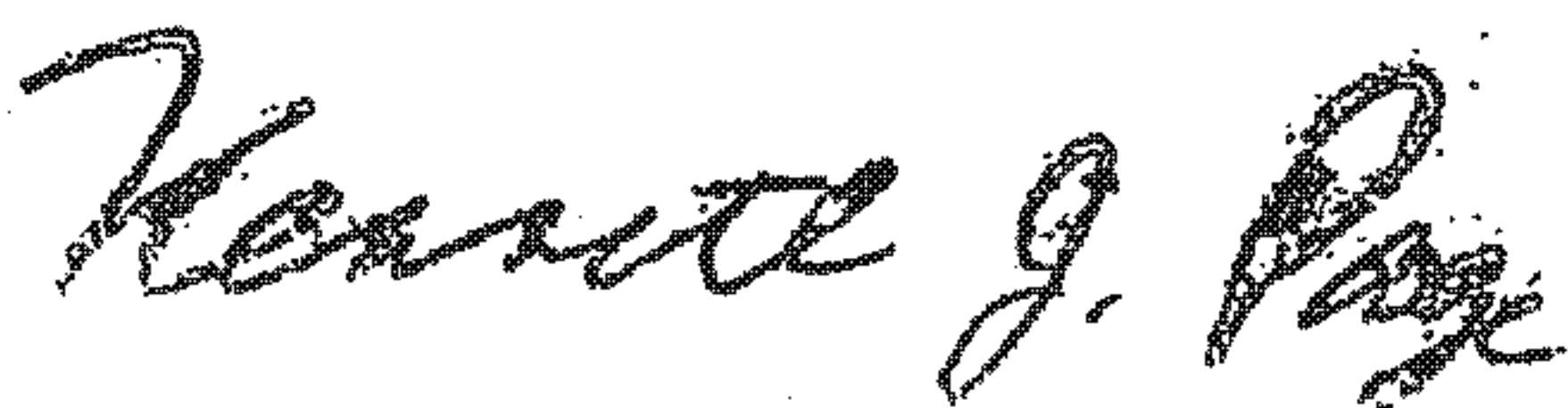
Sincerely,



Steve Dale, Executive Director
Vermont School Boards Association



Jeffrey Francis, Executive Director
Vermont Superintendents Association



Ken Page, Executive Director
Vermont Principals' Association



Vicki Wells, President
Vermont Council of Special Education Administrators

VERMONT DEC

The Vermont Subdivision of the International Division for Early Childhood
of the Council for Exceptional Children

October 11, 2011

Governor Peter Shumlin
109 State Street, Pavilion
Montpelier, VT 05609

Dear Governor Shumlin,

This letter indicates our enthusiastic support for Vermont's Race to the Top – Early Learning Challenge Application. We appreciate your administration's commitment to early learning and development and the critical role high quality programs and services play in ensuring that all children enter school ready to learn and succeed in life.

Vermont's work over the past two decades to build a truly collaborative and coordinated early learning and development system puts us in an excellent position to take integration to the next level with this timely opportunity.

Vermont's state and local agency leaders, families and policy makers have collaborated to design and implement many of the components essential to an effective early learning and development system;

- Our quality rating and improvement system – VT STARS - has been in place for five years and continues to receive critical state funding for expansion, demonstrating Vermont's strong commitment to supporting high quality programs during a time of budget restrictions;
- Vermont's state advisory council, Building Bright Futures, a public/private partnership, now has the authority of legislative statute, as does our state Pre-K program;
- Vermont's continuum of integrated services for children with special needs - Children's Integrated Services - is a model of service integration and blending of funds that is improving outcomes for young children and their families while working within financial constraints;
- Vermont leads the nation in assuring access to health insurance for all children;
- A long-standing commitment in Vermont to state and local partnerships which are dynamic and genuine, ensures that state policy and practice is informed and guided by what is happening on a local level, a critical foundation for working together effectively in a rural environment; and
- Active engagement of private partners whose interests and investments in early learning and development complement and support the goals of this application.

With each of these innovative efforts and strategies, ensuring access and high quality services to children with high needs has been and remains an unchanging priority.

We have reviewed the five areas of reform and agree that they are the cornerstones of an effective and comprehensive reform agenda. Our particular interest lies in area of promoting comprehensive delivery of quality services for all young children with special needs and their families (birth-8 years) in the State of Vermont. We are eager to lend our expertise and experience to help implement the state plan.

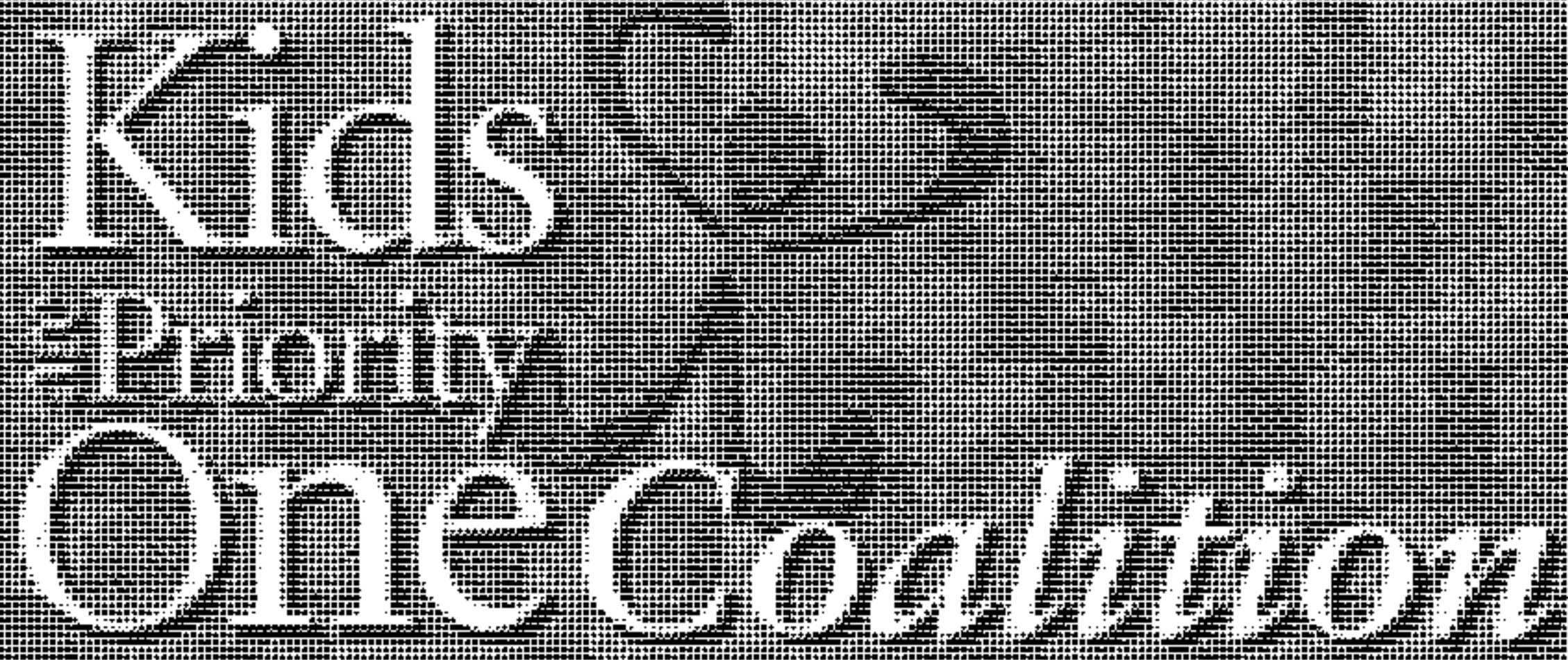
We will also assist in ensuring that families play a key role in the planning and implementation of Vermont's ELC State Plan, knowing that families and communities are the key to sustaining the ongoing success of our efforts.

Please call on us to assist in whatever ways are needed and count on our support.

Sincerely,



Jacqueline M Sprague, president
VT DEC



PO Box 57, South Newfane, VT 05601
802-248-9810
info@kidsarepriorityone.org
www.kidsarepriorityone.org

October 17, 2011

Governor Peter Shumlin
109 State Street, Pavilion
Montpelier, VT 05609

Dear Governor Shumlin,

This letter indicates our enthusiastic support for Vermont's Race to the Top – Early Learning Challenge application. We appreciate your administration's commitment to early learning and development. We know you understand the critical role that high-quality programs and services play in ensuring that all children have the sturdy foundation they need for lifelong learning.

Thanks to ongoing efforts to build a truly collaborative and coordinated early learning and development system in Vermont, we were well positioned to be able to apply for this grant and will be able to take full advantage of the funds, should Vermont be fortunate enough to be selected.

Vermont's state and local agency leaders, families, policy makers and advocates continue to work together to design and implement many of the components essential to an effective early learning and development system. These include:

- Vermont's quality rating and improvement system: STARS has been in place for five years and continues to receive critical state funding for expansion, demonstrating Vermont's strong commitment to supporting high quality programs during a time of budget restrictions.
- State Early Childhood Advisory Council: Building Bright Futures, a public/private partnership, now has the authority of legislative statute.
- State and local partnerships: Building Bright Futures regional councils, Parent Child Centers, and other entities provide mechanisms for ensuring that state policy and practice are informed and guided by what is happening on a local level. Non-profit early childhood service providers also play an integral role in ensuring that community needs inform state policy.
- Publicly-Funded Pre-k: Act 62 permits use of public education funds to be used for high-quality early education for three and four year olds.

- Vermont's continuum of integrated services for children with special needs: Children's Integrated Services is a model of service integration and blending of funds that is improving outcomes for young children and their families while working within financial constraints.
- Health insurance: Vermont leads the nation in assuring access to health insurance for all children through its Dr. Dynasaur program.

With each of these innovative efforts and strategies, ensuring access and high-quality services to children with high needs has been and remains an unchanging priority.

We have reviewed the five areas of reform and agree that they are the cornerstones of an effective and comprehensive reform agenda. They are consistent with the Kids Are Priority One Coalition's Policy Agenda and the Coalition's long-standing commitment to working with Vermonters to ensure access to affordable, high-quality child development services to Vermont's youngest citizens. Should Vermont be fortunate enough to receive Early Learning Challenge funds, we look forward to working with our local and state partners to help implement the state plan. We will also assist in ensuring that families play a key role in the planning and implementation of Vermont's ELC State Plan, knowing that families and communities are the key to sustaining the ongoing success of our efforts.

Please call on us to assist in whatever ways are needed. You can count on our support.

Sincerely,

(b)(6)

Kim Friedman
Campaign Director
Kids Are Priority One Coalition



October 11, 2011

Governor Peter Shumlin
109 State Street, Pavilion
Montpelier, VT 05609

Dear Governor Shumlin,

I am writing this letter in enthusiastic support of Vermont's Race to the Top – Early Learning Challenge Application. I am personally acquainted with your heartfelt commitment to high-quality, outcomes-accountable early care, health, and education programs, and appreciate how that has influenced your administration. I know that you understand how essential excellent child development and family support services, and an infrastructure supportive of their quality and accessibility, are to ensuring that all children enter school ready to succeed.

Over the last twenty years, Vermont has worked diligently to build a truly collaborative, well-coordinated early care, health, and education system. Our state's experience puts us in an outstanding position to take the integration of services and supports for young children and their families to the next level with this timely opportunity.

Vermont's state and local agency leaders, families and policy makers have collaborated to design and implement many of the components essential to an effective early care, health and education system:

- Our quality rating and improvement system – VT STARS - has been in place for five years and continues to receive critical state funding for expansion, demonstrating Vermont's strong commitment to supporting high quality programs during a time of budget restrictions;
- Vermont's state advisory council, Building Bright Futures, a public/private partnership, now has the authority of legislative statute, as does our state Pre-K program;
- Vermont's continuum of integrated services for children with special needs - Children's Integrated Services - is a model of service integration and blending of funds that is improving outcomes for young children and their families while working within financial constraints;
- Vermont leads the nation in assuring access to health insurance for all children;
- A long-standing commitment in Vermont to state and local partnerships which are dynamic and genuine, ensures that state policy and practice is informed and guided by what is happening on a local level, a critical foundation for working together effectively in a rural environment; and
- Active engagement of private partners whose interests and investments in early learning and development complement and support the goals of this application.

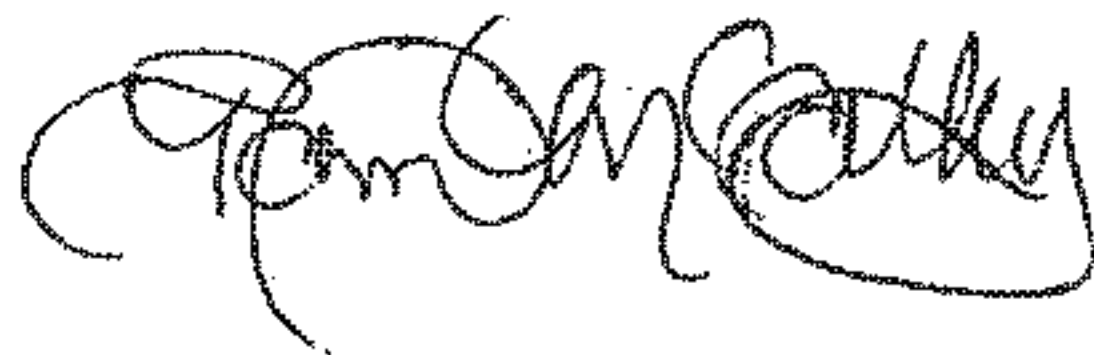
With each of these innovative efforts and strategies, ensuring access and high quality services to children with significant needs and their families has been and remains an unchanging priority.

We have reviewed the five areas of reform and agree that they are the cornerstones of an effective and comprehensive reform agenda. Our particular interest lies in the area of family engagement, especially with regard to children with special needs, in the planning, implementation, and evaluation of high-quality, well-integrated child development and family support services. As the Federal Family to Family Health Information Center and Parent Training and Information Center, as well as the provider of Part C Early Intervention Services for Chittenden County families with eligible children, we are committed to ensuring that the early childhood system Vermont envisions is responsive to children and families' needs as they define them. We know that holistic, strengths-based, results accountable services---and an infrastructure that is strong, inclusive, and responsive at the state and *local* levels, especially---will make all the difference in closing the achievement gaps that challenge so many of our youngest learners. Vermont Family Network staff and families are eager to lend our expertise, enthusiasm, and experience to help implement the state plan.

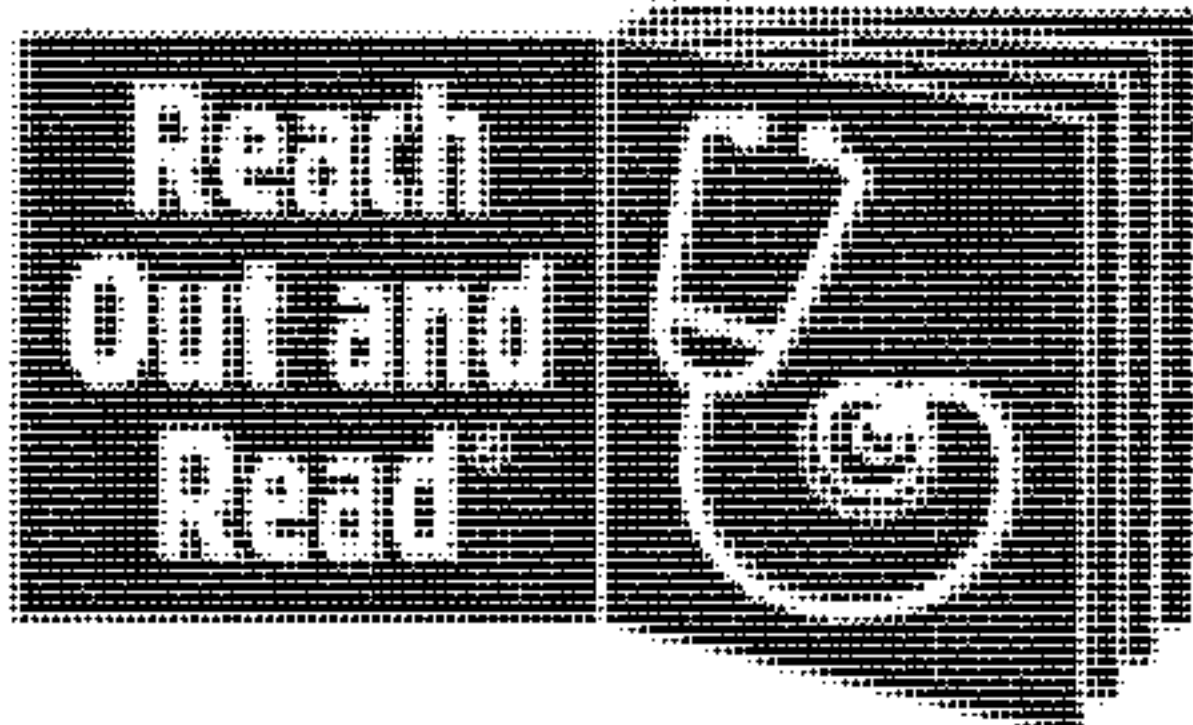
With the vision, energy, and wisdom of so many stakeholders enriching this comprehensive proposal, we are poised to build exceptionally "bright futures" for Vermont's youngest learners. Together, we will make a measurable difference in early care, health, and education outcomes.

Please call on us to assist in whatever ways are needed and count on our support.

All my best,



Pam McCarthy
President/CEO
Vermont Family Network



reachoutandread.org

October 12, 2011

Governor Peter Shumlin
109 State Street, Pavilion
Montpelier, VT 05609

Dear Governor Shumlin,

This letter indicates **Reach Out and Read's** enthusiastic support for Vermont's Race to the Top – Early Learning Challenge Application. Your administration's commitment to early learning programs and services is significant for it plays the critical role of assuring that all Vermont children arrive at school on "Day 1" ready to learn to read, ready to learn, and thus, poised to succeed in life.

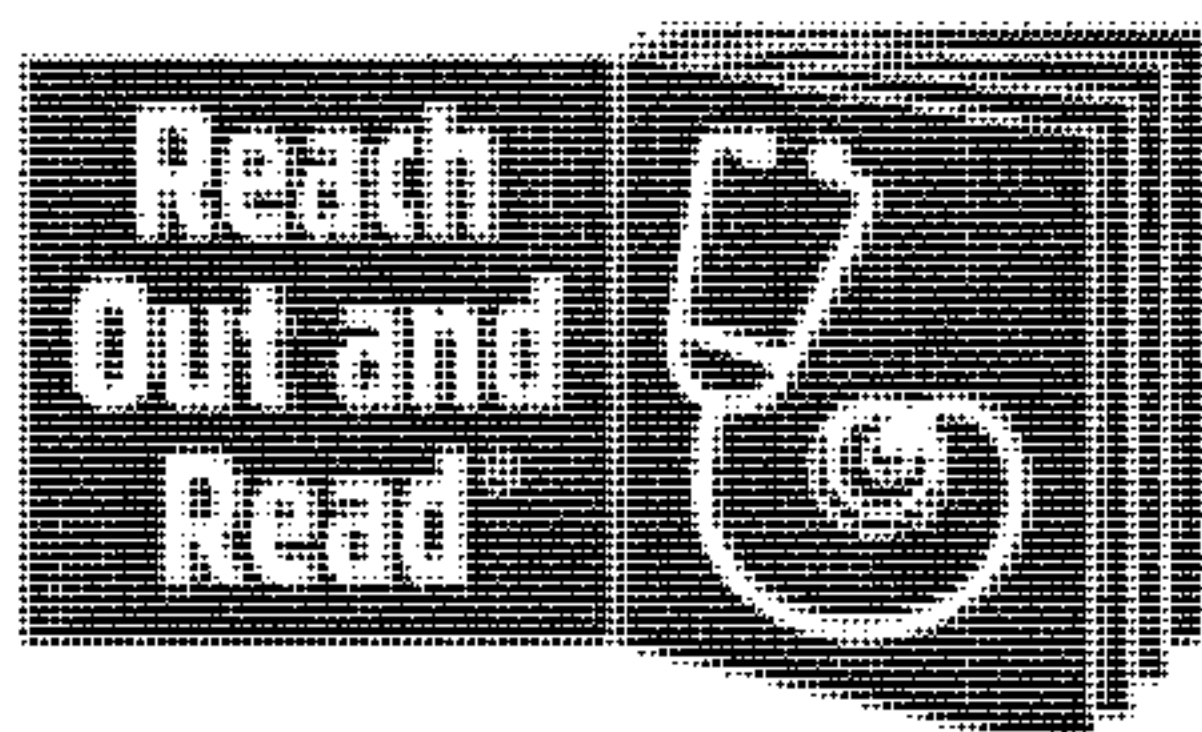
Vermont's work over the past two decades is impressive, having, built a truly collaborative and coordinated early learning and development system. It places Vermont in an excellent position to take integration to the next level.

Vermont's state and local agency leaders, families, physicians, and policy makers have collaborated to design and implement many of the components essential to an effective early learning and development system:

- Our quality rating and improvement system – VT STARS - has been in place for five years and continues to receive critical state funding for expansion, demonstrating Vermont's strong commitment to supporting high quality programs during a time of budget restrictions;
- Vermont's state advisory council, Building Bright Futures, a public/private partnership, now has the authority of legislative statute, as does our state Pre-K program;
- Vermont's continuum of integrated services for children with special needs - Children's Integrated Services - is a model of service integration and blending of funds that is improving outcomes for young children and their families while working within financial constraints;
- Vermont leads the nation in assuring access to health insurance for all children;
- A long-standing commitment in Vermont to state and local partnerships which are dynamic and genuine, ensures that state policy and practice is informed and guided by what is happening on a local level, a critical foundation for working together effectively in a rural environment; and
- Active engagement of private and non-profit partners whose interests and investments in early learning and development complement and support the goals of this application.

With each of these innovative efforts and strategies, ensuring access and high quality services to children with high needs has been and remains an unchanging priority. The five areas of reform are the cornerstones of an effective and comprehensive reform agenda.

Reach out and Read's particular interest lies in continuing to help parents support the early literacy development of their youngest children, beginning at six months of age. Reach Out and Read leverages



reachoutandread.org

both the health care system (universal access to all Vermont children through the standard series of health supervision visits through age 5) and the trusted and special relationship that medical providers have with parents, to change behaviors in the home toward reading aloud every day. As a nationwide non-profit that already annually serves 17,000 children in Vermont (and 4 million across the U.S.), we are eager to lend our expertise and experience to help implement the state plan.

Reach Out and Read focuses on ensuring that parents are awake to the key role they play as their child's first teacher. Vermont's families make up Vermont communities, and together we hold the keys to sustaining our children's success, not just in the critical very early years, but later, as well.

Please call on us to assist in whatever ways are needed. We support this application and plan fully.

Sincerely,
Gretchen Hunsberger

Program Director
New England Region
Reach out and Read
Gretchen.Hunsberger@reachoutandread.org

October 12, 2011

Governor Peter Shumlin
109 State Street, Pavilion
Montpelier, VT 05609

Dear Governor Shumlin,

This letter indicates our enthusiastic support for Vermont's Race to the Top – Early Learning Challenge Application. We appreciate your administration's commitment to early learning and development and the critical role high quality programs and services play in ensuring that all children enter school ready to learn and succeed in life.

Vermont's work over the past two decades to build a truly collaborative and coordinated early learning and development system puts us in an excellent position to take integration to the next level with this timely opportunity.

Vermont's state and local agency leaders, families and policy makers have collaborated to design and implement many of the components essential to an effective early learning and development system;

- Our quality rating and improvement system – VT STARS - has been in place for five years and continues to receive critical state funding for expansion, demonstrating Vermont's strong commitment to supporting high quality programs during a time of budget restrictions;
- Vermont's state advisory council, Building Bright Futures, a public/private partnership, now has the authority of legislative statute, as does our state Pre-K program;
- Vermont's continuum of integrated services for children with special needs - Children's Integrated Services - is a model of service integration and blending of funds that is improving outcomes for young children and their families while working within financial constraints;
- Vermont leads the nation in assuring access to health insurance for all children;
- A long-standing commitment in Vermont to state and local partnerships which are dynamic and genuine, ensures that state policy and practice is informed and guided by what is happening on a local level, a critical foundation for working together effectively in a rural environment; and
- Active engagement of private partners whose interests and investments in early learning and development complement and support the goals of this application.

With each of these innovative efforts and strategies, ensuring access and high quality services to children with high needs has been and remains an unchanging priority.

We have reviewed the five areas of reform and agree that they are the cornerstones of an effective and comprehensive reform agenda. Our particular interest lies in assuring the

integration of children who came to Vermont as refugees for many of whom English is a second language. We are eager to lend our expertise and experience to reach out to and engage their families as a crucial part of the implementation of the state plan.

We will also assist in ensuring that families play a key role in the planning and implementation of Vermont's ELC State Plan, knowing that families and communities are the key to sustaining the ongoing success of our efforts.

Please call on us to assist in whatever ways are needed and count on our support.

Sincerely,

Judy Scott
Director
Vermont Refugee Resettlement Program

October 7, 2011

Governor Peter Shumlin
109 State Street, Pavilion
Montpelier, VT 05609



Dear Governor Shumlin:

This letter represents the Vermont Center for the Book's strong support for the Race to the Top Early Learning Challenge Application from the State of Vermont. Vermont Center for the Book (VCB) shares your administration's commitment to the importance of early education and our organization mission complements and supports the goals of this application.

Since 1989 VCB has worked closely with the Vermont Department of Education and its efforts to coordinate early education in communities around the state and to promote school readiness. Specifically, VCB has worked to improve the professional development of the child-care workforce, to extend learning into the home, to support literacy in the early grades, and to promote cooperative relationships among the many agencies and programs providing services to children and families. This has been accomplished through our standards-based *Mother Goose Cares* courses for early educators and our *Mother Goose Programs* for families.

The goal of VCB's programs addressing early childhood education from birth to age seven is: to improve the quality of early education in Vermont by increasing the competence of early childhood educators, both center and home-based, by expanding the ability of early childhood educators to intentionally incorporate the language, concepts and skills of literacy, science, math and social studies into their daily interactions with children and by fostering communication between and among early educators and the families with whom they work. Over the past 10 years hundreds of early childhood educators—both center-based and family home care—have enrolled in VCB's multi-session courses, many for undergraduate or graduate credit. Independent evaluation has shown statistically significant change in child-care practice as a result of these courses.



In addition, our *Mother Goose Programs* for families have been offered by parent-child centers, Head Start centers, adult basic education centers, school districts, public libraries—in short, any agency that serves at-risk families with preschool children. These programs help parents and other family members understand the importance of reading and conversation in the home. Thousands of children have benefited from these programs since their inception.

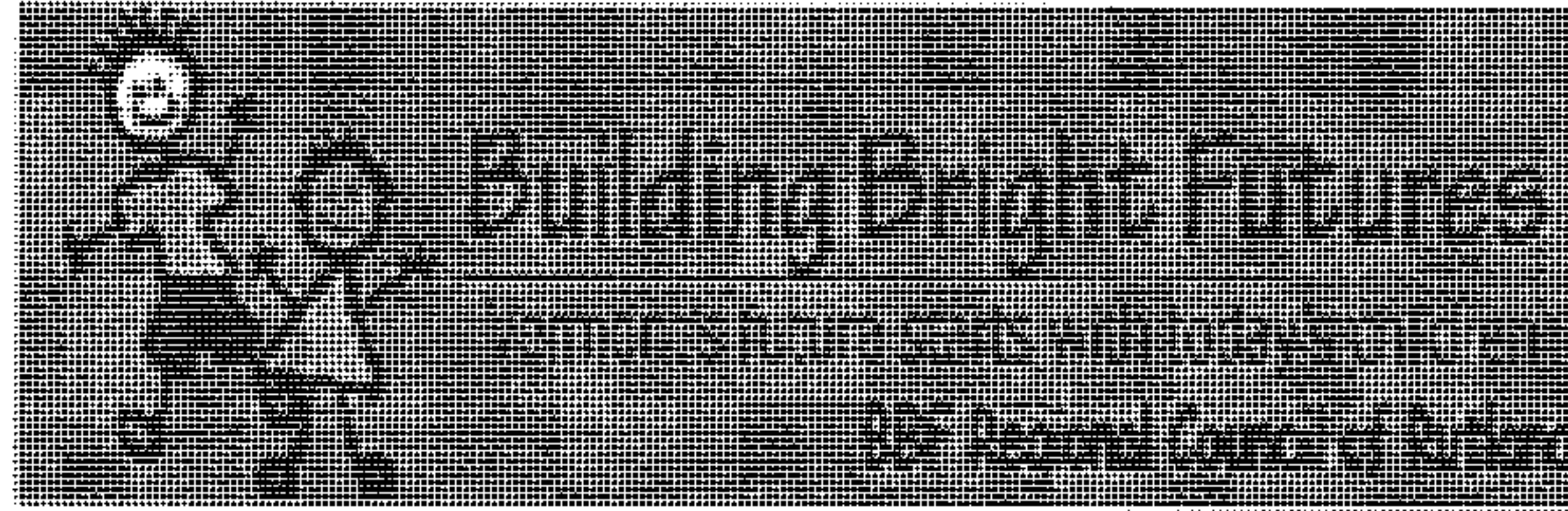
Most recently VCB joined forces with the Vermont Department of Libraries to create the Early Literacy Initiative (ELI), bringing early literacy programming to over 50 Vermont communities through public libraries. We give librarians the training and information they need to incorporate best literacy practices into their ongoing programs for children birth to three. The training includes information on ways to involve the child-care community in this work. As a Center for the Book affiliated with the Library of Congress, VCB recognizes that the public library is a community center and resource for literacy, information, technology and learning for children and their families. As a physical space and informal learning venue it is accessible to all and as such for many families it is the first step to school readiness.

We are pleased to be a part of Vermont's long-standing commitment to state and local partnerships, ensuring that state policy and practice is informed and guided by what is happening in local Vermont communities. VCB is an enthusiastic organization partner whose interests and investments in early learning and development complement and support the goals of this application. We wish you well with this application. Please let us know how we can help in any way.

Sincerely,

(b)(6)

Sally Anderson, Executive Director
Vermont Center for the Book



October 12, 2011

Governor Peter Shumlin
109 State Street, Pavilion
Montpelier, VT 05609

Dear Governor Shumlin,

This letter indicates our enthusiastic support for Vermont's Race to the Top – Early Learning Challenge Application. We appreciate your administration's commitment to early learning and development and the critical role high quality programs and services play in ensuring that all children enter school ready to learn and succeed in life.

Vermont's work over the past two decades to build a truly collaborative and coordinated early learning and development system puts us in an excellent position to take integration to the next level with this timely opportunity.

Vermont's state and local agency leaders, families and policy makers have collaborated to design and implement many of the components essential to an effective early learning and development system;

- Our quality rating and improvement system – VT STARS - has been in place for five years and continues to receive critical state funding for expansion, demonstrating Vermont's strong commitment to supporting high quality programs during a time of budget restrictions;
- Vermont's state advisory council, Building Bright Futures, a public/private partnership, now has the authority of legislative statute, as does our state Pre-K program;
- Vermont's continuum of integrated services for children with special needs - Children's Integrated Services - is a model of service integration and blending of funds that is improving outcomes for young children and their families while working within financial constraints;
- Vermont leads the nation in assuring access to health insurance for all children;
- A long-standing commitment in Vermont to state and local partnerships which are dynamic and genuine, ensures that state policy and practice is informed and guided by what is happening on a local level, a critical foundation for working together effectively in a rural environment; and
- Active engagement of private partners whose interests and investments in early learning and development complement and support the goals of this application.

With each of these innovative efforts and strategies, ensuring access and high quality services to children with high needs has been and remains an unchanging priority.

We have reviewed the five areas of reform and agree that they are the cornerstones of an effective and comprehensive reform agenda. Our particular interest lies in the strengthening of families and early education providers through the increase of professional development opportunities, engagement of parents in our system and strengthening our overall coordination of services and resources. We have a great council that is focusing on the relationships between home care and center based providers with the public school system. In addition we are implementing case management support to families identified by the home care providers in the more rural areas of our county. In addition we are piloting a parent advisory group in the northern and central section of our county to ensure our preschool programs are addressing adequately the needs of parents. Finally we are developing a magic notebook for kids based on partnerships with local providers and our kindergarten teachers. We are eager to lend our expertise and experience to help implement the state plan.

We will also assist in ensuring that families play a key role in the planning and implementation of Vermont's ELC State Plan, knowing that families and communities are the key to sustaining the ongoing success of our efforts.

Please call on us to assist in whatever ways are needed and count on our support.

Sincerely,

Caprice Hover
Rutland County Parent Child Center

Building Bright Futures Early Childhood Council of Northern Windsor and Orange Counties
319 US Route 5 South
Norwich, VT 05055
802-649-3268

October 11, 2011

Governor Peter Shumlin
109 State Street, Pavilion
Montpelier, VT 05609

Dear Governor Shumlin,

Please accept this letter of support for Vermont's Race to the Top – Early Learning Challenge Application. The Building Bright Futures Early Childhood Council for the Hartford region wholeheartedly supports this effort. We deeply appreciate your administration's commitment to high quality, accessible early care and learning opportunities for families with young children. We are eager to work with you to ensure that all children in Vermont enter school ready to learn and achieve their full potential.

We have been actively involved in Vermont's work over the past two decades to build a collaborative and coordinated early learning and development system. The progress we have made together puts us in an excellent position to engage in activities that further improve the system of supports for young families at both the state and regional levels.

To date, Vermont's state and local agency leaders, families and policy makers have collaborated to design and implement many of the components essential to an effective early learning and development system.

- Our quality rating and improvement system - VT STARS - has been in place for five years and continues to receive critical state funding for expansion, demonstrating Vermont's strong commitment to supporting high quality programs during a time of budget restrictions;
- Vermont's state advisory council - Building Bright Futures, a public/private partnership - now has the authority of legislative statute, as does our state Pre-K program;
- Vermont's continuum of integrated services for children with special needs - Children's Integrated Services - is a model of service integration and blending of funds that is improving outcomes for young children and their families while working within financial constraints;
- Vermont leads the nation in assuring access to health insurance for all children;
- Vermont's long-standing commitment to state and local partnerships ensures that state policy and practice is informed and guided by what is happening on a local level, a critical foundation for working effectively in a rural environment; and
- We have the active engagement of private partners whose interests and investments in early learning and development complement and support the goals of this application.

These efforts and strategies exemplify our shared commitment to meeting the needs of our most vulnerable children. We are poised to take integration to the next level.

We have reviewed the five areas of reform and agree that they are the cornerstones of an effective and comprehensive reform agenda. The particular interest of our council lies in reducing child abuse and neglect and improving access to high quality childcare. We are eager to lend our expertise and experience to help implement the state plan.

We will also assist in ensuring that families play a key role in the planning and implementation of Vermont's ELC State Plan, recognizing the key roles that families and communities play in sustaining the ongoing success of our efforts.

Please call on us to assist in whatever ways are needed. You can count on our support.

Sincerely,

Elaine Guenet
Executive Director, The Family Place
On behalf of the BBF Early Childhood Council of Northern Windsor and Orange Counties

September 28, 2011

Governor Peter Shumlin
109 State Street, Pavilion
Montpelier, VT 05609

Dear Governor Shumlin,

This letter indicates our enthusiastic support for Vermont's Race to the Top – Early Learning Challenge Application. We appreciate your administration's commitment to early learning and development and the critical role high quality programs and services play in ensuring that all children enter school ready to learn and succeed in life.

Vermont's work over the past two decades to build a truly collaborative and coordinated early learning and development system puts us in an excellent position to take integration to the next level with this timely opportunity.

Vermont's state and local agency leaders, families and policy makers have collaborated to design and implement many of the components essential to an effective early learning and development system;

- Our quality rating and improvement system – VT STARS - has been in place for five years and continues to receive critical state funding for expansion, demonstrating Vermont's strong commitment to supporting high quality programs during a time of budget restrictions;
- Vermont's state advisory council, Building Bright Futures, a public/private partnership, now has the authority of legislative statute, as does our state Pre-K program;
- Vermont's continuum of integrated services for children with special needs - Children's Integrated Services - is a model of service integration and blending of funds that is improving outcomes for young children and their families while working within financial constraints;
- Vermont leads the nation in assuring access to health insurance for all children;
- A long-standing commitment in Vermont to state and local partnerships which are dynamic and genuine, ensures that state policy and practice is informed and guided by what is happening on a local level, a critical foundation for working together effectively in a rural environment; and
- Active engagement of private partners whose interests and investments in early learning and development complement and support the goals of this application.

With each of these innovative efforts and strategies, ensuring access and high quality services to children with high needs has been and remains an unchanging priority.

We have reviewed the five areas of reform and agree that they are the cornerstones of an effective and comprehensive reform agenda. Our particular interest lies in the Successful State

Systems area and we are eager to lend our expertise and experience to help implement the state plan.

We will also assist in ensuring that families play a key role in the planning and implementation of Vermont's ELC State Plan, knowing that families and communities are the key to sustaining the ongoing success of our efforts.

Please call on us to assist in whatever ways are needed and count on our support.

Sincerely,

Central Vermont Building Bright Futures
383 Sherwood Drive
Montpelier, VT 05602
(802)262-3292 ext 113
jillm@fcwvvt.org

October 14, 2011

Governor Peter Shumlin
109 State Street, Pavilion
Montpelier, VT 05609

Dear Governor Shumlin,

This letter indicates our enthusiastic support for Vermont's Race to the Top – Early Learning Challenge Application. We appreciate your administration's commitment to early learning and development and the critical role high quality programs and services play in ensuring that all children enter school ready to learn and succeed in life.

Vermont's work over the past two decades to build a truly collaborative and coordinated early learning and development system puts us in an excellent position to take integration to the next level with this timely opportunity.

Vermont's state and local agency leaders, families and policy makers have collaborated to design and implement many of the components essential to an effective early learning and development system;

- Our quality rating and improvement system – VT STARS - has been in place for five years and continues to receive critical state funding for expansion, demonstrating Vermont's strong commitment to supporting high quality programs during a time of budget restrictions;
- Vermont's state advisory council, Building Bright Futures, a public/private partnership, now has the authority of legislative statute, as does our state Pre-K program;
- Vermont's continuum of integrated services for children with special needs - Children's Integrated Services - is a model of service integration and blending of funds that is improving outcomes for young children and their families while working within financial constraints;
- Vermont leads the nation in assuring access to health insurance for all children;
- A long-standing commitment in Vermont to state and local partnerships which are dynamic and genuine, ensures that state policy and practice is informed and guided by what is happening on a local level, a critical foundation for working together effectively in a rural environment; and
- Active engagement of private partners whose interests and investments in early learning and development complement and support the goals of this application.

With each of these innovative efforts and strategies, ensuring access and high quality services to children with high needs has been and remains an unchanging priority.

We have reviewed the five areas of reform and agree that they are the cornerstones of an effective and comprehensive reform agenda. Our particular interest lies in:

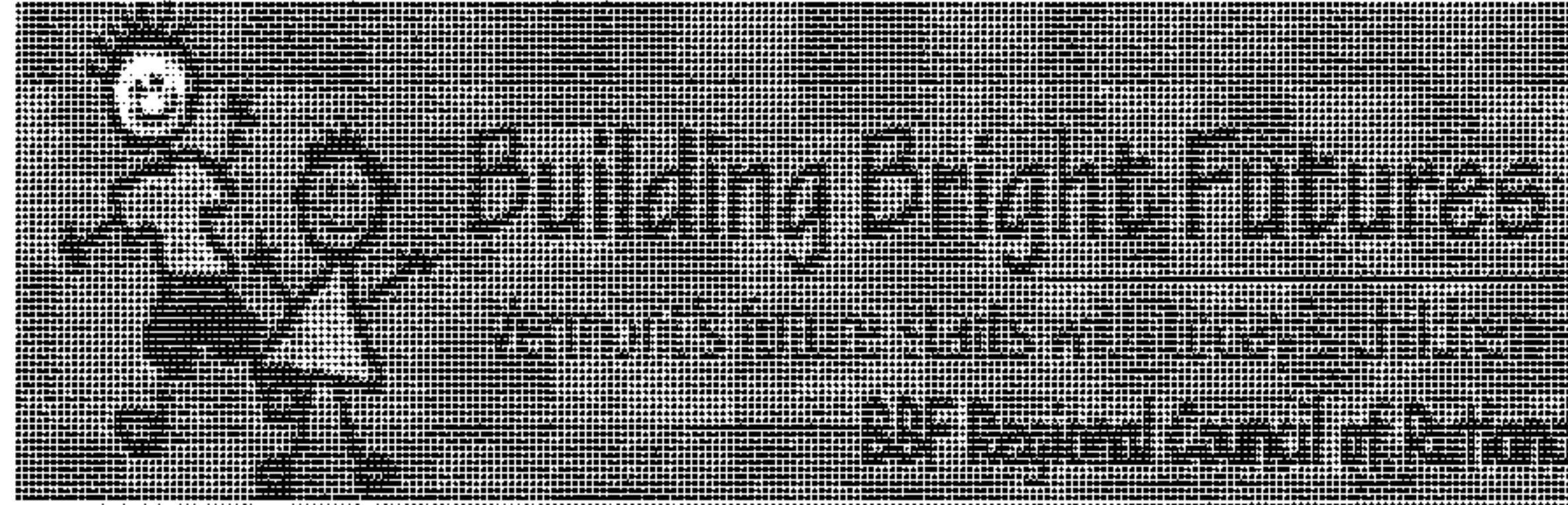
- Sustainable investments to enhance the quality and accountability of early learning and development programs
- Enhancing the capacity of BBF Regional Councils
- Continued and strengthened community partnerships with school districts
- Implementing, customizing, and integrating statewide systems by building community infrastructure to support young children, families, and providers

We will assist in ensuring that families play a key role in the planning and implementation of Vermont's ELC State Plan, knowing that families and communities are the key to sustaining the ongoing success of our efforts.

Please call on us to assist in whatever ways are needed and count on our support.

Sincerely,

Bridget Stone Allard, Interim Regional Director
Building Bright Futures of Chittenden County



October 12, 2011

Governor Peter Shumlin
109 State Street, Pavilion
Montpelier, VT 05609

Dear Governor Shumlin,

This letter indicates our enthusiastic support for Vermont's Race to the Top – Early Learning Challenge Application. We appreciate your administration's commitment to early learning and development and the critical role high quality programs and services play in ensuring that all children enter school ready to learn and succeed in life.

Vermont's work over the past two decades to build a truly collaborative and coordinated early learning and development system puts us in an excellent position to take integration to the next level with this timely opportunity.

Vermont's state and local agency leaders, families and policy makers have collaborated to design and implement many of the components essential to an effective early learning and development system;

- Our quality rating and improvement system – VT STARS - has been in place for five years and continues to receive critical state funding for expansion, demonstrating Vermont's strong commitment to supporting high quality programs during a time of budget restrictions;
- Vermont's state advisory council, Building Bright Futures, a public/private partnership, now has the authority of legislative statute, as does our state Pre-K program;
- Vermont's continuum of integrated services for children with special needs - Children's Integrated Services - is a model of service integration and blending of funds that is improving outcomes for young children and their families while working within financial constraints;
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- Active engagement of private partners whose interests and investments in early learning and development complement and support the goals of this application.

With each of these innovative efforts and strategies, ensuring access and high quality services to children with high needs has been and remains an unchanging priority.

We have reviewed the five areas of reform and agree that they are the cornerstones of an effective and comprehensive reform agenda. Our particular interest lies in the strengthening of families and early education providers through the increase of professional development opportunities, engagement of parents in our system and strengthening our overall coordination of services and resources. We have a great council that is focusing on the relationships between home care and center based providers with the public school system. In addition we are implementing case management support to families identified by the home care providers in the more rural areas of our county. In addition we are piloting a parent advisory group in the northern and central section of our county to ensure our preschool programs are addressing adequately the needs of parents. Finally we are developing a magic notebook for kids based on partnerships with local providers and our kindergarten teachers. We are eager to lend our expertise and experience to help implement the state plan.

We will also assist in ensuring that families play a key role in the planning and implementation of Vermont's ELC State Plan, knowing that families and communities are the key to sustaining the ongoing success of our efforts.

Please call on us to assist in whatever ways are needed and count on our support.

Sincerely,

Caprice Hover
Rutland County Parent Child Center



A Union of Professionals

Vermont
Early Educators
United



308 Pine Street
Burlington, VT 05641
Phone: 802-658-3113
Fax: 802-658-7673
Email: cathi@upvaft.org
Web: kidscountonme.com

October 14, 2011

Governor Peter Shumlin
109 State Street, Pavilion
Montpelier, VT 05609

Dear Governor Shumlin,

On behalf of Vermont Early Educators United-AFT (VEEU-AFT), I am writing to express our union's support for Vermont's Race to the Top-Early Learning Challenge Application. We recognize your Administration's commitment to high quality early learning, and appreciate your recognition of the role of the workforce in ensuring that Vermont's children receive the best start in life possible.

Vermont Early Educators United-AFT (VEEU-AFT), affiliated with the American Federation of Teachers, AFL-CIO, has grown as a result of the child care workforce working to build a voice for themselves, their profession, and the children and families to whom they are so dedicated. Our members have shown a sincere commitment to improving programs and resources here in Vermont. As the backbone of the early learning system, our organization will continue to work tirelessly to stabilize the workforce and to increase funding for early educators.

VEEU-AFT works on legislation and public policy strategies to improve Vermont's child care system for children, families and providers. This work has included our efforts to keep the Resource & Referral Agencies located in our communities, protecting vital funding for the professional development of the workforce, assuring that all Vermont's children have access to health insurance, and meeting with lawmakers to discuss the importance of prioritizing quality early education. As a Northern Lights approved Sponsor Organization, we provide additional high quality professional development opportunities in communities across the state.

For many years, state and local agency leaders, child care professionals, parents, and policy makers have focused collaborative efforts on the advancement of Vermont's early learning system. Our members are engaged in the Building Bright Futures State and Regional Councils, VT STARS program, Starting Points Networks, Parent Child Centers and our state Pre-k program. We believe that Vermont is a strong candidate for the RRT-Early Learning Challenge because of the involvement of community stakeholders and the workforce. We have developed a system that is beginning to weave together necessary components of professional development, workforce development (including data systems), quality rating, parent engagement, assessment and linkages to K-12 to create a strong and integrated system where our children can thrive in both school and in life.

As an organization dedicated to ensuring that every child has access to a high quality early learning and child care experience, we are committed to supporting the planning and implementation of Vermont's ELC plan

Governor Shumlin

October 12, 2011

Page 2

to ensure that any system includes provisions for appropriate compensation, scholarships and other benefits that a professional workforce requires to achieve our goal of ensuring all the children and families in Vermont have access to high quality early childhood education.

We look forward to continuing with the progress that has been made up to this point.

Sincerely,

(b)(6)

Cathi Ste. Marie

Member, VEEU-American Federation of Teachers, AFL-CIO

Governor Appointed Member of Building Bright Futures State Council

Cc: Randi Weingarten, President, American Federation of Teachers

Ben Johnson, President, United Profession of VT and VT AFL-CIO



Vermont Chapter

Vermont Chapter

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Montpelier, VT 05601
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swinters@vtmd.org

October 17, 2011

Governor Peter Shumlin
109 State Street, Pavilion
Montpelier, VT 05609

Dear Governor Shumlin:

This letter indicates our enthusiastic support for Vermont's Race to the Top – Early Learning Challenge Application. We appreciate your administration's commitment to early learning and development and the critical role high quality programs and services play in ensuring that all children enter school ready to learn and succeed in life.

Vermont's work over the past two decades to build a truly collaborative and coordinated early learning and development system puts us in an excellent position to take integration to the next level with this timely opportunity.

Vermont's state and local agency leaders, families and policy makers have collaborated to design and implement many of the components essential to an effective early learning and development system;

- Our quality rating and improvement system – VT STARS - has been in place for five years and continues to receive critical state funding for expansion, demonstrating Vermont's strong commitment to supporting high quality programs during a time of budget restrictions;
- Vermont's state advisory council, Building Bright Futures, a public/private partnership, now has the authority of legislative statute, as does our state Pre-K program;
- Vermont's continuum of integrated services for children with special needs - Children's Integrated Services - is a model of service integration and blending of funds that is improving outcomes for young children and their families while working within financial constraints;
- Vermont leads the nation in assuring access to health insurance for all children;
- A long-standing commitment in Vermont to state and local partnerships which are dynamic and genuine, ensures that state policy and practice is informed and guided by what is happening on a local level, a critical foundation for working together effectively in a rural environment; and
- Active engagement of private partners whose interests and investments in early learning and development complement and support the goals of this application.

With each of these innovative efforts and strategies, ensuring access and high quality services to children with high needs has been and remains an unchanging priority.

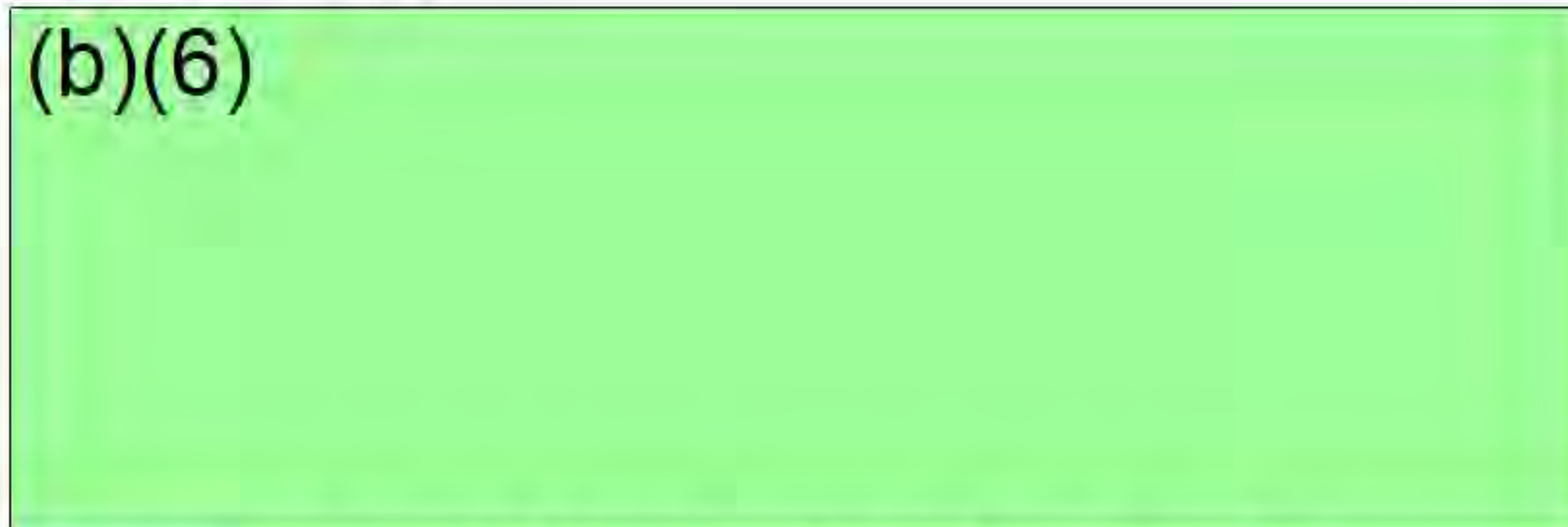
We have reviewed the five areas of reform and agree that they are the cornerstones of an effective and comprehensive reform agenda. Our particular interest lies in the health and wellbeing of Vermont's children and their families, and we all know that health and learning go hand in hand. We are eager to lend our expertise and experience to help implement the state plan.

We will also assist in ensuring that families play a key role in the planning and implementation of Vermont's ELC State Plan, knowing that families and communities are the key to sustaining the ongoing success of our efforts.

Please call on us to assist in whatever ways are needed and count on our support.

Sincerely,

(b)(6)

A large rectangular area of the document is redacted with a solid black fill. The text "(b)(6)" is printed in the top-left corner of this redacted area.

Louis A. DiNicola, M.D., FAAP
President