

Standard 10: NAEYC Accreditation Criteria for Leadership and Management Standard

Program Standard: The program effectively implements policies, procedures, and systems that support stable staff and strong personnel, fiscal, and program management so all children, families, and staff have high-quality experiences.

Rationale: Excellent programming requires effective governance structures, competent and knowledgeable leadership, as well as comprehensive and well-functioning administrative policies, procedures, and systems. Effective leadership and management create the environment for high-quality care and education by

- ensuring compliance with relevant regulations and guidelines;
- promoting fiscal soundness, program accountability, effective communication, helpful consultative services, positive community relations, and comfortable and supportive workplaces;
- maintaining stable staff; and
- instituting ongoing program planning and career development opportunities for staff as well as continuous

10.A. Leadership

10.A.1 U I T P K

The program has a well-articulated mission and philosophy of program excellence that guide its operation. The goals and objectives relate to the mission, philosophy, and all program operations and include child and family desired outcomes.

10.A.2 U I T P K

The program administrator has the educational qualifications and personal commitment required to serve as the program's operational and pedagogical leader. The administrator

- has at least a baccalaureate degree.²
- has at least 9 credit-bearing hours of specialized college-level course work in administration, leadership, and management (which can be in school administration, business management, communication, technology, early childhood management or administration, or some combination of these areas.)
- has at least 24 credit-bearing hours of specialized college-level course work in early childhood education, child development, elementary education, or early childhood special education that encompasses child development and children's learning from birth through kindergarten; family and community relationships; the practices of observing, documenting, and assessing young children; teaching and learning processes; and professional practices and development

OR

- documents that a plan is in place to meet the above qualifications within five years.

OR

- can provide documentation of having achieved a combination of relevant formal education and experience as specified in table 5, Alternative Pathways to Achieve Educational Qualifications of a Program Administrator.

(This is a required criterion.)

10.A.3 U I T P K
The program administrator demonstrates commitment to a high level of continuing professional competence (see appendix D, Program Administrator Definition and Competencies) and an ability to promote teamwork.

10.A.4 U I T P K
The program, regardless of its size or funding auspices, has a designated program administrator with the educational qualifications detailed in Criterion 10.A.02.

When a program has a total enrollment of fewer than 60 full-time equivalent (FTE) children, employs fewer than eight FTE staff, or both,

- a program may have a part-time administrator or an administrator who fulfills a dual role (e.g., teacher-administrator), and
- In multi-site programs, the sites may share an off-site administrator. When a program has a total enrollment of 60 or more FTE children, employs eight or more FTE staff,

or both,

- a program has a full-time administrator, or
- at multi-site programs, individual facilities have on-site a full-time administrator or full-time manager under the direct supervision of an individual who meets the qualifications outlined for the program administrator.

Note: When two or more people share administrative responsibilities, at least one person must meet the qualifications detailed in criterion 10.A.02.

This person is considered the designated administrator, and her or his contributions will be included in the assessment of criteria within the Leadership topic area.

10.A.05 U I T P K
The program administrator provides leadership to staff to implement the program mission.

10.A.06 U I T P K
The program administrator responds proactively to changing conditions to enhance program quality.

10.A.07 U I T P K
The program administrator and other program leaders systematically support an organizational climate that fosters trust, collaboration, and inclusion.

10.B. Management Policies and Procedures

10.B.1 U I T P K
Policies detail staff responsibilities, planning time, training and resources, address the importance of families and professionals across disciplines, and emphasize the need to work as teams and to build community partnerships.

10.B.02 U I T P K
All components of program operation are guided by written policies and are carried out through articulated plans, systems, and procedures that enable the program to run smoothly and effectively and that guide the program toward achieving its goals.

10.B.03 U I T P K
Technology-based information management systems are in place. Procedures guide staff in collecting and analyzing

data that are used to monitor the operation of the program and to inform program improvement. (This criterion is an Emerging Practice.)

10.B.04 U I T P K
The program and facility are licensed to operate or are regulated by the applicable state and local regulatory systems. The program maintains documentation showing that it is considered in good standing by its regulatory bodies, and it can document all certifications, approvals, and corrections of violations and deficiencies. (This is a required criterion.)

10.B.05 U I T P K
Accident and liability insurance coverage is maintained for children and adults. A certificate of insurance is available for review.

10.B.06 U I T P K
If a program is led or governed by a board of directors, advisory group, council, or other similar group, written policies define their roles and responsibilities along with those of the program staff who work directly with those entities.

10.B.07 U I T P K
The program has a strategic planning process that outlines actions the program will take to

- implement the program's vision and mission.
- achieve outcomes desired for children.
- maintain high-quality services to children and families.
- provide long-term resources to sustain the operation of the program.

10.B.08 U I T P K
The program has written policies and procedures that demonstrate how the program prepares for, orients, and welcomes children and families. These policies and procedures are shared verbally and in writing with families of enrolled children and are available in languages that families use and understand.

Policies address

- the program's philosophy and curriculum goals and objectives,
- the program's commitment to welcome children and families; and
- guidance and discipline.

Procedures address

- the variety of strategies used by the program for ongoing communication with families, including communication in their preferred language or through translation;
- how IFSPs, IEPs, and other individualized plans will be addressed for children with disabilities and other special learning needs;
- health and safety precautions and requirements that affect families and their children including building security and access, medications, inclusion or exclusion of ill children, and emergency plans;
- the variety of techniques used by the program to negotiate difficulties and differences that arise in interactions between families and program staff;
- payment, meals and snacks, and sleeping arrangements;
- how the program ensures confidentiality of child and family information;
- how and when children are scheduled for field trips;
- safety precautions that will be used to safeguard the children on trips, including having a communication device to call for help whenever necessary while on the trip, having first-aid supplies on the trip, and alternate transportation arrangements if there is a problem with the transportation vehicles during the trip.

10.B.09

U I T P K

The program has plans and policies to attract and maintain a consistently qualified, well-trained staff and reduce staff turnover.

10.B.10

U I T P K

Policies guide the appropriate use of specialized consultants to support staff's efforts to meet the needs of children and families to participate fully in the program, including children with disabilities, behavior challenges, or other special needs. Procedures address expected consultant skills, payment, access, availability, and working relationships with staff as well as how the program will arrange with other agencies to use their consultants for children who are eligible for their services. (This criterion is an Emerging Practice.)

10.B.11

U I T P K

Policies prescribe that each group be assigned teaching staff who have primary responsibility for working with that group of children. These teaching staff provide ongoing personal contact, meaningful learning activities, supervision, and immediate care as needed to protect children's well-being.

10.B.12

U I T P K

Written procedures address the maintenance of developmentally appropriate teaching staff-child ratios within group size to facilitate adult-child interaction and constructive activity among children.

Teaching staff-child ratios within group size are maintained during all hours of operation, including indoor time, outdoor time, and during transportation and field trips (when transporting children, the teaching staff-child ratio is used to guide the adult-child ratio).

Groups of children may be limited to one age or may include multiple ages. (A group or classroom consists of the children assigned to a teacher or a team of teaching staff for most of the day and who occupy an individual classroom or well-defined space that prevents intermingling of children from different groups within a larger room or area.)

- Teaching staff-child ratios within group size (see table 2) are maintained during all hours of operation, including indoor time, outdoor time, and during transportation and field trips (when transporting children, the teaching staff-child ratio is used to guide the adult-child ratio).
- Groups of children may be limited to one age or may include multiple ages. (A group or classroom consists of the children assigned to a teacher or a team of teaching staff for most of the day and who occupy an individual classroom or well-defined space that prevents intermingling of children from different groups within a larger room or area.)

10.B.13

U I T P K

The program is organized and staffed to minimize the number of group, teaching staff, and classroom transitions experienced by an individual child during the day and program year. Every attempt is made to maintain continuity of relationships between teaching staff and children and among groups of children.

10.B.14

U I T P K

Procedures address transition planning by administrators, teachers, and families to facilitate children's transition from one teacher to another, from one group to another, from one classroom to another, and from one program to another.

10.B.15

I T

Policies encourage keeping infants and toddlers/twos together with their teaching staff for nine months or longer.

10.C. Fiscal Accountability Policies and Procedures

10.C.01 U I T P K
Financial policies and the procedures to implement them provide evidence of sound fiscal accountability using standard accounting practices. Financial policies and procedures are consistent with the program's vision, philosophy, mission, goals, and expected child outcomes. Operating budgets are prepared annually, and there is at least quarterly reconciliation of expenses to budget. A system exists to review or adjust the budget if circumstances change, and it includes a yearly audit. Budgets are reviewed and amended as needed. Fiscal records (such as revenue and expenditure statements, balance sheets, banking reconciliation, etc.) are kept as evidence of sound financial management.

10.C.02 U I T P K
The person directly responsible for program implementation (administrator, site manager, program manager, or supervising teacher) is included in long-range fiscal planning and in operating budget preparation, reconciliation, and review.

10.C.03 U I T P K
The program has resources to support the program's vision, philosophy, mission, goals, operation, and expected child outcomes. Program administrators and other program leaders actively work to generate and manage the resources needed to support a program of excellence.

10.D. Health, Nutrition, and Safety Policies and Procedures

10.D.01 U I T P K
The program has written policies to promote wellness and safeguard the health and safety of children and adults. Procedures are in place that address

- steps to reduce occupational hazards such as infectious diseases (e.g., exposure of pregnant staff to CMV [cytomegalovirus], chicken pox), injuries (e.g., back strain, falls), environmental exposure (e.g., indoor air pollution, noise, stress);
- management plans and reporting requirements for staff and children with illness, including administration of medication, and criteria for their inclusion or exclusion;
- supervision of children in instances when teaching staff are assigned to specific areas that are near equipment where injury could occur;
- the providing of space, supervision, and comfort for a child waiting for pick up because of illness;
- the providing of adequate nutrition for children and adults;
- sleeping and napping arrangements, including sleep positioning for infants;
- sanitation and hygiene, including food handling and feeding;
- maintenance of the facility and equipment;
- prohibition of smoking, firearms, and other significant hazards that pose risks to children and adults; and
- the providing of referrals for staff to resources that support them in wellness, prevention and treatment of depression, and stress management.

10.D.02 U I T P K
The program has written procedures to protect children and adults from environmental hazards such as air pollution, lead, and asbestos, according to public health requirements.

10.D.03 U I T P K
The program has a written policy for reporting child abuse and neglect as well as procedures in place that comply with applicable federal, state, and local laws. The policy includes requirements for staff to report all suspected incidents of child abuse, neglect, or both by families, staff, volunteers, or others to the appropriate local agencies.

Staff who report suspicions of child abuse or neglect where they work are immune from discharge, retaliation, or other disciplinary action for that reason alone unless it is proven that the report is malicious.

10.D.04 U I T P K

The program has written procedures to be followed if a staff member is accused of abuse or neglect of a child in the program that protect the rights of the accused staff person as well as protect the children in the program.

10.D.05 U I T P K

The program has written procedures that outline the health and safety information to be collected from families and to be maintained on file for each child in one central location within the facility. The files are kept current by updating as needed, but at least quarterly. The content of the file is confidential, but is immediately available to

- administrators or teaching staff who have consent from a parent or legal guardian for access to records,
- the child's parents or legal guardian, and
- regulatory authorities, on request.

10.D.06 U I T P K

Written procedures address all aspects of the arrival, departure, and transportation of children. The procedures

- facilitate family-staff interaction.
- ensure that all children transported during the program day are accounted for before, during, and after transport.
- ensure the safety of all children as pedestrians and as passengers.
- address specific procedures for children with disabilities.
- address special circumstances in picking up children at the end of the day.

10.D.07 U I T P K

Transportation services are managed and program vehicles are licensed and insured in accordance with applicable federal and state laws. Certification of licensing and insurance is available on-site.

10.D.08 U I T P K

The program has written and posted disaster preparedness and emergency evacuation procedures. Procedures designate an appropriate person to assume authority and take action in an emergency when the administrator is not on-site. The procedures include

- plans that designate how and when to either shelter in place or evacuate and that specify a location for the evacuation;
- plans for handling lost or missing children, security threats, utility failure, and natural disasters;
- arrangements for emergency transport and escort from the program; and
- monthly practice of evacuation procedures with at least yearly practice of other emergency procedures.

10.D.09 U I T P K

The program has written, up-to-date, comprehensive procedures to prepare for and respond to medical and dental emergencies for children and adult staff. The procedures include

- identification of a hospital or other source of medical care as the primary site for emergency care (program staff have informed the facility of their intent to use their services in an emergency);
- immediate access to written familial-consent forms to relevant health insurance information for emergency medical treatment and transportation arrangements;
- arrangements for emergency transport and escort from the program of individuals who require immediate medical attention;

- presence of an adult with current pediatric first-aid training certification on-site at all times (training includes providing rescue breathing, management of a blocked airway, and any special procedures that physicians of enrolled children have documented that the children require); and
- individual emergency care plans for children with known medical or developmental problems or other conditions that might require special care in an emergency (allergy, asthma, seizures, orthopedic or sensory problems, and other chronic conditions; conditions that require regular medication or technology support)

10.D.10

U I T P K

Policies address the use of medications and special medical procedures needed by enrolled children:

- Medications are labeled with (a) the child's first and last name, name of clinician, expiration date, and manufacturer's instructions or (b) the original prescription label that details the name and strength of the medication as well as directions on administering and storing.
- Medication is administered only with written permission of the parent or legal guardian and as prescribed or as recommended in writing or by another form of direct communication with a licensed health care provider for a specific child. A standing order from a licensed health care provider may guide the use of over-the-counter medications with children in the program when that order details the specific circumstances and provides specific instructions for individual dosing of the medication.
- Teaching staff who administer care to children requiring special medical procedures are competent in the procedure and guided in writing by the prescribing health care provider.

10.E. Personnel Policies

10.E.01

U I T P K

The program has written personnel policies that define the roles and responsibilities, qualifications, and specialized training required of staff and volunteer positions. The policies outline nondiscriminatory hiring procedures and policies for staff evaluation. Policies detail job descriptions for each position, including reporting relationships; salary scales with increments based on professional qualification, length of employment, and performance evaluation; benefits; and resignation, termination, and grievance procedures. Personnel policies provide for incentives based on participation in professional development opportunities. The policies are provided to each employee upon hiring.

10.E.02

U I T P K

Hiring procedures ensure that all employees in the program (including bus drivers, bus monitors, custodians, cooks, clerical and other support staff) who come into contact with children in the program or who have responsibility for children

- have passed a criminal-record check.
- are free from any history of substantiated child abuse or neglect.
- are at least 18 years old (except vehicle drivers, who must be at least 21).
- have completed high school or the equivalent.
- have provided personal references and a current health assessment that attest to the prospective employee's ability to perform the tasks required to carry out the responsibilities of their position.

10.E.03

U I T P K

Efforts are made and documented to hire and maintain staff with the cultural and racial characteristics of the families served. Policies are in place for obtaining staff or volunteers who speak the language of the children served, and these individuals regularly interact with the children and families.

10.E.04

U I T P K

Programs maintain current health information from documented health assessments for all paid staff and for all volunteers who work more than 40 hours per month and have contact with children. A current health assessment (not

more than one year old) is received by the program before an employee starts work or before a volunteer has contact with children. The health assessment is updated every two years. Documented health assessments include

- immunization status,
- capacities and limitations that may affect job performance, and
- documentation by a licensed health professional of TB skin testing using the Mantoux method and showing the employee to be free from active TB disease. For those who have positive TB skin tests and who develop a persistent cough or unexplained fever, immediate assessment by a licensed physician is required. For those who have increased risk of TB according to the Centers for Disease Control (CDC), documentation is required annually by a licensed health professional showing that the employee is free from active TB disease.

10.E.05

U I T P K

New staff members serve an introductory period of employment during which the administrator or other qualified person makes a professional judgment as to their physical and psychological competence for working with children.

10.E.06

U I T P K

The programs offer benefits packages for full-time staff who have satisfactorily completed their introductory period of employment. Written policies detail employee benefits and include health insurance; employee leave, including sick, vacation, holiday, and personal leave; education benefits; and retirement. The written policies are shared with each employee. Benefits for part-time employees are available on a prorated basis. If some or all of these benefits are not available, a written plan for improving benefits is developed and implemented.

10.E.07

U I T P K

Staff are provided space and time away from children during the day. When staff work directly with children for more than four hours, staff are provided breaks of at least 15 minutes in each four-hour period. In addition, staff may request temporary relief when they are unable to perform their duties.

10.E.08

U I T P K

Confidential personnel files, including applications with record of experience, transcripts of education, health-assessment records, documentation of ongoing professional development, and results of performance evaluation, are kept in a secure location.

10.E.09

U I T P K

All staff are evaluated at least annually by an appropriate supervisor or, in the case of the program administrator, by the governing body.

10.E.10

U I T P K

An individual professional development plan is generated from the staff-evaluation process and is updated at least annually and ongoing as needed.

10.E.11

U I T P K

The program has an implementation plan for professional development, including orientations for new staff. Credit-bearing course work is included in the professional development plan whenever possible. The plan improves staff credentials and competencies. It is updated at least annually or as needed based on the evaluation process, the need to keep staff's knowledge current, or other identified needs.

10.E.12

U I T P K

The program's professional development plan is based on needs identified through staff evaluation and from other information from program evaluation processes.

- is written and shared with staff.
- includes mentoring, coaching, and other professional development opportunities for all staff.

- includes discussions of ethical issues.
- includes training in the policies and procedures of the program.
- includes training in skills for building positive relationships, all aspects of the curriculum, teaching practices, skills for partnering with families and communities, and skills for collaborating and participating as a member of a team.

10.F. Program Evaluation, Accountability, and Continuous Improvement

10.F.01 U I T P K

At least annually, administrators, families, staff, and other routinely participating adults are involved in a comprehensive program evaluation that measures progress toward the program's goals and objectives. Valid and reliable processes are used to gather data and evidence.

10.F.02 U I T P K

The annual evaluation processes include gathering evidence on all areas of program functioning, including policies and procedures, program quality, children's progress and learning, family involvement and satisfaction, and community awareness and satisfaction. A report of the annual evaluation findings is shared with families, staff, and appropriate advisory and governance boards, and the results are used as a basis for continuing successful activities and for changing those that need improvement.

10.F.03 U I T P K

The program establishes goals for continuous improvement and innovation using information from the annual program evaluation. The program uses this information to plan professional development and program quality-improvement activities as well as to improve operations and policies.

10.F.04 U I T P K

The program offers staff and families opportunities to assist in making decisions to improve the program. Collaborative and shared decision making is used with all participants to build trust and enthusiasm for making program changes. Staff and families meet at least annually to consult on program planning and ongoing program operations.

10.F.05 U I T P K

The program has an ongoing monitoring system to ensure that all program goals and requirements are met. The program has a data system that is used to collect evidence that goals and objectives are met; this evidence is incorporated in the annual program evaluation. (This criterion is an Emerging Practice.)