



## Quality Improvement Plan

Quality Improvement Plans (QIPs) summarize a program's plan for continuous quality improvement planning. Early learning program leaders can use this form to develop a QIP that meets requirements for North Dakota Licensing, Bright and Early participation, Building Quality and Continuous Quality Improvement Planning.

You can complete the document **electronically**, by saving it as new document and typing directly into the form. We recommend that you save it as a new document with a new date each time you update it electronically.

OR you can **print** this document and fill it out by hand.

Program: \_\_\_\_\_ Date: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Email: \_\_\_\_\_ Phone Number: \_\_\_\_\_

### Indicate the current status of your program:

- Unlicensed
- Licensed
- Building Quality
- Bright & Early Step: \_\_\_\_\_
- Growing Futures Category Pathway: \_\_\_\_\_
- Under Corrective Action

### Determine the number of goals your program will address over the next year.

All QIPs include data-driven goals for program improvement as well as concrete action steps and strategies for achieving the goals. Programs are encouraged to undertake an aggressive improvement plan that will improve outcomes for children, but we caution you against pursuing more goals than your program can reasonably accomplish over the next year.

Use the Quality Improvement Goal Form on the next page to list your program goals, action steps and strategies for achieving stated goals.

# Quality Improvement Goal Form #1

Use this section to list your QIP goals, action steps and strategies for achieving stated goals.

- Use one Quality Improvement Goal Form per goal. Duplicate pages as needed.
- SHORT TERM GOALS (something you can accomplished in a year or less). Use one form per goal
- LONG TERM GOALS (something that may take more than a year to complete). Break into manageable short term goals and complete one form for each.

**Program** \_\_\_\_\_ **Date** \_\_\_\_\_

**Individual** \_\_\_\_\_

## What would you like to accomplish once your goals are met:

- Become licensed
- Achieve Bright & Early Step: \_\_\_\_\_
- Achieve Growing Futures Category Pathway: \_\_\_\_\_
- Earn my CDA
- Earn my Aim4Excellence credential
- Be in compliance with licensing regulations
- Other *(Please list)* \_\_\_\_\_

## Program Goal or Individual Goal:

## What set of criteria or requirements did you use to identify this goal?

- North Dakota Rules and Regulations
- Bright & Early Guidelines
- Growing Futures Category Pathway
- CDA
- Other *(Please list)* \_\_\_\_\_

## What other information did you use to develop this goal?

*(i.e.ERS summary report, ERS, CLASS, BAS, PAS, Aim4Excellence, Winning Ways, ND Core Competencies, ND Early Learning Guidelines, ND Pre-K Standards)*

**What area(s) does this goal address?** *(Check all that apply)*

- North Dakota Licensing
- Health & Safety
- Physical Activity & Nutrition
- Space & Furnishings
- Learning Experiences
- Interactions & Relationships
- Other *(Please list)* \_\_\_\_\_
- CLASS
- Career Pathways & Credentials
- Inclusion & Special Needs
- Business Management & Staff Management
- Family Engagement
- Planning and Assessment

**What action steps/strategies will help you achieve this goal?**

**Goal:** \_\_\_\_\_

Action Step Strategy	Person Responsible	Due Date	Date Completed

**What resources will you need to make progress toward this goal?**

*(Provide a detailed description. Examples include specific materials, technical assistance, professional development etc.)*

# Quality Improvement Goal Form #2

Use this section to list your QIP goals, action steps and strategies for achieving stated goals.

- Use one Quality Improvement Goal Form per goal. Duplicate pages as needed.
- SHORT TERM GOALS (something you can accomplished in a year or less). Use one form per goal
- LONG TERM GOALS (something that may take more than a year to complete). Break into manageable short term goals and complete one form for each.

**Program** \_\_\_\_\_ **Date** \_\_\_\_\_

**Individual** \_\_\_\_\_

### What would you like to accomplish once your goals are met:

- Become licensed
- Achieve Bright & Early Step: \_\_\_\_\_
- Achieve Growing Futures Category Pathway: \_\_\_\_\_
- Earn my CDA
- Earn my Aim4Excellence credential
- Be in compliance with licensing regulations
- Other *(Please list)* \_\_\_\_\_

### Program Goal or Individual Goal:

### What set of criteria or requirements did you use to identify this goal?

- North Dakota Rules and Regulations
- Bright & Early Guidelines
- Growing Futures Category Pathway
- CDA
- Other *(Please list)* \_\_\_\_\_

### What other information did you use to develop this goal?

*(i.e.ERS summary report, ERS, CLASS, BAS, PAS, Aim4Excellence, Winning Ways, ND Core Competencies, ND Early Learning Guidelines, ND Pre-K Standards)*

**What area(s) does this goal address?** *(Check all that apply)*

- North Dakota Licensing
- CLASS
- Health & Safety
- Career Pathways & Credentials
- Physical Activity & Nutrition
- Inclusion & Special Needs
- Space & Furnishings
- Business Management & Staff Management
- Learning Experiences
- Family Engagement
- Interactions & Relationships
- Planning and Assessment
- Other *(Please list)* \_\_\_\_\_

**What action steps/strategies will help you achieve this goal?**

**Goal:** \_\_\_\_\_

Action Step Strategy	Person Responsible	Due Date	Date Completed

**What resources will you need to make progress toward this goal?**

*(Provide a detailed description. Examples include specific materials, technical assistance, professional development etc.)*

# Quality Improvement Goal Form #3

Use this section to list your QIP goals, action steps and strategies for achieving stated goals.

- Use one Quality Improvement Goal Form per goal. Duplicate pages as needed.
- SHORT TERM GOALS (something you can accomplished in a year or less). Use one form per goal
- LONG TERM GOALS (something that may take more than a year to complete). Break into manageable short term goals and complete one form for each.

**Program** \_\_\_\_\_ **Date** \_\_\_\_\_

**Individual** \_\_\_\_\_

## What would you like to accomplish once your goals are met:

- Become licensed
- Achieve Bright & Early Step: \_\_\_\_\_
- Achieve Growing Futures Category Pathway: \_\_\_\_\_
- Earn my CDA
- Earn my Aim4Excellence credential
- Be in compliance with licensing regulations
- Other *(Please list)* \_\_\_\_\_

## Program Goal or Individual Goal:

## What set of criteria or requirements did you use to identify this goal?

- North Dakota Rules and Regulations
- Bright & Early Guidelines
- Growing Futures Category Pathway
- CDA
- Other *(Please list)* \_\_\_\_\_

## What other information did you use to develop this goal?

*(i.e.ERS summary report, ERS, CLASS, BAS, PAS, Aim4Excellence, Winning Ways, ND Core Competencies, ND Early Learning Guidelines, ND Pre-K Standards)*

**What area(s) does this goal address?** *(Check all that apply)*

- North Dakota Licensing
- Health & Safety
- Physical Activity & Nutrition
- Space & Furnishings
- Learning Experiences
- Interactions & Relationships
- Other *(Please list)* \_\_\_\_\_
- CLASS
- Career Pathways & Credentials
- Inclusion & Special Needs
- Business Management & Staff Management
- Family Engagement
- Planning and Assessment

**What action steps/strategies will help you achieve this goal?**

**Goal:** \_\_\_\_\_

Action Step Strategy	Person Responsible	Due Date	Date Completed

**What resources will you need to make progress toward this goal?**

*(Provide a detailed description. Examples include specific materials, technical assistance, professional development etc.)*

Record your progress each month:

	Progress Notes
MONTH 1	
MONTH 2	
MONTH 3	
MONTH 4	
MONTH 5	
MONTH 6	



MONTH 7	
MONTH 8	
MONTH 9	
MONTH 10	
MONTH 11	
MONTH 12	