## Organizational PQAS Application

The Office of Child Development and Early Learning (OCDEL), in working to establish collaborations across the varied systems that provide professional development to early childhood and school-age professionals in Pennsylvania, approves organizations where the organization offers a professional development approval and oversight system for instructors that is comparable to PQAS.

The <u>Pennsylvania Quality Assurance System (PQAS)</u> certifies instructors and organizations which provide professional development to early childhood and school-age professionals in Pennsylvania. The PQAS maintains a registry of approved instructors to help ensure that professional development activities meet quality standards.

Staff who are approved, can only provide professional development under the auspices of the approved organization for events that are available to the early childhood education community.

### Eligibility for Organizational Approval

Organizations must meet one of the following requirements:

- Organizations that are:
  - Head Start Organizations which are in good standing with the Federal Office of Head
     Start as well as the Region III Office
  - AEYC/Child Care Associations (with fulltime paid staff)
  - Government Bureaus
- Organizations which do not offer professional development that is specific to early childhood or school-age educational practice but have important information to share.

The Organization & Instructor Requirements below must be completed prior to applying.

#### Organization Requirements

Organization must have a current Organization Profile with the PD Registry.

#### Create an Organization Profile\*

- 1. Log into papdregistry.org.
- 2. Click on **Add Organization Profile** box within the main page of your profile.
- 3. Click Create Profile
- 4. Complete the Contact Information section
- 5. Answer **NO** for 'Does this organization provide care and/or education to children?'
- 6. Organization Type: Complete this section as I did in the below screenshot.
- 7. Organization Address: Complete this section.
- 8. Click Submit.

\*NOTE: Unsure if your organization already has an Organization Profile? Email <a href="mailto:pqas@pakeys.org">pqas@pakeys.org</a> BEFORE creating a new profile.

#### Instructor Requirements

#### Instructors must

- be a current employee of the organization;
- have a current profile in the PD Registry;
- complete the Professional Standard Area form within the application; and
- attach the Organization to the employment tab on their profile.

#### **Engaging Adult Learners**

**NOTE:** Taking this course is highly encouraged but not mandatory.

Engaging Adult Learners is a three-hour online course. To locate and register:

- 1. Go to Search Training Events in the left-hand menu
- 2. Scroll down and select **Training Type**.
- 3. Select Online Self-Paced and E Learning
- 4. Click Search
- 5. Scroll through the events until you find the online course you are looking for
- 6. Click Register and follow payment steps. (Cost: \$7.00)
- 7. Once you have registered, you may click on your MY PD tab to get to the course
- 8. If a blue box appears to the right of the course title, click on it to begin the course. If one does not appear click the course title to be taken to the course details where a link to the course will be provided.

#### Submit Application

**Subject Line:** Organizational PQAS Application

- 1. Organization Information
- 2. Representative Agreement
- 3. <u>Professional Development Organization</u>
  <u>Narrative</u>
- 4. Professional Standard Area(s) Form
- 5. Staff Spreadsheet

Email completed application and all documents to <a href="PQAS@pakeys.org">PQAS@pakeys.org</a>.

### **Application Process**

- The review process for a completed application with all required documentation can take up to 90 days once received.
- If additional items are needed, the contact person listed in the application will be notified via email.
- Once successfully reviewed, the contact person will be notified of status via email.
- Approval is valid for three years.
- When approval expires, an updated application must be submitted for reapproval.



## Organization Information

This application is to be completed by the person responsible for providing oversight to professional development programs within an Organization, Corporation, Association, or Agency.

| Organization Name:             |  | Org ID#:                       |                     |
|--------------------------------|--|--------------------------------|---------------------|
| Address:                       |  |                                |                     |
| City:                          | State:   | Zip:                           |                     |
|                                |  |                                |                     |
| Contact Person:                | Title:   |                                |                     |
| Email:                         | Phone:   |                                |                     |
| Type of Organization/Associa   | ation:   |                                |                     |
| Head Start Organization        | n:   | STAR 3:                        | STAR 4:             |
| AEYC or Child Care Asso        | ociation Employees:  |                                |                     |
| Intermediate Unit:             |  |                                |                     |
| Early Intervention Tech        | nical Assistance:  |                                |                     |
| Government Bureau:             |  |                                |                     |
| School District:               |  |                                |                     |
|                                | ecific competency group): c offer professional development the | nat is specific to early child | lhood or school-age |
| Emphasis Area:                 |  |                                |                     |
| Professional development provi | ded by the applicant targets the                               | e following groups (sele       | ct all that apply): |
| Infant/Toddler                 | Preschool Sch  | ool-Age                        | Adults              |



#### Representative Agreement

Check all and provide digital signature at the bottom of the page.

The Organization Representative\* agrees to:

Provide oversight to Instructors in the development, implementation, and evaluation of professional development experiences to ensure high quality services to Pennsylvania early childhood and school-age practitioners.

Code events using <u>Pennsylvania Professional Standards and Competencies for Early Childhood</u> <u>Educators</u> as applicable.

Post courses that are open to early childhood education and school-age professionals on <a href="the-pennsylvania">the</a>
<a href="Pennsylvania">Pennsylvania</a> Key's PD Registry.

Follow recognized early childhood code of ethics, including delivering professional development in a culturally and individually sensitive manner using adult learning principles and current, developmentally appropriate best practices in the early childhood education and school-age fields.

Maintain records of each staff that documents each person's eligibility, including:

Résumé indicating at least a bachelor's degree or certification in a specialty discipline in a field related to the professional development event topic

Verifies instructors are current employees of the organization.

Verifies that outside contracted instructors, must have their Individual PQAS approval prior to event.

\*NOTE: Failure to follow the expectations will result in termination of the Organizational PQAS.

| ature of Person Responsible for Program Date |  |
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# Professional Development Organization Narrative

| 1. | Describe your organization's professional development approval and oversight system for instructors. |
|----|--|
| 2. | Describe the process used to assess instructor qualifications.                                       |
| 3. | Indicate the minimum requirements for instructor qualifications.                                     |
| 4. | Incorporate a statement of internal process to evaluate instructor performance.                      |
| 5. | Include a copy of the relevant tools.  |



6. Using the table below, list the professional development that will be available to early childhood and/or afterschool professionals.

By placing the appropriate code(s) in the space provided below, identify how the content in these professional development opportunities aligns with the following:

• Pennsylvania Professional Standards and Competencies for Early Childhood Educators

| Title | 1  | # Hours | Professional Standard Area(s) (PS | SA) |
|-------|--|---------|-----------------------------------|-----|
|       | Example: How Do Social Emotional Skills Affect Behavior? | 3       | PSA 1, 2, etc.                    |     |
| A.    |  |         |                                   |     |
| В.    |  |         |                                   |     |
| C.    |  |         |                                   |     |
| D.    |  |         |                                   |     |
| E.    |  |         |                                   |     |
| F.    |  |         |                                   |     |
| G.    |  |         |                                   |     |
| Н.    |  |         |                                   |     |
| 1.    |  |         |                                   |     |



7. Attach a copy of the participant evaluation tool and describe the process for how feedback is used to adjust future professional development activities listed in the question 6 above.

Label them A, B, C, D, E... If the evaluation tool is the same for all professional development activities listed attach one copy and indicate such.

| Participant Evaluation Tool | Process for how feedback is used to adjust future professional development activities | Example Label<br>(A, B, C, D, E, F, G, H, I) |
|-----------------------------|---|--|
|                             |   |  |
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8. Include information about how feedback is gathered from participants, and other processes used to evaluate and monitor the quality of the professional development provided.



### Professional Standard Area Form\*

\*NOTE: This form must be completed by all staff members.

Please identify your ability to instruct in the specific Professional Standard Area(s) listed below, which are drawn from the Pennsylvania Professional Standards and Competencies for Early Childhood Educators. Select only those areas that are appropriate for your experience and educational background.

Name: Registry ID#: Date:

| Professional Standard Area   | Justification |
|--|---------------|
| <b>PSA 1:</b> Child Development and Learning in Context  |               |
| <b>PSA 2:</b> Family-Teacher Partnerships and Community Connections                                  |               |
| <b>PSA 3:</b> Child Observation, Documentation, and Assessment                                       |               |
| <b>PSA 4:</b> Developmentally, Culturally, and Linguistically Appropriate Teaching Practices         |               |
| PSA 5: Knowledge, Application, and Integration of Academic Content in the Early Childhood Curriculum |               |
| <b>PSA 6:</b> Professionalism as an Early Childhood Educator   |               |
| PSA 7: Health and Safety   |               |
| <b>K8:</b> Program Organization and Administration   |               |



# Staff Spreadsheet

| Staff First Name Last Name | Registry ID # | Currently PQAS Approved<br>(Yes or No) | Professional Standard Area(s)<br>Requested |
|----------------------------|---------------|--|--|
| Ex: Jane Doe               | 5689452       | No                                     | PSA 1, PSA 2, etc.                         |
|                            |               |  |  |
|                            |               |  |  |
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