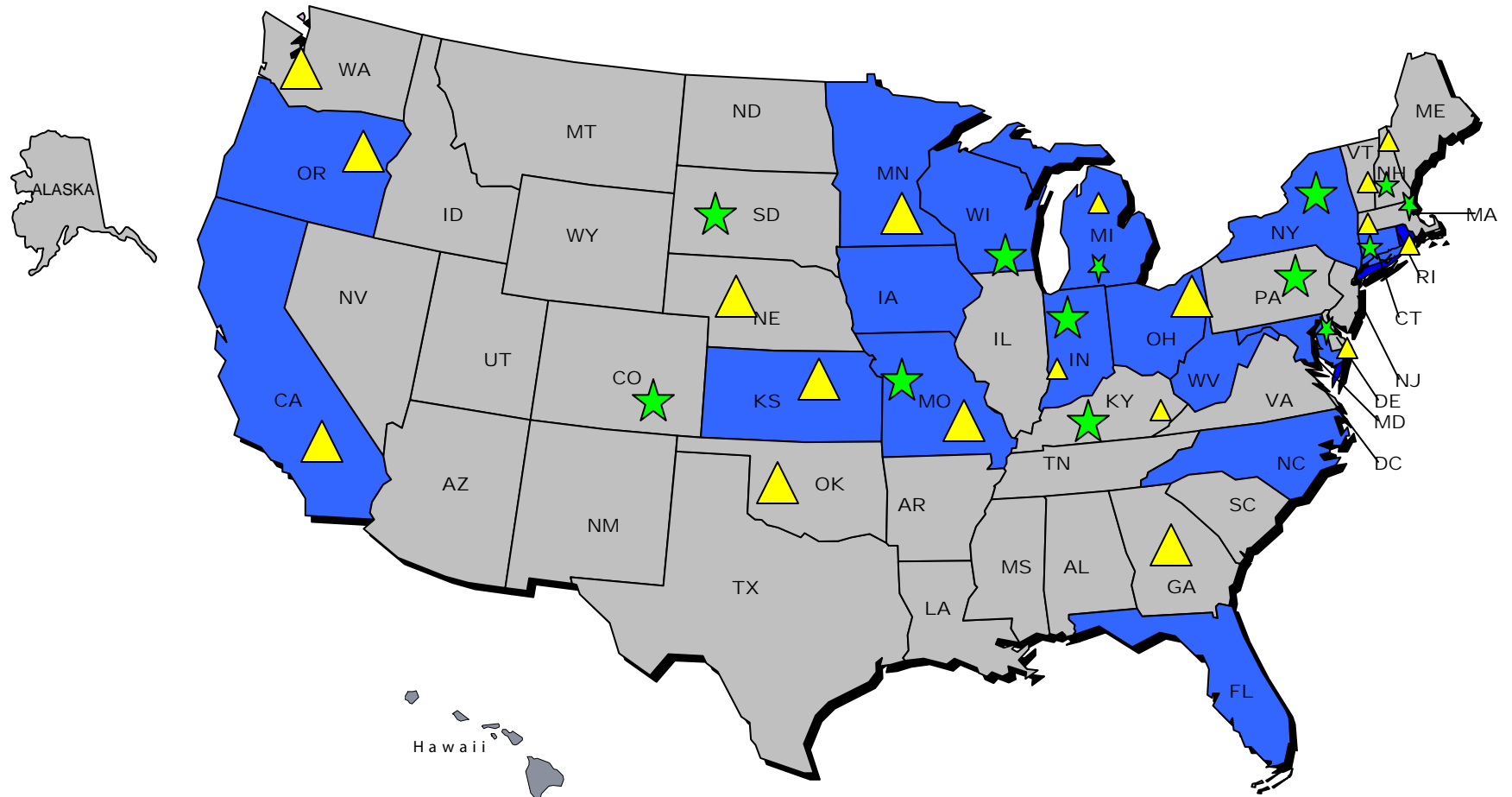





# Quick Facts on School-Age Care: Program and Practitioner Standards



**KEY:**

-  States with school-age program standards
-  States with core competency standards
-  States with school-age credential



## **Quick Facts on School-Age Care: Trends in Program and Practitioner Standards**

School-age program and practitioner standards identify quality benchmarks above those set by licensing regulations. These standards provide guidance to program leaders on the components of a high-quality program and the qualifications of well-trained program staff. At least 29 states have established, or, are in the process of developing program or practitioner standards.

### **Program Standards –**

Seventeen states<sup>1</sup> have developed school-age program standards that identify indicators of program quality. Program standards typically address curricula, program administration, outreach to parents, and the overall learning environment. Standards are intended to build from licensing regulations and inform training for a wide range of school-age programs. Additionally, for standards to be most useful they can be aligned with relevant standards for children/youth and for practitioners.

### **Practitioner Standards –**

In order to support school-age professionals, 18 states<sup>2</sup> have identified core knowledge and competencies (i.e., what every practitioner needs to know and be able to do) to provide high-quality school age programs. In addition, at least 13 states have developed a school-age professional credential. These states are: Colorado, Connecticut, Delaware, Indiana, Kentucky (in process), Massachusetts, Michigan, Missouri, New Hampshire, New York, Pennsylvania, South Dakota, and Wisconsin. To receive these credentials school-age professionals must meet benchmarks around the types and number of hours of training received, as well as continuing education requirements. Often portfolios or on-site observations are required to achieve a credential.

### **How States Use Program and Practitioner Standards –**

The development of program and practitioner standards can help states to assess needs for technical assistance and training and can support policymakers in strengthening the quality improvement system. Several states, such as New York and Florida, created self-assessment tools for the program standards so that programs can voluntarily assess and improve quality. In addition, some states link program and practitioner standards to their school-age Quality Rating and Improvement Systems (QRIS). Many states are also developing trainer and training registries to document training and other qualifications of staff, helping them to track trends in the professional preparation and ongoing development of school-age professionals.

For more information on Professional Development Systems see, [http://nccic.acf.hhs.gov/afterschool/prof\\_dev.html](http://nccic.acf.hhs.gov/afterschool/prof_dev.html)

For more information on Quality Improvement Systems see, [http://nccic.acf.hhs.gov/afterschool/quality\\_improvement.html](http://nccic.acf.hhs.gov/afterschool/quality_improvement.html)

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<sup>1</sup> Three of these states, Kansas, Oregon and West Virginia, were in the process of developing program standards in May 2010.

<sup>2</sup> Three of these states Kentucky, Oklahoma and Oregon, were in the process of identifying core knowledge and competencies in May 2010.