

<b>For Office Use Only</b>
YM Received Date:
YM Status:
YM AD Request Date:
YM Approval E-Mail Date:



Encouraging Quality...

Recognizing Excellence.

PO Box 2948  
1-855-706-3272

Merrifield, VA 22116  
1-855-806-3272 fax

## NECPA First Annual Report

*The purpose of this form is to update the NECPA Commission of any changes, updates and staff training for the past accreditation year in order to maintain NECPA Accreditation.*

### Instructions for completing your First Annual Report:

- **Annual reports are due within 30 days of your accreditation anniversary date**, and are to be sent no earlier than 30 days before this date.
- This form should ONLY be used if this is your program's First Accreditation Anniversary Date.
- This annual report should be reflective of your program's past accreditation year.
- Please complete all fields; do not leave any item blank. Only mark an item as N/A if it is not applicable.
- All pages of the Annual Report must be labeled with the program's site number, including additional documentation and copies of First Aid/CPR certificates.
- Please keep a complete copy of your annual report, including all supplemental documentation, as these documents will not be returned to your program.
- Your report will be reviewed within 6-8 weeks of receipt and communication of results will be given via e-mail.
- If the annual report is not received within 30 days of your anniversary due date, a final notice will be issued and a **monthly late fee of \$25.00 will be applied to your account each month the report is late**. This final notice will provide a grace period of 30 days to submit the late annual report. If your report is not received within 30 days of your final notice issuance, your accreditation will be suspended.
  - For Example: If your accreditation date is June 30, 2016, your first anniversary date is June 30, 2017. Your First Annual Report is due between June 1, 2017 and June 30, 2017. If your report is not received by June 30, 2017, a **monthly** late fee of \$25.00 will be invoiced to your program. If the annual report is not received by July 30, 2017, a final notice will be issued. This final notice will provide a grace period of 30 days to submit the late annual report. If your report is not received by August 30, 2017, your accreditation will be suspended.
- Please Note: If your program does not comply with e-mail requests for additional documentation during the Annual Report review process, the program will be subject to suspension and removal from the on-line NECPA Accredited Programs Database until additional documentation is received.

### Annual Report Submission – Choose ONLY One

Mail	The NECPA Commission, Inc., PO Box 2948, Merrifield, VA 22116 (NOTE* UPS and FedEx not accepted)
E-Mail	AnnualReport@necpa.net (Please Note: Program's NECPA Site Number must be included in the subject field)
Fax	1-855-806-3272 (Please Note: Program's NECPA Site Number must be noted on the cover page)

### Program Information

NECPA Site Number:	
Program Name:	
Street Address:	
City, State, Zip Code:	
Director Full Name:	Owner:
Phone Number:	Email Address:

### Determine Your Accreditation Due Dates

<i>Example:</i> Accreditation Award Date: 11/30/2016 First Anniversary Date: 11/30/2017 Second Anniversary Date: 11/30/2018	<b>Most Recent Accreditation Award Date:</b>	
	<b>First Anniversary Date:</b>	<i>This is your program's first AR due date.</i>
	<b>Second Anniversary Date:</b>	<i>This is your program's second AR due date.</i>



<b>Annual Report Checklist for Submission</b>	
<b>Please ensure that the following checklists are completed before your submission:</b>	
<b>Required Annual Report Items:</b>	<b>YES</b>
1. I have included a method of payment on page 2 of this report.	
2. I have included a copy of the program's state license.	
3. I have included a copy of <u>all visit summaries and all licensing reports for the past 12 months</u> and, if applicable, documentation of corrective action plans for violations and non-compliance items.	
4. The number of staff listed on the <b>All Staff Training Report</b> (page 8) reflects the total number of staff members that work with children, as indicated on item A in the <b>Staff Update</b> (page 5) of this report.	
5. I have included an <b>Individual Staff Training Report</b> (page 9) for every staff member that works with children including the Director.	
6. I have indicated the highest level of education and the number of early childhood education credits earned on every staff member's <b>Individual Staff Training Report</b> in accordance with <b>NECPA's Teacher Qualification Requirements</b> . Please refer to your program's edition of the <i>NECPA Standards Book</i> to review these requirements.	
7. I have only included continuing education hours that fall within the program's past accreditation year.	
8. I have included copies of First Aid and CPR Cards for at least 90% of all staff members working with children.	
9. I have provided a detailed summary of how my program's new employee orientation process educates new staff members on the NECPA Standards.	

<b>Review the following to determine applicability to your program:</b>	<b>YES</b>	<b>N/A</b>
1. If applicable, I have included <b>Professional Development Plans</b> (page 11) for any staff members who have not completed the required continuing education hours in the last accreditation year.		
2. If applicable, I have attached the <b>NECPA Self Report Form</b> <u>with supporting documentation</u> (see page 4 for instructions).		
3. If my program was assigned <b>Annual Report Items</b> upon accreditation, I have completed page 6 and <u>included supporting documentation</u> (ex: photographs, education logs).		
4. If my program has experienced a turnover higher than 60%, I have attached a statement regarding the turnover rate (page 5) as well as documentation of a retention plan that includes a staff development plan and training opportunities.		

**Part 1. Program Update**

This form is used to make the NECPA Office aware of any changes to your program.

	Yes	No
1. Have there been any major changes in enrollment patterns in the past year (10% or greater change)?  What is your current enrollment? _____		
2. In the last year, have you served any children with special needs?  If Yes, what was the number of children served? ____		
3. Has your program's license status changed in the past year?  If Yes, was this reported within <u>72 hours</u> of the occurrence to the NECPA using the Self Report Form? <b>Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/> (If no, please submit a completed Self Report)		
4. Has your program's license capacity changed in the past year?  If Yes, was this reported within <u>72 hours</u> of the occurrence to the NECPA using the Self Report Form? <b>Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/> (If no, please submit a completed Self Report)		
5. Has the program completed any major remodeling to the facility or major physical plant changes or additions in the past year?  If Yes, was this reported within <u>30 days</u> of the occurrence to the NECPA using the Self Report Form? <b>Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/> (If no, please submit a completed Self Report)		
6. Has the program had a change in Director/Administrator in the past year?  If Yes, was this reported within <u>30 days</u> of the occurrence to the NECPA using the Self Report Form? <b>Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/> (If no, please submit a completed Self Report)		
<ul style="list-style-type: none"> <li>• If you have answered "Yes" to questions 3-6 and <u>have not previously reported these items</u> using the NECPA Self Report Form, <u>you must include a completed <b>NECPA Self Report Form</b></u> with the submission of this Annual Report.</li> <li>• Supporting documentation for the Self Report must also be submitted and can include copies of transcripts, certificates, resumes, photo identification, and photographs of new classrooms or major modifications to the facility.</li> <li>• The NECPA Self Report Form can be found on-line at <a href="http://www.necpa.net">www.necpa.net</a>. Your program's Annual Report will be considered <b>INCOMPLETE</b> until a NECPA Self Report and supporting documentation is submitted and approved.</li> </ul>		

**Part 2. Staff Update**

This form refers to "staff" as any employee who regularly works with children at the program.  
This may include directors, teaching staff and support staff.

<p>Has the program had staff leave the program in the past accreditation year, either voluntarily or involuntarily?</p> <p><b>If Yes:</b></p> <ul style="list-style-type: none"> <li>Complete all questions below.</li> </ul> <p><b>If No:</b></p> <p>Only answer question A and write "N/A" for each of the remaining questions below.</p>	<p><b>Yes</b></p>	<p><b>No</b></p>
<p>A. What is the total number of full and part time staff <b>currently</b>?</p>	<p>A =</p>	
<p>B. What is the total number of full and part time staff <b>one accreditation year ago</b>?</p>	<p>B =</p>	
<p>C. What is the total number of employees who have left the program within the past accreditation year, either voluntarily or involuntarily?</p>	<p>C =</p>	
<p>D. Calculate staff turnover rate.</p> <p>Step 1: C divided by B (C/B) Step 2: Multiply by 100</p> <p>For Example: My program had 10 full and part time staff one year ago. Currently, my program has 8 full and part time staff. What is my staff turnover rate?</p> <p>A. What is the total number of full and part time staff currently? 8 B. What is the total number of full and part time staff one year ago? 10 C. What is the number of employees who have left the program within the past accreditation year? 2</p> <p>Step 1: C divided by B (C/B): C/B= 2 / 10 = 0.20 Step 2: Multiply by 100: 0.20 x 100= 20%</p>	<p><b>Staff turnover % =</b></p> <p><i>If applicable, please attach a statement written on program letterhead regarding the <b>high turnover rate (60% or greater)</b>. Any formal documentation that supports a plan of action <b>MUST</b> be provided with the submission of your Annual Report and labeled with your site number.</i></p>	

**Program Age Groups Served**

Please indicate age groups currently served at the program and list the name of the NECPA qualified Lead Teacher for each age group.

<b>Age Group</b>	<b>Name of NECPA Qualified Lead Teacher</b>

**Part 3. Annual Report Items Update**

This section is only to be completed by programs that are assigned AR items at the time of accreditation.

**Instructions for completing Part 3:**

- **If your program was given Annual Report (AR) items at the time of accreditation**, please report changes and/or improvements that have occurred for each of your program's items.
- Annual Report items are sent via email and included on the second page of your accreditation letter.
- **Supplementary documentation for each AR item must be attached or the report will be considered incomplete.**
- Label all supplementary documentation with the corresponding item number and the program's site number.
- **If your program was not given AR items to address at the time of accreditation**, please write "N/A" in each section below.

**Item Number:**

Changes or improvements made:


**Item Number:**

Changes or improvements made:


**Item Number:**

Changes or improvements made:


**Item Number:**

Changes or improvements made:


## Part 4. Staff Training Reports

### ***Instructions for completing Part 4:***

1. The **All Staff Training Report** must match the number of staff reported on item "A" of the Staff Update form on page 5.
2. Complete an **Individual Staff Training Report** for each staff member on page 9. Complete each report in its entirety; please do not leave any item blank.
3. The NECPA **Individual Staff Training Report** must be utilized. Please do not submit any other forms to report continuing education.
4. Continuing education reported on the **Individual Staff Training Report** must fall within with the past accreditation year. (i.e. if your accreditation date is June 30, 2016, you will submit continuing education beginning June 30, 2016 and ending June 30, 2017).
5. Ongoing training opportunities may include: conferences, workshops, college classes, public school in-service workshops, in-center training, and CPR/First Aid Training. Continuing education must be job-related. School functions such as dances and festivals do not qualify as continuing education.
6. Provide the specific training topics (i.e. do not report "Staff Training", "Staff Meeting" or "Conference"). College courses reported as continuing education must include the complete name of the course and must be related to Early Childhood Education or Early Childhood Development. Courses must be successfully completed within the program's past accreditation year in order to count toward a staff member's continuing education requirements.
7. If more than one staff training report is needed for a specific employee, please write "see next page" in the "TOTAL Number of Training Hours" box. Then, include the final total on the last page of each employee's **Individual Staff Training Report**.
8. Please note, the NECPA continuing education standard requires that at least 30 clock hours of job-related continuing education is obtained in the first year of employment and at least 24 clock hours of job-related continuing education based on individual competency needs each year thereafter.
9. For each new staff member still in their first year of employment, that has not yet met the 30 clock hours of continuing education, please complete the **Professional Development Plan**. This plan is to include all upcoming continuing education hours required to meet NECPA Standards.
10. If an existing staff member who has worked at the program for over one year has not met the 24 clock hours of continuing education, please complete the **Professional Development Plan** and explain the extenuating circumstances that prevented the staff member from meeting the NECPA continuing education requirement.

**Part 4. Staff Training Reports (Continued)**

**All Staff Training Report**

This form is used to summarize the continuing education hours of all staff members working with children, including the director. If a staff member is not currently FA/CPR certified and has a scheduled FA/CPR class for a future date, it must be noted on a **Professional Development Plan** or by submission of class registration. Please make copies of this report as necessary.

Name of Staff Member	<b>For NECPA Office Use Only</b> <small>*Do not mark the fields below</small>				First Aid Expiration Date	CPR Expiration Date	Date of Hire	Total Number of Hours
	FA / CPR	NEW	PD	QUAL				
<i>Example: Jane Smith</i>					10/15/18	10/15/18	06/01/16	24

<b>Total Number of <u>Staff Regularly Working with Children*</u></b>	
<small>*Please Note: Must match the number of staff reported on item "A" of the <b>Staff Update</b> form on page 5.</small>	





**Part 5. New Staff Process**

This section is used to provide information regarding the program’s approach to integrating NECPA standards into the new employee orientation training and process.

How has your program educated new staff members on the NECPA Standards under which your program was accredited? Please provide a detailed orientation summary below.

<p>Have all <u>new staff members</u> completed 30 clock hours of continuing education, as required by NECPA Standards? (Please note, this should be reflected on the <b>Individual Staff Training Report</b>.)</p> <p><b>If No:</b></p> <ul style="list-style-type: none"> <li>• Submit a <b>Professional Development Plan</b> (page 11) for each employee, documenting how the required continuing education will be obtained within the first year of employment.</li> </ul>	<p>Yes</p>	<p>No</p>
<p>Have all <u>existing staff members</u> who have worked at the program for one year or more completed 24 clock hours of continuing education, as required by NECPA Standards? (Please note, this should be reflected on the <b>Individual Staff Training Report</b>.)</p> <p><b>If No:</b></p> <ul style="list-style-type: none"> <li>• Submit a <b>Professional Development Plan</b> (page 11) for each employee, documenting how the required continuing education will be obtained <u>and explain the extenuating circumstances</u> that prevented the staff member from meeting the NECPA continuing education requirement.</li> </ul>	<p>Yes</p>	<p>No</p>

