## **Spark Quality Improvement Cycle Reflection Form**

## Quality Improvement Cycles

As of October 1, 2023 programs are required to be listed with DHS in order to complete a portfolio to achieve a 3, 4, or 5-star rating. Another way to participate in Spark as a non-DHS listed program is to complete annual Quality Improvement (QI) Cycles. Quality Improvement Cycles are 12 month cycles designed to help programs pursue self-selected quality improvement goals and receive Spark Support Funds (\$1,000 - \$2,000 depending on program size).

Programs will receive incentive funds after the completion of a 12-month QI cycle - the amounts to be determined.

## Steps of a QI Cycle

- Decide what you want your goal to be. If you need help, here are some possible resources:
- · Review the QI Cycle Planning Guide for examples and resources
- · Have an ERS or CLASS assessment done on your program
- Review the NAEYC Professional Competencies
- Check with your local CCR&R for help
- Finalize your goal and record it in your QI Cycle documentation form.
- Complete and submit the Spark Request for Supports form in the TRI Payment Forms
  Portal along with the WOU Substitute W-9. You receive the link to the portal when you
  submit the QI cycle documentation form. Funds can be expected in 3-6 weeks.
- Explore resources to help you achieve your goal as you take steps to achieve it. If you
  need additional help, reach out to your local CCR&R and the Spark Helpline
  (grishelp@wou.edu).
- After 12 months, complete the QI Cycle Reflection to report on the progress or achievement of your goal as well as challenges and lessons learned.
- 6. Incentive funds will be distributed after the reflection has been completed.

Program Name *	License number (or N/A) *
Your Name (First & Last) *	Phone number *
	()
County *	

Powered by **a formsite** 

This electronic form is emailed to participants after completion of a QI Cycle.

## **Spark Quality Improvement Cycle Reflection Form**

Complete this Reflection form after you have completed a 1-year Quality Improvement Cycle.
Date began QI Cycle *
mm/dd/yyyy 🛗
What led you to choose this goal? *
Describe the activities or steps you took working towards this goal. *
What challenges did you encounter as you worked to achieve it? *
How do you feel you were successful in achieving this goal or making progress towards achieving it? *

milat resources dru you docess ds	s you worked toward achieving this goal? *	
		10
What insights did you have or wha	at did you/your program learn from this process?*	
		1
How did working towards this goa	I impact the children, families, and program staff?	*
		10
Anything else you would like to sh	nare?*	
Anything else you would like to sh	nare?*	/
	nare? * Title/Role *	li
Your Name *	Title/Role *	
Your Name *	Title/Role *	
Your Name *	Title/Role *	
Your Name * Email address *	Title/Role *	
Your Name * Email address *	Title/Role *	
Your Name * Email address *	Title/Role *	
Your Name * Email address *	Title/Role *	
Anything else you would like to sh  Your Name *  Email address *	Title/Role *	
Your Name * Email address *	Title/Role *	
Your Name * Email address *	Title/Role *	
Your Name * Email address *	Date *  mm/dd/yyyy	

I:\T