

Child Care Services Program P.O. Box 948 Nome, AK 99762

www.kawerak.org

Email: intake@kawerak.org

1-800-450-4341 or (907) 443-4358

eFax: (907) 802-6183

## Kawerak Child Care Quality Improvement Grant

Kawerak supports the increased quality and availability of Child Care and the development of Early Childcare Professionals. Our goal is to increase Professional Development, create Safe/Healthy Environments, and Culturally Based, High-Quality care.

Quality Improvement Grants are available to Licensed or Tribally Approved Relative Providers in the Bering Straight region. Assistance is available up to the following amounts based on type of care provided and is contingent on the availability of funds.

- \$10,000 Tribally Approved Relative Providers
- \$20,000 Licensed Family or Group Home
- \$50,000 Center Based Care

Quality Improvement and Activities include, but not limited to:

- Purchasing of age-appropriate toys, education and development materials, and supplies
- Support for Training and Professional Development
- Purchasing a State Child Care License
- Making minor home, health and safety improvements, including supplies and equipment

Kawerak Child Care Services is committed to providing training and professional development opportunities to increase provider knowledge and competencies in caring for young children. Training opportunities may include attending early childhood conferences, webinars, teleconferences, receiving books and resource materials, attending college classes, or other early care and learning related opportunities.

Health and safety improvements ensure the safe care of young children. Improvements may include, but not limited to, repairing stairs/walkways for children's access, providing child safe play areas, installing egress windows, floor covering, or other safety issues within children's reach. Safety equipment may include, but not limited to, obtaining or replacing fire extinguishers and carbon monoxide detectors, First Aid kits, Pediatric First Aid and CPR training, Emergency Preparedness supplies, safe sleep items such as mats, cribs, or sheets, or any other improvements meeting health and safety criteria.

Kawerak will purchase materials, supplies and equipment on behalf of the Provider. If home, health and safety improvements are requested, we will work with you to obtain quotes from contractors to do the work. Upon project completion, a follow up report will be required of the recipient.

Applications for Quality Improvement Grants are available by contacting Kawerak Child Care Services who will assist you in completing your application.

### **Kawerak Quality Improvement Grant Guidelines**

Quality Improvement Grants are intended to increase family options and access to care while improving the quality of child care services.

- 1. Providers may submit two requests per calendar year which, when combined, cannot exceed the annual allowable amount.
- 2. Items will be purchased through Kawerak. Some exceptions may apply.
- 3. All items must be used solely for child care purposes and will be considered in proportion to care provided.
- 4. Supplemental food items are limited to those noted on the list provided. Some exceptions may apply. Items may be reordered quarterly to maintain supply, so long as the annual requests do not exceed the allowable amount per calendar year. High sugar or salt items will not be allowed. Substitutions based on health guidelines or availability may be provided as needed.
- 5. Education and developmental materials to support children's learning include quality, age-appropriate, culturally reflective, books, dramatic play materials, blocks, materials for large and small motor development, etc. To assure safety, quality, and availability, items maybe limited to approved vendors, Kaplanco.com or Lakeshorelearning.com.
- 6. Items not allowed include those that pose a choking or other hazardous situation, motorized items or those that require frequent battery changes, televisions, DVDs, video games, systems, cleaning products containing hazardous chemicals, or field trip expenses.
- 7. Camping, boating, travel, or other water-based activity supplies will not be provided.
- 8. A follow up report may be required upon request.
- 9. Funding and supplies are based on demonstrated need and availability of resources.
- 10. Other restrictions may apply.



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# Kawerak Child Care Quality Improvement Grant Application

Applicant Information: Provider's Name (primary contact):							
110videt 31vanie (printary contact).							
Early Care and Education Program:							
Program Mailing Address (street, city, zip):							
Telephone: Email:							
If applicable, please provide a copy of the following: (1) Business License, (2) Child Care License, (3) most recent State of Alaska Child Care Program Office Report of Inspection.							
Please select the Quality Improvement area for which you are applying:  Training and professional development							
Quality materials and learning supplies for children							
State of Alaska Licensing Requirements	State of Alaska Licensing Requirements						
Home, Health and Safety improvements, includi	Home, Health and Safety improvements, including supplies and equipment						
Other quality measurable activities as determined by Kawerak Child Care Services Program  Are you an active member of the SEED registry or have you applied in the last month? Yes No							
What type of early care and education program best describes your child care service?							
Licensed Center	Licensed Group Home						
Licensed Family Home	Tribally Approved Relative Provider Care						
Which of the following age range(s) do you/will you serve?							
Infants (0-12 months)	Toddlers						
Preschoolers (36-60 months)	School Age (Kindergarten – 12 years)						
How many children 5 years or younger are or will be enr	rolled in your program?						
Total number of children who are or will be in your care	?						
What is the total or estimated amount you are requesting	?						

Please describe how you would use the funds including estimated dollar amounts:							
Please describe at least two areas for your program to grow/develop:							
Please describe how the Quality Improvement grant will benefit your program:							

#### **QUALITY IMPROVEMENT ITEMS LIST**

SUPPLEMENTAL FOOD ITEMS – Food items are limited to the following selection and may be ordered quarterly as needed.

Rice: 36oz or more: (Not allowed: boil in bag, microwavable, added fats, oils, sodium, sugars)

Beans: dry 16oz., canned, no soups, mixes, added ingredients

Pasta: Barilla, Chuster

Pancake Mix: Krusteaz, Kodiak

Syrup: Aunt Jemima, Mrs. Butterworth's, Log Cabin

Macaroni and Cheese: Kraft

Canned Fruit: Dole, Del Monte (100% fruit juice)

Canned Soup: Campbell's or Progresso

Crackers: Ritz, Wheat Thins, Triscuit, Saltines

Peanut Butter: Skippy, Jif, Kirkland Jelly (low sugar): Smuckers, Welch

Tuna fish / salmon (Not allowed: albacore, white, king mackerel, organic)

Cereal: no more than 6g sugar per serving

Snack Bars: Nature Valley, Quaker, Clif, Kind, NutriGrain

Nuts: Almonds, Peanuts, Trail Mix

**Dried Fruit** 

Spaghetti Sauce: Prego, Hunts, Ragu Oatmeal: Quaker Instant or Old Fashioned

Milk: shelf stable, powdered (Not allowed: organic, flavored, acidophilus, buttermilk or goat)

Formula: Similac, Enfamil, Earth's Best, Happy Baby

Baby Food: infant cereal (barley, oatmeal, multi grain, mixed grain)

(Not allowed: rice, added fruit or single serving, additives, DHA/ARA)

Diapers: Huggies, Pampers (specific size:

Hand Sanitizer

\*Not allowed: boil in bag, microwavable, added fats, oils, sodium, sugars.

Other items requested as available:

#### TOYS AND EDUCATIONAL MATERIALS:

I would like to receive the selected items.

Age appropriate items will be ordered from approved sites including Lakeshore Learning and Kaplan Co. If other items are requested, please list below:

#### TRAINING AND PROFESSIONAL DEVELOPMENT:

Travel and/or fees to attend the below child care training:

Fees ar	nd associate	d costs list	ed below:					
НОМЕ	E & SAFET Gates	Y: See Saf Crib	ety Checkli Mats	st for potent Sheets	ial home Hand T		provements. Other: Pleas	se describe below.
determ	_	re related resources.  Egres	necessity. Pros		_	_		confirmation to s and processed
Statement of Agreement I understand that qualified expenses must be used only for the child care facility or home and that no personal expenses are permitted. I understand quality improvement grants are awarded based on demonstrated need and availability of funds. By signing below, I agree to abide by the grant guidelines and complete the requirements associated with the quality improvement grant and Kawerak Child Care Services.								
	er (Print)			(Si	gnature)			(Date)
Staff N	lotes:							
Kawera	ak Child Ca	re Service	s Coordinate	or or Specia	list (Signa	ature)		(Date)
Kawera	ak Child Ca	re Service	s Director (S	Signature)				(Date)

STATE OF ALASKA LICENSING REQUIREMENTS: