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Quality Progress Report (QPR)
For
Kentucky
FFY 2024

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The Quality Progress Report (QPR) collects information from states and territories (hereafter referred to as lead agencies) to describe investments to improve the quality of care available for children from birth to age 13. This report meets the requirements in the Child Care and Development Block Grant (CCDBG) Act of 2014 for lead agencies to submit an annual report that describes how quality funds were expended, including the activities funded and the measures used to evaluate progress in improving the quality of child care programs and services.

For purposes of simplicity and clarity, the specific provisions of applicable laws printed herein are sometimes paraphrases of, or excerpts and incomplete quotations from, the full text. The lead agency acknowledges its responsibility to adhere to the applicable laws regardless of these modifications.

The contents of this document do not have the force and effect of law and are not meant to bind the public in any way. This document is intended only to provide clarity to the public regarding existing requirements under the law or agency policies.

QUALITY PROGRESS REPORT

The Quality Progress Report (QPR) collects information from lead agencies to describe investments to improve the quality of care available for children from birth to age 13. This report meets the requirements in the Child Care and Development Block Grant (CCDBG) Act of 2014 for lead agencies to submit an annual report that describes how quality funds were expended, including the activities funded and the measures used to evaluate progress in improving the quality of child care programs and services. Lead agencies are also required to report on their Child Care and Development Fund (CCDF) quality improvement investments through the CCDF Plan, which collects information on the proposed quality activities for a three-year period; and through the ACF-696, which collects quarterly expenditure data on quality activities.

The annual data provided by the QPR will be used to describe how lead agencies are spending a significant investment per year to key stakeholders, including Congress, federal, state and territory administrators, providers, parents, and the public.

Specifically, this report will be used to:

- Ensure accountability and transparency for the use of CCDF quality funds, including a set-aside for quality infant and toddler care and activities funded by American Rescue Plan (ARP) Act
- Track progress toward meeting state- and territory-set indicators and benchmarks for improvement of child care quality based on goals and activities described in CCDF Plans; and
- Understand efforts in progress towards all child care settings meeting the developmental needs of children
- Inform federal technical assistance efforts and decisions regarding strategic use of quality funds.

What Period Must Be Included: All sections of this report cover the federal fiscal year activities (October 1, 2023, through September 30, 2024), unless otherwise stated. Data should reflect the cumulative totals for the fiscal year being reported, unless otherwise stated.

What Data Should Lead Agencies Use: Lead agencies may use data collected by other government and nongovernment agencies (e.g., CCR&R agencies or other TA providers) in addition to their own data as appropriate. We recognize that lead agencies may not have all of the data requested initially but expect progress towards increased data capacity. The scope of this report covers quality improvement activities funded at least in part by CCDF in support of CCDF activities. Lead agencies must describe their progress in meeting their stated goals for improving the quality of child care as reported in their FFY 2022-2024 CCDF Plan.

How is the QPR Organized?

The first section of the QPR gathers basic data on the population of providers in the state or territory and goals for quality improvement and glossary of relevant terms. The rest of the report is organized according to the ten authorized uses of quality funds specified in the CCDBG Act of 2014:

- 1) Support the training and professional development of the child care workforce
- 2) Improve the development or implementation of early learning and development guidelines
- 3) Develop, implement, or enhance a quality rating improvement system for child care providers
- 4) Improve the supply and quality of child care for infants and toddlers
- 5) Establish or expand a lead agency wide system of child care resource and referral services
- 6) Support compliance with lead agency requirements for licensing, inspection, monitoring, training, and health and safety
- 7) Evaluate the quality of child care programs in the state or territory, including how programs positively impact children
- 8) Support providers in the voluntary pursuit of accreditation
- 9) Support the development or adoption of high-quality program standards related to health, mental health, nutrition, physical activity, and physical development
- 10) Other activities to improve the quality of child care services supported by outcome measures that improve provider preparedness, child safety, child well-being, or kindergarten-entry.

The Office of Child Care (OCC) recognizes that quality funds may have been used to address the coronavirus 2019 (COVID-19) pandemic. These activities should be reflected in the relevant sections of the QPR.

When is the QPR Due to ACF?

The QPR will be due to the Administration for Children and Families (ACF) by the designated lead agency no later than December 31, 2024.

Glossary of Terms

The following terms are used throughout the QPR. These definitions can also be found in section 98.2 in the CCDBG Act of 2014. For any term not defined, please use the lead agency definition of terms to complete the QPR.

Center-based child care provider means a provider licensed or otherwise authorized to provide child care services for fewer than 24 hours per day per child in a non-residential setting, unless in

care in excess of 24 hours is due to the nature of the parent(s)' work. Associated terms include "child care centers" and "center-based programs."

Director means a person who has primary responsibility for the daily operations and management for a child care provider, which may include a family child care provider, and which may serve children from birth to kindergarten entry and children in school-age child care.

Family child care provider means one or more individuals who provide child care services for fewer than 24 hours per day per child in a private residence other than the child's residence, unless care in excess of 24 hours is due to the nature of the parent(s)' work. Associated terms include "family child care homes."

In-home child care provider means an individual who provides child care services in the child's own home.

License-exempt means facilities that are not required to meet the definition of a facility required to meet the CCDF section 98.2 definition of "licensing or regulatory requirements." Associated terms include "legally exempt" and "legally operating without regulation."

Licensed means a facility required by the state to meet the CCDF section 98.2 definition of "licensing or regulatory requirements," which explains that the facility meets "requirements necessary for a provider to legally provide child care services in a state of locality, including registration requirements established under state, local or tribal law."

Programs refer generically to all activities under the CCDF, including child care services and other activities pursuant to §98.50 as well as quality activities pursuant to §98.43.

Provider means the entity providing child care services.

Staffed family child care (FCC) networks are programs with paid staff that offer a menu of ongoing services and resources to affiliated FCC educators. Network services may include individual supports (for example, visits to child care homes, coaching, consultation, warmlines, substitute pools, shared services, licensing TA, mental health services) and group supports (for example, training workshops, facilitated peer support groups).

Teacher means a lead teacher, teacher, teacher assistant or teacher aide who is employed by a child care provider for compensation on a regular basis, or a family child care provider, and whose responsibilities and activities are to organize, guide and implement activities in a group or individual basis, or to assist a teacher or lead teacher in such activities, to further the cognitive, social, emotional, and physical development of children from birth to kindergarten entry and children in school-age child care.

1) Overview

To gain an understanding of the availability of child care in the state or territory, please provide the following information on the total number of child care providers.

1.1 State or Territory Child Care Provider Population

1.1.1 Total Number of Licensed Providers:

Enter the total number of licensed child care providers that operated in the state or territory as of September 30, 2024. These counts should include all licensed child care providers, not just those serving children receiving CCDF subsidies.

Licensed center-based programs **1744**

Unable to provide number. Indicate reason:

Additional clarification: Based on most recent submission of the FY 2024 ACF-800 data there were 1498 licensed center-based programs receiving CCDF funding. Please report the number of ALL licensed center-based programs operating in the state here, regardless of receipt of CCDF funding.

Licensed family child care homes **254**

Unable to provide number. Indicate reason:

Additional clarification: Based on most recent submission of the FY 2024 ACF-800 data there were 160 licensed family child care homes receiving CCDF funding. Please report the number of ALL licensed family child care homes operating in the state here, regardless of receipt of CCDF funding.

2) Supporting the training and professional development of the child care workforce

Goal: *Ensure the lead agency's professional development systems or framework provides initial and ongoing professional development and education that result in a stable child care workforce with the competencies and skills to support all domains of child development.*

2.1 Lead Agency Progression of Professional Development

2.1.1 Professional Development Registry:

Did the lead agency use a workforce registry or professional development registry to track progression of professional development during October 1, 2023 to September 30, 2024?

Yes. If yes, describe: **The Early Care and Education Training Records Information System (ECE-TRIS) is a statewide registry system for the early childhood and afterschool workforce. ECE-TRIS began collecting data for Kentucky Division of Child Care (DCC) in 2006. The registry ensures accurate and quality data management and reporting services as well as access to training content. ECE-TRIS provides online access to training activities and information, support, and programming to assist in providing quality training for early care and education professionals to better serve the families and children of the Commonwealth of Kentucky. It is important that people who provide services to Kentucky's families and children have the training they need. ECE-TRIS provides a mechanism that enables child care owners and directors to track the training their professionals attend. ECE-TRIS currently has the capacity to track and capture data on specific trainings, trainers, and participants through various processes provided within the system. ECE-TRIS continues to work with partners to strengthen the information collected by ECE-TRIS to support individual programs, partner agencies, and the industry.**

No. If no, what alternative does the lead agency use to track the progression of professional development for teachers/providers serving children who receive CCDF subsidy? Describe:

2.1.2 Participation in Professional Development Registry:

Are any teachers/providers required to participate?

Yes. If yes, describe: **922 KAR 2:090 Child-care center licensure; Section 11 Staff Requirements; "(17) A staff person's compliance with training requirements of this section shall be verified through the cabinet-designated database maintained pursuant**

to 922 KAR 2:240". The cabinet designated database system/professional development registry is ECE-TRIS. This regulation applies to all staff members in a regulated child care setting. Teacher and provider training data in the registry is used by Kentucky's Division of Regulated Child Care (DRCC) surveyors to review annual training hours for licensing compliance.

No. If no, describe:

2.1.3 Number of Participants in Professional Development Registry:

Total number of participants in the registry as of September 30, 2024 **178,682**

2.1.4 Spending - Professional Development Registry:

Were funds from any sources (e.g., CCDF quality set aside, non-CCDF funds, CARES, CRRSA, ARP Supplemental Discretionary, or ARP Stabilization 10% set-aside) spent to support this activity?

Yes, if so which funding source(s) were used?

CCDF quality funds

Non-CCDF funds

CARES funds

CRRSA Funds

ARP Supplemental Discretionary

ARP Stabilization 10% set-aside

Unable to report. Indicate reason:

No

2.2 Workforce Development

2.2.1 Professional Development and Career Pathways Support:

How did the lead agency help teachers/providers progress in their education, professional development, and/or career pathway between October 1, 2023 and September 30, 2024 (check all that apply)? If selected, how many staff received each type of support?

Scholarships (for formal education institutions) **1172**

Financial bonus/wage supplements tied to education levels **Milestone Achievement awards: 199**

Career advisors, mentors, coaches, or consultants **Child Care Aware of Kentucky Training and Professional Development Coaches** coached a total of 2267 providers during the reporting period.

Reimbursement for training **Related Education Reimbursement: 92**

Loans

Substitutes, leave (paid or unpaid) for professional development

Other. Describe: "CDA-K" referred to the "KIDS NOW" initiative. CDA-K is still used in our application because it allows any applicant to participate, regardless of income. The other CDA application did require income guidelines. The Division of Child Care pays for two settings for the CDA-K, applicants can choose between the three settings offered from the Council for Professional Recognition: Center-Based Infant-Toddler, Center-Based Pre-school and Family Child Care. The CDA-K Mini-grant is \$425 for 2 settings, and DCC will pay \$125 for the renewal fee every 2 years.

KHEAA- Kentucky Higher Education Assistance Authority (listed under "Scholarships (for formal education institutions)") is the total number of scholarships awarded. The funding was expanded in 2021 and continues to be offered for Directors, Administrators, and other leadership roles to include Master's degree programs.

NCS-CCCC/NCS-CDA (Non-College Scholarship- Commonwealth Child Care Credential/Non-College Scholarship- Child Development Associate) is broken down into two separate scholarship awards, NCS-CCCC is the first 60 hours leading to the completion of the Commonwealth Child Care Credential. The second award is for completing 60 hours (Totaling 120 hours) for the Child Development Associate Credential through the Council for Professional Recognition. Totals for both NCS-CCCC and NCS-CDA invoiced for distinct scholars: 485

Milestone Awards are granted to a scholar who has earned a certain level within their scholarship program. The employer pays 10% of the award total, and the state pays the remaining amount. Milestones Currently offered: -CCCC Completion: -\$90.00 (Employer pays \$10) -CDA Completion - \$225.00 (employer pays \$25) -Associates Degree Completion -\$270.00 (employer pays \$30) -Director's Credential Completion -\$270.00 (employer pays \$30) -Bachelor's Degree Completion -\$450.00 (employer pays \$45)

N/A. Describe:

2.2.2 Spending - Professional Development and Career Pathways Support:

Were funds from any sources (e.g., CCDF quality set aside, non-CCDF funds, CARES, CRRSA, ARP Supplemental Discretionary, or ARP Stabilization 10% set-aside) spent to support this activity?

Yes, if so which funding source(s) were used?

- CCDF quality funds
- Non-CCDF funds
- CARES funds
- CRRSA Funds
- ARP Supplemental Discretionary
- ARP Stabilization 10% set-aside
- Unable to report. Indicate reason:

No

2.3 Child Care Provider Qualifications

2.3.1 Number of Licensed Child Care Programs Qualifications:

Total number of staff in licensed child care programs with the following qualification levels as of September 30, 2024:

- Child Development Associate (CDA) **999**
- Associate's degree in an early childhood education field (e.g. psychology, human development, education) **370 (EC related fields) and a total of 1501 AA's in all fields.**
- Bachelor's degree in an early childhood education field (e.g. psychology, human development, education) **446 (EC related fields) and a total of 1162 BA's in all fields.**
- State child care credential **1543**
- State infant/toddler credential **0**
- Unable to report this data. Indicate reason:

2.3.2 Number of Licensed CCDF Child Care Programs Qualifications:

Total number of staff in licensed CCDF child care programs with the following qualification levels as of September 30, 2024:

- Child Development Associate (CDA) **688**
- Associate's degree in an early childhood education field (e.g. psychology, human development, education) **270 (EC related fields) and a total of 549 AA's in all fields.**

Bachelor's degree in an early childhood education field (e.g. psychology, human development, education) **289 (EC related fields) and a total of 771 BA's in all fields.**

State child care credential **1231**

State infant/toddler credential **0**

Unable to report this data. Indicate reason:

2.4 Technical Assistance for Professional Development

2.4.1 Technical Assistance Topics:

Technical assistance on the following topics is available to providers as part of the lead agency's professional development system (can be part of QRIS or other system that provides professional development to child care providers):

Business Practices

Mental health for children

Emergency Preparedness Planning

Other. Describe other technical assistance available to providers as part of the professional development system: **Kentucky Division of Child Care maintained a contractual agreement with Child Care Aware of Kentucky for Professional Development and educational assistance. DCC also maintained a contractual agreement with Western Kentucky University to support the Family Child Care Network, which provides direct technical assistance and professional development opportunities to family child care providers.**

2.4.2 Spending - Technical Assistance for Professional Development:

Were funds from any sources (e.g., CCDF quality set aside, non-CCDF funds, CARES, CRRSA, ARP Supplemental Discretionary, or ARP Stabilization 10% set-aside) spent to support this activity?

Yes, if so which funding source(s) were used?

CCDF quality funds

Non-CCDF funds

CARES funds

CRRSA Funds

ARP Supplemental Discretionary

ARP Stabilization 10% set-aside

Unable to report. Indicate reason:

[] No

2.5 Spending – Training and Professional Development

2.5.1 Spending – Training and Professional Development:

What is the total amount spent across all funding sources (i.e., CCDF quality set aside, non-CCDF funds, CARES, CRRSA, ARP Supplemental Discretionary, and ARP Stabilization 10% set-aside) to support the training and professional development of the child care workforce during October 1, 2023 to September 30, 2024? **\$3983479**

[] Unable to report total amount spent. Indicate reason:

Optional: Use this space to tell us any additional information about how funds were spent that is not captured in the items already reported. **Funding for KHEAA was expanded in 2021 and continues to be offered for Directors, Administrators, and for Master's degree programs. Previously, degree programs were only included through a Bachelor's degree. KHEAA regulations 11 KAR Chapter 16 were maintained during the reporting period to continue funding for the the expanded ECE related degree programs.**

ARP funds were also utilized to expand payments to training agencies that partner with the state in helping providers achieve their Commonwealth Child Care Credential and CDA. Those agencies are paid directly from DCC, on behalf of the provider, \$250.00 per 30 hours of training. This totals \$1000.00 paid to the agencies for each provider to obtain the necessary training to earn their CDA (120 hours of training). Prior to ARP funding, this amount was \$420.00. ARP funds allowed for the expansion of the CDA-K Mini Grant program to include providers renewing their CDA to have the \$125.00 renewal fee covered by DCC.

2.6 Progress Update

2.6.1 Progress Update – Training and Professional Development:

Supporting the training and professional development of the child care workforce

Measurable indicators of progress the state/territory reported in section 6.3.2 of the FFY 2022-2024 CCDF Plan.

DCC conducts monthly and quarterly analysis of child care programs movement in Kentucky All STARS TQRIS to measure progress of movement in rating level based on review of the domains and standards accessed by providers. Weekly analysis displays the number of providers participating at each level of quality broken out by provider

type. Quarterly analysis includes regional data.

Before the state of emergency due to Covid-19 Kentucky All STARS TQRIS system had met and was maintaining its contractual goal of 45% high quality participation in All STARS (providers operating at 3-5 stars). Targeted recruitment plans and special incentives have been put in place to help maintain and improve this participation

Please include information on the outcomes and numerical targets achieved based on the measurable indicators of progress specified in section 6.3.2 of the FFY 2022-2024 CCDF Plan: Participation and level determination in the All STARS TQRIS takes into account education and experience level in our State ECE Professional Development Framework and Career Lattice. Beginning September 30, 2024, the Division of Child Care in partnership with the Governor's Office of Early Childhood has started meeting to update the Professional Development and Career Lattice to include different pathways of entry into the Career Lattice levels with an expected completion date of 2025. Training and Professional Development initiatives supported by the various funding methods mentioned previously, along with CCDF Quality Funds, assist providers in attaining higher corresponding levels on the ECE Career Lattice. Please refer to 4.5.1 for an expansion on this particular topic.

Kentucky utilizes Child Care Aware of Kentucky Coaching/Technical Assistance (TA) Staff, Early Childhood Mental Health Specialist (ECMHS) and Child Care Health Consultants (CCHC) to promote training and professional development in our Core Content Subject Areas. These areas support the Commonwealth Child Care Credential, the CDA, and higher education. During this reporting period, the Division of Child Care had the Kentucky Infant and Toddler Credential, and the Kentucky School-Aged Youth Development Credential implemented into regulation. These credentials will be added to the KY ECE PD Framework and Career Lattice to continue supporting quality efforts of providers as related to the All STARS program. One of the requirements for these credentials is a training developed in partnership with the Early Childhood Mental Health Specialist (ECMHS) Kentucky Strengthening Families initiative on Trauma Informed Care. The Kentucky Infant and Toddler Credential has a direct correlation with the Council for Professional Recognition's Center Based Infant and Toddler CDA, if a provider has already obtained their Infant and Toddler CDA, they are eligible for a level 1 Kentucky Infant and Toddler Credential. The purpose of these age-group specific credentials is to raise quality by empowering providers to become age-group experts

through selecting trainings and experience specific to their desired age group.

The Division of Child Care hosted one Training of Trainers (TOT) this year: Autism 102. This was an extension of the previous TOT: Autism 101. Autism 102 was to move beyond the basic understanding of Autism Spectrum Disorder and to provide classroom strategies, strategies to build relationships with children with Autism and building relationships with families supporting children with Autism. Autism 102 also gave classroom observation tools and strategies to address challenging behaviors in the classroom for support.

Division of Child Care has partnered with Brightwheel, the child care management system to bring live webinar trainings to providers. During this reporting period Brightwheel offered training hours for participants of the live webinars with the following topics: Brightwheel Overview and Training (88 Registered Participants), Building Trust and Great Communication with Families (51 Registered participants), Make Billing and Payments Faster and Easier (35 Participants), Streamline Admissions and Delight New Families (35 Participants). We have started planning additional training opportunities with Brightwheel for 2025.

The Division of Child Care continued to offer expanded scholarship opportunities to providers in regulated/licensed child care settings through KHEAA at formal education institutions across the state. These programs are offered for credentials, such as the CDA and KY Director's Credential. They also cover full scholarships for Associate's, Bachelor's, and Master's programs in ECE, Interdisciplinary Early Childhood Education (IECE), or Child and Family Studies.

The Governor's Office of Early Childhood (GOEC) implemented a statewide training and coaching program using the Pyramid Model (PM) framework. This project beginning in April 2024 and set to finish in September 2025. The Division of Child Care approved training agencies are the agencies set to provide the trainings and practice-based coaching to facilities across the state. The goal of the project is to train a total of 138 Infant and Toddler teachers 21 hours of PM training for 2 years, and 80 Preschool age teachers, 13 hours of PM training per year. The Division of Child Care will report a comprehensive number of licensed child care centers and Family Child Care providers that this program has impacted during the 2025 QPR when the project has finished.

DCC continues to promote the GOEC Early Childhood Education Apprenticeships

including 3 different pathways through the Apprenticeships: The Child Care Development Specialist, The Early Childhood Educator, and the Early Childhood Administration Director path. As of August 2024, GOEC has 46 Employee partnerships with licensed child care providers, this includes both blended programs and licensed programs. Providers can learn more about the apprenticeship pathways through their Child Care Aware Professional Development coaches.

DCC created a new digital badge distributed by Badger through ECE-TRIS. A digital badge is an indicator of accomplishment or skill that can be displayed professionally to show achievement. Digital badges are portable, sharable, and stackable snapshots of targeted professional learning in the areas of Infant and Toddler and/or School Age content. The badges are awarded for completing 30 hours of professional learning approved by DCC in School-Age or Infant Toddler content and must have at least 4 hours of learning in each core content area. GOEC has sponsored a \$50 incentive through the Preschool Development Grant for providers who have achieved the badge while funding is available.

The Division of Child Care is also offering a next level credential that builds upon the 30 hours already received with the digital badge. Learners who want to continue focusing their professional learning in the Infant Toddler or School-Age pathway can seek a corresponding credential. Both credentials have 3 levels with different requirements for the number of hours in training to the specific content area of each age setting. With upcoming changes to the Career Lattice the Division of Child Care is working to implement both credentials into the Career Lattice to give credit for the All Stars QRIS system.

The Infant Toddler Credential levels and requirements:

<https://apps.legislature.ky.gov/law/kar/titles/922/002/245/>

The School Age Youth Credential levels and requirements:

<https://apps.legislature.ky.gov/law/kar/titles/922/002/255/>

3) Improving early learning and development guidelines

Goal: To ensure the lead agency has research-based early learning and development guidelines appropriate for children birth to age 12, including children with special needs and dual language learners that are used to inform practice and professional development.

3.1 Early Learning and Development Guidelines

3.1.1 Spending - Early Learning and Development Guidelines:

Were funds from any sources (e.g., CCDF quality set aside, non-CCDF funds, CARES, CRRSA, ARP Supplemental Discretionary, or ARP Stabilization 10% set-aside) spent to improve early learning and development guidelines during October 1, 2023 to September 30, 2024?

Yes, if so which funding source(s) were used?

- CCDF quality funds
- Non-CCDF funds
- CARES funds
- CRRSA Funds
- ARP Supplemental Discretionary
- ARP Stabilization 10% set-aside
- Unable to report. Indicate reason:

What is the total amount spent across all funding sources (i.e., CCDF quality set aside, non-CCDF funds, CARES, CRRSA, ARP Supplemental Discretionary, and ARP Stabilization 10% set-aside) on improving upon the development or implementation of early learning and development guidelines? \$

Unable to report total amount spent. Indicate reason

Optional: Use this space to tell us any additional information about how funds were spent that is not capture in the item already reported:

No

3.2 Progress Update

3.2.1 Progress Update - Early Learning and Development Guidelines:

Improving upon the development or implementation of early learning and development guidelines.

Measurable indicators of progress the state/territory reported in section 6.4.3 of the FFY 2022-2024 CCDF Plan:

Note: The information displayed is from the most recent approved FFY2022-2024 CCDF Plan. **Early Childhood Standards was completed in June 2003. The original document as well as subsequent updates represents the collaborative work and development process of work groups which include representatives from the Cabinet for Health and Family Services, the Kentucky Department of Education, Head Start and additional state stakeholders representing the needs of children from birth to age four.**

In 2007, these work groups were reconvened to start looking at revisions and a revised version of the Kentucky Early Learning Standards was completed and released in 2009. This first revision included changes to both content and format based on relevant recent research as well as input from early care and education professionals.

The most current revision of the KY Early Childhood Standards (2013) includes updates made to the document to ensure alignment with the Early Childhood Advisory Council (ECAC) vision, including the school readiness definition. In addition, these updates include alignment with the Head Start Child Development and Early Learning Framework.

Please include information on the outcomes and numerical targets achieved based on the measurable indicators of progress specified in section 6.4.3 of the FFY 2022-2024 CCDF Plan: **The Kentucky's Early Childhood Standards (KYEC Standards) are being revised and will be proposed to the Early Childhood Advisory Council (ECAC) for approval in December 2024. These meetings started July 29, 2024, to discuss the current standards and where updates needed to be made and will conclude upon approval from the Early Childhood Advisory Council.**

4) Developing, implementing, or enhancing a quality rating and improvement system (QRIS) and other transparent system of quality indicator

Goal: To ensure the lead agency implements a quality rating and improvement system, or other quality rating system, to promote high-quality early care and education programs.

4.1 Quality rating and improvement system status

4.1.1 QRIS or other system of quality improvement status:

Indicate the status and include a description of the lead agency's quality rating and improvement system (QRIS) or other system of quality improvement during October 1, 2023 to September 30, 2024?

The lead agency QRIS is operating state- or territory-wide.

- General description of QRIS: **Kentucky All STARS is Kentucky's expanded five-star quality rating and improvement system serving all early care and education programs including childcare centers, Head Start and public preschool that receive public funding. The unified system is based on Kentucky's Early Childhood Standards and research-based indicators of quality. Kentucky All STARS recognizes programs that have made a commitment to continuous quality improvement and provides programs with additional support including training, technical assistance and coaching. Programs earn their rating on the expanded five-star scale entering the rating system at All STARS level one by meeting regulatory requirements. Kentucky All STARS level two is obtained by completing a set of required domains and standards. Kentucky All STARS level three through five feature a range of points programs must meet in order to move up on the rating scale. While there are required domains for these three STARS levels, programs can choose from a menu of standards to fulfill the requirements. When the provider obtains a level of 3 or higher they will have also completed the requirements for the previous level. For example, if a provider meets level 4 on the ERS scales during a rating visit, they have exceeded the other levels. Of course they also must meet the All STARS requirements as it on the Standards of Quality Verification Checklist (requirements of Level 2). ERS tools are not based on level but age group served/ provider type. TYPE I providers are observed with the ITERS-R for infants and toddlers, ECERS-3 for early childcare (3-5), SACERS-U for school-age (5-onward). Type II and Certified providers are observed using the FCCERS-R tool.**

- How many tiers/levels? **5** [insert number of tiers below as required and describe each tier and check off which are high quality]
 - Tier/Level 1: **All child care providers with a regular or preliminary license in good standing are automatically enrolled at a Level 1. Programs with a preliminary license must remain at a Level 1.**
 High Quality
 - Tier/Level 2: **Provider meets the following required standards around teacher trainings for developmental screening, professional learning in curriculum, instructional practices and/or teaching and learning or has an approved early childhood credential or degree. The following standards are required for Level 2 providers:**
 - 50 percent of teaching staff have professional learning activities in developmental screening.
 - Complete an environmental self-assessment using a valid and reliable tool appropriate for ages/settings of children served.
 - Program/site administrator/director receives 10 hours of professional learning in curriculum, instructional practices and/or teaching and learning or has an approved early childhood credential or degree.
 - 50 percent of teaching staff receives 10 hours of professional learning in curriculum, instructional practices and/or teaching and learning or have an approved early childhood credential or degree. No additional points are required for a Level 2 rating. High Quality
 - Tier/Level 3: **All required standards as outlined for Level 2, in addition providers must also compile 21-30 points from the four Standards of Quality Domains Classroom and Instructional, Family and Community Engagement, Staff Qualifications and Professional Development, Administrative and Leadership Practices. -Participate in an environmental observation on a valid and reliable tool. No minimum required score.**
 - 4 Standards of Quality Domains:**
 - 8 points from Classroom and Instructional Quality domain**
 - 2 points from Family and Community Engagement domain**
 - 2 points from Staff Qualifications and Professional Development domain**
 - 2 points from Administrative and Leadership Practices domain**
 - At least 7 points from any domain.** High Quality

- Tier/Level 4: All required standards as outlined for Level 2, in addition providers must also compile 31-40 points from the four Standards of Quality Domains Classroom and Instructional, Family and Community Engagement, Staff Qualifications and Professional Development, Administrative and Leadership Practices. Participate in an environmental observation on a valid and reliable tool. Minimum required score or 4.0 must be achieved for all rated classrooms.
4 Standards of Quality Domains:
8 points from Classroom and Instructional Quality domain
2 points from Family and Community Engagement domain
2 points from Staff Qualifications and Professional Development domain
2 points from Administrative and Leadership Practices domain
At least 17 points from any domain
 High Quality
- Tier/Level 5: All required standards as outlined for Level 2, in addition providers must also compile 41-50 points from the four Standards of Quality Domains Classroom and Instructional, Family and Community Engagement, Staff Qualifications and Professional Development, Administrative and Leadership Practices. Participate in an environmental observation on a valid and reliable tool. Minimum required score or 5.0 must be achieved for all rated classrooms.
4 Standards of Quality Domains:
8 points from Classroom and Instructional Quality domain
2 points from Family and Community Engagement domain
2 points from Staff Qualifications and Professional Development domain
2 points from Administrative and Leadership Practices domain
At least 27 points from any domain
 High Quality
- Tier/Level 6:
 High Quality
- Tier/Level 7:
 High Quality
- Tier/Level 8:
 High Quality
- Tier/Level 9:
 High Quality
- Tier/Level 10:

High Quality

- Total number of licensed child care centers meeting high quality definition: **666**
- Total number of licensed family child care homes meeting high quality definition: **37**
- Total number of CCDF providers meeting high quality definition: **599**
- Total number of children served by providers meeting high quality definition: **15,377**

The lead agency QRIS is operating a pilot (e.g., in a few localities, or only a few levels) but not fully operating state- or territory-wide.

- General description of pilot QRIS (e.g., in a few localities, or only a few levels):
- Which localities if not state/territory-wide?
- How many tiers/levels? [insert number of tiers below as required and describe each tier and check off which are high quality
 - Tier/Level 1:
 High Quality
 - Tier/Level 2:
 High Quality
 - Tier/Level 3:
 High Quality
 - Tier/Level 4:
 High Quality
 - Tier/Level 5:
 High Quality
 - Tier/Level 6:
 High Quality
 - Tier/Level 7:
 High Quality
 - Tier/Level 8:
 High Quality
 - Tier/Level 9:
 High Quality
 - Tier/Level 10:
 High Quality

- Total number of licensed child care centers meeting high quality definition:
- Total number of licensed family child care homes meeting high quality definition:

- Total number of CCDF providers meeting high quality definition:
 - Total number of children served by providers meeting high quality definition:
- The lead agency is operating another system of quality improvement.
- General description of other system:
 - Describe assessment scores, accreditation, or other metrics associated with this system:
 - Describe how “high quality” is defined in this system?
 - Total number of licensed child care centers meeting high quality definition:
 - Total number of licensed family child care homes meeting high quality definition:
- Total number of CCDF providers meeting high quality definition:
 - Total number of children served by providers meeting high quality definition:
- The lead agency does not have a QRIS or other system of quality improvement.
- Do you have a definition of high quality care?
 - Yes, define:
 - Total number of licensed child care centers meeting high quality definition:
 - Total number of licensed family child care homes meeting high quality definition:
 - Total number of CCDF providers meeting high quality definition:
 - Total number of children served by providers meeting high quality definition:
 - No

4.1.2 Spending - Quality rating and improvement system status:

Were funds from any sources (e.g., CCDF quality set aside, non-CCDF funds, CARES, CRRSA, ARP Supplemental Discretionary, or ARP Stabilization 10% set-aside) spent to support this activity?

Yes, if so which funding source(s) were used?

- CCDF quality funds
- Non-CCDF funds
- CARES funds
- CRRSA Funds
- ARP Supplemental Discretionary
- ARP Stabilization 10% set-aside
- Unable to report. Indicate reason:

No

4.2 Quality Rating and Improvement Systems participation

4.2.1 QRIS or other system of quality improvement participation:

What types of providers participated in the QRIS or other system of quality improvement during October 1, 2023 to September 30, 2024 (check all that apply)?

- Licensed child care centers
- Licensed family child care homes
- License-exempt providers
- Programs serving children who receive CCDF subsidy
- Early Head Start programs
- Head Start programs
- State Prekindergarten or preschool programs
- Local district-supported Prekindergarten programs
- Programs serving infants and toddlers
- Programs serving school-age children
- Faith-based settings
- Tribally operated programs
- Other. Describe:

4.3 Quality Rating and Improvement Systems Benefits

4.3.1 Quality Rating and Improvement Systems Benefits:

What types of financial incentives or technical assistance are available for providers related to QRIS or other system of quality improvement? Check as many as apply.

- One-time grants, awards or bonuses
 - Licensed child care centers
 - Licensed family child care homes
- On-going or periodic quality stipends
 - Licensed child care centers **820**
 - Licensed family child care homes **70**
- Higher CCDF subsidy rates (including tiered rating)
 - Licensed child care centers **559**
 - Licensed family child care homes **40**

- Ongoing technical assistance to facilitate participation in QRIS or improve quality of programs already participating in QRIS (or some other technical assistance tied to QRIS)
- Other. Describe

4.3.2 Spending - Quality Rating and Improvement Systems Benefits:

Were funds from any sources (e.g., CCDF quality set aside, non-CCDF funds, CARES, CRRSA, ARP Supplemental Discretionary, or ARP Stabilization 10% set-aside) spent to support this activity?

Yes, if so which funding source(s) were used?

- CCDF quality funds
- Non-CCDF funds
- CARES funds
- CRRSA Funds
- ARP Supplemental Discretionary
- ARP Stabilization 10% set-aside
- Unable to report. Indicate reason:

No

4.4 Spending – Quality Rating and Improvement Systems

4.4.1 Spending – Quality Rating and Improvement Systems:

What is the total amount spent across all funding sources (i.e., CCDF quality set aside, non-CCDF funds, CARES, CRRSA, ARP Supplemental Discretionary, and ARP Stabilization 10% set-aside) related to QRIS or other quality rating systems during October 1, 2023 to September 30, 2024? **\$5997528**

Unable to report total amount spent. Indicate reason

Optional: Use this space to tell us any additional information about how funds were spent that is not captured in the items already reported.

4.5 Progress Update

4.5.1 Progress Update – Quality Rating and Improvement Systems:

Developing, implementing, or enhancing a quality rating and improvement system (QRIS) or other transparent system of quality indicators.

Measurable indicators of progress the state/territory reported in section 7.3.6 of the FFY 2022-2024 CCDF Plan:

Note: The information displayed is from the most recent approved FFY2022-2024 CCDF Plan. **DCC conducts weekly and quarterly analysis of child care programs movement in Kentucky All STARS TQRIS to measure progress of movement in rating level based on review of the domains and standards accessed by providers. Weekly analysis displays the number of providers participating at each level of quality broken out by provider type. Quarterly analysis includes regional data.**

Before the state of emergency due to Covid-19 Kentucky All STARS TQRIS system had met and was maintaining it's contractual goal of 45% high quality participation in All STARS (providers operating at 3-5 stars). Targeted recruitment plans and special incentives have been put in place to help maintain and improve this participation.

Please include information on the outcomes and numerical targets achieved based on the measurable indicators of progress specified in section 7.3.6 of the FFY 2022-2024 CCDF Plan: **Initial findings show that our efforts for targeted TA has continued to help us maintain at 35%. DCC's next steps are to look at barriers within our regulation as the regulation will be opening in 2025. These barriers will allow for better participation from our Family Child Care centers as well as After School programs. We're also working on a Quality Initiatives Survey with our providers to better hear from them some of the barriers they're facing.**

Once we can fully identify the barriers our child care centers are facing and better alleviate the burden we should see increases to our high quality numbers.

5) Improving the supply and quality of child care programs and services for infants and toddlers

Goal: Ensure adequate and stable supply of high quality child care with a qualified, skilled workforce to promote the healthy development of infants and toddlers. Please report on all activities funded by quality dollars and infant toddler set-aside.

5.1 Infant/Toddler Specialists

5.1.1 Infant/Toddler Specialists:

Did providers have access to infant/toddler specialists during October 1, 2023 to September 30, 2024?

Yes

- Number of specialists available to all providers **1- At this time, the Lead Agency has one full-time infant and toddler specialist. This specialist is responsible for the management of the Kentucky Infant and Toddler Specialist Network, developing training content on infant and toddler related information and serves on a number of committees devoted to the birth-to-three age group. In addition to the Lead Agency Infant and Toddler Specialist, Division of Child Care (DCC) has partnered with other agencies to provide support to infant toddler teachers. These specialists are not designated infant toddler specialists but are still accessible to providers as needed. Family Child Care Network of Kentucky (FCCN) is a statewide staffed network that is partnered with DCC to provide support for infant and toddler teachers of Family Child Care programs in Kentucky.**
- Number of specialists available to providers serving children who receive CCDF **1**
- Number of specialists available specifically trained to support family child care providers **18**
- Number of providers served **3024**
- Total number of children reached **Unable to provide data at this time.**

No, there are no infant/toddler specialists in the state/territory.

N/A. Describe:

5.1.2 Infant/Toddler Specialists Supports Provided:

If yes, what supports do the infant/toddler specialists provide?

Relationship-caregiving practices (or quality caregiving/developmentally appropriate practices)

- On-site and virtual coaching
- Health and safety practices
- Individualized professional development consultation (e.g., opportunities for or awareness on career growth opportunities, degree/credential programs)
- Group professional development
- Family engagement and partnerships
- Part C early intervention services
- Mental health of babies, toddlers, and families
- Mental health of providers
- Behavioral Health
- Other. Describe **Early Childhood Mental Health Program (ECMHP) provides consultation, training and evaluation services for children from birth to age 5 and their families with a focus on social, emotional and behavioral issues. Also, the Child Care Health Consultation for Healthy Start in Child Care programs, through the Department for Public Health, provides training and technical assistance to child care providers.**

Also, the Child Care Health Consultation for Healthy Start in Child Care programs, now under the Kentucky Department of Community Based Services, Division of Child Care, provides training and technical assistance to child care providers. Currently there are 8 CCHC including 1 CCHC State Trainer within the CCHC program that serve 13,000 child care providers in Kentucky. CCHC has served 159,000 children in Kentucky with training provided by CCHCs. CCHC's provide infant toddler teachers with Family Thrive training; Winning Ways to Talk with Parents training; Building Parent-Child Care Provider Relationships by Technical Assistance (TA); How to Communicate with Families TA; Building Better Brains training; TA on developmental milestones; Child Abuse and Neglect; Pediatric Abusive Head Trauma (PAHT); Supporting Substance Exposed Infants; Neonatal Abstinence Syndrome; Neonatal Opioid Withdrawal; Finding and Maintaining a Medical Home. CCHC provide in person coaching, TA, individualized professional development consultation and training for free for all licensed Child Care providers. CCHC promotes child care that is breastfeeding friendly to mothers and infants; CACFP TA; menu planning; and a Parents Guide to Choosing Child care, hosts parent Cafes with Family Thrive training. CCHC's also provide free training and TA on nutrition and physical activity for child care providers. Training called "Nutrition 101". Go NAPPSACC is a grant funded curriculum through the state physical activity and nutrition grant (SPAN) from the U.S. Center for Disease Control and Prevention (CDC), Color me Healthy Curriculum and 5210 Curriculum.

5.1.3 Spending – Infant/Toddler Specialists:

Were funds from any sources (e.g., CCDF quality set aside, non-CCDF funds, CARES, CRRSA, ARP Supplemental Discretionary, or ARP Stabilization 10% set-aside) spent to support this activity?

Yes, if so which funding source(s) were used?

- CCDF quality funds
- Non-CCDF funds
- CARES funds
- CRRSA Funds
- ARP Supplemental Discretionary
- ARP Stabilization 10% set-aside
- Unable to report. Indicate reason:

No

5.2 Staffed Family Child Care Networks

5.2.1 Number and Description of Staffed Family Child Care Networks:

How many staffed family child care networks operated during October 1, 2023 to September 30, 2024?

Number of staffed family child care networks: **1**

- o Describe what the network/hub provides to participating family child care providers: **The Family Child Care Network (FCCN) of Kentucky is operating to provide training and technical assistance to family child care (FCC) programs throughout KY. The FCCN contract is held by the Western Kentucky University. There are a total of four sub-contracts with regional agencies in order to ensure direct services are offered in all child care regions of the state.**

The Family Child Care Network of KY has nine objectives:

- 1. Be the liaison between community businesses and child care programs attempting to establish the child care network model as an employee benefit for the business.**
- 2. Support family child care homes with business needs including: tuition billing, compliance with the Child and Adult Federal Food Program, and tax preparation.**
- 3. Offer Technical assistance for Relative Registered Care providers.**
- 4. Provide outreach to relative registered, Kinship Care and Fictive Kin providers,**

family child care homes, and the community.

5. Recruitment of regulated family child care homes, including recruitment to the All STARS QRIS.

6. Provide Technical assistance for family child care homes including regulatory requirements and Quality Standards.

7. Offer training specifically targeted at family child care providers.

8. Provide networking opportunities and resources for family child care homes.

9. Collaborate with DCC in order to stay up-to-date with QRIS and maintain reliability.

In addition, FCCN offers the following services, as noted in the I/T section previously:

- Relationship-caregiving practices (or quality caregiving/developmentally appropriate practices)
- On-site and virtual coaching
- Health and safety practices
- Individualized professional development consultation (e.g., opportunities for or awareness on career growth opportunities, degreed/credential programs)
- Group professional development
- Family engagement and partnerships

No staffed family child care networks operate in state/territory

5.2.2 Spending - Staffed Family Child Care Networks:

Were funds from any sources (e.g., CCDF quality set aside, non-CCDF funds, CARES, CRRSA, ARP Supplemental Discretionary, or ARP Stabilization 10% set-aside) spent to support this activity?

Yes, if so which funding source(s) were used?

CCDF quality funds

Non-CCDF funds

CARES funds

CRRSA Funds

ARP Supplemental Discretionary

ARP Stabilization 10% set-aside

Unable to report. Indicate reason:

No

5.3 Spending - Programs and services for infants and toddlers

5.3.1 Spending - Programs and services for infants and toddlers:

What is the total amount spent across all funding sources (i.e., CCDF quality set aside, non-CCDF funds, CARES, CRRSA, ARP Supplemental Discretionary, and ARP Stabilization 10% set-aside), above and beyond to the 3% infant and toddler set-aside, to improve the supply and quality of child care programs and services for infants and toddlers during October 1, 2023 to September 30, 2024? **\$7601018**

Unable to report total amount spent. Indicate reason:

Optional: Use this space to tell us any additional information about how funds were spent that is not captured in the items already reported.

5.4 Progress Update

5.4.1 Progress Update - Programs and services for infants and toddlers:

Improving the supply and quality of child care programs and services for infants and toddlers.

Measurable indicators of progress the state/territory reported in section 7.4.2 of the FFY 2022-2024 CCDF Plan:

Note: The information displayed is from the most recent approved FFY2022-2024 CCDF Plan. **The Kentucky Early Care and Education Training Records Information System (ECE-TRIS) provides detailed reports of the number of providers trained in early learning standards, infant and toddler and related topics, number of trainings offered, and number of active trainers across the state. The Kentucky Integrated Child Care System identifies and tracks all staff working in a licensed, certified child care facility.**

Please include information on the outcomes and numerical targets achieved based on the measurable indicators of progress specified in section 7.4.2 of the FFY 2022-2024 CCDF Plan: **At this time, the Lead Agency has one full-time infant and toddler specialist. This specialist is responsible for the management of the Kentucky Infant and Toddler Specialist Network, developing training content on infant and toddler related information and serves on a number of committees devoted to the birth-to-three age group. In addition to the Lead Agency Infant and Toddler Specialist, Division of Child Care (DCC) has partnered with other agencies to provide support to infant toddler teachers. These specialists are not designated infant toddler specialists but are still accessible to providers as needed. Family Child Care Network of Kentucky (FCCN) is a statewide staffed network that is partnered with DCC to provide support**

for infant and toddler teachers of Family Child Care programs in Kentucky. During this fiscal year, FCCN had 18 family child care specialists available to all providers. These 18 specialists were all available to providers serving children who receive CCDF funding. FCCN's data tracking methods were established on Oct 1, 2022 and continue to improve as they grow in their role to support our providers.

Family Child Care Network (FCCN) conducted 289 total Infant/Toddler trainings with a total of 9,864 participants.

While they do not only serve Infant and Toddler providers, most family child care homes serve at least one infant and/or toddler in their care. Between October 1, 2023, to June 30, 2024: 200 Certified Family Child Care providers were served with 4778 contacts. 29 Type II Family Child Care home providers were served with 601 different contacts. These contacts varied from email, meeting at the person's home or in the community, phone calls, text messages, or meetings virtually. Kentucky also partners with the Kentucky Child Care Health Consultants (CCHC) which has ten (10) specialists available to all providers and providers receiving CCDF.

Child Care Aware of Kentucky provided a total of 1,216 TA sessions specific to Infants and/or Toddlers. (Infant-494, Toddler-722) Child Care Aware staff participated in 14 community events focused on infants and toddlers, which included 12 Community Baby Showers as well as attendance at the KY Symposium for Maternal and Infant Outcomes and distribution of early care resources to be included in newborn bags for parents at local hospitals.

- Total Number of Event Attendees: 1,398
- Total Number of Consumer Ed Materials Distributed: 4,491

TA Specialists conducted 16 training sessions on the Infant/Toddler Environment Rating Scale, Third Edition (ITERS-3). A total of 386 participants completed the training with the following outcomes: why engagement and positive interactions are key components of quality, how to create a child-centered approach to learning, how to create appropriate infant/toddler spaces that support cognitive, social-emotional, and physical development, and how to use the ITERS-3 to assess classroom quality and develop improvement plans.

The following infant/toddler-focused online trainings are available to child care providers on our learning management system:

- ECE 116: Learnscaping - Creating Appropriate Environments for Infants and Toddlers (1 hour)
- ECE 130: Sign Language for Infants (1.5 hours)
- ECE 131: Sign Language for Toddlers (1.5 hours)

- ECE 140: Kentucky Watch Me! Celebrating Milestones and Sharing Concerns (1 hour)
- ECE 146: The Administration of the Hawaii Early Learning Profile (HELP) Birth - 3 (5 hours)
- ECE 147: The Administration of the Carolina Curriculum for Infants and Toddlers with Special Needs (CCITSN) (4 hours)
- ECE 151: Importance of KY's Early Childhood Standards and Early Intervention Assessment Data (1.5 hours)

6) Establishing, expanding, modifying, or maintaining a statewide system of child care resource and referral services

Goal: Lead agency provides: services to involve families in the development of their children, information on a full range of child care options, and assistance to families in selecting child care that is appropriate for the family’s needs and is high quality as determined by the lead agency.

6.1 Spending – Child Care Resource and Referral Services

6.1.1 Spending – Child Care Resource and Referral Services:

Were funds from any sources (e.g., CCDF quality set aside, non-CCDF funds, CARES, CRRSA, ARP Supplemental Discretionary, or ARP Stabilization 10% set-aside) spent to establish, expand, modify, or maintain a statewide CCR&R during October 1, 2023 to September 30, 2024?

Yes, if so which funding source(s) were used?

- CCDF quality funds
- Non-CCDF funds
- CARES funds
- CRRSA Funds
- ARP Supplemental Discretionary
- ARP Stabilization 10% set-aside
- Unable to report. Indicate reason:

What is the total amount spent across all funding sources (i.e., CCDF quality set aside, non-CCDF funds, CARES, CRRSA, ARP Supplemental Discretionary, and ARP Stabilization 10% set-aside) to **establish, expand, modify, or maintain a statewide CCR&R** during October 1, 2023 to September 30, 2024? **\$1395656**

Unable to report total amount spent. Indicate reason:

Optional: Use this space to tell us any additional information about how funds were spent

No

6.2 Progress Update

6.2.1 Progress Update – Child Care Resource and Referral Services:

Establishing, expanding, modifying or maintaining a statewide system of child care resource and referral services.

Measurable indicators of progress the state/territory reported in section 7.5.2 of the FFY 2022-2024 CCDF Plan:

Note: The information displayed is from the most recent approved FFY2022-2024 CCDF Plan.

Data analysis assists in identification of trends and progress in program areas to assist management with regulatory and programing decisions. Data analyzed for trends and measures of progress may include number of families and children served by type of provider, review of demographic location, type of care such as non-traditional hours and care for special needs. Census data may also be used in conjunction with provider data to determine areas of greatest need for recruitment of additional child care providers. Measurable outcomes can be established based on identified needs, and progress toward outcome attainment then measured accordingly.

Kentucky captures data from various sources such as: Kentucky Integrated Child Care System

kynect ☑ Assistance & Support Programs for Kentuckians

Kentucky Early Care and Education Training Records Information System (ECE-TRIS)

eMARS - Enhanced Management Administrative Reporting System

Please include information on the outcomes and numerical targets achieved based on the measurable indicators of progress specified in section 7.5.2 of the FFY 2022-2024 CCDF Plan: **The Division of Child Care continuously monitors data from monthly CCAP enrollment reports, All STARS participation, ECE-TRIS, and licensing and survey reports to identify areas for improvement within the child care system. The Division of Child Care holds monthly meetings with the CCR&R as well as other stakeholders to identify gaps and develop action plans to address those gaps.**

The CCR&R also provides a quarterly report that contains the following metrics/information: **Consumer education efforts including the types of materials distributed (12,524), Total number of Attendance at meetings (345), Total number of Consultations (92) and Total number of Events/Presentations hosted by CCRC (77) with a total attendance for those presentations/events of 7,077 attendees.**

Expansion of Child Care Services through:

- 1.) Technical assistance to potential providers including the number of initial consultations (236), walk-throughs (140), background check guidance (16), and technology support (38);
- 2.) Number of Getting Started sessions provided (130) complete with the provider type as well as total number of attendees (202) and satisfaction survey results summary;
- 3.) Tracking Potential Providers who have withdrawn (125) from the licensing process by provider type and reason for withdrawal;

Technical assistance offered to support Continuous Quality Improvement measured by provider type and contact methods: Total of 11,749 hours of TA provided for all provider types.

New Programs by Provider Type 122 new Licensed Type 1 and Type 2 programs, 50 new certified providers for this reporting period.

- 1.) Information is also broken down into the Top 10 TA Areas in re: regulatory compliance which includes General Administration, Training Hours and PD, Background Checks, Plan of Correction Assistance, Director/Staff Requirements, Employee Records, Technology Assistance, Building Premises, Walk-Throughs, and Policies and Procedures;
 - 2.) Top 5 TA Areas in re: KY All STARS (TQRIS) which includes AQRs, Training Hours, Space & Furnishings, Activities, and Interactions;
 - 3.) Top 4 TA Areas of Professional Development which includes ECE-TRIS, Recruitment, Training Hours and Professional Development Plans.
 - 4.) Targeted TA Efforts by age group (Infants:469, Toddler:684, Preschool:889, OST:311), as well as those with LEP (2), experiencing homelessness, and those with special needs (16);
 - 5.) Directed Plan of Correction (DPOC) Trainings including number of trainings conducted (128) Training Efforts with a total of 46 child care facilities receiving the DPOC Training.
- 1.) Total TA provided to individual trainers (543) broken down by content category;
 - 2.) Number of Trainer Connections meetings (6) held along with the number of attendees (134);
- Professional Development Efforts:
- 1.) Total TA provided to individual scholars (1,780) and the content category;
 - 2.) Number of PD presentations held (19) along with the number of attendees (250);
 - 3.) Approval and renewal of various scholarships broken down by category ERS Support/Reliability which captures the efforts from Quality TA Specialists focused on coaches and raters to include the number of training sessions provided (16) and who attended; the number of individual consultations(67); and the ERS Reliability by Staff Person by Scale. The report also provides an update about any additional efforts the CCR&R has completed that is not listed in the above metrics.

Maintain a current and accurate user-friendly web site to provide parents, providers, programs, and the general public with information and resources related to professional development for child care providers and quality environments and services in child care. CCA

maintains a website at <https://www.childcareawareky.org/>

Coordinate, with the Cabinet, training for child care providers and provide technical assistance to employers, current and potential child care providers, and the community at large Professional development activities included offering the 6-hour orientation requirement training with 4,958 child care providers completing ECOOL: Early Care Orientation On-Line.

The Market Rate Report was shared with DCC in March 2024 and a Work Force report focused on the Cost Model for Licensed centers was shared in June 2024. These reports are available at <https://www.childcareawareky.org/research/>

7) Facilitating compliance with lead agency requirements for inspection, monitoring, health and safety standards and training, and lead agency licensing standards

Goal: To ensure child care providers maintain compliance with lead agency licensing, inspection, monitoring, and health and safety standards and training.

7.1 Complaints about providers

7.1.1 Number of Complaints about providers:

How many complaints were received regarding providers during October 1, 2023 to September 30, 2024? **1490**

7.1.2 Spending - Complaints about providers:

Were funds from any sources (e.g., CCDF quality set aside, non-CCDF funds, CARES, CRRSA, ARP Supplemental Discretionary, or ARP Stabilization 10% set-aside) spent to support this activity (including maintaining a hotline)?

Yes, if so which funding source(s) were used?

CCDF quality funds

Non-CCDF funds

CARES funds

CRRSA Funds

ARP Supplemental Discretionary

ARP Stabilization 10% set-aside

Unable to report. Indicate reason:

No

7.2 Licensing Staff

7.2.1 Number of Licensing Staff:

How many licensing staff positions were there in the state or territory during October 1, 2023 to September 30, 2024? Number of staff **Average of 24; 32 positions are dedicated to licensing staff positions but average of 24 staff due to ongoing vacancies during this reporting period.**

7.2.2 Spending – Licensing Staff:

Were funds from any sources (e.g., CCDF quality set aside, non-CCDF funds, CARES, CRRSA, ARP Supplemental Discretionary, or ARP Stabilization 10% set-aside) spent to support this activity?

Yes, if so which funding source(s) were used?

- CCDF quality funds
- Non-CCDF funds
- CARES funds
- CRRSA Funds
- ARP Supplemental Discretionary
- ARP Stabilization 10% set aside
- Unable to report. Indicate reason:

No

7.3 Health and Safety Standards Coaching and Technical Assistance

7.3.1 Coaching or technical assistance on health and safety standards as a result of inspection:

How many child care programs received coaching or technical assistance to improve their understanding and adherence to CCDF health and safety standards as a result of an inspection or violation during October 1, 2023 to September 30, 2024? **67**

7.3.2 Spending - Coaching or technical assistance on health and safety standards as a result of inspection:

Were funds from any sources (e.g., CCDF quality set aside, non-CCDF funds, CARES, CRRSA, ARP Supplemental Discretionary, or ARP Stabilization 10% set-aside) spent to support this activity?

Yes, if so which funding source(s) were used?

- CCDF quality funds
- Non-CCDF funds
- CARES funds
- CRRSA Funds
- ARP Supplemental Discretionary
- ARP Stabilization 10% set-aside
- Unable to report. Indicate reason:

No

7.4 Spending - Compliance with health, safety, and licensing standards

7.4.1 Spending - Compliance with health, safety, and licensing standards:

What is the total amount spent across all funding sources (i.e., CCDF quality set aside, non-CCDF funds, CARES, CRRSA, ARP Supplemental Discretionary, and ARP Stabilization 10% set-aside) on facilitating compliance with lead agency requirements for inspections, monitoring, health and safety standards and training, and lead agency licensing standards during October 1, 2023 to September 30, 2024? **\$486285**

Unable to report total amount spent. Indicate reason:

Optional: Use this space to tell us any additional information about how funds were spent that is not captured in the items already reported.

7.5 Progress Update

7.5.1 Progress Update - Compliance with health, safety, and licensing standards:

Facilitating compliance with lead agency requirements for inspection, monitoring, health and safety standards and training, and lead agency licensing standards.

Measurable indicators of progress the state/territory reported in section 7.6.3 of the FFY 2022-2024 CCDF Plan:

Note: The information displayed is from the most recent approved FFY2022-2024 CCDF Plan. **Measurable indicators of progress relevant to the use of funds for technical assistance and coaching would include analysis of licensing data regarding deficiencies, and progress of providers in increasing quality level in the state's QRIS.**

Please include information on the outcomes and numerical targets achieved based on the measurable indicators of progress specified in section 7.6.3 of the FFY 2022-2024 CCDF Plan: **DRCC is working towards implementing multiple changes to the public facing website that will assist in educating consumers about the extent of regulatory issues verified during inspection. Previous reports only identified areas of non-compliance wherein the new report will identify areas of compliance as well. DRCC has also initiated the process of reviewing information from other states regarding "serious injury" and how that is defined. This process will help DRCC continue to expand the information provided to families and partner agencies. This will also be utilized to help guide DRCC policies in determining when an action may be warranted against a license due to a serious injury.**

We have been meeting with Child Care Aware on a quarterly basis to discuss trends and

frequently cited deficiencies. In the fall of last year, Office of the Inspector General (OIG) participated in the campaign to assist providers in identifying needs to improve supervision through the “Count your kids, kids count” campaign. We continue to develop programs like Ryker’s Request and the Kentucky Campaign for Children, in order to increase consumer awareness.

8) Evaluating and assessing the quality of child care programs and services, including evaluating how programs positively impact children

Goal: Lead agency investment in effective quality improvement strategies using reliable data from evaluation and assessment

8.1 Evaluation and assessment of center-based programs

8.1.1 Evaluation and assessment of center-based programs:

What measure(s) or tool(s) were used to evaluate and assess the quality of and effective practice in center-based programs during October 1, 2023 to September 30, 2024?

QRIS

CLASS

ERS

FCCERS

ITERS

State evaluation tool. Describe

Core Knowledge and Competency Framework

Other. Describe **We currently use the E-3, ECERS-3, Early childhood Environmental Rating Scale Third Edition: The Third Edition of ECERS is a major revision that introduces innovations in both the content and administration of the scale while retaining the continuity of the two principal characteristics of the ECERS, namely its comprehensive or global definition of quality and the reliance on observation as the primary source of information on which to base assessment of classroom quality. The E-3 continues to maintain a comprehensive view of early childhood development that includes physical, social-emotional, and cognitive domains, as well as children’s health and safety. The E-3 sees the physical environment, children’s relationships with one another and with significant adults, and instruction as intertwined. Much of the teaching is done during the course of the day as teachers interact with children at play and during routines. Division of Child Care also uses the (SACERS) school aged environmental rating scale based on ECERS-3 format for school aged settings.**

Do not evaluate and assess quality and effective practice

8.1.2 Spending - Evaluation and assessment of center-based programs:

Were funds from any sources (e.g., CCDF quality set aside, non-CCDF funds, CARES, CRRSA, ARP Supplemental Discretionary, or ARP Stabilization 10% set-aside) spent to support this activity?

Yes, if so which funding source(s) were used?

- CCDF quality funds
- Non-CCDF funds
- CARES funds
- CRRSA Funds
- ARP Supplemental Discretionary
- ARP Stabilization 10% set-aside
- Unable to report. Indicate reason:

No

8.2 Evaluation and assessment of family child care programs

8.2.1 Evaluation and assessment of family child care programs:

What measure(s) or tool(s) were used to evaluate and assess the quality of and effective practice in family child care programs during October 1, 2023 to September 30, 2024?

- QRIS
- CLASS
- ERS
- FCCERS
- ITERS
- State evaluation tool. Describe
- Core Knowledge and Competency Framework
- Other. Describe
- Do not evaluate and assess quality and effective practice

8.2.2 Spending - Evaluation and assessment of family child care programs:

Were funds from any sources (e.g., CCDF quality set aside, non-CCDF funds, CARES, CRRSA, ARP Supplemental Discretionary, or ARP Stabilization 10% set-aside) spent to support this activity?

Yes, if so which funding source(s) were used?

- CCDF quality funds
- Non-CCDF funds
- CARES funds
- CRRSA Funds

- ARP Supplemental Discretionary
- ARP Stabilization 10% set-aside
- Unable to report. Indicate reason:

No

8.3 Spending - Evaluation and assessment of child care programs

8.3.1 Spending - Evaluation and assessment of child care programs:

What is the total amount spent across all funding sources (i.e., CCDF quality set aside, non-CCDF funds, CARES, CRRSA, ARP Supplemental Discretionary, and ARP Stabilization 10% set-aside) on evaluating and assessing the quality of child care programs, practice, or child development during October 1, 2023 to September 30, 2024?
\$4520994

Unable to report total amount spent. Indicate reason:

Optional: Use this space to tell us any additional information about how funds were spent that is not captured in the items already reported.

8.4 Progress Update

8.4.1 Progress Update - Evaluation and assessment of child care programs:

Evaluating and assessing the quality of child care programs and services, including evaluating how programs positively impact children.

Measurable indicators of progress the state/territory reported in section 7.7.2 of the FFY 2022-2024 CCDF Plan:

Note: The information displayed is from the most recent approved FFY2022-2024 CCDF Plan. **DCC conducts weekly and quarterly analysis of child care programs movement in Kentucky All STARS TQRIS to measure progress of movement in rating level based on review of the domains and standards accessed by providers. Weekly analysis displays the number of providers participating at each level of quality broken out by provider type. Quarterly analysis includes regional data.**

Before the state of emergency due to Covid-19 Kentucky All STARS TQRIS system had met and was maintaining it's contractual goal of 45% high quality participation in All STARS (providers

operating at 3-5 stars). Targeted recruitment plans and special incentives have been put in place to help maintain and improve this participation.

Please include information on the outcomes and numerical targets achieved based on the measurable indicators of progress specified in section 7.7.2 of the FFY 2022-2024 CCDF Plan: **Data has shown us that the targeted TA did work as our percentage of high-quality programs did not drop and has continued to maintain at 35%. We did find however that we didn't increase our percentages either. This is mostly due to the fact that any new programs we brought up were countered by high quality programs dropping due to new directors who didn't want to participate at this time as they were currently learning how to run their centers.**

With proof that the measures we're currently taking are helping our current child care centers we're now looking towards reach out Quality Initiatives to our level 1's and 2's around barriers they feel are keeping them from trying to participating at the high-quality levels.

9) Supporting child care providers in the voluntary pursuit of accreditation

Goal: Support child care programs and FCCs in the voluntary pursuit of accreditation by a national accrediting body with demonstrated, valid, and reliable program standards of quality

9.1 Accreditation Support

9.1.1 Accreditation Support:

How many providers did the lead agency support in their pursuit of accreditation (e.g., financial incentives, technical assistance with the accreditation process, coaching/mentoring by accredited programs) during October 1, 2023 to September 30, 2024?

Yes, providers were supported in their pursuit of accreditation

- a. Licensed center-based programs
- b. License-exempt center-based programs
- c. Licensed family child care homes
- d. License-exempt family child care homes (care in providers' home)
- e. Programs serving children who receive CCDF subsidy

No lead agency support given to providers in their pursuit of accreditation.

N/A. Describe: **The Division of Child Care offers several supports as grants to providers in their pursuit of accreditation: National After-School Association/COA grant, NAEYC grant, and the NAFCC mini-grants. The COA grant pays up to \$900 on accreditation fees (to include the fee and the visit) to the COA for KY licensed school age programs. The NAEYC grant covers the on-site validation fee paid directly to NAEYC on the program's behalf for KY Licensed Type 1 centers. The NAFCC mini-grant pays up to \$500.00 for the accreditation fee to the NAFCC on the program's behalf for KY Licensed Type 2 homes and Certified Family Child Care Homes. While these are offered, the Division of Child Care had no applicants and no payments made during FFY 2024.**

9.1.2 Spending – Accreditation Support:

Were funds from any sources (e.g., CCDF quality set aside, non-CCDF funds, CARES, CRRSA, ARP Supplemental Discretionary, or ARP Stabilization 10% set-aside) spent to support this activity?

Yes, if so which funding source(s) were used?

CCDF quality funds

Non-CCDF funds

CARES funds

- CRRSA Funds
- ARP Supplemental Discretionary
- ARP Stabilization 10% set-aside
- Unable to report. Indicate reason:

What is the total amount spent across all funding sources (i.e., CCDF quality set aside, non-CCDF funds, CARES, CRRSA, ARP Supplemental Discretionary, and ARP Stabilization 10% set-aside) on accreditation during October 1, 2023 to September 30, 2024? \$

- Unable to report total amount spent. Indicate reason:

Optional: Use this space to tell us any additional information about how funds were spent
 No

9.2 Progress Update

9.2.1 Progress Update – Accreditation Support:

Supporting providers in the voluntary pursuit of accreditation.

Measurable indicators of progress the state/territory reported in section 7.8.2 of the FFY 2022-2024 CCDF Plan:

Note: The information displayed is from the most recent approved FFY2022-2024 CCDF Plan. **With the integration of All STARS data into the Kentucky Integrated Child Care System (KICCS), the Lead Agency is able to study adopted standards of practice in relation to other measures of quality tracked within the system.**

Before the state of emergency due to Covid-19 Kentucky All STARS TQRIS system had met and was maintaining it’s contractual goal of 45% high quality participation in All STARS (providers operating at 3-5 stars). Targeted recruitment plans and special incentives have been put in place to help maintain and improve this participation.

Please include information on the outcomes and numerical targets achieved based on the measurable indicators of progress specified in section 7.8.2 of the FFY 2022-2024 CCDF Plan: **DCC administers grants to support programs seeking accreditation from the Council on Accreditation (partnered with the National After-School Association, National Association for the Education of Young Children (NAEYC), and the National Association for Family Child Care (NAFCC). During the time period for FFY2024, DCC did not support any providers with**

accreditation and therefore have no progress data available. DCC would like for centers interested in achieving or maintaining accreditation to utilize the grant/funding opportunities. Child Care Aware of Kentucky (CCAKY) Quality coaches are available on an ongoing and consistent basis to provide technical assistance to child care programs preparing for accreditation. Professional Development Coaches with CCAKY may also assist programs.

10) Supporting providers in the development or adoption of high-quality program standards related to health, mental health, nutrition, physical activity, and physical development

Goal: Assist programs to meet high-quality comprehensive program standards relating to health, mental health, nutrition, physical activity, and physical development

10.1 High-Quality Program Standards

10.1.1 High-Quality Program Standards:

How did the state or territory help providers develop or adopt high quality program standards during October 1, 2023 to September 30, 2024?

QRIS, check which indicators the lead agency has established:

- Health, nutrition, and safety of child care settings
- Physical activity and physical development in child care settings
- Mental health of children
- Learning environment and curriculum
- Ratios and group size
- Staff/provider qualifications and professional development
- Teacher/provider-child relationships
- Teacher/provider instructional practices
- Family partnerships and family strengthening
- Other. Describe:

Early Learning Guidelines

State Framework. Describe

Core Knowledge and Competencies

Other. Describe

N/A – did not help provider develop or adopt high quality program standards

10.1.2 Spending - High-Quality Program Standards:

Were funds from any sources (e.g., CCDF quality set aside, non-CCDF funds, CARES, CRRSA, ARP Supplemental Discretionary, or ARP Stabilization 10% set-aside) spent to support this activity?

Yes, if so which funding source(s) were used?

CCDF quality funds

Non-CCDF funds

- CARES funds
- CRRSA Funds
- ARP Supplemental Discretionary
- ARP Stabilization 10% set-aside
- Unable to report. Indicate reason:

What is the total amount spent across all funding sources (i.e., CCDF quality set aside, non-CCDF funds, CARES, CRRSA, ARP Supplemental Discretionary, and ARP Stabilization 10% set-aside) to support providers in the development or adoption of high-quality program standards related to health, mental health, nutrition, physical activity, and physical development during October 1, 2023 to September 30, 2024? **\$5978275**

- Unable to report total amount spent. Indicate reason:

Optional: Use this space to tell us any additional information about how funds were spent that is not captured in the items already reported.

- No

10.2 Progress Update

10.2.1 Progress Update - High-Quality Program Standards:

Supporting the development or adoption of high-quality program standards related to health, mental health, nutrition, physical activity, and physical development.

Measurable indicators of progress the state/territory reported in section 7.9.2 of the FFY 2022-2024 CCDF Plan:

Note: The information displayed is from the most recent approved FFY2022-2024 CCDF Plan. **With the integration of All STARS data into the Kentucky Integrated Child Care System (KICCS), the Lead Agency is able to study adopted standards of practice in relation to other measures of quality tracked within the system.**

Before the state of emergency due to Covid-19 Kentucky All STARS TQRIS system had met and was maintaining it's contractual goal of 45% high quality participation in All STARS (providers operating at 3-5 stars). Targeted recruitment plans and special incentives have been put in place to help maintain and improve this participation.

Please include information on the outcomes and numerical targets achieved based on the measurable indicators of progress specified in section 7.9.2 of the FFY 2022-2024 CCDF Plan: **Data has shown us that the targeted TA did work as our percentage of high-quality programs did not drop and has continued to maintain at 35%. We did find however that we didn't increase our percentages either. This is mostly due to the fact that any new programs we brought up were countered by high quality programs dropping due to new directors who didn't want to participate at this time as they were currently learning how to run their centers.**

With proof that the measures we're currently taking are helping our current child care centers we're now looking towards reach out Quality Initiatives to our level 1's and 2's around barriers they feel are keeping them from trying to participating at the high-quality levels.

11) Other activities to improve the quality of child care services

Goal: To improve the quality of child care programs and services related to outcomes measuring improved provider preparedness, child safety, child well-being, or kindergarten-entry

11.1 Sustainability funding to child care providers

11.1.1 Sustainability funding to child care providers:

Did the state or territory continue to provide stabilization grants to child care providers using funds other than the American Rescue Plan (ARP) Act Stabilization funds during October 1, 2023 to September 30, 2024?

Yes. If yes, describe and check which types of providers were eligible and number served.

The Cabinet issued one last stabilization payment in December to licensed and certified childcare programs based on licensure/certification capacity as reported to the DRCC by January 1, 2024. The Cabinet issued payments to registered providers based on subsidy enrollment. The payment was approximately \$310.00 per child dependent on the number of full-time and part-time providers that apply.

Licensed center-based programs **1380**

License-exempt center-based programs

Licensed family child care homes **151**

License-exempt family child care homes (care in providers' home) **4**

In-home (care in the child's own home)

Other (explain)

No.

N/A. Describe:

11.1.2 Spending – Sustainability funding to child care providers:

Were funds from any sources (e.g., CCDF quality set aside, non-CCDF funds, CARES, CRRSA, ARP Supplemental Discretionary, or ARP Stabilization 10% set-aside) spent to support this activity?

Yes, if so which funding source(s) were used?

CCDF quality funds

Non-CCDF funds

CARES funds

CRRSA Funds

ARP Supplemental Discretionary

- ARP Stabilization 10% set-aside
- Unable to report. Indicate reason:

No

11.2 Data Systems Investment

11.2.1 Data Systems Investment:

Did the state/territory invest in data systems to support equitable access to child care (e.g., modernizing and maintaining systems; technology upgrades and data governance improvements to provide more transparent and updated information to parents; a workforce registry; updated QRIS systems; CCR&R updates; monitoring systems) from October 1, 2023 to September 30, 2024?

Yes. Describe: **The Division of Child Care announced in December 2023 that DCC is providing access to Brightwheel, a child care management software, to all licensed and certified programs paid for through a three year pilot program. Currently, there are 695 active provider programs enrolled in Brightwheel. This breaks down into 604 Licensed providers (86.9%) and 91 Certified Providers (13.2%). At launch providers had access to trainings via Brightwheel on functionality and support as needed. Some of the benefits of Brightwheel are eliminating and reducing paperwork, putting two-way family communication in one place, automating billing and payments, and making check-ins, enrollments and reporting easily accessible. In the 2025 QPR DCC will be able to report on CCAP Attendance and real-time enrollment features with the ability to capture and monitor child care supply and demand for different settings.**

No

11.2.2 Spending - Data Systems Investment:

Were funds from any sources (e.g., CCDF quality set aside, non-CCDF funds, CARES, CRRSA, ARP Supplemental Discretionary, or ARP Stabilization 10% set-aside) spent to support this activity?

Yes, if so which funding source(s) were used?

- CCDF quality funds
- Non-CCDF funds
- CARES funds
- CRRSA Funds
- ARP Supplemental Discretionary

- ARP Stabilization 10% set-aside
- Unable to report. Indicate reason:

No

11.3 Supply and Demand Analysis

11.3.1 Supply and Demand Analysis:

Did the state/territory conduct an analysis of supply and demand or other needs assessment to identify areas of focus to build supply or target funding from October 1, 2023 to September 30, 2024?

Yes. Describe findings: **The Division of Child Care has contracted with the University of Kentucky's Human Development Institute (HDI) to conduct the 2024 Market Rate Survey (MRS). All providers in the regulated, priced child care market were invited to participate. Data were collected from January 16 through February 14, 2024 in order to provide current and contemporaneous information on child care across the state. The three types of regulated providers in Kentucky, Licensed Type I and Type II Centers, and Certified Family Child Care Homes, were included. These market rates are provided to inform DCC as they look at setting subsidy rates. In addition, these rates can be utilized as business information to providers as they set their own rates based on the market in their area. The research team will also be using this market rate information as a baseline to examine the providers' costs of child care in part two of this project.**

To view the tables in the MRS- Please visit: <https://www.childcareawareky.org/wp-content/uploads/2024/06/2024-Market-Rate-Study-1.pdf>

In addition to the MRS, Child Care Aware of Kentucky also conducted the second part of the research to show the Cost of Care in Kentucky for providers. . This study provides data to inform the provision of Child Care and Development Block Grant (CCDBG) subsidies that are sufficient to ensure that eligible children have the same access as non-eligible children to child care spots. Part 1 is the 2024 Kentucky Child Care Market Rate Survey, submitted on 4/29/24. This traditional market rate study was based on a statewide survey of providers. Part 2 is the 2024 Kentucky Cost Model for Licensed Centers. In this study, cost models for both small and large licensed child care centers are developed and presented.

Implications: A cost model aggregates data from a wide range of child care programs and provides a systems-level view of the financial model of child care. These data-driven

scenarios model what was hinted at by anecdotal evidence and pilot findings: child care centers are barely making it. Small centers in this model cannot balance revenue and expenditures at all. The only model that manages to break even is the large center model using the provider-reported median wages that are already below the Low Wage threshold of the PCQC calculations. It appears that these low salaries may be the only reason that model produces a revenue of 2%. Increasing typical wages to a more desirable level would be one way to address chronic staffing shortages, and to promote higher retention of qualified early childhood educators. If child care center businesses across the state are going to be able to continue to provide services to families, there must be additional supports in place. This would require broad and sustainable long-term supports to expand access to high quality child care. Achieving these goals would combat the chronic underfunding of subsidies based only on market rates, break the cycle of low wages for child care workers, and ensure that the funds are available to both assure regulatory compliance and quality for all centers. Equitable access to high quality child care for all children cannot occur without a reduction in the systemic barriers.

In addition to the Market Rate Study and the Cost of Care Model for Licensed Centers, UK HDI used these data to develop additional tools to analyze supply and demand across the state. These additional tools were: 1) the child care desert map 2) the high quality desert map, and 3) the landscape report. These tools have been provided to DCC and are available regionally through the supports offered by Regional Child Care Administrators and Child Care Aware coaching staff to local child care providers and business communities. For the purposes of our analysis, child care deserts are defined as more than three times as many children as there are child care slots, or for a high quality child care desert, three times as many children as there are slots in a high quality (Levels 3-5) facility. Child numbers are based on census data, and slots are based on licensed capacity. These tools are available to economic development stakeholders, local business leaders, communities supporting local families, and individuals deciding where to open a facility.

To view the Completed 2024 Kentucky Cost Model for Licensed Centers visit:
<https://www.childcareawareky.org/wp-content/uploads/2024/07/Cost-of-Care-in-Kentucky-Part-2-Cost-Model-2024.pdf>

[] No

11.3.2 Spending - Supply and Demand Analysis:

Were funds from any sources (e.g., CCDF quality set aside, non-CCDF funds, CARES, CRRSA, ARP Supplemental Discretionary, or ARP Stabilization 10% set-aside) spent to support this activity?

Yes, if so which funding source(s) were used?

- CCDF quality funds
- Non-CCDF funds
- CARES funds
- CRRSA Funds
- ARP Supplemental Discretionary
- ARP Stabilization 10% set-aside
- Unable to report. Indicate reason:

No

11.4 Supply and Demand Initiatives

11.4.1 Supply and Demand Initiatives:

Did the state/territory implement initiatives designed to address supply and demand issues related to child care deserts and/or vulnerable populations (such as infants and toddlers, children with disabilities, English language learners, and children who need child care during non-traditional hours) during October 1, 2023 to September 30, 2024? Check all that apply.

- Child care deserts
- Infants/toddlers
- Children with disabilities
- English language learners
- Children who need child care during non-traditional hours
- Other. Describe: **During this reporting period, DCC continued efforts with the labor cabinet to promote the Employee Child Care Assistance Partnership (ECCAP) Program. This program left the "pilot" phase during this reporting period. Through ECCAP, the cost of child care is shared by you, your employer, and Kentucky's Cabinet for Health and Family Services (CHFS). The amount contributed by the Cabinet is based upon your family's size and income level. This incentive builds the workforce by supporting families with child care cost needs, and supporting the growing of child care businesses throughout the state.**

DCC provided Orientation and Pediatric Abused Head Trauma (PAHT) training in Spanish via

online modules during this reporting period. These trainings are required for all new child care employees within the first 90 days of employment. These trainings will help Spanish-speaking Early educators learn key Health and Safety requirements and best practices in their native language. DCC also has started the process of having the Diversity, Equity and Inclusion content for modules 1-4 translated into Spanish for additional training opportunities. Please see the full DEI Training initiative update in section 11.7 for additional details.

DCC also has continued the Family Child Care Provider Grants. These are one time grants, up to \$5000 to assist in paying fees and purchasing items needed to establish and open a regulated family care home. Funds will help new providers care for children in a regulated environment ensuring child safety and security. Family Child Care homes are one of the ways we are targeting to address the supply and demand issues with both child care deserts and infant/toddler populations.

DCC continued to offer the Preschool Partnership grant to incentivize cooperative public/private partnerships between public school districts and child care providers to develop full-day high-quality programs for at-risk children. The incentive grant program represented an opportunity for school districts and child care providers to improve the quality of services in their communities. During this reporting period, DCC issued one grant for this grant type.

11.4.2 Spending - Supply and Demand Initiatives:

Were funds from any sources (e.g., CCDF quality set aside, non-CCDF funds, CARES, CRRSA, ARP Supplemental Discretionary, or ARP Stabilization 10% set-aside) spent to support this activity?

Yes, if so which funding source(s) were used?

- CCDF quality funds
- Non-CCDF funds
- CARES funds
- CRRSA Funds
- ARP Supplemental Discretionary
- ARP Stabilization 10% set-aside
- Unable to report. Indicate reason:

No

11.5 Provider Compensation and Benefits

11.5.1 Spending - Provider Compensation and Benefits:

What compensation and benefits improvements did teachers/providers receive between October 1, 2023 and September 30, 2024 (check all that apply)? If indicated, how many providers received each type of support?

Financial bonuses (not tied to education levels)

Salary enhancements/wage supplements

Health insurance coverage

Dental insurance coverage

Retirement benefits

Loan Forgiveness programs

Mental Health/Wellness programs

Start up funds 50

Other. Describe: **Child Care Staff continued being a protected population through CCAP Eligibility: Starting October 21, 2022 the Division of Child Care added a new provision for Child Care employees that are applying for CCAP. Those employees in child care that meet all of the requirements for CCAP and have verified their employment in a Cabinet for Health and Family Services (CHFS) regulated (licensed or certified) child care program are eligible to have all of their household income excluded from the Child Care Assistance Program (CCAP) application process. This eliminated income barriers for our regulated child care providers who may not have been eligible for CCAP previously. During the reporting period, 5,023 providers have completed the process and have met all requirements to exclude their income for the Child Care Assistance Program and has positively impacted 8,782 children in Kentucky.**

The Division of Child Care continued to offer the Family Child Care provider grant. This one time grant, up to \$5000 to assist in paying fees and purchasing items needed to establish and open a regulated family child care home. Funds will help new providers care for children in a regulated environment ensuring child safety and security. In this reporting period DCC has issued 50 grants totaling \$250,000.

N/A. Describe:

11.5.2 Spending - Provider Compensation and Benefits:

Were funds from any sources (e.g., CCDF quality set aside, non-CCDF funds, CARES, CRRSA, ARP Supplemental Discretionary, or ARP Stabilization 10% set-aside) spent to support this activity?

Yes, if so which funding source(s) were used?

- CCDF quality funds
- Non-CCDF funds
- CARES funds
- CRRSA Funds
- ARP Supplemental Discretionary
- ARP Stabilization 10% set-aside
- Unable to report. Indicate reason:

No

11.6 Spending – Other Activities to Improve the Quality of Child Care Services

11.6.1 Spending – Other Activities to Improve the Quality of Child Care Services:

What is the total amount spent across all funding sources (i.e., CCDF quality set aside, non-CCDF funds, CARES, CRRSA, ARP Supplemental Discretionary, and ARP Stabilization 10% set-aside) on other activities to improve the quality of child care services during October 1, 2023 to September 30, 2024? **\$1382817**

Unable to report total amount spent. Indicate reason:

Optional: Use this space to tell us any additional information about how funds were spent that is not captured in the items already reported.

11.7 Progress Update

11.7.1 Progress Update – Other Activities to Improve the Quality of Child Care Services:

Other activities to improve the quality of child care services supported by outcome measures that improve provider preparedness, child safety, child well-being, or kindergarten-entry.

Measurable indicators of progress the state/territory reported in section 7.10.1 of the 2022-2024 CCDF Plan:

Note: The information displayed is from the most recent approved FFY2022-2024 CCDF Plan.

N/A

Please include information on the outcomes and numerical targets achieved based on the measurable indicators of progress specified in section 7.10.2 of the 2022-2024 CCDF Plan: **During this reporting period, DCC announced that we had partnered with 6 Kentucky training agencies across the state to offer training opportunities that focused on Diversity, Equity, and Inclusion. The DEI training project started in January 2024 and continued for 6 months until July 2024. The Training agencies created cohorts to engage early education professionals in meaningful and intentional conversations on how we can support children, families, and each other from a DEI perspective. An average of 601 early care and education providers across the state participated in the DEI project. This project awarded a total of 12 hours of early care and education hours were awarded for the DEI Training to anyone who completed all six modules. Below are the averages for participation for the 6-month project across the state:**

Infant/Toddler Teachers: 217

Preschool or School Age Teachers: 244

Directors, Owners, or Administrators: 142

Family Child Care Providers: 65

These participants are employed by 290 individual child care programs across the state. In addition to the DEI training participating centers were provided curated kits to teacher over the 6 months. A total of 3,606 kits were distributed through the 6 months project, with an additional 1,140 kits purchased for training agencies to continue providing the content and support for future opportunities. Program directors were able to purchase high quality learning materials and furniture for their classrooms. Over \$75,000 in orders were submitted through the ePro site during the project. The DEI content has been released to all 6 participating training agencies for future training opportunities to continue the DEI work. Modules 1-4 have also been sent for translation into Spanish to support Kentucky's Spanish-speaking providers.

During this reporting period, DCC has translated Orientation, the 6-hour training required by Federal and State regulation, for Health, Safety, Child Abuse and Neglect and Recommended Practices; and the required Pediatric Abuse Head Trauma (PAHT) training into Spanish. These two trainings have been made available to providers via online modules. Spanish "ECOOL" is available through the University of Kentucky's HDI learning platform, and Spanish PAHT is available at no cost to providers through the ECE-TRIS Moodle Platform. All translated training materials have also been provided to Trainers in Kentucky that are eligible to train on PAHT and Orientation. These materials can be used to help bridge the language barrier for new providers into the field, or to create content to refresh knowledge in a provider's native language. All translated materials are available to trainers through the training resources in ECE-TRIS.

Analysis of surveying data identified areas of concerns relating to active supervision. The

Division of Child Care, the Office of Inspector General/Division of Regulated Child Care, Child Care Aware of Kentucky, the Child Care Health Consultants, and the Family Child Care Network created tip sheets/reminders that providers could use within their programs to address these frequently cited violations. All partners created "active supervision" reminders and tips that were shared with all providers through various outlets.

During this reporting period, the Division of Child Care continued its monthly newsletter the ECE-Insider. This newsletter is for child care providers to stay current on information from Division of Child Care, important health and safety reminders and family engagement ideas. During the reporting period DCC has provided the ECE-Insider translated into Spanish to have more accessible communication for Spanish speaking providers. The active supervision tips have also been included in the ECE-Insider in partnership with DRCC.

The Division of Child Care continued to offer expanded scholarship opportunities to providers in regulated/licensed child care settings through KHEAA at formal education institutions across the state. These programs are offered for credentials, such as the CDA and KY Director's Credential. They also cover full scholarships for Associate's, Bachelor's, and Master's programs in ECE, Interdisciplinary Early Childhood Education (IECE), or Child and Family Studies.

The Cabinet issued one last stabilization payment in December to licensed and certified childcare programs based on licensure/certification capacity as reported to the DRCC by January 1, 2024. The Cabinet issued payments to registered providers based on subsidy enrollment. The payment was approximately \$310.00 per child dependent on the number of full-time and part-time providers that apply.

The Division of Child Care announced in December 2023 that DCC is providing access to Brightwheel, a child care management software, to all licensed and certified programs paid for through a three year pilot program. Currently, there are 695 active provider programs enrolled in Brightwheel. This breaks down into 604 Licensed providers (86.9%) and 91 Certified Providers (13.2%). At launch providers had access to trainings via Brightwheel on functionality and support as needed. Some of the benefits of Brightwheel are eliminating and reducing paperwork, putting two-way family communication in one place, automating billing and payments, and making check-ins, enrollments and reporting easily accessible. In the 2025 QPR DCC will be able to report on CCAP Attendance and real-time enrollment features with the ability to capture and monitor child care supply and demand for different settings.

In addition to the Market Rate Study and the Cost of Care Model for Licensed Centers, UK HDI

used these data to develop additional tools to analyze supply and demand across the state. These additional tools were: 1) the child care desert map 2) the high quality desert map, and 3) the landscape report. These tools have been provided to DCC and are available regionally through the supports offered by Regional Child Care Administrators and Child Care Aware coaching staff to local child care providers and business communities. For the purposes of our analysis, child care deserts are defined as more than three times as many children as there are child care slots, or for a high quality child care desert, three times as many children as there are slots in a high quality (Levels 3-5) facility. Child numbers are based on census data, and slots are based on licensed capacity. These tools are available to economic development stakeholders, local business leaders, communities supporting local families, and individuals deciding where to open a facility.

Child Care Staff continued being a protected population through CCAP Eligibility: Starting October 21, 2022 the Division of Child Care added a new provision for Child Care employees that are applying for CCAP. Those employees in child care that meet all of the requirements for CCAP and have verified their employment in a Cabinet for Health and Family Services (CHFS) regulated (licensed or certified) child care program are eligible to have all of their household income excluded from the Child Care Assistance Program (CCAP) application process. This eliminated income barriers for our regulated child care providers who may not have been eligible for CCAP previously. During the reporting period, 5,023 providers have completed the process and have met all requirements to exclude their income for the Child Care Assistance Program and has positively impacted 8,782 children in Kentucky.

The Division of Child Care continued to offer the Family Child Care provider grant. This one time grant, up to \$5000 to assist in paying fees and purchasing items needed to establish and open a regulated family child care home. Funds will help new providers care for children in a regulated environment ensuring child safety and security. In this reporting period DCC has issued 50 grants totaling \$250,000.

12) Annual Report

Lead agencies must submit an annual report, as required at 45 CFR § 98.53(f) (4), describing any changes to lead agency regulations, enforcement mechanisms, or other lead agency policies addressing health and safety based on an annual review and assessment of serious child injuries and any deaths occurring in child care programs receiving CCDF, and in other regulated and unregulated child care centers and family child care homes, to the extent possible.

12.1 Annual Report and Changes

12.1.1 Annual Report:

Describe the annual review and assessment of serious injuries and any deaths occurring in child care programs receiving CCDF, and in other regulated and unregulated child care centers and family child care homes, to the extent possible. **Division of Regulated Child Care (DRCC) has implemented a Peer Review Procedure wherein the Director, Assistant Director, and Regional Program Managers meet specifically to assess situations that have occurred which prompted an action against a provider's license. These situations often include incidents of serious injury and at times, fatalities. The Peer Review Procedure includes a systematic evaluation of these cases and their related processes including inspection, investigation, and identification of specific violations. The Peer Review also will assess the criteria used when actions are taken against a provider's license.**

OIG has requested the Office of Data Analytics to provide any identifying correlations to target areas where education and coaching may decrease fatalities or serious injuries.

Meetings continue to occur weekly to discuss matters of serious injury and death. Information is then shared with DCC and supporting agencies during other collateral meetings with the Family Child Care Network (FCCN), Child Care Aware of Kentucky (CCA) , and Child Care Regulation Committee (CCRC).

OIG is tracking data in the civil penalty process to be proactive in attempts to minimize serious injury or death. We have identified a reduction since last August in the number of revocations and emergency suspensions issued as a result

12.1.2 Annual Report Changes:

Describe any changes to lead agency regulations, enforcement mechanisms, or other lead agency policies addressing health and safety based on the annual review and assessment. **DRCC is**

working towards implementing multiple changes to the public facing website that will assist in educating consumers about the extent of regulatory issues verified during inspection. Previous reports only identified areas of non-compliance wherein the new report will identify areas of compliance as well. DRCC has also initiated the process of reviewing information from other states regarding "serious injury" and how that is defined. This process will help DRCC continue to expand the information provided to families and partner agencies. This will also be utilized to help guide DRCC policies in determining when an action may be warranted against a license due to a serious injury.

Since the implementation of the Kentucky Campaign for Child Care, DRCC has participated in two public events distributing documentation we have created (available upon request). DRCC is sharing information with illegal providers and are desperately trying to recruit providers during our initial contact as we have determined most return to providing illegal child care once receiving a Cease and Desist order. We have engaged with other community partners, including recent attendance to the Family Child Care Network Conference to discuss the merits and development of both the Campaign, and Ryker's Request, a means to educate the public regarding utilization of licensed and certified care. DRCC is working on a poster campaign to be distributed in Home Health Agencies, DCBS Family Support and Protection and Permanency offices. DRCC has distributed magnets identifying a QR code to assist parents in connecting to KYNECT to identifying licensed and certified providers. DRCC's is hope to include the information to be distributed at community baby showers throughout the state.

To learn more about the Kentucky Campaign for Child Care:

<https://www.chfs.ky.gov/agencies/os/oig/drcc/Pages/KentuckyCampaignforChildCare.aspx>

To learn more about Ryker's Request:

<https://www.chfs.ky.gov/agencies/os/oig/drcc/Pages/RykersRequests.aspx>