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Quality Progress Report (QPR)

For

Kentucky

FFY 2022

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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, 2021 through September 30, 2022), 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.

Reporting Activities Related to ARP Act Child Care Stabilization Grants

The ARP Act included approximately \$24 billion for child care stabilization grants, representing an important opportunity to stabilize the child care sector and do so in a way that builds back a stronger child care system that supports the developmental and learning needs of children, meets parents' needs and preferences with equal access to high-quality child care, and supports a professionalized workforce that is fairly and appropriately compensated for the essential skilled work that they do. Lead agencies must spend stabilization funds as subgrants to

qualified child care providers to support the stability of the child care sector during and after the COVID-19 public health emergency. Please refer to the information memorandum [ARP Act Child Care Stabilization Grants](#) (CCDF-ACF-IM-2021-02) for further guidance on the child care stabilization grants made available through the ARP Act.

While the OCC has established a new data collection form, the ACF-901 – American Rescue Plan (ARP) Stabilization Grants Provider-Level Data, as the primary data collection mechanism for reporting related to ARP stabilization grants, Section 13 of the QPR asks about activities related to stabilization grants made possible through ARP funding. The OCC will inform lead agencies if the data reported through the ACF-901 is complete enough to warrant skipping Section 13 of the QPR. The following information is requested in Section 13:

- If the lead agency ran more than one grant program;
- How stabilization grants were used to support workforce compensation; and
- Methods to eliminate fraud, waste, and abuse when providing stabilization grants

Section 13 should be used to report on ARP Stabilization Grants ONLY. Other child care sustainability or stabilization grant programs established or ongoing using other funding mechanisms (i.e., CCDF or other supplemental funding e.g., CARES, CRRSA, ARP Supplemental Discretionary Funds) should be reported in Section 11.

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, 2022.

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 network means a group of associated family child care providers who pool funds to share some operating costs and to pay for at least one staff person who helps the providers to manage their businesses and enhance quality.

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. Please enter N/A when necessary.

1.1 State or Territory Child Care Provider Population

Enter the total number of child care providers that operated in the state or territory as of September 30, 2022. These counts should include all child care providers, not just those serving children receiving CCDF subsidies. Please enter N/A when necessary.

Licensed center-based programs **1754**

N/A. Describe:

License exempt center-based programs

N/A. Describe:

Licensed family child care homes **203**

N/A. Describe:

License-exempt family child care homes (care in providers' home) **31**

N/A. Describe:

In-home (care in the child's own home) **12**

N/A. Describe:

Other. Explain:

1.2 Goals for Quality Improvement

Based on Question 7.1.2 from the FFY2022-2024 CCDF State and Territory Plan, please report progress on the lead agency's overarching goals for quality improvement during October 1, 2021 to September 30, 2022. Include any significant areas of progress that were not anticipated in the Plan as well. For each goal listed, briefly describe the improvement with specific examples or numeric targets where possible. **Lead Agency has been involved in technical assistance related to consumer education (parent education) during this period. Lead Agency has had many internal discussions with partner agencies and has convened a Consumer Education Network that meets quarterly. The purpose of the Consumer Education Network is to ensure the Lead Agency and it's contractual partners are providing clear and consistent information about ECE services and quality. Lead Agency continues to engage the provider community with town halls and direct communication. The Lead Agency also began working on a more robust Consumer Statement (previously the DCC 112 and DCC 113) to ensure all CCDF requirements are met in FY 2023.**

The goals for Quality Improvement continue to be helping providers recover from the effects of COVID-19. All quality rating visits were suspended during the height of COVID and extensions were granted to ALL programs. The Kentucky All STARS raters have collaborated with the Child Care Aware of Kentucky Quality Coaches to prepare providers for renewals in the next two years. Rating visits resumed during FY 2022. The Lead Agency has seen a slight dip in quality overall, but are diligently working to provide supports through coaching and technical assistance to our providers.

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 diverse and stable child care workforce with the competencies and skills to support all domains of child development. Please select N/A as appropriate.

2.1 Lead Agency Progression of Professional Development

2.1.1 Did the lead agency use a workforce registry or professional development registry to track progression of professional development during October 1, 2021 to September 30, 2022?

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 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 the 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 Are any teachers/providers required to participate?

Yes. If yes, describe: **922 KAR 2:240 requires credentialed trainers to enter all training credit records for teachers/providers within 10 days of training end date. Teacher and**

provider training data in the registry is also used by Kentucky's Division of Regulated Child Care surveyors to review annual licensing hours.

No. If no, describe:

2.1.3 Total number of participants in the registry as of September 30, 2022 **158990**

2.2 Workforce Development

2.2.1 What supports did the lead agency make available to teachers/providers to help them progress in their education, professional development, and career pathway between October 1, 2021 and September 30, 2022 (check all that apply)? If available, how many people received each type of support?

Scholarships (for formal education institutions) **1600**

Financial bonus/wage supplements tied to education levels

Career advisors, mentors, coaches, or consultants

Reimbursement for training

Loans

Substitutes, leave (paid or unpaid)for professional development

Other. Describe: **CDA-K stood for the K in KIDS NOW. Although we no longer reference KIDS NOW, it is still the application we use because it allows any applicant to participate, regardless of income. The other application did require income guidelines.**

KHEAA - Kentucky Higher Education Assistance Authority.

NCS-CCCC/NCS-CDA - Non-College Scholarship- Commonwealth Child Care Credential or Child Development Associate (broken down into 2 separate scholarships, each 60 hours; Council for Professional Recognition; the first 60 lead to the Commonwealth and the second 60 lead to the CDA through Council).

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 remainder.

We offer several:

-CCCC completion - \$90.00 (employer pays \$10)

-CDA completion - \$225.00 (employer pays \$25)

-Associates Degree completion - \$270 (employer pays \$30)

-Directors Credential completion - \$270 (employer pays \$30)

-Bachelor's Degree completion - \$450.00 (employer pays \$50)

Scholarship, Grant, Award	Count
CDA-K	220
KHEAA	765
Milestone	156
Related Educational Reimbursement	101
NCS - CCCC	223
NCS ☐ CDA	135
Total:	1,600

N/A. Describe:

2.2.2 What compensation and benefits improvements did the lead agency support for teachers/providers between October 1, 2021 and September 30, 2022 (check all that apply)? If available, how many people 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

Other. Describe: **CRRSA Funding: This funding is for licensed and certified providers based on capacity. All payments are based on enrollment. Initial payment is \$300/child, with 3 following payments of \$260. Child care programs shall use portions of this funding for staff salaries. This may include salary increases or hazard pay for providers working during the KY State of Emergency. Funding can also be used for fixed expenses (rent/mortgage, utilities, insurance premiums, ETC), PPE, cleaning supplies, and food.**

The Lead Agency also amended 922 KAR 2:120 in December 2021 requiring ALL child care center staff members to receive training on first aid and CPR. Training agencies were awarded contracts to offer and deliver CPR/First Aid, Blood borne pathogens, and Epi-Pen training to any child care provider, at no cost to program or staff members. The lead agency provided 2,873 teachers/providers compensation support with CPR/First Aid Training/Blood Borne Pathogens/Epi-Pen and NBCP checks.

[] N/A. Describe:

For questions 2.3 to 2.4 please report on the number of staff by qualification level as of September 30, 2022. Count only the highest level attained by staff.

2.3 Licensed child care providers	Licensed child care center directors	Licensed child care center teachers	Licensed family child care providers	If N/A, explain
a. Total number:	1071	2290	111	
b. How many had a Child Development Associate (CDA)?	107	382	17	
c. How many had an Associate's degree in an early childhood education field (e.g., psychology, human development, education)?	133	433	8	
d. How many had a Bachelor's degree in an early childhood education field (e.g., psychology, human development, education)?	248	641	5	
e. How many had a State child care credential?	66	221	39	
f. How many had State infant and toddler credentials?	0	0	0	No State Infant and toddler credentials issued for this reporting period.

2.3 Licensed child care providers	Licensed child care center directors	Licensed child care center teachers	Licensed family child care providers	If N/A, explain
g. How many had an "other" degree? Define "other" degree: Individuals with a Directors Credential (DC), Trainers Credential (TC), Master's Degree (M), or Doctorate Degree (D).	517	613	42	

2.4 Licensed CCDF providers	Licensed child care center directors who serve children who receive CCDF subsidy	Licensed child care center teachers who serve children who receive CCDF subsidy	Licensed family child care providers who serve children who receive CCDF subsidy	If N/A, explain
a. Total number:	877	1464	66	
b. How many had a Child Development Associate (CDA)?	91	254	16	
c. How many had an Associate's degree in an early childhood education field (e.g., psychology, human development, education)?	114	267	7	

2.4 Licensed CCDF providers	Licensed child care center directors who serve children who receive CCDF subsidy	Licensed child care center teachers who serve children who receive CCDF subsidy	Licensed family child care providers who serve children who receive CCDF subsidy	If N/A, explain
d. How many had a Bachelor's degree in an early childhood education field (e.g., psychology, human development, education)?	182	369	1	
e. How many had a State child care credential?	64	159	6	
f. How many had State infant and toddler credentials?	0	0	0	No state infant and toddler credentials.
g. How many had an "other" degree? Define "other" degree: Individuals with a Directors Credential (DC), Trainers Credential (TC), Master's Degree (M), Doctorate Degree (D).	426	415	36	

2.5 How many providers received the following additional forms of professional development and/or technical assistance from October 1, 2021 to September 30, 2022?

	Total	Licensed or registered center-based programs	License-exempt center-based programs	Licensed or registered family child care homes	License-exempt family child care homes (care in providers' home)	In-home (care in the child's own home)
a) Business practices	2801	2728	0	62	8	3

	Total	Licensed or registered center-based programs	License-exempt center-based programs	Licensed or registered family child care homes	License-exempt family child care homes (care in providers' home)	In-home (care in the child's own home)
b) Mental health	6665	6465	0	185	6	9
c) Diversity, equity, and inclusion	750	738	0	12	0	0
d) Emergency Preparedness Planning	2122	2069	0	43	7	3
e) Other:	0	0	0	0	0	0

2.6 Spending:

2.6.1 Did the lead agency spend funds from any of the following sources to support the **training and professional development** of the child care workforce during October 1, 2021 to September 30, 2022?

Funding source	Was this funding source used?
a. CCDF quality set aside (from all available appropriation years that were spent during the fiscal year)	<input checked="" type="checkbox"/> Yes Amount spent \$ 490410.61 If yes, describe how funds were used: Funds were spent through a contractual agreement with University of Kentucky for Professional Development, educational assistance. <input type="checkbox"/> No <input type="checkbox"/> N/A Describe:

Funding source	Was this funding source used?
b. Non-CCDF funds (e.g., TANF funds spent directly on quality, Preschool Development Funds, state or local funds, etc.)	<input checked="" type="checkbox"/> Yes Amount spent: \$ 1133271.02 If yes, describe source(s) of funding and how funds were used: State funds from our Tobacco Master Settlement and were used for professional development on UK contract, CDA non college scholarships. <input type="checkbox"/> No <input type="checkbox"/> N/A Describe:
c. Coronavirus Aid, Relief, and Economic Security (CARES) Act, 2020	<input type="checkbox"/> Yes Amount spent \$ If yes, describe how funds were used: <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A Describe:
d. Coronavirus Response and Relief Supplemental Appropriations (CRRSA) Act, 2021	<input checked="" type="checkbox"/> Yes Amount spent \$ 1174567.55 If yes, describe how funds were used: Child Care Provider Training contracts for CPR and first aid; blood borne pathogens; and Epi Pen use. The Lead Agency amended 922 KAR 2:120 in December 2021 requiring ALL child care center staff members to receive training on first aid and CPR. Training agencies were awarded contracts to offer and deliver CPR/First Aid, Blood borne pathogens, and Epi-Pen training to any child care provider, at no cost to program or staff members. CRRSA Funding: This funding is for licensed and certified providers based on capacity. All payments are based on enrollment. Initial payment is \$300/child, with 3 following payments of \$260. Child care programs shall use portions of this funding for staff salaries. This may include salary increases or hazard pay for providers working during the KY State of Emergency. Funding can also be used for fixed expenses (rent/mortgage, utilities, insurance premiums, ETC), PPE, cleaning supplies, and food. <input type="checkbox"/> No <input type="checkbox"/> N/A Describe:

Funding source	Was this funding source used?
e. American Rescue Plan (ARP) Act, 2021 Supplemental funding	<input checked="" type="checkbox"/> Yes Amount spent \$ 1480327.00 If yes, describe how funds were used: Two Trainer’s Academies were offered to credentialed trainers at a cost of \$75,000: 1.) Director & Administrator 2.) Special Needs. The Division of Child Care (DCC) also used the ARP Supplemental funding to offer scholarships for anyone employed in the child care field. During FFY 2022, 672 awards were issued to 429 individual scholars for a total of \$1,405,327. <input type="checkbox"/> No <input type="checkbox"/> N/A Describe:
f. ARP Act, 2021 Stabilization Grant set-aside ONLY (As a reminder 10% of the ARP Stabilization Grants could be set-aside for administrative expenses, supply building, and technical assistance. This question refers only to this 10%.)	<input type="checkbox"/> Yes Amount spent \$ If yes, describe how funds were used: <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A Describe:

2.7 Progress Update: Using the measures identified in 6.3.2 of the CCDF Plan, report on the progress made during October 1, 2021 to September 30, 2022 on activities related to supporting the training and professional development of the child care workforce. In addition, describe outcomes achieved, including examples and numeric targets where possible. If progress was not made, describe barriers toward achieving measurable outcomes:

The number of programs overall has decreased as have the number of centers operating at high quality. As of September 30, 2022, 744 providers (38%) were considered high quality. The Lead Agency did raise the add-on incentives to programs who provided care during non-traditional hours (\$2 to \$10 per day); accredited programs (\$1 to \$5 per day); and programs who provided care for children with special needs (\$1 to \$5 per day).

The Division of Child Care (DCC) offered two individual Trainer's Academies: Director & Administrator and Special Needs. Each academy was 12 months with a different topic trained each month. The Director and Administrator Academy had 25 participants. The Special Needs Academy had 37 participants. Each participant not only received the

training on the topic but was also provided with all training materials and content so that these trainings could be replicated throughout the state over the next year.

DCC also provided the funding for anyone working in a regulated child care settings to receive a full scholarship for a certificate, credential, associate's degree, bachelor's degree or master's degree. In FFY22, 672 awards were issued to 429 individual scholars. 72% were for associate's and bachelor's degrees, with 77% being for IECE (Interdisciplinary Early Childhood Education). These funds were used at 22 institutions of higher education.

Both of these initiatives create professional development opportunities for ALL child care providers throughout the state. Making these resources more available to ALL providers, builds a stronger ECE workforce which will allow programs to increase their overall quality rating.

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 Were any changes or updates made to the State or Territory’s early learning and development guidelines during October 1, 2021 to September 30, 2022?

Yes. If yes, describe changes or updates:

No

N/A Describe:

3.2 Spending:

3.2.1 Did the lead agency spend funds from any of the following sources on the **development or implementation of early learning and development guidelines** during October 1, 2021 to September 30, 2022?

Funding source	Was this funding source used?
a. CCDF quality set aside (from all available appropriation years that were spent during the fiscal year)	<input type="checkbox"/> Yes Amount spent \$ If yes, describe how funds were used: <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A Describe:
b. Non-CCDF funds (e.g., TANF funds spent directly on quality, Preschool Development Funds, state or local funds, etc.)	<input type="checkbox"/> Yes Amount spent: \$ If yes, describe source(s) of funding and how funds were used: <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A Describe:
c. Coronavirus Aid, Relief, and Economic Security (CARES) Act, 2020	<input type="checkbox"/> Yes Amount spent \$ If yes, describe how funds were used: <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A Describe:

Funding source	Was this funding source used?
d. Coronavirus Response and Relief Supplemental Appropriations (CRRSA) Act, 2021	<input type="checkbox"/> Yes Amount spent \$ If yes, describe how funds were used: <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A Describe:
e. American Rescue Plan (ARP) Act, 2021 Supplemental funding	<input type="checkbox"/> Yes Amount spent \$ If yes, describe how funds were used: <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A Describe:
f. ARP Act, 2021 Stabilization Grant set-aside ONLY (As a reminder 10% of the ARP Stabilization Grants could be set-aside for administrative expenses, supply building, and technical assistance. This question refers only to this 10%.)	<input type="checkbox"/> Yes Amount spent \$ If yes, describe how funds were used: <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A Describe:

3.3 Progress Update: Using the measures identified in section 6.4 of the CCDF Plan, report on the progress made during October 1, 2021 to September 30, 2022 on activities related to improving early learning and development guidelines. In addition, describe outcomes achieved, including examples and numeric targets where possible. If progress was not made, describe barriers toward achieving measurable outcomes:

The Lead Agency supported the Governor's Office of Early Childhood in updating the state's Early Learning Standards by participating in a variety of work groups. The Lead Agency also supported GOEC's work on developing new Family Guides. Both of these items were released to the ECE industry in June 2022 during the Early Childhood Institute. These materials can be found at: <https://kyecac.ky.gov/professionals/Early-Childhood-Standards/Getting-Started/Pages/Start-Here.aspx>

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 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, 2021 to September 30, 2022?

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

Please describe all QRIS tiers and which tiers are considered high quality care: **Level 1**

A child care provider with a regular or preliminary license in good standing

Level 2 **Environmental self-assessment**

Level 3 **Participate in an environmental observation (*High Quality)**

Level 4 - Participate in an environmental observation, must achieve a score of 4 in all rated classrooms (*High Quality)

Level 5 - Participate in an environmental observation, must achieve a score of 5 in all rated classrooms (*High Quality)

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.

Please describe all QRIS tiers and which tiers are considered high quality care:

The lead agency is operating another system of quality improvement.

Describe this system and your definition of high quality care, which may include assessment scores, accreditation, or other metrics:

The lead agency does not have a QRIS or other system of quality improvement.

Please include your definition of high quality care:

4.2 What types of providers participated in the QRIS or other system of quality improvement during October 1, 2021 to September 30, 2022 (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 For each setting, indicate the number of providers eligible to participate in the QRIS or other system of quality improvement and the number of providers participating as of September 30, 2022?

	License d child care centers	License- exempt child care centers	Licensed family child care homes	License- exempt family child care homes	In-home (care in the child's own home)	Programs serving children who receive CCDF subsidy	Other, Describe: All regulate d child care program s are automat ically enrolled in the state's QRIS program . 922 KAR 2:160 Section 14 and 922 KAR 2:270 Section 2 outlines that any program that receives state and/or federal funds shall participa te in the QRIS program . Program s may opt-out of QRIS participa
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							<p>tion making them ineligible to receive CCDF dollars. Of the 1,373 programs reported as eligible to receive CCDC, Kentucky currently has 24 programs which have opted out of QRIS. Programs may opt-out of QRIS if they are not receiving CCDF or have no subsidy children enrolled.</p>
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a. Number of providers eligible for QRIS or other system of quality improvement	1766	0	244	0	0	1373	0
b. Number of providers participating in QRIS or other system of quality improvement	1714	0	242	0	0	1349	0
c. N/A, describe							

4.4 Is participation in the QRIS or other system of quality improvement mandatory for any group of providers?

Yes (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: **Any Licensed Type I, II, or Certified provider who receives local, state, or federal funding. The providers listed in Region IV's question (Licensed CCLC, FCC, Pre-k, Local districts) are NOT required to participate in QRIS unless they are also a licensed/certified program. QRIS is not mandatory for Licensed CCLC, FCC, Pre-k, Local districts if they are not receiving CCDF funds.**

- No.
- N/A Describe

4.5 Enter the number of programs that met the lead agency’s high quality definition as of September 30, 2022:

- a) Licensed child care centers **718**
- b) License-exempt child care centers **0**
- c) Licensed family child care homes **8**
- d) License-exempt family child care homes (care in providers’ home) **0**
- e) In-home (care in the child’s own home) **0**
- f) Programs serving children who receive CCDF subsidy **498**

N/A. Describe

4.6 Enter the number of CCDF children in high quality care by age grouping as of September 30, 2022:

a. Total number of CCDF children in high quality care **11809**

i. Infant **847**

Define age range: from **0** weeks months years through **12** weeks months years

ii. Toddler **3089**

Define age range: from **1** weeks months years through **3** weeks months years

iii. Preschool **4637**

Define age range: from **3** weeks months years through **6** weeks months years

iv. School-age **3236**

Define age range: from **6** weeks months years through **18** weeks months years

b. Other. Describe

c. N/A. Describe:

4.7 Did the lead agency provide one-time grants, awards or bonuses connected to (or related to) QRIS or other system of quality improvement during October 1, 2021 to September 30, 2022? If yes, how many were provided to the following types of programs during October 1, 2021 to September 30, 2022?

Yes, the following programs received grants.

- a. Licensed child care centers
- b. License-exempt child care centers
- c. Licensed family child care homes
- d. License-exempt family child care homes (care in providers' home)
- e. In-home (care in the child's own home)
- f. Programs serving children who receive CCDF subsidy

No.

N/A. Describe:

4.8 Did the lead agency provide on-going or periodic quality stipends (e.g. annual participation bonus, recurring bonuses for maintaining quality level) connected to (or related to) QRIS or other system of quality improvement during October 1, 2021 to September 30, 2022? If yes, how many programs received on-going or periodic quality stipends connected to (or related to) QRIS or other system of quality improvement during October 1, 2021 to September 30, 2022?

Yes, the following programs received stipends.

- a. Licensed child care centers **795**
- b. License-exempt child care centers **0**
- c. Licensed family child care homes **39**
- d. License-exempt family child care homes (care in providers' home) **0**
- e. In-home (care in the child's own home) **0**
- f. Programs serving children who receive CCDF subsidy **834**

No.

N/A. Describe:

4.9 Did the lead agency provide higher subsidy rates (included tiered rates) related to the QRIS or other quality rating system during October 1, 2021 to September 30, 2022? If so, how many programs received higher subsidy payment rates due to their QRIS rating during October 1, 2021 to September 30, 2022?

Yes, the following programs received higher subsidy rates.

- a. Licensed child care centers **446**
- b. License-exempt child care centers **0**
- c. Licensed family child care homes **8**
- d. License-exempt family child care homes (care in providers' home) **0**
- e. In-home (care in the child's own home) **44**
- f. Programs serving children who receive CCDF subsidy **498**

No.

N/A. Describe:

4.10 Did the lead agency provide ongoing technical assistance related to the QRIS or other quality rating system during October 1, 2021 to September 30, 2022? If so, how many programs received ongoing technical assistance during October 1, 2021 to September 30, 2022?

Yes, the following programs received ongoing technical assistance.

- a. Licensed child care centers **795**
- b. License-exempt child care centers **0**
- c. Licensed family child care homes **39**
- d. License-exempt family child care homes (care in providers' home) **0**
- e. In-home (care in the child's own home) **0**
- f. Programs serving children who receive CCDF subsidy **834**

No.

N/A. Describe:

4.11 Spending:

4.11.1 Did the lead agency spend funds from any of the following sources to support QRIS or other quality rating systems during October 1, 2021 to September 30, 2022?

Funding source	Was this funding source used?
a. CCDF quality set aside (from all available appropriation years that were spent during the fiscal year)	<input type="checkbox"/> Yes Amount spent \$ If yes, describe how funds were used: <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A Describe:
b. Non-CCDF funds (e.g., TANF funds spent directly on quality, Preschool Development Funds, state or local funds, etc.)	<input checked="" type="checkbox"/> Yes Amount spent: \$ 4398124.10 If yes, describe source(s) of funding and how funds were used: Tobacco Master Settlement Agreement funds used to support the Kentucky All STARS Rating system. <input type="checkbox"/> No <input type="checkbox"/> N/A Describe:

Funding source	Was this funding source used?
c. Coronavirus Aid, Relief, and Economic Security (CARES) Act, 2020	<input type="checkbox"/> Yes Amount spent \$ If yes, describe how funds were used: <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A Describe:
d. Coronavirus Response and Relief Supplemental Appropriations (CRRSA) Act, 2021	<input type="checkbox"/> Yes Amount spent \$ If yes, describe how funds were used: <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A Describe:
e. American Rescue Plan (ARP) Act, 2021 Supplemental funding	<input type="checkbox"/> Yes Amount spent \$ If yes, describe how funds were used: <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A Describe:
f. ARP Act, 2021 Stabilization Grant set-aside ONLY (As a reminder 10% of the ARP Stabilization Grants could be set-aside for administrative expenses, supply building, and technical assistance. This question refers only to this 10%.)	<input type="checkbox"/> Yes Amount spent \$ If yes, describe how funds were used: <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A Describe:

4.12 Progress Update: Using the measures identified in section 7.3.6 of the CCDF Plan, report on the progress made during October 1, 2021 to September 30, 2022 on activities related to Developing, implementing, or enhancing a quality rating and improvement system (QRIS) and other transparent system of quality indicator. In addition, describe outcomes achieved, including examples and numeric targets where possible. If progress was not made, describe barriers toward achieving measurable outcomes. Due to the impacts of Covid-19 on child care centers, the Kentucky All STARS program was on a freeze until

December 2021. When the freeze was lifted, a high volume of child care centers reported they would not be able to renew and stay at a high-quality rating due to issues regarding staffing and training. In response, Kentucky All STARS extended renewals for one year for all child care centers and instead, had them complete an Annual Quality Review. This ensured that child care centers are receiving training and technical assistance from contracted sub recipient Child Care Aware of Kentucky. During this reporting period, 664 programs that had an All STARS Renewal. Of those program 511 programs completed an AQR.

The Annual Quality Review (AQR) is an electronic file audit providers complete to demonstrate their continued adherence to the Kentucky All STARS Standards of Quality. The providers complete a narrative of how they maintain each standard they were awarded credit for and how they demonstrate implementation. Measurable indicators include all training standards and staff qualifications. The AQR does not affect Technical Assistance (TA); rather, it provides an opportunity for providers to work with their assigned coach to ensure continued adherence to the standards.

5) Improving the supply and quality of child care programs 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 Provide the total number of state or territory-funded infant toddler specialists available to providers during October 1, 2021 to September 30, 2022.

Yes, specialists are available.

- a. Number of specialists available to all providers
- b. Number of specialists available to providers serving children who receive CCDF
- c. Number of specialists available specifically trained to support family child care providers
- d. Number of providers served
- e. Total number of children reached

No, there are no funded specialists.

N/A. Describe: **The Lead Agency has one full-time infant and toddler specialist who is responsible for facilitating a quarterly Infant and Toddler Specialist Network; develop Training of the Trainer events focusing on infant and toddler specific information; serve on a number of committees devoted to the 0-3 age group.**

5.2 Please provide the total number of programs receiving state or territory-funded on-site coaching in infant and toddler practice and the percentage of these programs that served CCDF children.

	Licensed child care centers	License-exempt child care centers	Licensed family child care homes	License-exempt family child care homes	In-home (care in the child's own home) providers
a. Number of programs receiving on-site coaching	0	0	0	0	0

	Licensed child care centers	License-exempt child care centers	Licensed family child care homes	License-exempt family child care homes	In-home (care in the child's own home) providers
b. Percent of total programs receiving on-site coaching that served children who receive CCDF	0%	0%	0%	0%	0%
c. N/A, describe					

5.3 How did the lead agency promote and expand child care providers' ability to provide developmentally appropriate services for infants and toddlers during October 1, 2021 to September 30, 2022?

Infant/toddler health consultants available. Describe: **There are also 8 Child Care Health Consultants and two Technical Assistance Specialists who are also available to providers throughout the state.**

Infant/toddler mental health consultants available. 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.**

Coordination with early intervention specialists providing services under Part C of the Individuals with Disabilities Education Act. Describe:

- Other. Describe: **The following ITSN meetings were held:**
- October 2021 - Focused on the goals and mission of the network as we regain normalcy post-pandemic**
 - May 2022 - Focused on FCCN and needs of infant toddler teachers**
 - August 2022 - Meeting canceled due to unavailability of specialists**

The Child Care Health Consultation for Healthy Start in the Child Care Program, through the Department for Public Health, provides training and technical assistance to child care providers.

Below Trainer Academy events were officered. Each event was offered during business hours and evening hours.

-Inclusive Physical Activities with Young Children with Disabilities

-ACES/PCES

-Neonatal Alcohol Syndrome

-Homelessness in ECE

-Avoiding Suspension & Expulsion in ECE

- Foster & Adoption in Kentucky

N/A. Describe:

5.5 Provide the number of staffed family child care networks supported by CCDF funds through direct agreement with a centralized hub or community-based agency during October 1, 2021 to September 30, 2022.

Number of staffed family child care networks: 5

Describe what the hub provides to participating family child care providers: - **The FCC networks provide individualized TA services, recruitment, start-up, and ongoing technical assistance. Training sessions that are specific to family**

childcare are also provided. Zoning assistance and startup with individualized participants has been a focus within the last few months.

- **Collaboration with businesses on connections.**

- **Presentations to chambers to support family child care providers**

No staffed family child care networks supported by CCDF funds.

N/A. Describe:

5.6 Spending

5.6.1 Did the lead agency spend funds from any of the following sources, in addition 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, 2021 to September 30, 2022?

Funding source	Was this funding source used?
a. CCDF quality set aside (from all available appropriation years that were spent during the fiscal year)	<input checked="" type="checkbox"/> Yes Amount spent \$ 1503726.30 If yes, describe how funds were used: Contract with WKY for Family Child Care (FCC) Support. <input type="checkbox"/> No <input type="checkbox"/> N/A Describe:
b. Non-CCDF funds (e.g., TANF funds spent directly on quality, Preschool Development Funds, state or local funds, etc.)	<input type="checkbox"/> Yes Amount spent: \$ If yes, describe source(s) of funding and how funds were used: <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A Describe:
c. Coronavirus Aid, Relief, and Economic Security (CARES) Act, 2020	<input type="checkbox"/> Yes Amount spent \$ If yes, describe how funds were used: <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A Describe:
d. Coronavirus Response and Relief Supplemental Appropriations (CRRSA) Act, 2021	<input type="checkbox"/> Yes Amount spent \$ If yes, describe how funds were used: <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A Describe:
e. American Rescue Plan (ARP) Act, 2021 Supplemental funding	<input checked="" type="checkbox"/> Yes Amount spent \$ 417864.06 If yes, describe how funds were used: Infant/Toddler Contracted Slots Initiative and FCC Startup Grants <input type="checkbox"/> No <input type="checkbox"/> N/A Describe:

Funding source	Was this funding source used?
f. ARP Act, 2021 Stabilization Grant set-aside ONLY (As a reminder 10% of the ARP Stabilization Grants could be set-aside for administrative expenses, supply building, and technical assistance. This question refers only to this 10%.)	<input type="checkbox"/> Yes Amount spent \$ If yes, describe how funds were used: <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A Describe:

5.7 Progress Update: Using the measures identified in section 7.4.2 of the CCDF Plan, report on the progress made during October 1, 2021 to September 30, 2022 on activities related to improving the supply and quality of child care programs for infants and toddlers. In addition, describe outcomes achieved, including examples and numeric targets where possible. If progress was not made, describe barriers toward achieving measurable outcomes. The staffed Family Child Care Network (FCCN) has been operating for the past year. There has been a steady increase in the number of certified family child care homes. DCC has also allocated ARPA discretionary funds to support the opening of new family child care homes by offering at \$5000 start-up grant. These grants were initially \$2,500 but were increased to \$5,000.

DCC has also setup an Infant Toddler Contracted Slots Program Infant (ITCS). The goals of the program include providing fiscal stability for high-quality child care providers serving eligible infants and toddlers and establishing a continuum of care for children and families in high- quality settings. These goals aim to improve the overall quality of infant and toddler services in Kentucky while strengthening the viability of our child care structure. There are 29 (376 slots) child care providers participating in the ITCS program. ITCS is a pilot project to support providers in receiving full funding for children on child care assistance along with ensuring their staff receive their CDA, they become a higher level in the QRIS program, and they provide a curriculum that is conducive to Kentucky's QRIS program. This is program is in the implementation phase and no data on outcomes achieved has been gathered. While Lead Agency was hopeful that this would increase overall infant and toddler capacity that has not necessarily occurred. The Lead Agency has switched from paying subsidy based on attendance to enrollment which is ultimately what the ITCS project was intended to do for infant and toddler slots.

Also, an Infant and Toddler Credential and an After School Credential are being developed. Draft regulations are in process and will be filed with the Legislative Research Commission

by summer 2023. ECE-TRIS is also developing badges within the system to encourage individual staff and providers to further their education and training specific to these identified age groups.

Lead Agency has identified no additional barriers with the current goals or new initiatives (Family Child Care Network or the Infant Toddler Contracted Slots Program).

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 Describe how CCDF quality funds were used to establish, expand, modify, or maintain a statewide system of child care resource and referral services during October 1, 2021 to September 30, 2022. In FFY 2022, Kentucky allocated approximately \$1,294,061.18 in quality dollars towards the maintenance of the statewide child care resource and referral (CCR&R) contract. The CCR&R contracts supports staffing and administrative costs for technical assistance, professional development, quality improvement, training, and child care referral services.

6.2 Spending

6.2.1 Did the lead agency spend funds from any of the following sources to establish, expand, modify, or maintain a statewide CCR&R during October 1, 2021 to September 30, 2022?

Funding source	Was this funding source used?
a. CCDF quality set aside (from all available appropriation years that were spent during the fiscal year)	<input checked="" type="checkbox"/> Yes Amount spent \$ 1294061.18 If yes, describe how funds were used: Quality Network contract with University of Kentucky. <input type="checkbox"/> No <input type="checkbox"/> N/A Describe:
b. Non-CCDF funds (e.g., TANF funds spent directly on quality, Preschool Development Funds, state or local funds, etc.)	<input type="checkbox"/> Yes Amount spent: \$ If yes, describe source(s) of funding and how funds were used: <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A Describe:

Funding source	Was this funding source used?
c. Coronavirus Aid, Relief, and Economic Security (CARES) Act, 2020	<input type="checkbox"/> Yes Amount spent \$ If yes, describe how funds were used: <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A Describe:
d. Coronavirus Response and Relief Supplemental Appropriations (CRRSA) Act, 2021	<input type="checkbox"/> Yes Amount spent \$ If yes, describe how funds were used: <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A Describe:
e. American Rescue Plan (ARP) Act, 2021 Supplemental funding	<input type="checkbox"/> Yes Amount spent \$ If yes, describe how funds were used: <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A Describe:
f. ARP Act, 2021 Stabilization Grant set-aside ONLY (As a reminder 10% of the ARP Stabilization Grants could be set-aside for administrative expenses, supply building, and technical assistance. This question refers only to this 10%.)	<input type="checkbox"/> Yes Amount spent \$ If yes, describe how funds were used: <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A Describe:

6.3 Progress Update: Using the measures identified in section 7.5.2 of the CCDF Plan, report on the progress made during October 1, 2021 to September 30, 2022 on activities related to establishing, expanding, modifying, or maintaining a statewide system of child care resource and referral services. In addition, describe outcomes achieved, including

examples and numeric targets where possible. If progress was not made, describe barriers toward achieving measurable outcomes. 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. Kentucky continues to improve upon consumer education efforts in supporting parents to make informed decisions in choosing quality care. Kentucky requested and is receiving targeted technical assistance to revamp the Division of Child Care's consumer education website. This work began in FFY 2020 and continued throughout FFY 2022. The Division has also maintained its presence on social media and increased usage of the agency listserv. The Division of Child Care is also convening a quarterly Consumer Education / Communication work group to make sure all contractual partners are sharing consistent messages and information.

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 (14,688), attendance at meetings (482), number of consultations provided (164), and the number of events/presentation given (129) and how many were in attendance (6,857);

Expansion of Child Care Services through:

- 1.) Technical assistance to potential providers including the number of initial consultations (140), walk-throughs (133), background check guidance (23), and technology support (46);
- 2.) Number of Getting Started sessions provided (104) complete with the provider type as well as total number of attendees (134) and satisfaction survey results summary;
- 3.) Tracking Potential Providers who have withdrawn (132) from the licensing process by provider type and reason for withdrawal;

Technical assistance offered to support Continuous Quality Improvement (8,865) measured by provider type and contact methods.

- 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 Curriculum;
- 3.) Top 4 TA Areas of Professional Development which includes ECE-TRIS, Recruitment, Training Hours and Professional Development Plans.
- 4.) Targeted TA Efforts (581) by age group, as well as those with LEP, experiencing homelessness (2), and those with special needs;

5.) Directed Plan of Correction (DPOC) Trainings including number of trainings conducted (122)

Training Efforts

- 1.) Total TA provided to individual trainers (327) broken down by content category;
- 2.) Number of Trainer Connections meetings (9) held along with the number of attendees (213);

Professional Development Efforts:

- 1.) Total TA provided to individual scholars (2,040) and the content category;
- 2.) Number of PD presentations held (17) along with the number of attendees (299);
- 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 and who attended; the number of individual consultations; 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.

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 Has the lead agency aligned CCDF health and safety standards with the following?

- a. Licensing standards

Yes.

No. If not, describe why:

- b. Caring for Our Children Basics

Yes.

No. If not, describe why:

- c. Head Start

Yes.

No. If not, describe why: **The Division of Child Care has taken steps toward aligning health and safety regulations by adjusting infant and toddler classroom age requirements with those of Early Head Start (EHS). With a continued increase in EHS partnerships, Kentucky intends to continue to work toward better alignment with EHS standards while also being sensitive to the fiscal and staffing concerns of child care owners and operators.**

- d. State pre-k

Yes.

No. If not, describe why: **Similar to Early Head Start, some of Kentucky's education and safety requirements for public school programs would not be fiscally viable for private child care to sustain.**

7.2 Complaints regarding child care providers received during October 1, 2021 to September 30, 2022

- 7.2.1 How many complaints were received regarding providers during October 1, 2021 to September 30, 2022?

- a. Licensed providers **1135**

- b. License-exempt providers **45**

- 7.2.2 What was the average length of time between receiving the complaint and taking steps to respond to a complaint during October 1, 2021 to September 30, 2022?

Priority 1 Investigation (most serious) ☑ 1-2 business days

Priority 2 Investigation ☑ 5 business days

Priority 3 Investigation ☑ 15 business days

7.2.3 How many complaints received an on-site follow-up inspection during October 1, 2021 to September 30, 2022? **160**

7.2.4 How many of the complaints resulted in one or more *substantiated* violations in the program or provider site identified during October 1, 2021 to September 30, 2022? **721**

7.2.5 How many child care providers had CCDF funding revoked as a result of an inspection during October 1, 2021 to September 30, 2022? **0**

7.2.6 How many child care providers closed as a result of an inspection during October 1, 2021 to September 30, 2022? **0**

7.2.7 Please provide any additional information regarding health and safety complaints and inspections in the state or territory during October 1, 2021 to September 30, 2022: **Starting January 2022 DRCC implemented additional tracking categories related to complaint intake and investigation to assess more specific data and trends. Categories include the nature of injury, type of treatment related to injury, and whether a critical area was injured.**

7.3 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, 2021 to September 30, 2022?

a. Licensed center-based programs **58**

b. License-exempt center-based programs **0**

c. Licensed family child care homes **2**

d. License-exempt family child care homes (care in providers' home) **0**

e. In-home (care in the child's own home) **0**

f. N/A Describe:

7.5 Spending:

7.5.1 Did the lead agency spend funds from any of the following sources on facilitating compliance with lead agency requirements for inspections, monitoring, health and safety standards and training, and lead agency licensing standards during October 1, 2021 to September 30, 2022?

Funding source	Was this funding source used?
a. CCDF quality set aside (from all available appropriation years that were spent during the fiscal year)	<input checked="" type="checkbox"/> Yes Amount spent \$ 6384572.26 If yes, describe how funds were used: Contract with our Office of Inspector General and overhead for certification and enrollment. <input type="checkbox"/> No <input type="checkbox"/> N/A Describe:
b. Non-CCDF funds (e.g., TANF funds spent directly on quality, Preschool Development Funds, state or local funds, etc.)	<input checked="" type="checkbox"/> Yes Amount spent: \$ 1075.93 If yes, describe source(s) of funding and how funds were used: State funds were used for office supplies and postage. <input type="checkbox"/> No <input type="checkbox"/> N/A Describe:
c. Coronavirus Aid, Relief, and Economic Security (CARES) Act, 2020	<input type="checkbox"/> Yes Amount spent \$ If yes, describe how funds were used: <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A Describe:
d. Coronavirus Response and Relief Supplemental Appropriations (CRRSA) Act, 2021	<input checked="" type="checkbox"/> Yes Amount spent \$ 468928.25 If yes, describe how funds were used: Funds were used for Background checks for child care workforce. <input type="checkbox"/> No <input type="checkbox"/> N/A Describe:
e. American Rescue Plan (ARP) Act, 2021 Supplemental funding	<input type="checkbox"/> Yes Amount spent \$ If yes, describe how funds were used: <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A Describe:

Funding source	Was this funding source used?
f. ARP Act, 2021 Stabilization Grant set-aside ONLY (As a reminder 10% of the ARP Stabilization Grants could be set-aside for administrative expenses, supply building, and technical assistance. This question refers only to this 10%.)	<input type="checkbox"/> Yes Amount spent \$ If yes, describe how funds were used: <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A Describe:

7.6 Progress Update: Using the measures identified in section 7.6.3 of the CCDF Plan, report on the progress made during October 1, 2021 to September 30, 2022 on activities related to facilitating compliance with lead agency requirements for inspection, monitoring, health and safety standards and training, and lead agency licensing standards. In addition, describe outcomes achieved, including examples and numeric targets where possible. If progress was not made, describe barriers toward achieving measurable outcomes. The Division of Child Care (DCC) has maintained its communication with partner agencies, stakeholders, and providers to improve transparency and ensure all entities receive consistent information. There has been more collaboration between all parties.

DCC sent out a total of 65 listserv messages between October 1, 2021 to September 30, 2022 informing those subscribed (providers, administrators, partner agencies and stakeholders). Topics varied from changes in administrative regulations; how federal funds would be spent and how to apply; changes to processes within the Cabinet, etc. These listserv messages were also shared on the Kentucky Department for Community Based Services social media, contract agencies' websites and social media, and through advocacy and stakeholder groups.

DCC also setup several monthly townhall meetings for child care providers, administrators, partner agencies and stakeholders between October 1, 2021, and September 30, 2022, providing policy clarification of regulations. The monthly townhall meetings focused on child care regulations, policy, and programs. Information was sent out through listserv messages of informational meetings with varied topics and dates (e.g., January 18, 2022, Training Requirements; February 8, 2022, Completing the Plan of Correction; February 28, 2022, Food/Meal Requirements; April 12, 2022, CCAP Billing Requirements; May 10, 2022, Directed Plan of Correction; June 14, 2022, Background Checks). As a result of these townhall meetings, there is no data to support an increase in quality as the Lead Agency's

QRIS program is still recovering from the impacts of COVID and extending AQR submissions in place of complete rating visit.

8) Evaluating and assessing the quality of child care programs in the state or territory, 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 What measure(s) or tool(s) and studies did the lead agency use to evaluate and assess the quality of programs and effective practice in center-based programs during October 1, 2021 to September 30, 2022?

To measure program quality, describe: The Environmental Rating Scales (ITERS-R, ECERS-3, and SACERS-U) are used by reliable coaching staff to provide ongoing technical assistance and continuous quality improvement advice. In addition, those same scales are used by reliable raters during official TQRIS rating visits. The Environment Rating Scales are a research based, age-appropriate observation tool that is used in at least 36 states for participation in a TQRIS program. The tools (ITERS-R, ECERS-3, SACERS-U and FCCERS-R) are used in the appropriate setting for ages of children served. The use of the tools requires regular reliability amongst all who administer them. The coaches provide ongoing technical assistance and continuous quality improvement advice.

In addition, the KY ALL STAR Raters are trained to ensure reliability on the scales that are administered for an official TQRIS rating visit. A program should not focus on a perfect score (perfection is not possible), minimize the low scores and maximize the high scores. Choose what can successfully be improved, do not focus on the things that cannot be changed due to location of the playground, interior issues etc.

To measure effective practice, describe: The Kentucky All STARS Standard of Quality are used to measure effective practices in four domains (Classroom & Instructional Quality; Staff Qualifications & Professional Development; Family & Community Engagement; and Administrative & Leadership Practices. (* Lead Agency's domain's tie back to the basic components of quality).

The basic components of quality are:

- Protection of children's health and safety,
- Building relationships with; children, parents, extended family, and community

☒ Opportunities for stimulation and learning from experiences

[x] To measure age appropriate child development, describe: **There are two ways to measure quality in early childhood settings:**

Structural Quality- creates a framework for the level of quality the children experience (staff: child ratios, staff education, wages and cost of care. Three of those structures are supported within our 4 domains).

Global Process-the environment that the children experience that has a direct effect on their development (interactions with people, what materials they get to play with and how they experience time. This is what the scales measure).

There are three basic components of **☒process quality☒** that the ERS measures:

--Building positive relationships with other children and with the adults who educate and care for them. Aspects for interactions assessed: positive interactions during routines, play and group times, chances for children to select activities that interest them and make their own choices of who and where to play, having a schedule that meets the needs of the children so that negative interactions do not occur and plenty of time for physical play for children to release energy at appropriate times.

--Age-appropriate learning opportunities that meet a wide range of developmental needs of the children. The scales evaluate whether the teaching strategies are appropriate and effective for use of each child. It evaluates the appropriateness of instruction by children's obvious responses in terms of engagement, frustration or interest and enthusiasm. The scale assesses (during routine care as well as play) whether the children are offered opportunities for independent exploration, staff input into learning and moving children appropriately towards literacy.

--Protection of children's health and safety. Attention to safety and health issues are more important to children that are cared for in a group setting. The scales help us determine how well the children are cared for and how well they are protected, minimizing hazards and supervising for safety.

[x] Other, describe: **Kentucky All STARS is a hybrid model requiring some standards at the lower levels and allowing providers to choose standards to gain points toward higher levels of quality. With that, there is not a requirement that programs measure age-appropriate child development. However, points may be awarded for providers who ensure developmental screenings, conduct ongoing curriculum-based assessments, and support IFSP/IEP goals of**

individual children. This domain is given priority by requiring at least 8 points, so the majority of programs meet at least one of these standards.

N/A. Describe:

8.2 What measure(s) or tool(s) and studies did the lead agency use to evaluate and assess the quality of programs and effective practice in family child care programs during October 1, 2021 to September 30, 2022?

[x] To measure program quality, describe: The FCCERS-R is used by reliable coaching staff to provide ongoing technical assistance and continuous quality improvement advice. In addition, the same scale issued by reliable raters during the official TQRIS rating visit.

[x] To measure effective practice, describe: The Kentucky All STARS Standards of Quality are used to measure effective practices in four domains (Classroom & Instructional Quality; Staff Qualifications & Professional Development; Family & Consumer Engagement; and Administrative & Leadership Practices).

[x] To measure age appropriate child development, describe: There are two ways to measure quality in early childhood settings:

Structural Quality- creates a framework for the level of quality the children experience (staff: child ratios, staff education, wages and cost of care. Three of those structures is supported within our 4 domains).

Global Process-the environment that the children experience that has a direct effect on their development (interactions with people, what materials they get to play with and how they experience time. This is what the scales measure).

There are three basic components of "process quality" that the ERS measures:

--Building positive relationships with other children and with the adults who educate and care for them. Aspects for interactions assessed: positive interactions during routines, play and group times, chances for children to select activities that interest them and make their own choices of who and where to play, having a schedule that meets the needs of the children so that negative interactions do not occur and plenty of time for physical play for children to release energy at appropriate times.

--Age-appropriate learning opportunities that meet a wide range of developmental needs of the children. The scales evaluate whether the teaching strategies are appropriate and effective for use of each child. It evaluates the appropriateness of instruction by children's obvious responses in terms of engagement, frustration or interest and enthusiasm. The scale assesses (during routine care as well as play) whether the children are offered opportunities for independent exploration, staff input into learning and moving children appropriately towards

literacy.

•
--Protection of children's health and safety. Attention to safety and health issues are more important to children that are cared for in a group setting. The scales help us determine how well the children are cared for and how well they are protected, minimizing hazards and supervising for safety.

Other, describe: Kentucky All STARS is a hybrid model requiring some standards at the lower levels and allowing providers to choose standards to gain points toward higher levels of quality. With that, there is not a requirement that programs measure age-appropriate child development. However, points may be awarded for providers who ensure developmental screenings, conduct ongoing curriculum-based assessments, and support IFSP/IEP goals of individual children. This domain is given priority by requiring at least 8 points, so the majority of programs meet at least one of these standards.

N/A. Describe:

8.3 Spending:

8.3.1 Did the lead agency spend funds from any of the following sources on evaluating and assessing the quality of child care programs, practice, or child development during October 1, 2021 to September 30, 2022?

Funding source	Was this funding source used?
a. CCDF quality set aside (from all available appropriation years that were spent during the fiscal year)	<input type="checkbox"/> Yes Amount spent \$ If yes, describe how funds were used: <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A Describe:

Funding source	Was this funding source used?
b. Non-CCDF funds (e.g., TANF funds spent directly on quality, Preschool Development Funds, state or local funds, etc.)	<input checked="" type="checkbox"/> Yes Amount spent: \$ 4059939.00 If yes, describe source(s) of funding and how funds were used: Lead Agency used Tobacco Settlement Funds were used to cover All Stars Program Incentives around all stars levels and the number of subsidy children served. Monies increase based upon higher levels of quality achieved in All Stars which requires higher scores for Kentucky All Stars standards and ERS. <input type="checkbox"/> No <input type="checkbox"/> N/A Describe:
c. Coronavirus Aid, Relief, and Economic Security (CARES) Act, 2020	<input type="checkbox"/> Yes Amount spent \$ If yes, describe how funds were used: <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A Describe:
d. Coronavirus Response and Relief Supplemental Appropriations (CRRSA) Act, 2021	<input type="checkbox"/> Yes Amount spent \$ If yes, describe how funds were used: <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A Describe:
e. American Rescue Plan (ARP) Act, 2021 Supplemental funding	<input type="checkbox"/> Yes Amount spent \$ If yes, describe how funds were used: <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A Describe:

Funding source	Was this funding source used?
f. ARP Act, 2021 Stabilization Grant set-aside ONLY (As a reminder 10% of the ARP Stabilization Grants could be set-aside for administrative expenses, supply building, and technical assistance. This question refers only to this 10%.)	<input type="checkbox"/> Yes Amount spent \$ If yes, describe how funds were used: <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A Describe:

8.4 Progress Update: Using the measures identified in section 7.7.2 of the CCDF Plan, report on the progress made during October 1, 2021 to September 30, 2022 on activities related to evaluating and assessing the quality of child care programs in the state or territory, including evaluating how programs positively impact children. In addition, describe outcomes achieved, including examples and numeric targets where possible. If progress was not made, describe barriers toward achieving measurable outcomes. Using the measures identified in section 7.7.2 of the CCDF Plan, report on the progress made during October 1, 2021, to September 30, 2022, on activities related to evaluating and assessing the quality of child care programs in the state or territory, including evaluating how programs positively impact children. In addition, describe outcomes achieved, including examples and numeric targets where possible. If progress was not made, describe barriers toward achieving measurable outcomes. Using the TQRIS Rating levels based on Kentucky's Early Childhood Standards and research-based indicators of quality, Kentucky set the target of 45% of all childcare centers statewide would be at a high-quality level (3-5) within the state's TQRIS. Kentucky finished FFY 22 with 38% of participating child care centers being at a high-quality rating level. The continued drop-in High-Quality Percentage has showed the continued impact of Covid-19 on child care centers, especially around staffing and training for staff. DCC conducts quarterly analysis of movement in Kentucky All STARS to measure increases in rating levels and progression of scores on Environment Rating Scales. Based on the last quarterly analysis, the lead agency is currently at 38% high quality. This number is lower than average due the impact of COVID-19.

9) Supporting 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 How many providers did the lead agency support in their pursuit of accreditation during October 1, 2021 to September 30, 2022?

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:

9.2 Spending

9.2.1 Did the lead agency spend funds from any of the following sources on accreditation during October 1, 2021 to September 30, 2022?

Funding source	Was this funding source used?
a. CCDF quality set aside (from all available appropriation years that were spent during the fiscal year)	<input type="checkbox"/> Yes Amount spent \$ If yes, describe how funds were used: <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A Describe:
b. Non-CCDF funds (e.g., TANF funds spent directly on quality, Preschool Development Funds, state or local funds, etc.)	<input type="checkbox"/> Yes Amount spent: \$ If yes, describe source(s) of funding and how funds were used: <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A Describe:

Funding source	Was this funding source used?
c. Coronavirus Aid, Relief, and Economic Security (CARES) Act, 2020	<input type="checkbox"/> Yes Amount spent \$ If yes, describe how funds were used: <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A Describe:
d. Coronavirus Response and Relief Supplemental Appropriations (CRRSA) Act, 2021	<input type="checkbox"/> Yes Amount spent \$ If yes, describe how funds were used: <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A Describe:
e. American Rescue Plan (ARP) Act, 2021 Supplemental funding	<input type="checkbox"/> Yes Amount spent \$ If yes, describe how funds were used: <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A Describe:
f. ARP Act, 2021 Stabilization Grant set-aside ONLY (As a reminder 10% of the ARP Stabilization Grants could be set-aside for administrative expenses, supply building, and technical assistance. This question refers only to this 10%.)	<input type="checkbox"/> Yes Amount spent \$ If yes, describe how funds were used: <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A Describe:

9.3 Progress Update: Using the measures identified in section 7.8.2 of the CCDF Plan, report on the progress made during October 1, 2021 to September 30, 2022 on activities related to supporting providers in the voluntary pursuit of accreditation. In addition, describe outcomes achieved, including examples and numeric targets where possible. If progress was not made, describe barriers toward achieving measurable outcomes. Kentucky does not use any funds to support pursuing accreditation.

10) Supporting 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 Quality Indicators: Does the lead agency have quality improvement standards that include indicators covering the following areas beyond what is required for licensing?

Yes, 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
- Mental health for staff/employees
- 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:

No

10.2 Spending

10.2.1 Did the lead agency spend funds from any of the following sources on supporting the development or adoption of high-quality program standards related to health, mental health, nutrition, physical activity, and physical development during October 1, 2021 to September 30, 2022?

Funding source	Was this funding source used?
a. CCDF quality set aside (from all available appropriation years that were spent during the fiscal year)	<input type="checkbox"/> Yes Amount spent \$ If yes, describe how funds were used: <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A Describe: The lead agency did not use any CCDF quality set aside funds toward the development or adoption of optional quality standards related to health, mental health, nutrition, physical activity, or physical development during this reporting period.
b. Non-CCDF funds (e.g., TANF funds spent directly on quality, Preschool Development Funds, state or local funds, etc.)	<input type="checkbox"/> Yes Amount spent: \$ If yes, describe source(s) of funding and how funds were used: <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A Describe:
c. Coronavirus Aid, Relief, and Economic Security (CARES) Act, 2020	<input type="checkbox"/> Yes Amount spent \$ If yes, describe how funds were used: <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A Describe:
d. Coronavirus Response and Relief Supplemental Appropriations (CRRSA) Act, 2021	<input type="checkbox"/> Yes Amount spent \$ If yes, describe how funds were used: <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A Describe:
e. American Rescue Plan (ARP) Act, 2021 Supplemental funding	<input type="checkbox"/> Yes Amount spent \$ If yes, describe how funds were used: <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A Describe:

Funding source	Was this funding source used?
f. ARP Act, 2021 Stabilization Grant set-aside ONLY (As a reminder 10% of the ARP Stabilization Grants could be set-aside for administrative expenses, supply building, and technical assistance. This question refers only to this 10%.)	<input type="checkbox"/> Yes Amount spent \$ If yes, describe how funds were used: <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A Describe:

10.3 Progress Update: Using the measures identified in section 7.9.2 of the CCDF Plan, report on the progress made during October 1, 2021 to September 30, 2022 on activities related to supporting the development or adoption of high-quality program standards related to health, mental health, nutrition, physical activity, and physical development. In addition, describe outcomes achieved, including examples and numeric targets where possible. If progress was not made, describe barriers toward achieving measurable outcomes. Due to the impacts of Covid-19 on child care centers, the Kentucky All STARS program was on a freeze until December 2021. When the freeze was lifted, a high volume of child care centers reported they would not be able to renew and stay at a high quality rating due to issues regarding staffing and training. In response, Kentucky All STARS extended renewals for one year for all child care centers and instead, had them complete an Annual Quality Review. This ensures that child care centers are receiving training and technical assistance from contracted sub recipient Child Care Aware of Kentucky.

Lead Agency captures these in a combination of the environmental Rating Scales in conjunction with the All STARS Standards:

The Environment Rating Scales are a research based, age-appropriate observation tool that is used in at least 36 states for participation in a TQRIS program. The tools (ITERS-R, ECERS-3, SACERS-U and FCCERS-R) are used in the appropriate setting for ages of children served. The use of the tools requires regular reliability amongst all who administer them. The coaches provide ongoing technical assistance and continuous quality improvement advice. In addition, the KY ALL STAR Raters are trained to ensure reliability on the scales that are administered for an official TQRIS rating visit.

A program should not focus on a perfect score (perfection is not possible), minimize the low scores and maximize the high scores. Choose what can successfully be improved, do not focus on the things that cannot be changed due to location of the playground, interior

issues etc.

***To measure effective practice**

Kentucky ALL STARS Standards of Quality is used to measure effective practices in four domains (Classroom & Instructional Quality; Staff Qualifications & Professional Development; Family & Community Engagement; and Administrative & Leadership Practices) (** our domains tie back to the basic components of quality**).

The basic components of quality are:

- ☑ Protection of children's health and safety,
- ☑ Building relationships with; children, parents, extended family, and community
- ☑ Opportunities for stimulation and learning from experiences

There are two ways to measure quality in early childhood settings:

Structural Quality- creates a framework for the level of quality the children experience (staff: child ratios, staff education, wages and cost of care. **3 of those structures is supported within our 4 domains)

Global Process-the environment that the children experience that has a direct effect on their development (interactions with people, what materials they get to play with and how they experience time. This is what the scales measure).

There are three basic components of ☑process quality☑ that the ERS measures:

--Building positive relationships with other children and with the adults who educate and care for them. Aspects for interactions assessed: positive interactions during routines, play and group times, chances for children to select activities that interest them and make their own choices of who and where to play, having a schedule that meets the needs of the children so that negative interactions do not occur and plenty of time for physical play for children to release energy at appropriate times.

--Age-appropriate learning opportunities that meet a wide range of developmental needs of the children. The scales evaluate whether the teaching strategies are appropriate and effective for use of each child. It evaluates the appropriateness of instruction by children's obvious responses in terms of engagement, frustration or interest and enthusiasm. The scale assesses (during routine care as well as play) whether the children are offered opportunities for independent exploration, staff input into learning and moving children appropriately towards literacy.

--Protection of children's health and safety. Attention to safety and health issues are more important to children that are cared for in a group setting. The scales help us determine

how well the children are cared for and how well they are protected, minimizing hazards and supervising for safety.

The All STARS Standards cover four domains Classroom & Instructional Quality; Staff Qualifications & Professional Development; Family & Consumer Engagement; and Administrative & Leadership Practices.

We are not currently capturing health, mental health, nutrition but look to add these when the regulations open.

11) 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

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 Did the state or territory set up a grant program (NOT including American Rescue Plan Act stabilization grants) designed to sustain the child care supply or provide sustainability funding to child care providers due to the COVID-19 pandemic during October 1, 2021 to September 30, 2022?

Yes. If yes, describe **\$82,680 was paid out through the Coronavirus Response and Relief Supplemental Appropriations (CRRSA). These grants overlapped from the last federal fiscal year.** and check which types of providers were eligible and number served.

- Licensed center-based programs **3**
- License-exempt center-based programs
- Licensed family child care homes **1**
- License-exempt family child care homes (care in providers' home)
- In-home (care in the child's own home)
- Other (explain)

No.

N/A. Describe:

11.2 Did the lead agency provide supports and resources in response to any of the following emergent health and safety needs of children and/or providers either through funding or directly in-kind during October 1, 2021 to September 30, 2022 (check all that apply)?

- COVID-19 vaccinations. Describe:
- COVID-19 testing. Describe:
- Access to infant formula. Describe:
- Cleaning supplies and/or personal protective equipment (PPE). Describe:
- Post-disaster recovery efforts. Describe:
- Other. Describe:

N/A. Describe: **The lead agency didn't provide any supports or resources in response to the above emergent health and safety needs of children and/or providers either through funding or directly in-kind during October 1, 2021 to September 30, 2022.**

11.3 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, 2021 to September 30, 2022?

Yes. Describe:

No

11.4 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, 2021 to September 30, 2022?

Yes. Describe findings:

No

11.5 Did the state/territory fund 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, 2021 to September 30, 2022? 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:

11.6 Did the state/territory integrate Diversity, Equity, and Inclusion (DEI) practices into quality initiatives during October 1, 2021 to September 30, 2022? Check all that apply.

Reviewing policies/program design using DEI assessment tools

Development of DEI assessment tools

Incorporate into QRIS

Incorporate into PD Framework

Strategic planning

Supply building efforts

Strengthened outreach/communication to better understand diverse community needs

and assets

Other. Describe:

11.7 How many providers received the following from October 1, 2021 to September 30, 2022?

	Total	Licensed or registered center-based programs	License-exempt center-based programs	Licensed or registered family child care	License-exempt family child care (care in providers' home)	In-home (care in the child's own home)
a) Increased rates	0	0	0	0	0	0
b) Increased wages		0	0	0	0	0
c) Benefits: health insurance	0	0	0	0	0	0
d) Mental health supports	0	0	0	0	0	0
e) Start-up funds	50	22	0	28	0	0
f) Other:	0	0	0	0	0	0

11.7a Describe:

11.7b Describe:

11.7c Describe:

11.7d Describe:

11.7e Describe: **ARPA CCDF Discretionary funds were used to provide start-up grants for those opening programs in identified child care deserts and those opening new family child care homes.**

11.8 Spending:

11.8.1 Did the lead agency spend funds from any of the following sources on **other activities to improve the quality of child care services** during October 1, 2021 to September 30, 2022?

Funding source	Was this funding source used?
a. CCDF quality set aside (from all available appropriation years that were spent during the fiscal year)	<input type="checkbox"/> Yes Amount spent \$ If yes, describe how funds were used: <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A Describe:
b. Non-CCDF funds (e.g., TANF funds spent directly on quality, Preschool Development Funds, state or local funds, etc.)	<input type="checkbox"/> Yes Amount spent: \$ If yes, describe source(s) of funding and how funds were used: <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A Describe:
c. Coronavirus Aid, Relief, and Economic Security (CARES) Act, 2020	<input type="checkbox"/> Yes Amount spent \$ If yes, describe how funds were used: <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A Describe:
d. Coronavirus Response and Relief Supplemental Appropriations (CRRSA) Act, 2021	<input checked="" type="checkbox"/> Yes Amount spent \$ 82680.00 If yes, describe how funds were used: Clean-up sustainability payments made to 5 individual providers. <input type="checkbox"/> No <input type="checkbox"/> N/A Describe:
e. American Rescue Plan (ARP) Act, 2021 Supplemental funding	<input checked="" type="checkbox"/> Yes Amount spent \$ 2004092.98 If yes, describe how funds were used: ARPA CCDF Discretionary funds were used to provide start-up grants for those opening programs in identified child care deserts and those opening new family child care homes. Another initiative using these funds was the Infant Toddler Slot (ITCS) Project to address the supply and demand issue related to the shortage of infant toddler slots.

Funding source	Was this funding source used?																				
	<table border="0" style="width: 100%;"> <tr> <td style="width: 60%;">Initiative</td> <td style="text-align: right;">Total Spent in</td> </tr> <tr> <td>FFY 22</td> <td style="text-align: right;">Funding Source</td> </tr> <tr> <td>Desert Area Start up</td> <td style="text-align: right;">\$1,586,228.92</td> </tr> <tr> <td>ARPA Discretionary</td> <td></td> </tr> <tr> <td>FCC Start up</td> <td style="text-align: right;">\$55,000.00</td> </tr> <tr> <td></td> <td style="text-align: right;">ARPA</td> </tr> <tr> <td>Discretionary</td> <td></td> </tr> <tr> <td>Infant Toddler Slots Project</td> <td style="text-align: right;">\$362,864.06</td> </tr> <tr> <td>ARPA Discretionary</td> <td></td> </tr> <tr> <td>Total</td> <td style="text-align: right;">\$2,004,092.98</td> </tr> </table> <p><input type="checkbox"/> No <input type="checkbox"/> N/A Describe:</p>	Initiative	Total Spent in	FFY 22	Funding Source	Desert Area Start up	\$1,586,228.92	ARPA Discretionary		FCC Start up	\$55,000.00		ARPA	Discretionary		Infant Toddler Slots Project	\$362,864.06	ARPA Discretionary		Total	\$2,004,092.98
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f. ARP Act, 2021 Stabilization Grant set-aside ONLY (As a reminder 10% of the ARP Stabilization Grants could be set-aside for administrative expenses, supply building, and technical assistance. This question refers only to this 10%.)	<input type="checkbox"/> Yes Amount spent \$ If yes, describe how funds were used: <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A Describe:																				

11.9 Progress Update: Using the measures identified in section 7.10.1 of the CCDF Plan, report on the progress made during October 1, 2021 to September 30, 2022 on activities related to 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. In addition, describe outcomes achieved, including examples and numeric targets where possible. If progress was not made, describe barriers toward achieving measurable outcomes. **The Lead Agency did not identify any new goals or initiatives in Section 7.10.1 of the 2022-20224 CCDF State Plan. However, the Lead Agency has a number of projects funded by ARPA that should be noted:**

CPR and First Aid Training

To ensure the preparedness of our programs and the safety of all of our children and staff, we utilized CRSSA funding to cover the cost of first aid and CPR certification for all licensed programs in our state through the utilization of our Child Care Resource and Referral

Agencies to provide the training. We have utilized \$ 1,091,887.55 during this time frame to support the training of 2,778 early educators. This will continue until September 2023.

Preschool Partnership Grant

The preschool system in Kentucky is mainly a part-day or part-week program providing support to children who are diagnosed with developmental delays or are in a socioeconomic hardship. The Division of Child Care is working with the Kentucky Department of Education on a preschool partnership opportunity to provide extended early education services to our preschool-age children that qualify for child care assistance as well as children with IEPs. This partnership is between a school district and a child care center or centers that provide extra hours of services. We are still in the collection phase of data on the programs, but we do have 58 school districts across the state partnering with 91 child care centers to provide the extra hours of preschool services to support the children that they serve. This will allow our state to increase kindergarten readiness skills and assist with the extra social-emotional supports needed within our communities.

ITCS Contracted Slots Pilot Project

Kentucky is in need of infant and toddler care across the state. One population that is at more of a disadvantage is our children on child care assistance. To see how we can illuminate this issue we have implemented a pilot project that supports providers with financial support, training, curriculum, and social-emotional supports. This pilot project is to support providers in receiving full funding for children on child care assistance along with ensuring their staff receives their CDA, they become a higher level in our Quality Rating and Improvement System (QRIS), and they provide a curriculum that is conducive to our All-Stars requirements. This pilot project encompasses 27 early education programs which all have to provide services to children on Child Care Assistance and provide slots for 329 infants and toddlers. This program is also in the implementation phase and ongoing until June 2023.

Training Academies and the DCC Training of Trainers

The Division of Child Care has held several Training of Trainers and two year-long Training Academies on specific topics pertaining to Social Emotional and Special Needs of Young Children, and Business Administration of child care providers.

The TOT's have been on specific topics that have been asked for across the state like:

- ☒ Autism 101, which was presented by Allyson Shelton and Calvonia Radford in Feb. 2022 and had a total 122 credentialed participants.
- ☒ Sensory Integration in Early Childhood Classroom presented by Sarah Vanover in March 2022 and had a total of 121 credentialed participants
- ☒ Universal Design in Early Childhood Classrooms presented by Lauren Rachels in August 2022 with 63 credentialed participants

The Training Academies held 12 training sessions per academy on specific topics pertaining to either special needs and social-emotional supports or Business administration topics. We had a total of 62 participants with 37 in the special needs track and 25 in the business administration track. Each training was held by a credentialed trainer or a national trainer that was approved through the Division of Child Care.

12) 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 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. The Office of Inspector General assesses all serious injuries and deaths through a process which begins with a regional review. Regional Program Managers assess reports of serious injury or death through a screening process assigning priority to reports for investigations. This review includes assessments for civil penalties and/or adverse action recommendations. During monthly meetings, leadership staff assess occurrences of the events and policies, and procedural changes as needed. OIG does not distinguish between programs based on the receipt of CCDBG funds.

OIG also provides a monthly report to Lead Agency providing aggregate data for all actions taken (pre-licensure visits, monitoring visits, complaints, adverse action, etc.). OIG also provides Lead Agency with all notices of Emergency Suspension and Revocations as they occur. The Director for the Division of Regulated Child Care and the Director for the Lead Agency also meet on a monthly basis to discuss contract deliverables and any areas or providers of concern.

12.2 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. No changes were made due to the annual review or assessment. However, conversations have begun about how to improve the process during the next review period. OIG Leadership meets at least monthly with leadership of DCC to present concerns regarding regulatory oversight as the regulations are promulgated by DCC. OIG has developed an inspection tool for consistent inspection and oversight of Registered Providers. OIG has also adopted the inspection tools for licensed and certified providers to reflect the last regulation updates. During the last review period, OIG/DRCC resumed the operation of the Civil Penalties program which includes the issuance of civil monetary penalties resulting from certain ☒Type A☒ and ☒Type B☒ violations.

13) American Rescue Plan (ARP) Act Child Care Stabilization Grants

Goal: To ensure the lead agency implements an equitable stabilization grant program. The American Rescue Plan (ARP) Act included approximately \$24 billion for child care stabilization grants, representing an important opportunity to stabilize the child care sector and do so in a way that builds back a stronger child care system that supports the developmental and learning needs of children, meets parents' needs and preferences with equal access to high-quality child care, and supports a professionalized workforce that is fairly and appropriately compensated for the essential skilled work that they do. Lead agencies must spend most stabilization funds as subgrants to qualified child care providers to support the stability of the child care sector during and after the COVID-19 public health emergency. Section 13 should be used to report on ARP Stabilization Grants ONLY.

13.1 Did you run more than one grant program? If so, list the number of separate grant programs and describe their uses.

Yes. Describe:

No

13.2 Which of the following methods were used to support workforce compensation (e.g., bonuses, stipends, increased base wages, or employee benefits) with stabilization grants? (check all that apply)

Targeted grants to support workforce compensation (no other allowable uses)

Providing bonus funds to providers that increased child care staff compensation through stabilization grants

Requiring a specific percentage or amount of stabilization grant funding go toward child care staff compensation increases. Percent or amount for staff compensation:

Other (Describe): **Each provider who applied for ARPA Stabilization funds applied for a tier which was dependent on the base hourly wage for all of their employees. Providers had four months to bring all of their employees up to the tier's base pay rate.**

13.3 Describe the methods used to eliminate fraud, waste, and abuse when providing stabilization grants (e.g., validated identity through the lead agency licensing system or conducted identity verification through a data match with state tax records):

Kentucky eligibility requirements for the stabilization grants include providers that are existing licensed, certified, or registered childcare providers in the Commonwealth and that are active in the Office of Inspector General, Division of Regulated Childcare (DRCC) database as of March 11, 2021. These providers must also participate in the Kentucky All-STARS program and have the ability to accept children enrolled in Kentucky's Child Care Assistance Program

(CCAP).

Additionally, Kentucky has a third-party consulting firm that is currently conducting audit and compliance reviews of each provider receiving stabilization grants. All programs who have received sustainability grant funds will be audited at least one time during the contract period.

Programs who have moved up in compensation tier level will be audited to validate the increase. All tier 2 and 3 programs will also be required to submit payroll documentation as verification that all staff are being paid according to minimum respective requirements and other expenditures are sampled by our vendor for additional review and testing.

The Third-Party Vendor pulls a random sample of providers to be reviewed each audit cycle. The provider is required to enter the total amount of the ARPA Stabilization Payments they have spent in each of the following categories: Personnel; Other Staff Compensation; Facility Cost; Cleaning and Sanitation Supplies; Equipment or Supplies; Mental Health Supports; Debt Payment; or Other (with explanation). The provider is also required to list payroll information such as payroll frequency; and names of employees with position, gross pay, number of hours worked, and hourly rate. The provider is also required to upload supporting documentation.