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Quality Progress Report (QPR)
For
Indiana
FFY 2023

QPR Status: Accepted as of 2024-02-28 20:47:02 GMT

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, 2022, through September 30, 2023), 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, 2023.

Glossary of Terms

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

Center-based child care provider means a provider licensed or otherwise authorized to provide child care services for fewer than 24 hours per day per child in a non-residential setting, unless in care in excess of 24 hours is due to the nature of the parent(s)' work. Associated terms include "child care centers" and "center-based programs."

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

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

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

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

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

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

Provider means the entity providing child care services.

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

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

1) Overview

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

1.1 State or Territory Child Care Provider Population

1.1.1 Total Number of Licensed Providers:

Enter the total number of licensed child care providers that operated in the state or territory as of September 30, 2023. These counts should include all licensed child care providers, not just those serving children receiving CCDF subsidies.

Licensed center-based programs **768**

Unable to provide number. Indicate reason:

Additional clarification: Based on most recent submission of the FY 2023 ACF-800 data there were 587 licensed center-based programs receiving CCDF funding. Please report the number of ALL licensed center-based programs operating in the state here, regardless of receipt of CCDF funding.

Licensed family child care homes **2150**

Unable to provide number. Indicate reason:

Additional clarification: Based on most recent submission of the FY 2023 ACF-800 data there were 1834 licensed family child care homes receiving CCDF funding. Please report the number of ALL licensed family child care homes operating in the state here, regardless of receipt of CCDF funding.

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

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

2.1 Lead Agency Progression of Professional Development

2.1.1 Professional Development Registry:

Did the lead agency use a workforce registry or professional development registry to track progression of professional development during October 1, 2022, to September 30, 2023?

Yes. If yes, describe: **Indiana tracks training data in a platform called, Indiana Learning Paths (ILP), which provides a robust tracking mechanism. Caregiver qualifications are tracked in a module of the Office of Early Childhood and Out-of-School Learning's Child Care Information System (CCIS).**

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

2.1.2 Participation in Professional Development Registry:

Are any teachers/providers required to participate?

Yes. If yes, describe:

No. If no, describe: **Early childhood and out-of-school time professionals are encouraged to utilize the state sponsored training platform but not required by any state law or policy to do so. This training platform is offered for free to any participant in the state and offers a wide variety of training options making it highly utilized throughout Indiana.**

2.1.3 Number of Participants in Professional Development Registry:

Total number of participants in the registry as of September 30, 2023 **26058**

2.1.4 Spending - Professional Development Registry:

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

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

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

No

2.2 Workforce Development

2.2.1 Professional Development and Career Pathways Support:

How did the lead agency help teachers/providers progress in their education, professional development, and/or career pathway between October 1, 2022 and September 30, 2023 (check all that apply)? If selected, how many staff received each type of support?

- Scholarships (for formal education institutions) **1118**
- Financial bonus/wage supplements tied to education levels **1567**
- Career advisors, mentors, coaches, or consultants **50**
- Reimbursement for training
- Loans
- Substitutes, leave (paid or unpaid) for professional development **1118**
- Other. Describe:
- N/A. Describe:

2.2.2 Spending - Professional Development and Career Pathways Support:

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

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

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

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

No

2.3 Child Care Provider Qualifications

2.3.1 Number of Licensed Child Care Programs Qualifications:

Total number of staff in licensed child care programs with the following qualification levels as of September 30, 2023:

Child Development Associate (CDA) **812**

Associate's degree in an early childhood education field (e.g. psychology, human development, education) **111**

Bachelor's degree in an early childhood education field (e.g. psychology, human development, education) **889**

State child care credential

State infant/toddler credential

Unable to report this data. Indicate reason: **Indiana does not track some of this data for all auspices.**

2.3.2 Number of Licensed CCDF Child Care Programs Qualifications:

Total number of staff in licensed CCDF child care programs with the following qualification levels as of September 30, 2023:

Child Development Associate (CDA) **795**

Associate's degree in an early childhood education field (e.g. psychology, human development, education) **106**

Bachelor's degree in an early childhood education field (e.g. psychology, human development, education) **798**

State child care credential

State infant/toddler credential

Unable to report this data. Indicate reason: **Indiana does not track some of this data for all auspices. This number also does not include registered ministries within the state of Indiana.**

2.4 Technical Assistance for Professional Development

2.4.1 Technical Assistance Topics:

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

Business Practices

Mental health for children

Diversity, equity, and inclusion

Emergency Preparedness Planning

Other. Describe other technical assistance available to providers as part of the professional development system: **Technical assistance is open to all regulated child care programs on a wide variety of topics. This includes all Core Knowledge Areas as defined in Indiana's Core Knowledge and Competencies (CKC's) including Child and Youth Growth and Development, Health, Safety and Nutrition, Observation and Assessment, Learning Environment and Curriculum, Leadership and Professionalism, and Organizational Development and Administration.**

2.4.2 Spending - Technical Assistance for Professional Development:

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

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

CCDF quality funds

Non-CCDF funds

CARES funds

CRRSA Funds

ARP Supplemental Discretionary

ARP Stabilization 10% set-aside

Unable to report. Indicate reason:

No

2.5 Spending – Training and Professional Development

2.5.1 Spending – Training and Professional Development:

What is the total amount spent across all funding sources (i.e., CCDF quality set aside, non-CCDF funds, CARES, CRRSA, ARP Supplemental Discretionary, and ARP

Stabilization 10% set-aside) to support the training and professional development of the child care workforce during October 1, 2022 to September 30, 2023? **\$13141613**

Unable to report total amount spent. Indicate reason:

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

2.6 Progress Update

2.6.1 Progress Update – Training and Professional Development:

Supporting the training and professional development of the child care workforce

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

The Lead Agency uses information related to the state's QRIS, Paths to Quality (PTQ), to determine if quality improvement efforts have been successful. OECOSL monitors the non-compliances during PTQ rating visits to determine if there are any trends that indicate additional supports or services are needed. Additionally, OECOSL contracts with Spark Learning Lab to provide technical assistance to providers. Measurable indicators of progress include the number of level advancements, PTQ enrollment, and the number of programs who complete quality improvement plans within the agreed upon timeframe. OECOSL continues to monitor the inventory of resources and supports available to programs including a content dashboard and quarterly training calendars. OECOSL is working with Indiana AEYC to complete workforce profiles that include education and training information. This information, alongside an annual professional development needs survey, will drive our strategy moving forward.

Please include information on the outcomes and numerical targets achieved based on the measurable indicators of progress specified in section 6.3.2 of the FFY 2022-2024 CCDF Plan: **As outlined in Section 6.3.2 of the CCDF State Plan, the Office of Early Childhood and Out-of-School Learning (OECOSL) continues to monitor Paths to QUALITY™ (PTQ) enrollments and level advancements. In this reporting period, our goal was to maintain PTQ enrollments at 76.87% of eligible programs; however, we ended this reporting period slightly higher than anticipated at 80.97%. Our level advancement goal was to increase the number of programs advancing levels with 243 programs moving up at least one level. We exceeded this goal with 313 programs advancing at least 1 level during this FFY. OECOSL continued to see continuing education (clock hours), Foundations training, and CDA's in the top 5 insufficiencies during Paths to QUALITY™**

rating visits across all program types in FFY23. To address this, OECOSL continues to increase support for professional development, including degree and credential attainment.

OECOSL has several different strategies to improve the professionalism and attainment of degrees and credentials among child care professionals throughout the state. We continue to work with Indiana AEYC and the T.E.A.C.H. (Teacher Education and Compensation Helps) Early Childhood Indiana® Scholarship staff to determine what enhancements can be made to the scholarship program to increase utilization of the program and the feasibility of additional scholarship models. We monitor the number of scholarship recipients to track progress and have seen increases across scholarships for formal education opportunities. After an in-depth analysis to remove barriers for accessing scholarships, a Working Scholar Model was launched in the Fall 2022 semester which provides stipends to professionals without support of a sponsoring child care program. In the third academic year this was offered, 12 professionals received scholarships under this model – an increase from 3 last FFY. The Master’s Degree Scholarship is in its third year with 103 professionals receiving a scholarship – an increase from 66 last FFY. Indiana AEYC has also implemented a program that provides Associate’s Degree classes fully in Spanish in partnership with Ivy Tech Community College – South Bend. 48 bilingual providers have increased – double the number of participants from FFY22. We hope to support the expansion of this pilot across the state with the potential to begin a cohort in Central Indiana in the next reporting period. Lastly, OECOSL approved for the scholarship to allow recipients to accelerate their course taking (if they are in good academic standing) to finish degrees quicker. In the fall of 2023, a new scholarship model was launched to help current Early Childhood Career and Technical Education instructors achieve the credentials needed in order to offer dual credit to high school students in their programs. Unfortunately no teachers have participated in the scholarship to date but we will continue to market this opportunity.

The Non-Formal Child Development Associate (CDA) course facilitated by the Indiana Association for the Education of Young Children (INAEYC) has also had significant success in not only providing pathways for professionals to obtain their CDA Credential but has also partnered with the Department of Workforce Development and local Adult Education Programs across the state to offer courses. 176 individuals participated in the Non-Formal CDA Classes this FFY (an increase from 103 in FFY22) in partnership with the Department of Workforce Development and local Adult Education Programs. This class

has embedded the Test of Adult Basic Education (TABE) assessment – a test that is used as a pre/post-test to determine a person’s skills and aptitudes related to reading, math, and language and the WIN Essential Skills Credential- an opportunity for candidates to earn a valuable addition to their resume or portfolio that lets employers know they have the highly demanded soft skills to succeed. The implementation of the TABE Assessment was intended to not only support the professionalism of the educators in the program, but also increase the CDA credential completion rate. To monitor progress, OECOSL and INAEYC track TABE assessment results as well as the percent of participants who receive their credential. Throughout the course, 88% of professionals increased or maintained their score (achieved measurable skills gain if needed based on their initial pre-test) as well as having an 94% overall CDA Credential completion rate. We anticipate this will remove barriers for professionals who complete their CDA to pursue their associate degrees through the T.E.A.C.H. Early Childhood Indiana scholarship. We will continue to monitor this data closely in the coming years. In the last year, the demand for Non-Formal CDA courses have increased significantly. This led to offering additional classes in English and Spanish for those entering the field.

Starting in the spring of 2023, IN AEYC began to host 3 CDA Resource Days across the state to support individuals in navigating the CDA Process in addition to 4 virtual sessions. These events, held in partnership with Ivy Tech Community College were attended by 45 individuals with 15 individuals attaining their CDA Credentials or enrolling in an Associate’s Degree program so far.

In partnership with Indiana AEYC, a workforce initiative was launched in 2020 to help provide career coaching as well as supporting programs in their recruitment and retention of qualified staff. As a part of this initiative, the 11 Workforce Coordinators provided technical assistance and training to 840 programs (309 centers, 303 homes, 104 ministries, 58 schools, and 66 LLEP’s) an increase from 739 in FFY22. In this reporting period, these coordinators began to offer a four part series on Taking on Turnover. 147 individuals attended sessions offered throughout the year.

OECOSL also partners with Infancy Onward to support the endorsement of professionals in Infant and Toddler Mental Health and Early Childhood Mental Health. OECOSL monitors the number of endorsed professionals to track progress. Currently, Indiana has 93 endorsed providers in Infant/Toddler Mental Health and Early Childhood Mental Health. In this reporting period, in partnership with Early Learning Indiana, Infancy Onward continued to provide scholarships to remove the financial barrier to obtain this

endorsement. We anticipate that this will increase the number of endorsed professionals in the state as 86 individuals have been granted scholarships. Infancy Onward also created additional resources for providers to understand what training is accepted for endorsement, providing clearer pathways to obtain it. Infancy Onward also continues to partner with Indiana's Part C program, First Steps, for their annual conference. 750 professionals participated in this conference in FFY23.

OECOSL also provided professional development scholarships to the Indiana Afterschool Network Summit in 2023. 319 professionals attended this conference at a reduced cost and 41 people attended at no cost because of this scholarship.

For early educators, OECOSL provided professional development scholarships to the Indiana Early Childhood Conference in May of 2023 – the first in person hosting of this event since 2019. 1,363 individuals attended the conference utilizing a scholarship from OECOSL.

Educators and child care professionals continued to access trainings through Indiana Learning Paths, Indiana's learning management system. OECOSL tracks progress by monitoring the number of providers accessing Indiana Learning Paths as well as the number of hours completed. This included 36,998 unique users representing 4,719 programs completed 322,954 hours of training in Indiana Learning Paths – an increase from FFY22 (33,231 unique users representing 297 programs who completed 294,542 hours). We attribute this increase to many new asynchronous trainings on topics identified through provider surveys as well as providing mandatory trainings online in both English and Spanish.

OECOSL is working in partnership with Indiana AEYC to launch a Training and Trainer Approval System. The application is currently live and OECOSL will continue to work to build the inventory of approved training and trainers to promote high quality professional development opportunities for child care professionals. While using approved training for licensing and QRIS is not currently required, we anticipate making this change in 2025. Our intent is to ensure that providers are accessing quality training that aligns with adult education principles.

In response to challenges lifted from our Regional Advisory Councils and Licensing Advisory Committees, OECOSL committed to offering mental health and wellness supports. OECOSL worked in partnership with Spark Learning Lab to offer 7 total

provider support groups facilitated by a licensed clinical social worker from January to July 2023. Registration for the groups filled up quickly with 131 registrants, but only 46 individuals attended at least 1 session. Participation did increase in groups offered April to July; however, OECOSL will be working with Spark Learning Lab and Indiana University (evaluators) to determine changes needed to the format of the groups. We will continue to monitor progress through registrations and participation. OECOSL does not maintain individual data for these participants for confidentiality purposes.

In late spring of 2022, OECOSL worked with several key partners to launch our Building Wellness initiative. The Building Wellness program is a confidential employee assistance program offering free short-term counseling, legal and financial consultation, work-life assistance and crisis intervention services to early care and out-of-school time providers, their employees, volunteers and the household family members or dependents of all eligible individuals. As of September 30th, 2023, services were accessed 1662 times. This program is monitored monthly through utilization reports which are used to track progress. OECOSL and its partners continue to promote this program to increase utilization. This has included sending physical posters and magnets through the postal service to all registered and licensed child care providers in Indiana. Additionally, in partnership with Spark Learning Lab, the CALM App was offered free of charge to child care providers. During this FFY, 1,125 users signed up to utilize the app and 890 engaged in the app.

3) Improving early learning and development guidelines

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

3.1 Early Learning and Development Guidelines

3.1.1 Spending - Early Learning and Development Guidelines:

Were funds from any sources (e.g., CCDF quality set aside, non-CCDF funds, CARES, CRRSA, ARP Supplemental Discretionary, or ARP Stabilization 10% set-aside) spent to improve early learning and development guidelines during October 1, 2022 to September 30, 2023?

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

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

What is the total amount spent across all funding sources (i.e., CCDF quality set aside, non-CCDF funds, CARES, CRRSA, ARP Supplemental Discretionary, and ARP Stabilization 10% set-aside) on improving upon the development or implementation of early learning and development guidelines? **\$756397**

Unable to report total amount spent. Indicate reason

Optional: Use this space to tell us any additional information about how funds were spent that is not capture in the item already reported: **Updates were made to Indiana’s early learning standards (formerly known as The Foundations) by the Indiana Department of Education based on research, feedback from educators, and work from professionals with expertise in each specialty area. The standards were then adopted by the Indiana State Board of Education in June of 2023. These updates included the addition of standards relating to computational thinking and the alignment to the most recent Indiana Academic Standards. The new Early Learning Standards can be found here: <https://www.in.gov/doe/students/indiana-academic-standards/early-learning/>. The Lead Agency is currently working with the Indiana Department of Education to create**

new professional development opportunities related to these updates utilizing CCDF Quality Funds.

[] No

3.2 Progress Update

3.2.1 Progress Update - Early Learning and Development Guidelines:

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

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

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

The Lead Agency administers the QRIS which assesses annually the level of quality for participating programs. OECOSL defines high quality as advancing to or maintaining Level 3 or 4 in the system. These levels include standards related to incorporating Indiana's Early Learning Foundations into lesson planning and implementation of a curriculum. OECOSL continuously monitors the number of high quality programs as well as several partners including the CCR&R's and Spark Learning Lab. Additionally, Spark Learning Lab has performance measures tied to program participation and level advancement in PTQ.

Since 2014, Indiana has increased the number of high-quality rated early care and education programs by over 80%. As of the ELAC 2020 annual report, 60% of all known early care and education programs participate in Paths to QUALITY, and more than 700 have achieved high quality Level 3 or Level 4 since 2014. Children enrolled in a Paths to QUALITY program Level 3 or Level 4 has increased about 44% since 2014. These measures are reported annually in the ELAC report and is an additional way in which Indiana measures success of this investment.

Please include information on the outcomes and numerical targets achieved based on the measurable indicators of progress specified in section 6.4.3 of the FFY 2022-2024 CCDF Plan: **In Section 6.4.3 of the CCDF State Plan, the Office of Early Childhood and Out-of-School Learning (OECOSL) committed to monitor the level of quality and participation in the state's quality rating and improvement system, Paths to QUALITY™ (PTQ). OECOSL also monitors the number of high quality programs, defined as level 3 or 4. In this reporting period, our goal was to maintain Paths to QUALITY enrollments at 75.3% of eligible programs; however, we ended this reporting period slightly higher than anticipated at 77%. Our level advancement goal was to increase the number of programs advancing by 228 programs advancing at least 1 level. 231**

programs advanced with 161 of those moving to level 3 or 4.

OECOSL closely monitors the number of providers who access trainings on the Indiana Early Learning Foundations. The trainings on Indiana Learning Paths are widely completed with 1,949 professionals trained on specific content area trainings and 12,715 professionals trained on the general Early Learning Foundations in the last fiscal year. The lead agency has seen a significant increase in the completion of this training over the last 3 years – including an increase from FFY22 where 9,108 professionals were trained on the Foundations. We hope that this number continues to increase as new providers enter the field and strategies are implemented to decrease the number of Paths to QUALITY insufficiencies related to Foundations training.

Additionally, OECOSL monitors the number of Paths to QUALITY insufficiencies related to Foundations training as it is a standard in our quality rating and improvement system for Level 2 and beyond through monthly reports. This standard continues to be a common insufficiency for programs during rating visits and is in the top 3 insufficiencies for all program types (licensed centers, ministries, and licensed homes) with 67 total insufficiencies – a decrease from 104 in FFY 22. OECOSL has recently worked with our technical assistance provider to create “course collections” for onboarding new staff and included the Foundations training. We associate this strategy and promotion of the course collection with the decrease in the number of insufficiencies related to Foundations training. We have also engaged with the Regional Advisory Councils to brainstorm new or other strategies to decrease the number of insufficiencies on this topic.

Additionally, information about the Indiana Early Learning Foundations is presented in a family friendly format through our consumer education website, Brighter Futures (<https://brighterfuturesindiana.org/parents/play-learning>).

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

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

4.1 Quality rating and improvement system status

4.1.1 QRIS or other system of quality improvement status:

Indicate the status and include a description of the lead agency's quality rating and improvement system (QRIS) or other system of quality improvement during October 1, 2022 to September 30, 2023?

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

- **General description of QRIS: High quality, as defined by the Indiana Early Learning Advisory Council (ELAC), is a program which attains a level 3 or level 4 on Paths to QUALITY™ (Indiana's statewide QRIS). Providers who voluntarily choose to participate in Paths to QUALITY (PTQ) are required to meet key quality indicators to advance to successively higher levels. To achieve Paths to QUALITY level 3, programs must meet the requirements of levels 1 and 2 (e.g., basic health and safety standards, daily schedule and planned activities that support growth and development) and implement a curriculum that supports learning and school readiness while providing professional development opportunities for staff. To achieve Paths to QUALITY Level 4, programs must meet the requirements of levels 1, 2, and 3, and achieve accreditation by an approved national accrediting body, such as NAEYC and NAFCC. Coaches are available to provide intensive technical assistance to providers in several different areas including, but not limited to, teaching strategies, teacher-child interactions, family engagement strategies, developmentally appropriate practice, environment, health & safety, curriculum, lesson planning, reflective feedback, and appropriate behavior management and intervention strategies. The program uses the readiness checklist, a tool developed for the Paths to QUALITY system. This tool allows providers to assess their program standards and set quality goals. Once the program has prepared the appropriate documentation, a Paths to QUALITY rating visit is performed, and the program receives their assigned Paths to QUALITY level. Programs are offered incentives for participation in Paths to QUALITY and advancement to higher levels.**

- How many tiers/levels? **4** [insert number of tiers below as required and describe each tier and check off which are high quality]
 - Tier/Level 1: **Level 1 programs have demonstrated that they are operating in good standing and have been recognized by the state of Indiana as having met all required health and safety standards.**
 High Quality
 - Tier/Level 2: **Level 2 programs have demonstrated a commitment to improve program quality. They offer opportunities for children to advance their growth and development. Level 2 programs will have evidence of a consistent daily schedule, planned activities for children, and will provide relevant program information for families.**
 High Quality
 - Tier/Level 3: **Level 3 programs have demonstrated the knowledge and skill necessary for planning appropriate activities and opportunities that lead children toward school readiness. Level 3 programs have made a significant investment in the professional development of the staff, and they incorporate family and staff input into the program.**
 High Quality
 - Tier/Level 4: **Level 4 programs are the highest rated programs and have demonstrated a commitment to the highest level of professionalism in high quality child care—achievement of a nationally recognized accreditation. Level 4 programs are managed by a provider or director who has volunteered to provide mentoring to others in the field.**
 High Quality
 - Tier/Level 5:
 High Quality
 - Tier/Level 6:
 High Quality
 - Tier/Level 7:
 High Quality
 - Tier/Level 8:
 High Quality
 - Tier/Level 9:
 High Quality
 - Tier/Level 10:

High Quality

- Total number of licensed child care centers meeting high quality definition: **576**
- Total number of licensed family child care homes meeting high quality definition: **715**
- Total number of CCDF providers meeting high quality definition: **1240**
- Total number of children served by providers meeting high quality definition: **24629**

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

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

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

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

4.1.2 Spending - Quality rating and improvement system status:

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

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

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

No

4.2 Quality Rating and Improvement Systems participation

4.2.1 QRIS or other system of quality improvement participation:

What types of providers participated in the QRIS or other system of quality improvement during October 1, 2022 to September 30, 2023 (check all that apply)?

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

4.3 Quality Rating and Improvement Systems Benefits

4.3.1 Quality Rating and Improvement Systems Benefits:

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

- One-time grants, awards or bonuses
 - Licensed child care centers **248**
 - Licensed family child care homes **603**
- On-going or periodic quality stipends
 - Licensed child care centers **237**
 - Licensed family child care homes **152**
- Higher CCDF subsidy rates (including tiered rating)
 - Licensed child care centers **1923**
 - Licensed family child care homes **1497**

Ongoing technical assistance to facilitate participation in QRIS or improve quality of programs already participating in QRIS (or some other technical assistance tied to QRIS)
 Other. Describe **Milestone awards were given to Paths to QUALITY™ Level 3 and 4 programs for maintaining their level for either 5 or 10 years consecutively. In addition to center and home one time awards, 61 ministries and 65 Local Education Agencies also received awards.**

4.3.2 Spending - Quality Rating and Improvement Systems Benefits:

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

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

CCDF quality funds

Non-CCDF funds

CARES funds

CRRSA Funds

ARP Supplemental Discretionary

ARP Stabilization 10% set-aside

Unable to report. Indicate reason:

No

4.4 Spending – Quality Rating and Improvement Systems

4.4.1 Spending – Quality Rating and Improvement Systems:

What is the total amount spent across all funding sources (i.e., CCDF quality set aside, non-CCDF funds, CARES, CRRSA, ARP Supplemental Discretionary, and ARP Stabilization 10% set-aside) related to **QRIS or other quality rating systems** during October 1, 2022 to September 30, 2023? **\$8103073**

Unable to report total amount spent. Indicate reason

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

4.5 Progress Update

4.5.1 Progress Update – Quality Rating and Improvement Systems:

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

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

Note: The information displayed is from the most recent approved FFY2022-2024 CCDF Plan. **The OECOSL has performance measures outlined in the contracts for both the CCR&Rs and SPARK Learning Lab with payment withholds attached related to measurable indicators of progress relevant to this use of funds that the state uses in order evaluate its progress in improving the quality of child care programs and services within the state. Each agency is held responsible to show improvement in increasing the number of early childhood programs available within each county and by type (i.e. child care home, center etc.) and quality level to ensure sufficient supply of early childhood care and education options for children and families. Each contract has potential financial penalties and corrective action procedures outlined to ensure that goals are met throughout the life of the contract and that communities and family needs are met. The CCRRs also provide an annual report that discusses the supply, demand, quality, and cost of care in each service delivery area. Through the State of Early Learning Access report, new methodology was developed which attempts to both qualify and quantify access throughout the state. In discussing access herein, this report will move away from viewing it as simply a supply and demand equation, and layer in the additional components of quality, affordability, and choice. Combined, these four elements viewed in context with one another offer a more robust indicator of access.**

The CCDF Administrator from the Lead Agency is a member of the Early Learning Advisory Committee (ELAC) which produces an annual report on the quality of care being delivered as well as access to care. This annual report can be found at <http://www.elacindiana.org/data/annual-reports/>. OECOSL has also partnered with Early Learning Indiana to develop enhanced county dashboards that allow community members and OECOSL to look at data related to the quality of care being delivered as well as accessibility issues by county.

Please include information on the outcomes and numerical targets achieved based on the measurable indicators of progress specified in section 7.3.6 of the FFY 2022-2024 CCDF Plan: **As outlined in Section 7.3.6 of the CCDF State Plan, OECOSL continues to monitor Paths to QUALITY™ enrollments and level advancements. In this reporting period, our goal was to maintain enrollment at 76.87% of eligible programs; however, we ended this reporting period**

slightly higher than anticipated at 80.97%. Our level advancement goal was to increase the number of programs advancing by 243 programs advancing at least 1 level. 331 programs advanced at least one level this FFY.

Throughout the implementation of the new technical assistance model, SPARK Learning Lab has created a wealth of resources to help programs prepare for level maintenance or advancement rating visits, in addition to providing coaching and cohort learning opportunities. This includes 45 PTQ Success Tools (10 new this year) which are available on demand for programs through Indiana Learning Paths and were accessed 41,441 times. In partnership with the Paths to QUALITY Policy Committee and OECOSL, Spark Learning Lab created a comprehensive provider-facing resource that outlines Paths to QUALITY policies, as well as procedures and links to partner resources. This site was accessed 334 times. In addition, work has begun on a Paths to QUALITY introductory session for teachers which will focus on what it means to work in a rated program. Spark Learning Lab is continuing work on a provider [guidebook](#) for each auspice that will include the Paths to QUALITY standards, explanations, tips for implementation, and best practice guidance.

OECOSL, through its Paths to QUALITY Policy Committee, also incorporated policy changes to better meet the needs of programs. This included making permanent several COVID-19 flexibilities with updating staffing lists the day of the rating visit and the opportunity to apply for a short term waiver for the education standard. Additionally, many provider forms that are submitted to OECOSL (such as appeal and Inactive Voluntary Status forms) are now available through Microsoft forms for faster submission and response times. In this reporting period, OECOSL also worked with the Indiana Head Start Collaboration Office and Indiana Head Start Association to implement a new policy for QRIS reciprocity for Head Start programs to obtain Level 3 (high quality). This went into effect on May 1st, 2023 and 76 Head Start program sites have applied for and received reciprocity.

OECOSL also completed an Equity Review of this system with the Family and Social Services Agency's Office of Healthy Opportunities and their Equity Policy Analyst in the Fall of 2022. This included a landscape analysis, interviews with stakeholders and providers, and a thorough review of current policies. The results of that review as well as our action plan will be shared with all stakeholders. Prior to the publishing of our action plan, we were able to accomplish some of the recommendations including translating Paths to QUALITY required forms into Spanish and work has begun to revise the non-discrimination statement and add more terms to the glossary for clarification. OECOSL has also created a workgroup with system partners to address equity throughout our quality improvement system and activities. They continue to

meet on a bi-monthly basis.

The OECOSL also sets annual goals with the local Child Care Resource and Referral (CCR&R) agencies. These goals focus on increasing access to high quality early care and education as well as concentration on counties in Indiana that have little access to care in general. These goals are monitored monthly to track progress.

Lastly, OECOSL is a member of the Early Learning Advisory Committee (ELAC) which produces a report on the quality of care being delivered as well as access to care. The most recent report focuses on the impact of COVID-19. This annual report can be found at <http://www.elacindiana.org/data/annual-reports/>.

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

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

5.1 Infant/Toddler Specialists

5.1.1 Infant/Toddler Specialists:

Did providers have access to infant/toddler specialists during October 1, 2022 to September 30, 2023?

Yes

- Number of specialists available to all providers **4**
- Number of specialists available to providers serving children who receive CCDF **4**
- Number of specialists available specifically trained to support family child care providers **4**
- Number of providers served **2021**
- Total number of children reached **39257**

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

N/A. Describe:

5.1.2 Infant/Toddler Specialists Supports Provided:

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

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

On-site and virtual coaching

Health and safety practices

Individualized professional development consultation (e.g., opportunities for or awareness on career growth opportunities, degreed/credential programs)

Group professional development

Family engagement and partnerships

Part C early intervention services

Mental health of babies, toddlers, and families

Mental health of providers

Behavioral Health

Other. Describe **Providers may also receive support based on the results of the Program Growth Tool. This self assessment allows providers to identify areas that they would like to receive technical assistance and support in.**

5.1.3 Spending – Infant/Toddler Specialists:

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

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

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

No

5.2 Staffed Family Child Care Networks

5.2.1 Number and Description of Staffed Family Child Care Networks:

How many staffed family child care networks operated during October 1, 2022 to September 30, 2023?

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

- o Describe what the network/hub provides to participating family child care providers: **The Child Care Resource and Referral agencies are working to launch family child care networks. During this time frame, one child care resource and referral started their family child care network with 8 participants. They will work to connect providers to each other as well as no/low cost local, regional, and statewide resources available to them.**

No staffed family child care networks operate in state/territory

5.2.2 Spending - Staffed Family Child Care Networks:

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

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

CCDF quality funds

Non-CCDF funds

CARES funds

CRRSA Funds

ARP Supplemental Discretionary

ARP Stabilization 10% set-aside

Unable to report. Indicate reason:

No

5.3 Spending - Programs and services for infants and toddlers

5.3.1 Spending - Programs and services for infants and toddlers:

What is the total amount spent across all funding sources (i.e., CCDF quality set aside, non-CCDF funds, CARES, CRRSA, ARP Supplemental Discretionary, and ARP Stabilization 10% set-aside), above and beyond to the 3% infant and toddler set-aside, to improve the supply and quality of child care programs and services for infants and toddlers during October 1, 2022 to September 30, 2023? **\$9354916**

Unable to report total amount spent. Indicate reason:

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

5.4 Progress Update

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

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

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

Note: The information displayed is from the most recent approved FFY2022-2024 CCDF Plan. **Progress is being measured by analyzing the increase of infant/toddler seats throughout the state as well as the number of high quality infant/toddler seats throughout the state. The**

CCRRs report on this information monthly and also create an annual report that reflects the supply, demand, and quality available in that service delivery area. Some programs that improved their level of quality in order to participate in On My Way Pre-K also serve infants and toddlers. Additionally, the Lead Agency along with its partners, adopted statewide goals around reducing safe sleep violations in 2018. As a result of this goal, significant increases in referrals from OECOSL licensing staff to Spark Learning Lab occurred which resulted in increased technical assistance to programs that demonstrated a lack of compliance with Safe Sleep Practices. Due to this increased awareness and focus on safety, Indiana's General Assembly passed SEA 187 mandating that OECOSL impose a series of fines for providers who demonstrate ongoing noncompliance with Safe Sleep Practices. OECOSL will be able to track data regarding these fines and the number of noncompliances that were able to be systemically corrected as a result of this intervention. Additionally, Spark Learning Lab provides intensive technical assistance including the creation of a Quality Improvement Plan for those with safe sleep violations identified by a referral from the licensing consultant. SPARK Learning Lab has determined goals and performance measures related to decreasing the number of safe sleep violations, and increasing the number of programs that participate in Quality Improvement Planning as a result of safe sleep violations. SPARK Learning Lab addresses these goals by providing targeted technical assistance and by creating resources and guidance to support programs in providing safe sleep environments.

Additionally, data from the Self-Assessment Tool can be used to track program goals and progress. The Self-Assessment Tool comprises seven (7) standards with a total of 46 quality items utilizing a rubric-based developmental continuum that offers a roadmap for advancing program quality from "Beginning" to "Excelling". Infant and Toddler standards are embedded throughout the quality items. The Self-Assessment Tool quality continuum includes specific behaviors, benchmarks, and ultimately a scope and sequence a program can use to improve quality. There are four (4) versions of the Self-Assessment Tool, one for each program type (Center-Based, Family Child Care Homes, Ministries, School-Based) with questions tailored for each. One or more sections of the Self-Assessment Tool can be completed at any time and as many times as a program's unique needs shift and are reprioritized.

Please include information on the outcomes and numerical targets achieved based on the measurable indicators of progress specified in section 7.4.2 of the FFY 2022-2024 CCDF Plan: As outlined in section 7.4.2 of the CCDF State plan, OECOSL tracks multiple measures related to the implementation of infant/toddler quality initiatives including the number of infant and toddler seats available, high-quality seats available, and several metrics around Safe Sleep violations.

Throughout FFY23, the OECOSL has worked to focus on the capacity and quality of infant toddler care. The lead agency monitors the number of infant/toddler seats throughout the state including the number of high-quality infant/toddler seats throughout the state. There was a total of 89,037 infant and toddler seats – an increase of 1058 from FFY22. It’s also interesting to note that the number of high-quality infant/toddler seats increased by 3,142 from 52,167 to 55,309. Despite the increase in seats, changes in program desired capacity in infant and toddler programs have driven a sharp increase in the number of enhanced referrals completed by the Child Care Resource and Referral network. In FFY23, 3,722 enhanced referrals were completed for infants and toddlers – an increase from 2,887 in FFY 22.

OECOSL, along with its partners, adopted statewide goals around reducing safe sleep violations in 2018. As a result of this, significant increases in technical assistance referrals from OECOSL licensing staff to Spark Learning Lab Coaches occurred. This subsequently led to increased technical assistance to programs that demonstrated a lack of compliance with Safe Sleep Practices. OECOSL monitors the number of these safe sleep referrals and number of repeat non-compliances to track progress. There were 100 technical assistance referrals for safe sleep non-compliances in FFY23. With implementing targeted strategies, 96% of programs who have a safe sleep violation did not have a repeat violation. Additionally, Safe Sleep Training was offered in an online, asynchronous format which enabled 14,582 educators to complete this training to date. Lastly, Safe Sleep violations are no longer in the top 10 of most cited violations in the state with 120 Safe Sleep referrals in FFY23 – a slight increase from 113 in FFY 22.

Due to this increased awareness and focus on safety, Indiana’s General Assembly passed SEA 187 mandating that OECOSL impose a series of fines for providers who demonstrate ongoing noncompliance with Safe Sleep Practices. OECOSL is able to track data regarding these fines and the number of non-compliances that were able to be systemically corrected as a result of this intervention. There were 10 fines collected for safe sleep non-compliances, an increase from FFY21 but still a decrease from 13 in FFY20.

In FY19, the State of Indiana went through a significant system change. A new, statewide technical assistance provider and model was launched. Rather than having Infant/Toddler and Inclusion Specialists for each service area, there are now two statewide specialists for these content areas. These specialists provide support to all coaching staff, increasing the accessibility of high quality support in these areas to providers. There were 17 specialists available to all providers and were also available to providers accepting CCDF. There were 9 specialists

specifically trained to support family child care providers. 44 asynchronous trainings are available on demand throughout this year. Additionally, Spark Learning Lab created 135 new infant and toddler resources that were accessed 9,563 times.

This year, efforts related to infant/toddler mental health were also a focus. OECOSL continued its partnership with Infancy Onward (Mental Health America of Indiana) to help expand Infant Toddler and Early Childhood Mental Health supports. OECOSL tracks the number of outreach events, and professional development opportunities to measure progress. Throughout this year, Infancy Onward staff completed 208 community meetings and training on infant and early childhood mental health. These professional development trainings also included professional development in partnership with Part C Early Intervention (First Steps). Infancy Onward was able to provide professional development focused on early childhood mental health through their annual conference to 750 professionals in partnership with Indiana's Part C program, First Steps. There are currently 81 Infant and Toddler Mental Health endorsed providers in the state of Indiana. OECOSL looks forward to continuing this partnership to increase the number of endorsed providers and trainings offered to early care and education professionals.

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

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

6.1 Spending – Child Care Resource and Referral Services

6.1.1 Spending – Child Care Resource and Referral Services:

Were funds from any sources (e.g., CCDF quality set aside, non-CCDF funds, CARES, CRRSA, ARP Supplemental Discretionary, or ARP Stabilization 10% set-aside) spent to establish, expand, modify, or maintain a statewide CCR&R during October 1, 2022, to September 30, 2023?

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

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

What is the total amount spent across all funding sources (i.e., CCDF quality set aside, non-CCDF funds, CARES, CRRSA, ARP Supplemental Discretionary, and ARP Stabilization 10% set-aside) to **establish, expand, modify, or maintain a statewide CCR&R** during October 1, 2022 to September 30, 2023? **\$7614247**

Unable to report total amount spent. Indicate reason:

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

No

6.2 Progress Update

6.2.1 Progress Update – Child Care Resource and Referral Services:

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

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

Note: The information displayed is from the most recent approved FFY2022-2024 CCDF Plan. **The Lead Agency will utilize a Coordinating Network for the CCR&R program. The Coordinating Network will provide guidance to local CCR&Rs on how to complete assessments, synthesize data and make service provision more consistent. The CCRRO will provide training, technical assistance and other support for the State’s CCR&R system as well as be responsible for state-level data collection, analysis, and dissemination on early childhood care and education supply and demand, cost and quality, and CCR&R activities and services. As the Coordinating Network, CCRRO will support statewide programs and systems, such as: centralized early childhood consumer education and referral services, professional development and workforce registries and the online training platform. The 4 core services of the CCR&Rs are:**

Parent Education and Referral Support

The CCR&R shall perform Parent Education and Referral Support services as a core local CCR&R responsibility. This service category focuses on providing families with information about the different types of early childhood care and education available that would meet their specific needs, access information about the characteristics of a quality early childhood program and receive information about other community resources.

Program Services

The CCR&R shall perform Program Services as a core local CCR&R responsibility. This service category focuses on supporting early childhood programs, assistance with starting the business of a child care or family child care home, training on Indiana state licensing requirements, and recommendations for operating a quality early childhood program.

Public Awareness and Engagement

The CCR&R shall perform Public Awareness and Engagement services as a core local CCR&R responsibility. This service category focuses on promoting awareness of local CCR&R services and providing community members and organizations with information about the supply and demand for early childhood care and education, including information on the types of programs available, the types of programs parents are asking for, and the gaps

between the two.

Data Collection and Assessment

The CCR&R shall perform Data Collection and Assessment duties as part of their local CCR&R agency responsibilities. This responsibility category focuses on ensuring that all relevant performance data and information on families, programs, community organizations, and the local CCR&R agency itself is collected, utilized, and stored for quality improvement and monitoring purposes.

Each CCR&R is held accountable to these outcomes through monthly contract monitoring teleconferences between the Lead Agency and CCR&RCO. The local agency is responsible for ensuring correct data entry prior to these monitoring calls. Each outcome measure is discussed in coordination with the accompanying data. The lead agency has identified metrics to use to track CCR&R performance and adherence to the requirements of the Contract. These performance measures shall be tracked over the course of the Contract. Should the CCR&R fail to meet any of the performance measures, the lead agency may enforce corrective actions and monetary withholds as outlined in the agreements. CCR&Rs will be measured on the following long term outcome indicators:

In order to ensure that the Parent Education and Referral Support key responsibilities are met, these long term outcome indicators shall be used as a way to measure successful delivery of services:

Increased parental satisfaction with the supports and services provided by the local CCR&R agency.

Improved parental knowledge of characteristics of high quality early childhood care and education after contact with the local CCR&R agency.

Increased support of parents' employment, education, or related experiences through early childhood care and education.

Decreased limitation of parents' employment, education, or related experiences due to quality, affordably, scheduling, stability or other early childhood care and education issues.

Increased family satisfaction with the early education system and access to needed supports.

Increased family self-sufficiency and ability to achieve personal goals related to access to high quality care and education.

Decreased number of early childhood care and education settings used by a specific child within the past two years, supporting greater child development and continuity of care and education.

Please include information on the outcomes and numerical targets achieved based on the measurable indicators of progress specified in section 7.5.2 of the FFY 2022-2024 CCDF Plan: For October 1 to September 30 of the last federal fiscal year, the Lead Agency had contracts with the Child Care Resource and Referral Central Office and five regional Child Care Resource and Referral agencies. Within each of the contracts for the five Child Care Resource and Referral agencies, long term outcome indicators of success were included for the core service areas of parent education and support, program services focused on supporting child care programs, public awareness and engagement, and data collection and assessment. In addition to those long-term indicators of success, performance measures were also placed into all five regional Child Care Resource and Referral agencies' contracts to track performance. Should any of the Child Care Resource and Referral agencies fail to meet any of the performance measures the Lead Agency may enforce corrective actions and financial penalties. OECOSL uses these performance measures to measure progress as outlined in section 7.5.2 of the CCDF State plan:

Early Childhood Programs

Our statewide goal for the Child Care Resource and Referral Network's goal was 470 new programs for FFY23. This year, 516 programs opened across all settings which resulted in 414 new Paths to QUALITY™ enrollments.

CCDF Children in High Quality Programs

The overall statewide goal for CCDF children in high quality programs was 55.8% and we met that goal with 56.3%. The Child Care Resource and Referral Network worked to increase this number by establishing partnerships with eligibility offices and providing quality referrals to families. The Child Care Resource and Referral Network served over 5761 unique families with 7227 referrals which is a 15% increase in families served from the previous year. This included 2432 standard referrals and 4895 enhanced referrals.

Community Engagement Satisfaction

The Child Care Resource and Referral Network began using the "Net Promoter Score" in FFY20 to determine their community engagement satisfaction. Individual agencies will use and monitor this score while utilizing additional resources such as the Community Engagement Toolkit to promote their community engagement efforts. The goal for each Child Care Resource and Referral Agency was set individually to maintain or increase their Net Promoter Score. In this reporting period, all Child Care Resource and Referral agencies reported "great" or "excellent" scores according to the Net Promoter Score scale.

Annual Data Reports

Each Child Care Resource and Referral Agency and the Central Office produced an annual qualitative and quantitative reports on the services being offered, as well as on the supply, demand, and quality of early childhood care and education that includes a gap analysis, no later than 30 days after the end of each contract year. Child Care Resource and Referral Agencies are asked to present this data to key stakeholders within their service delivery areas. These annual reports were also made available to other system partners to inform their collaborative efforts.

Other Network Activities

The Child Care Resource and Referral Central Office has worked with national and local experts to create a 2 Generational framework, currently referred to as the "Child+" approach for the Child Care Resource and Referral Network. During this time, the Central Office and Child Care Resource and Referral staff have explored best practices to holistically supporting families with guidance from the Aspen Institute. Throughout year, the network expanded their role as child care navigators by leveraging community resources and partnerships. This FFY, 916 family needs assessments were completed resulting in 3,642 referrals to community organizations. This is an increase from FFY 22 since this has been implemented throughout the entire reporting period. From this, OECOSL was able to identify the top three needs for families who are seeking child care referrals are financial supports, housing, and education. Having this data has helped support OECOSL in creating and establishing new partnerships including connections to emergency housing partners.

Additionally, the Central Office has created and supported the implementation of Business Engagement and Community Engagement Toolkits to help Child Care Resource and Referral Network staff in working with local employers and human resources departments as well as their work with local stakeholders and coalitions. These toolkits provided OECOSL the opportunity to track business and community engagement to measure progress monthly. This resulted in engagements with 2000 community organizations and businesses.

Throughout this reporting period, the Lead Agency began to work with All Our Kin to create a statewide model and framework for implementing Staffed Family Child Care Networks. This included engagement with Child Care Resource and Referral staff, technical assistance staff, and a family child care provider representative. These networks will begin statewide in FFY24.

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

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

7.1 Complaints about providers

7.1.1 Number of Complaints about providers:

How many complaints were received regarding providers during October 1, 2022 to September 30, 2023? **1857**

7.1.2 Spending - Complaints about providers:

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

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

CCDF quality funds

Non-CCDF funds

CARES funds

CRRSA Funds

ARP Supplemental Discretionary

ARP Stabilization 10% set-aside

Unable to report. Indicate reason:

No

7.2 Licensing Staff

7.2.1 Number of Licensing Staff:

How many licensing staff positions were there in the state or territory during October 1, 2022, to September 30, 2023? Number of staff **47**

7.2.2 Spending – Licensing Staff:

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

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

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

No

7.3 Health and Safety Standards Coaching and Technical Assistance

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

How many child care programs received coaching or technical assistance to improve their understanding and adherence to CCDF health and safety standards as a result of an inspection or violation during October 1, 2022, to September 30, 2023? **133 (44 centers, 34 homes, 1 LLEP, 41 Ministries, 7 Local Education Agencies, 6 others)**

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

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

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

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

No

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

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

What is the total amount spent across all funding sources (i.e., CCDF quality set aside, non-CCDF funds, CARES, CRRSA, ARP Supplemental Discretionary, and ARP Stabilization 10% set-aside) on facilitating compliance with lead agency requirements for inspections, monitoring, health and safety standards and training, and lead agency licensing standards during October 1, 2022 to September 30, 2023? **\$4911125**

Unable to report total amount spent. Indicate reason:

Optional: Use this space to tell us any additional information about how funds were spent that is not captured in the items already reported. **Beginning October 16, 2022, agencies in the state of Indiana's civil service began to use new pay plans – a general plan, and separate plans for healthcare and information technology. These changes affected employees in agencies within the state's civil service system – with pay adjustments being realized on November 9, 2022 paychecks. These new pay plans were the result of the compensation study announced as part of the NextLevel State Work initiative that was implemented at the beginning of the 2022 to address challenges in recruitment, retention and overall employee wellness. Because of this, child care licensing staff saw increases in wages and benefits which resulted in an increase in spending to facilitate compliance with lead agency requirements.**

7.5 Progress Update

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

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

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

Note: The information displayed is from the most recent approved FFY2022-2024 CCDF Plan. **The Lead Agency produces monthly licensing reports that track compliance data such as monthly and year-to-date numbers of providers with licensing non-compliances, probationary licenses, validated complaint information, and enforcement actions. The Lead Agency looks for trends in reports showing a decline in complaints and enforcement actions as a result of our strategies used for continuous quality improvement. Onsite licensing inspections include, but are not limited to, monitoring of training and health & safety requirements. The Lead Agency surveys providers frequently to measure the effectiveness of monitoring and technical assistance. Baseline data from these surveys was collected in the 2019-2020 FFY and will be monitored throughout this plan period. Additionally, OECOSL will continue to monitor non-**

compliances and follow up surveys through the state's QRIS as well as data from the Spark Learning Lab Help Desk and Brighter Futures Solution Center to determine additional supports and services to improve program quality.

Please include information on the outcomes and numerical targets achieved based on the measurable indicators of progress specified in section 7.6.3 of the FFY 2022-2024 CCDF Plan: **As outlined in section 7.6.3 of the CCDF state plan, OECOSL monitors annual visits, non-compliances, and complaints to measure progress. The lead agency receives reports monthly to ensure that annual visits are completed on time and that complaints are responded to in an appropriate timeframe. The of non-compliances number remained somewhat consistent with 2,554 reported in FFY22 with 2,543 non-compliances in FFY23. The number of probationary licenses stayed at 92 during FFY 21 and 22; however, this increased to 106 in FFY23. There were 2326 Paths to QUALITY insufficiencies in this reporting previous as compared to 1671 in the previous.**

During this reporting period, the statewide technical assistance vendor, Spark Learning Lab, continued work to translate mandatory health and safety trainings into Spanish to increase accessibility. OECOSL monitors the number of trainings available in Spanish to track progress. There are currently 17 mandatory trainings in the content catalog 10 of which are now available in Spanish (accessed 442 times). The Universal Precautions training is now offered asynchronously in addition to being available through live webinar. In its second year, this was accessed 9,130 (an increase from 7,965 in FFY22) in English and 19 times in Spanish.

In partnership with Spark Learning Lab, a process for ensuring technical assistance to programs that have more serious or reoccurring health and safety violations was implemented. This need is identified by a referral from child care licensing consultant (a critical referral) or through the Program Growth Tool. Once a need is identified, a coach and the provider discuss the reason for the Quality Improvement Plan and the coach will work with the program to identify a measurable goal and action steps to meet that goal (including timelines, responsible parties, and potential barriers). The coach will link resources specific to the various action steps and goals and the coach will then monitor the program to revisit and update goals and action steps as necessary until completion. This process is not only aimed at supporting programs in maintaining compliance with licensing and monitoring requirements but also to provide technical assistance so programs can provide high quality programming around the health and safety components of care. Spark Learning Lab provided support and technical assistance for

133 critical referrals. We have seen this number increase from 102 in FFY22 and 87 in FFY21.

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

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

8.1 Evaluation and assessment of center-based programs

8.1.1 Evaluation and assessment of center-based programs:

What measure(s) or tool(s) were used to evaluate and assess the quality of and effective practice in center-based programs during October 1, 2022 to September 30, 2023?

QRIS

CLASS

ERS

FCCERS

ITERS

State evaluation tool. Describe

Core Knowledge and Competency Framework

Other. Describe **Indiana's Self-Assessment Tool, the Program Growth Tool (PGT), is comprised of seven standards with a total of 50 quality items utilizing a rubric based developmental continuum that offers a roadmap for advancing program quality from "Beginning" to "Excelling". The PGT quality continuum includes specific behaviors, benchmarks, and ultimately a scope and sequence a program can utilize to improve quality. There are four versions of the PGT, one for each program type (Center-Based, Family Child Care Homes, Ministries, School-Based) with questions tailored for each. The PGT can be completed at any time and as many times as a program's unique needs shift and are reprioritized. Once a program completes this assessment, Spark Learning Lab reaches out within 5 days to support the program in their quality improvement journey. In this reporting period, the PGT was completed by 99 child care providers.**

Do not evaluate and assess quality and effective practice

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

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

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

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

No

8.2 Evaluation and assessment of family child care programs

8.2.1 Evaluation and assessment of family child care programs:

What measure(s) or tool(s) were used to evaluate and assess the quality of and effective practice in family child care programs during October 1, 2022 to September 30, 2023?

- QRIS
- CLASS
- ERS
- FCCERS
- ITERS
- State evaluation tool. Describe
- Core Knowledge and Competency Framework
- Other. Describe **The Indiana Self-Assessment Tool, the Program Growth Tool (PGT) is comprised of seven standards with a total of 50 quality items utilizing a rubric based developmental continuum that offers a roadmap for advancing program quality from "Beginning" to "Excelling". The PGT quality continuum includes specific behaviors, benchmarks, and ultimately a scope and sequence a program can utilize to improve quality. There are four versions of the PGT, one for each program type (Center-Based, Family Child Care Homes, Ministries, School-Based) with questions tailored for each. The PGT can be completed at any time and as many times as a program's unique needs shift and are reprioritized. Once a program completes this assessment, Spark Learning Lab reaches out within 5 days to support the program in their quality improvement journey. The PGT was completed by 88 family child care providers ☐ a slight increase from FFY22.**
- Do not evaluate and assess quality and effective practice

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

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

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

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

No

8.3 Spending - Evaluation and assessment of child care programs

8.3.1 Spending - Evaluation and assessment of child care programs:

What is the total amount spent across all funding sources (i.e., CCDF quality set aside, non-CCDF funds, CARES, CRRSA, ARP Supplemental Discretionary, and ARP Stabilization 10% set-aside) on evaluating and assessing the quality of child care programs, practice, or child development during October 1, 2022 to September 30, 2023?
\$2003811

Unable to report total amount spent. Indicate reason:

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

8.4 Progress Update

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

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

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

Note: The information displayed is from the most recent approved FFY2022-2024 CCDF Plan. **The Lead Agency establishes PTQ provider advancement and level maintenance goals to measure progress in improving program quality. Programs participating in the QRIS at levels 2,**

3 and 4 are rated annually by independent raters who assess program compliance with the quality indicators including health and safety. The number of insufficiencies is tracked in the monthly rating summary data reports, and programs receive follow-up technical assistance to address any insufficiencies. Trend data is monitored to evaluate progress over time and to help focus technical assistance needs within the system. In addition, the Lead Agency utilizes multiple progress indicators through its monitoring system, CCIS. Measurable indicators are reported and logged into CCIS, and those indicators include but are not limited to the following:

- Professional development and education qualifications and trainings
- Program administration
- Management and leadership trainings
- Environment and instruction qualifications via ratios
- Group sizes
- Health and safety
- Curriculum
- Child assessment
- Environment assessments
- Interaction measurements
- Provisions for children with special needs
- National accreditation.

Please include information on the outcomes and numerical targets achieved based on the measurable indicators of progress specified in section 7.7.2 of the FFY 2022-2024 CCDF Plan: **OECOSL closely monitors the number of Paths to QUALITY rating visits to measure progress as outlined in section 7.7.2 of the CCDF state plan. 1784 rating visits were conducted this reporting period – an increase of 102 visits from the previous year . The number of PTQ insufficiencies increased this year from 1664 to 2026. While this does correlate with the increase number of programs participating, OECOSL has seen an increase in insufficiencies in all auspices except for legally exempt center based programs.**

It's also important to note that 40 programs requested and were approved for Inactive Voluntary Status (IVS) during this reporting period which provides them up to 90 days without needing to have a visit in the event of a medical or family emergency or natural disaster. This is a significant decrease from previous years due to COVID-19 program closures and illnesses declining.

OECOSL closely monitors the number of days from schedule to rating completion, distribution of ratings by program type, participation percentage by program type, amount of time to complete ratings, and common barriers to successful ratings to track progress. Performance measures to measure progress for evaluating quality include ensuring:

- ☒ 95% of ratings are not appealed and overturned**
- ☒ 90% of assessments result in satisfactory rating or better**
- ☒ 95% of ratings are completed within 30 days from the rating request**
- ☒ 85% inter-rater reliability**

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

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

9.1 Accreditation Support

9.1.1 Accreditation Support:

How many providers did the lead agency support in their pursuit of accreditation (e.g., financial incentives, technical assistance with the accreditation process, coaching/mentoring by accredited programs) during October 1, 2022 to September 30, 2023?

Yes, providers were supported in their pursuit of accreditation

- a. Licensed center-based programs **133**
- b. License-exempt center-based programs **22**
- c. Licensed family child care homes **63**
- d. License-exempt family child care homes (care in providers' home) **0**
- e. Programs serving children who receive CCDF subsidy **189**

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

N/A. Describe:

9.1.2 Spending – Accreditation Support:

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

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

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

What is the total amount spent across all funding sources (i.e., CCDF quality set aside, non-CCDF funds, CARES, CRRSA, ARP Supplemental Discretionary, and ARP Stabilization 10% set-aside) on accreditation during October 1, 2022 to September 30, 2023? **\$1060305**

Unable to report total amount spent. Indicate reason:

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

No

9.2 Progress Update

9.2.1 Progress Update – Accreditation Support:

Supporting providers in the voluntary pursuit of accreditation.

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

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

The Lead Agency establishes PTQ provider advancement and level maintenance goals to measure progress in improving program quality. Programs participating in the QRIS at levels 2, 3 and 4 are rated annually by independent raters who assess program compliance with the quality indicators including health and safety. The number of insufficiencies is tracked in the monthly rating summary data reports, and programs receive follow-up technical assistance to address any insufficiencies. Trend data is monitored to evaluate progress over time and to help focus technical assistance needs within the system. In addition, the Lead Agency utilizes multiple progress indicators through its monitoring system, CCIS. Measurable indicators are reported and logged into CCIS, and those indicators include but are not limited to the following:

Professional development and education qualifications and trainings

Program administration

Management and leadership trainings

Environment and instruction qualifications via ratios

Groups sizes

Health and safety

Curriculum

Child assessment

Environment assessments

Interaction measurements

Provisions for children with special needs

National accreditation.

The data in the Lead Agency's system clearly indicates an increase in PTQ enrolled providers

and an increase in level attainment within PTQ. This is aligned to national accreditation as accreditation is equivalent to Paths to QUALITY(TM) Level 4.

Please include information on the outcomes and numerical targets achieved based on the measurable indicators of progress specified in section 7.8.2 of the FFY 2022-2024 CCDF Plan: **The Lead Agency monitors the number of accredited programs (Paths to Quality Level 4) by setting yearly goals for achieving/maintaining Accreditation to measure progress as outlined in section 7.8.2 of the CCDF state plan. These goals are reviewed with the contractor (Indiana AEYC) monthly to ensure progress towards successful completion of the yearly goal. Our goal for this reporting period was to maintain the number of accreditations. In FFY23, 24 programs obtained their initial accreditation; however, we saw a decrease in 45 accredited programs. 17 providers closed and 28 programs lost their accreditation. 248 programs were supported by the Indiana Accreditation project for initial accreditation or renewal fees. OECOSL continues to meet with accrediting bodies to determine what additional supports may be needed.**

This year, Spark Learning Lab hosted accreditation cohorts and engaged with 19 programs. They also created 25 additional resources for programs pursuing accreditation.

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

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

10.1 High-Quality Program Standards

10.1.1 High-Quality Program Standards:

How did the state or territory help providers develop or adopt high quality program standards during October 1, 2022, to September 30, 2023?

QRIS, check which indicators the lead agency has established:

Health, nutrition, and safety of child care settings

Physical activity and physical development in child care settings

Mental health of children

Learning environment and curriculum

Ratios and group size

Staff/provider qualifications and professional development

Teacher/provider-child relationships

Teacher/provider instructional practices

Family partnerships and family strengthening

Other. Describe:

Early Learning Guidelines

State Framework. Describe

Core Knowledge and Competencies

Other. Describe **We would like to note that the ratio and group size standards within our QRIS are equivalent to licensing rules and regulations. This is due to the fact that Level 1 in our QRIS is licensing. Additionally, some accrediting bodies recognized by our QRIS for Level 4 may have additional standards.**

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

10.1.2 Spending - High-Quality Program Standards:

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

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

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

What is the total amount spent across all funding sources (i.e., CCDF quality set aside, non-CCDF funds, CARES, CRRSA, ARP Supplemental Discretionary, and ARP Stabilization 10% set-aside) to support providers in the development or adoption of high-quality program standards related to health, mental health, nutrition, physical activity, and physical development during October 1, 2022 to September 30, 2023? **\$1840128**

Unable to report total amount spent. Indicate reason:

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

No

10.2 Progress Update

10.2.1 Progress Update - High-Quality Program Standards:

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

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

Note: The information displayed is from the most recent approved FFY2022-2024 CCDF Plan. **Trend data is monitored to evaluate progress over time and to help focus technical assistance needs within the system. In addition, the Lead Agency utilizes multiple progress indicators through its monitoring system, CCIS. Measurable indicators are reported and logged into CCIS, and those indicators include but are not limited to the following: professional development and education qualifications and trainings; program administration, management and leadership trainings, environment and instruction qualifications via ratios, groups sizes, health and safety, curriculum, child assessment, environment assessments, interaction measurements and provisions for children with special needs as well as accreditation. The data in the Lead**

Agency's system clearly indicates an increase in PTQ enrolled providers and an increase in level attainment within PTQ. Additionally, the On My Way Pre-K evaluation, being conducted by Purdue University, is a longitudinal study which will follow the children through third grade and provide rich data on child outcomes and growth.

Data from the Self-Assessment Tool can be used to track program goals and progress. The Self-Assessment Tool comprises seven (7) standards with a total of 46 quality items utilizing a rubric-based developmental continuum that offers a roadmap for advancing program quality from **Beginning** to **Excelling**. The Self-Assessment Tool quality continuum includes specific behaviors, benchmarks, and ultimately a scope and sequence a program can use to improve quality. There are four (4) versions of the Self-Assessment Tool, one for each program type (Center-Based, Family Child Care Homes, Ministries, School-Based) with questions tailored for each. The Self-Assessment Tool can be completed at any time and as many times as a program's unique needs shift and are reprioritized. The Self-Assessment Tool has been available in the state of Indiana since April 2020 and has been completed More than 600 times in the first two years (April 2020-January 2023), including completions by all four program types (homes, centers, ministries, and school-based). Our goal will be to increase participation across all four program types.

Additionally, IAN maintains the Indiana Quality Program Self-Assessment (IN-QPSA) which is an online strengths-based self-assessment tool that enables youth programs to rate their performance based on the Indiana Afterschool Standards and Specialty Standards. The IN-QPSA can help OST programs:

- ☑ Identify and understand the factors that support or inhibit top performance**

- ☑ Use data to drive decisions.**

- ☑ Take action and make positive changes.**

- ☑ Continue to grow, learn and improve.**

- ☑ Maximize positive impact for staff, youth, families and community partners.**

Please include information on the outcomes and numerical targets achieved based on the measurable indicators of progress specified in section 7.9.2 of the FFY 2022-2024 CCDF Plan:

OECOSL uses trend data from the Paths to QUALITY system to monitor progress as outlined in section 7.9.2 of the CCDF State Plan. Programs participating at levels 2, 3 and 4 are evaluated annually by independent raters who assess a program's compliance with the quality indicators, including health and safety. Programs may choose to request a level advancement, decrease, or maintain the same rating on an annual basis. OECOSL measures progress by reviewing the number of insufficiencies monthly. Programs receive follow-up technical assistance to support the correction of insufficiencies.

Trend data is monitored to evaluate progress over time and to help focus technical assistance needs within the system. In FFY22, the state monitored the top 5 insufficiencies per auspice to support technical assistance:

Top 5 PTQ Rating Insufficiencies for Current Year (by Description)

- 1) Displays of children's art are available at children's eye level and show that most art work is exploratory and unique to each child ☐ 154
- 2) Children's physical, cognitive, language, literacy, math, and creative development is supported ☐ 90
- 3) At least 50% caregivers, including the lead caregiver, annually participate in a minimum of 20 clock hours of educational or in-service training focused on topics relevant to early childhood ☐ 68
- 4) The classroom is arranged and utilizes enough materials and activities to provide a variety of age and developmentally appropriate interest centers that invite children's exploration ☐ 62
- 5) 50% of teaching staff have either a CDA or equivalent certificate, an early childhood degree or equivalent degree OR completed 60 clock hours of educational training leading to an early childhood/child development degree or CDA credential -- 57

OECOSL was pleased to know that the Foundations Training is no longer a top 5 insufficiency as we continued to see increases in providers taking the training online.

OECOSL has also started to track the number of referrals to technical assistance related to rating visit insufficiencies. In this FFY, there were 100 referrals to technical assistance for post rating visit support.

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

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

11.1 Sustainability funding to child care providers

11.1.1 Sustainability funding to child care providers:

Did the state or territory continue to provide stabilization grants to child care providers using funds other than the American Rescue Plan (ARP) Act Stabilization funds during October 1, 2022 to September 30, 2023?

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

Licensed center-based programs

License-exempt center-based programs

Licensed family child care homes

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:

11.1.2 Spending – Sustainability funding to child care providers:

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

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

CCDF quality funds

Non-CCDF funds

CARES funds

CRRSA Funds

ARP Supplemental Discretionary

ARP Stabilization 10% set-aside

Unable to report. Indicate reason:

No

11.2 Data Systems Investment

11.2.1 Data Systems Investment:

Did the state/territory invest in data systems to support equitable access to child care (e.g., modernizing and maintaining systems; technology upgrades and data governance improvements to provide more transparent and updated information to parents; a workforce registry; updated QRIS systems; CCR&R updates; monitoring systems) from October 1, 2022 to September 30, 2023?

Yes. Describe: **The state is currently working with Deloitte Consulting to design, develop, and implement a new child care system including a comprehensive family portal, provider and educator portal, case management system, learning management system and business intelligence and reporting.**

No

11.2.2 Spending - Data Systems Investment:

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

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

CCDF quality funds

Non-CCDF funds

CARES funds

CRRSA Funds

ARP Supplemental Discretionary

ARP Stabilization 10% set-aside

Unable to report. Indicate reason:

No

11.3 Supply and Demand Analysis

11.3.1 Supply and Demand Analysis:

Did the state/territory conduct an analysis of supply and demand or other needs assessment to identify areas of focus to build supply or target funding from October 1, 2022 to September 30, 2023?

Yes. Describe findings: **The individual agencies within the Child Care Resource and Referral Network complete an annual report that includes an analysis of the supply and**

demand for child care across all age groups within their service delivery area. This information is then used to inform key community stakeholders and drive capacity building efforts by the agency and their program engagement team. The Child Care Resource and Referral Central Office within Early Learning Indiana completed an assessment of Indiana's early learning opportunities which resulted in the "Closing the Gap" report and interactive map in FFY21. This used a new methodology, the Early Learning Index, that attempts to both qualify and quantify child care access throughout Indiana. This method moves away from viewing access as a capacity supply and demand equation and layers in the additional components of quality, affordability, and choice. These four elements, viewed in context with one another, offer a more robust assessment of Hoosier families' ability to access early learning opportunities that suit their needs. The executive summary, report, and interactive map can be found here: <https://earlylearningin.org/closing-the-gap/> . This information will also be used by the Child Care Resource and Referral Agencies to inform community stakeholders and support capacity building efforts across the state and was also updated in FFY23. Starting in April of 2021, the state has asked providers to complete a monthly enrollment report that includes enrollment information compared to capacity, vacancies, and open teaching positions. This information has been used in this reporting period to support the Child Care Resource and Referral Network in providing family referrals with better data about vacancies across age and drive system level changes in quality supports available. A dashboard is also available to the public to drive local community efforts: <https://brighterfuturesindiana.org/scholarships/enrollment>

No

11.3.2 Spending - Supply and Demand Analysis:

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

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

CCDF quality funds

Non-CCDF funds

CARES funds

CRRSA Funds

ARP Supplemental Discretionary

ARP Stabilization 10% set-aside

Unable to report. Indicate reason:

No

11.4 Supply and Demand Initiatives

11.4.1 Supply and Demand Initiatives:

Did the state/territory implement initiatives designed to address supply and demand issues related to child care deserts and/or vulnerable populations (such as infants and toddlers, children with disabilities, English language learners, and children who need child care during non-traditional hours) during October 1, 2022 to September 30, 2023? 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:

11.4.2 Spending - Supply and Demand Initiatives:

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

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

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

- No

11.5 Provider Compensation and Benefits

11.5.1 Spending - Provider Compensation and Benefits:

What compensation and benefits improvements did teachers/providers receive between October 1, 2022 and September 30, 2023 (check all that apply)? If indicated, how many providers received each type of support?

- Financial bonuses (not tied to education levels)
- Salary enhancements/wage supplements
- Health insurance coverage
- Dental insurance coverage
- Retirement benefits
- Loan Forgiveness programs
- Mental Health/Wellness programs **1708**
- Start up funds
- Other. Describe:
- N/A. Describe:

11.5.2 Spending - Provider Compensation and Benefits:

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

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

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

No

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

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

What is the total amount spent across all funding sources (i.e., CCDF quality set aside, non-CCDF funds, CARES, CRRSA, ARP Supplemental Discretionary, and ARP Stabilization 10% set-aside) on other activities to improve the quality of child care services during October 1, 2022 to September 30, 2023? **\$980593**

Unable to report total amount spent. Indicate reason:

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

11.7 Progress Update

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

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

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

Note: The information displayed is from the most recent approved FFY2022-2024 CCDF Plan. **In addition to the above noted program monitoring indicators, Indiana’s state-funded pre-K pilot program, On My Way Pre-K, has expanded the enrollment of low-income four year-old children in high-quality early childhood settings in all counties. Children enrolled in this program will now have an opportunity to both attend pre-K and be better prepared for kindergarten. This program requires services through a mixed delivery system which includes public schools and licensed or registered child care providers who have achieved a Level 3 or Level 4 in PTQ. Accredited private schools are also eligible to participate in the On My Way Pre-K program. Approved programs are monitored and rated yearly through our PTQ system. The pre-K program have expanded the number of high quality Level 3 and Level 4 programs in Indiana and, as a result, have also increased the number of quality slots in Indiana for all children. The program requires teachers to complete a pre and post KRI (Kindergarten Readiness Indicator) for each child funded by the grant. Many programs have been trained to implement the assessment and have completed them for the 2020-21 school year.**

Please include information on the outcomes and numerical targets achieved based on the measurable indicators of progress specified in section 7.10.2 of the 2022-2024 CCDF Plan: **As outlined in section 7.10.1 of Indiana’s CCDF State plan, OECOSL set goals related to On My Way Pre-K child enrollment. In the 2022-2023 school year, OECOSL saw increasing numbers of enrollment with 6,200 (841 limited eligibility and 5359 regular children served (3,996 regular and 773 limited eligibility). Average grant costs were \$8120 per child (\$8450 regular and \$6050 limited eligibly).**

OECOSL continued to partner with Spark Learning Lab and K1ds County Therapy to pilot cohort opportunities. These cohorts were focused on mental health and challenging behaviors in a three-county area. 29 different providers participated in these cohorts with a potential impact on 17,017 children. OECOSL is engaging with Indiana University to evaluate the success of all

mental health programs and supports and engaging in continuous quality improvement as the evaluation unfolds in phases. In partnership with Infancy Onward and Spark Learning Lab, OECOSL continues to receive technical assistance through the Packard Funded Intensive Technical Assistance opportunity through Georgetown University. This intensive technical assistance the development of a comprehensive early childhood mental health system and specifically focusing on consultation.

12) Annual Report

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

12.1 Annual Report and Changes

12.1.1 Annual Report:

Describe the annual review and assessment of serious injuries and any deaths occurring in child care programs receiving CCDF, and in other regulated and unregulated child care centers and family child care homes, to the extent possible. **All serious injuries and deaths are investigated by a licensing consultant. The consultant visits the home or facility and coordinates with the Department of Child Services and police (when those agencies are involved) to investigate the incident. When the licensing team has a confirmed harmful injury or death of a child, they take steps to move forward with an enforcement against that child care providers license or registration and CCDF to ensure that child care provider is aware of the severity of the incident. Negative enforcement always follows the discovery of noncompliance. The type of negative enforcement strategy to be employed is determined in part by the degree and extent of noncompliance with the rules and the risks to the children being impacted by the noncompliance.**

A home/facility is cited for any violations of laws and regulations that govern that location. Follow up visits are made to ensure compliance of any citations. Reports are generated based upon any fatalities or serious injuries that are analyzed by OECOSL for patterns that then inform policy changes.

12.1.2 Annual Report Changes:

Describe any changes to lead agency regulations, enforcement mechanisms, or other lead agency policies addressing health and safety based on the annual review and assessment. **In the summer of 2023, the state of Indiana legislature approved a modification to the language around CPR Certification requirements in regulated child care programs. Previously, it was required that**

providers obtain CPR certification annually; however, many certifications are valid for multiple years. This new change allows child care providers to use CPR Certifications so long as they are current (not expired base on the language on the certification card). We anticipate this will eliminate a financial burden for child care providers while still following industry standards for CPR training and certifications.

OECOSL has worked with many stakeholders to give professionals the ability transfer background check consents to another program so long as they have not been out of work for more than 180 days. This alleviates the wait time and cost of getting another check complete.

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 Multiple Grant Programs

13.1.1 ARP Act Stabilization multiple grant programs:

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 ARP Act Stabilization Grants workforce compensation

13.2.1 ARP Act Stabilization Grant strategies for workforce compensation:

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): **All Stabilization Grants were issued in FFY 22.**