

**Preschool Development Grant Birth through Five Renewal Grant
Vermont Annual Performance Progress Report – 12/31/23 – 12/30/24**

The Vermont Integration Project B-5 team is pleased to submit our year two Annual Performance Progress Report (APPR). As you read through our report, it may be helpful to occasionally reference VIBP B-5's [full list of activities](#):

Section A: Strengthening the Early Childhood Care & Education Workforce

Question 1: Describe how PDG B-5 funds were used to aid local or statewide efforts to support ECCE educators and caregivers in earning a credential or degree.

Vermont workforce credential data has been updated in **Table 1**, showing data as reported last year and year two updated data. Throughout the Vermont Integration Project B-5 (VIP B-5) project cycle the project team, led by our data stewards, has worked to check, clarify, and improve our data. The data below is on the Federal Fiscal Year, as reported in last year's APPR.

Table 1. Workforce Credentials

Members of the workforce who hold CDA or college degree as of September 30th:	2023	2024
Child Development Associate (CDA)	229*	237*
Associate degree in an EC Education field	238*	289*
Bachelor's degree in an EC Education field	758*	920*
Master or Doctorate Degree in an EC Education field	342*	445*
Workforce members working towards credentials, as of September 30th:		
State Credential	184*	580*
Registered Apprenticeships	18**	16**
Workforce actively employed by child care programs licensed by the State of Vermont, as of September 30th:		
Total Workforce	9,740*	9,921*
Total workforce holding CDA, college degree, or working toward credentials as stated above	1,769	2,476
Total workforce <u>without</u> state-verified documentation of a CDA or college degree, or working towards credentials	7,791	7,434

*Source: ACF-218 QPR (FFY 2023 and 2024) for Vermont. Number reflects workforce members who are teachers, directors, or family child care providers.

****Source: VTAEYC Data**

Vermont also used ARPA funding to support the provision of career-level certificates for early childhood professionals. And Vermont's Act 76 of 2023—a law that aims to make positive changes to Vermont's early childhood system through a combination of increased funding, expanded benefits programs, and new policy, provided additional money to child care providers through Readiness payments and Quality and Capacity Program payments. The state is still collecting data on how child care programs applied those payments, but we know that at least some of that funding was used to support professional development.

The VT EC apprenticeship program represents an achievement level on the ladder. Participation has consistently been less than the goals set by program organizers, although attendance has consistently improved over the last four years. Led by the CDD, and in collaboration with Bank Street Education Center, the VIP B-5 project conducted an evaluation of the apprenticeship program in year two. The goal was to better understand why enrollment has been low, despite evidence that there is increased interest in the career ladder certificates. The team from Bank Street conducted a mixed-methods study that included a literature review, interviews, focus groups, and surveys. The data from this study identified numerous positive aspects of the program that participants appreciated, such as the value of practicing their profession with the help of a mentor in real world settings. The study also highlighted areas for improvement that the state is currently exploring. These include program requirements that felt limiting to participants, a need for additional qualified mentors, and an interest in fostering more communication between mentors, participants, and program administrators.

In their recommendations, Bank Street suggested looking at two states, Maine and Oregon, who have established a structured pathway to allow apprentices to advance to credentials of their choosing. We look forward to learning more about these programs in the coming year. In year three, the Vermont team also plans to develop an updated apprenticeship program. The team will use findings from the study to make changes to the current apprenticeship program while conducting continuous quality improvement throughout implementation.

Funding from the PDG also supported Vermont in providing resources to EC professionals working to earn an Agency of Education Educator licensure with an Early Childhood Education or Early Childhood Special Education Endorsement. Vermont currently requires all publicly funded prekindergarten education programs to have at least one licensed teacher working on their program site. Post COVID and amid a severe shortage of EC educators, the Vermont Standards Board for Professional Educators approved an Agency of Education (AOE) provisional license waiver. This waiver allowed programs to hire educators who committed to two years of being mentored and coached by a licensed provider, while working towards attaining a required professional credential. Year two VIP B-5 funding supported the

writing of a mentor handbook, and the development of training materials for waiver program participants. PDG funds also covered a sub-agreement with VTAEYC to manage the mentor-mentee relationships.

Question 2: Describe how you used PDG B-5 funds to support local or statewide efforts to improve ECCE workforce compensation, including pay and benefits. Please include efforts to develop salary scales or wage ladders, conduct compensation studies, increase pay and benefits, provide access to or navigation support to take up public benefits, provide recruitment or retention incentives, improve workplace conditions, or make other systems or program improvements to improve compensation.

Vermont continues to experience workforce challenges that make it difficult to meet the varied EC needs of all of the state's communities, including recruitment and retention, an interest in increased wages, and high administrative burdens. It's important to contextualize this data by saying that Vermont is currently experiencing workforce challenges in many industries, given the state's aging demographics and housing challenges. We also believe that the challenges that our Early Childhood workforce are experiencing are similar to those that are present in other states, and that they are indicative of national trends more than Vermont-specific problems.

But that being said, we also take these challenges seriously and know that they are impacting the people who we rely on to drive our early childhood systems. As one responder indicated, *"The EC workforce is educating and supporting the health and well-being of Vermont's future: our children. Yet, these professionals are still not paid in alignment with their value, skills, and competencies, and disparities in pay exist across private and public settings."*

The Vermont team is using PDG funding to respond to this as outlined below, with professional development playing a large role in addressing this issue.

1. VT Child Development Division (CDD)

Northern Lights at the Community College of Vermont (NL) is funded by the CDD with braided funds that include PDG funds. NL offers Vermont's EC Career Ladder as a tool for planning and tracking professional development contributing to an individual's EC career path. It accomplishes this by organizing and tracking progress against the completion of coursework, credentials, degrees, and licensure.

Each step on the ladder reflects progress in the individual's education and professional experience. To begin using the ladder, a level certificate is awarded based on the individual's professional experiences. In 2024, thanks to a combination of work done through the PDG and investments made through ARPA funds, Vermont saw a higher number of early childhood (EC) career ladder level certificate applications, showing a growing interest in EC as a career path.

In June 2024, the Vermont Early Childhood Networks (VECN) used PDG funding to offer a Wellness Institute for Family Child Care featuring presentations on self-care and comprehensive well-being for VT Department of Health (VDH)

VDH used PDG funding to offer providers multiple professional development opportunities, with the goal of making providers better trained in a way that would justify increasing their compensation.

VDH and the CDD worked with Vermont's Help Me Grow (HMGVT) staff to look at how EC providers can get information about opportunities to advance in their career through the HMGVT Resource Center. Historically, the HMGVT Resource Center contact/call lines had been underused by EC providers. Vermont used PDG funds to better publicize HMGVT call lines.

HMGVT also used blended funding that includes VIPB-5 and HRSA's EC Comprehensive Systems (ECCS): Health Integration Prenatal-to-Three, known as the Vermont Integration Program or VIPB-3 opportunity, to offer EC professionals free trainings on developmental monitoring and screening for EC Care and Education (ECCE). These trainings qualify for professional development credit through Northern Lights of CCV. Core knowledge areas addressed through these trainings include 1) child development and learning, 2) serving family and community partners, and 3) observation and assessment. The training series is entitled *ASQ Tool Training: Engaging Families in Developmental Monitoring, Screening, and Connection to Services*. There were 63 attendees at these events.

VDH also uses blended funding that include PDG funds to support the Vermont Child Health Improvement Program to host VT's Brazelton Touchpoints Center which offers PD on the use of Brazelton's Touchpoints Approach in working with children and families. During year two VCHIP provided four new Touchpoints trainings, training 64 providers from nine EC sectors in the use of this method. Through a continuous quality improvement cycle, we continue to adjust factors to make this training available to more ECCE and other trainees.

2. Building Bright Futures (BBF)

Sub Grants to Provider Community

BBF led the community sub granting activities in VIP B-5. This included gathering survey data that indicated wages and benefits are a long-standing problem for providers across the state. Therefore, in alignment with our Vermont EC Action Plan (VECAP), a large portion of our VIP grant funds were allocated for community grant making, much of which was used to provide increased compensation and benefits to the EC workforce.

Our [Vermont EC Fund](#) distributed 11 grants in year two that dedicated funds for staff compensation and/or benefits. These funds were used for a variety of related purposes including retention bonuses, hiring bonuses, bonuses for advancement in ECE levels, paid vacation and sick time, wellness stipends, tuition reimbursement (for those not eligible for other forms of aid), a paid training/mentoring programs for New Americans entering the field, funds to give employees an increase in hourly pay, and travel expenses to attend an immersive Reggio training.

Question 3: What supports did you provide to ECCE educators and caregivers through PDG B-5 funds to improve compensation (pay and benefits) or help them progress in their education, professional development, and career pathway? Check all that apply FOR THE PERIOD 12/31/2023 through 12/30/2024.

Vermont used PDG funding to provide the following supports to ECCE educators and caregivers:

- ☐ Scholarships (for formal education institutions) #_____
- ☐ Financial bonus/wage supplements tied to education levels #_____
- ☐ Financial bonus/wage supplements NOT tied to education levels #_____
- ☒ Career advisors, mentors, coaches, or consultants #_____

Identified coach roles across activities	19*
Known number of coaching or TA sessions	531

*Number of coach roles includes 1 count for consultant at VTAEYC who has multiple staff members fielding TA calls.

- ☒ Registered apprenticeships #___16___
- ☐ Reimbursement for training #_NA_____
- ☐ Loans #_____
- ☒ Substitutes, leave (paid or unpaid) for professional development #_3 grants awarded for providing substitutes and other supports for staff PD_____
- ☐ Insurance coverage (health and/or dental) #_____
- ☐ Retirement benefits #_____
- ☐ Loan forgiveness #_____
- ☒ Mental health/workplace wellness programs #_12_____

Table 2

VIP B-5 Activity	Type of Support	# receiving support	# giving support
3.3 Touchpoints	Family/Child Relations	166	N/A
4.2 Norther Lights PD	PD (See details in “Other”)	162*	N/A
4.3 Early MTSS	Coaching	80	12
4.4 EC Consultant	TA/Training – (4) Webinars	161	N/A
4.6 Provisional License	Coach/Mentor	13 EC Professionals	6
5.2 QI in Childcare	Training – 18 Sessions	287 sites	N/A
6.1 EC Grants	Funds for Workforce Development	9 sites	N/A
6.2 Special Accommodations Grant	Funds to support workforce’s engagement with PD Opportunities.		N/A
6.3 Fam/Inf Mental Health	Funds for Behavior/Training	8 sites	N/A
6.4 Fam Child Care Homes	TA/Training**	260 EC Professionals	N/A

*Source: NL Reports PE 12/31/2024 and 7/31/2024

Question 4: How much and what percent of your state’s total PDG B-5 funds are dedicated to initiatives supporting the ECCE workforce?

Vermont applied PDG funds to support the ECCE workforce as follows:

Table 3

VIP B-5 Activity	Budgeted	Obligated or Spent*
4.3 Early MTSS	\$515,116	\$221,359
4.4 EC Consultant	\$64,678	\$64,678
4.6 Provisional License	\$70,000	\$10,000
5.2 QI in Childcare	\$68,994	\$68,994
6.1 EC Grants	\$2,881,550	\$3,445,734
6.3 Fam/Inf Mental Health	\$509,052	\$21,870
6.4 Fam Child Care Homes	\$110,000	\$4,785

*Best estimate as fiscal year has not closed

Additional Detail about Table 3: Provisional License Mentoring activities (4.5) continue to be reviewed extensively for underspending. The teacher mentor project activity had previously experienced significant administrative challenges but, as of the fall of year two, was outsourced through contractual agreement between AOE and VTAEYC. Spending for this activity

immediately improved under this contract, which will end 6/30/2025.

Question 5: Describe how and to what extent you are using PDG B-5 funds to support ECCE educators and caregivers across settings and age groups. If available, use data to support your response and provide the number or percentage of people who received or benefitted from PDG B-5 support.

PDG funds allowed us to better support many communities across our EC system. This includes reviewing and expanding Vermont's professional development opportunities and expanding care for children and families. The Vermont team pursued this in year two in the following ways.

1. When considering the reach of our professional development opportunities, the CDD, with Northern Lights, conducted an extensive review of available tools to evaluate curricula and ensure use of trauma-responsive approaches that accounted for a positive experience for all children. Not finding a tool that fit our goals, we ultimately secured a contract with Liberation Learning Collective to develop an audit tool that will be used to review curriculum and develop new curriculum, and that will eventually to be available to share with other partners.

As we work on our strategic plan update, partners at BBF contracted with The Creative Discourse Group to support the development of the 2026-2030 EC Strategic Plan. The priority in this update is to ensure the plan prioritizes the needs and includes input from a broad range of Vermont populations in the state's EC systems improvement conversations. A core partner on the project, The Agency of Administration (AOA) serves on the project advisory committee to ensure coordination with other work and initiatives in the state. Help Me Grow has hired staff to conduct weekly outreach and build relationships with the large population of families who may be English language learners. This included facilitation of special events such as Crawlers, Walkers, and Toddlers weekly playgroups.

2. The [review of the apprenticeship program](#) included researching the unique needs of any Vermonters interested in participating. The results included four recommendations: 1. Strengthen Communication, 2. Adapt program design to educators and Vermont's unique context, 3. Enhance program governance, 4. Consider Family Child Care apprenticeships as a future possibility. These recommendations are being reviewed for potential implementation by CDD staff that administer the program.
3. Vermont's newly revised Quality Rating and Improvement System, the Step Ahead Recognition System (STARS), encourages programs to improve their quality at all levels by developing staff knowledge and skills through continuous quality improvement (CQI). The PDF-funded administrator made significant efforts to support ECCE providers in year 2 related in our response to Question 10.

4. During year two our VIP B-5 partners at the AOA were able to fill their VIP funded Data Analyst position. The Data Analyst attend VIP B-5 data meetings, was available for consultation, and fostered discussion about how to best ensure that populations of students with specialized needs were being supported by the VIP B-5 grant. Some specific ways the AOA Data Analyst was able to contribute include taking a co-lead role in planning and executing our second full VIP project team Community of Practice call which focused on reaching populations we have had less contact with, regularly attending PDG project management calls, and meeting with activity teams to help review materials and plans to ensure they supported vulnerable populations of children.

Section B: Expanding Access to High Quality ECCE through Subgrants

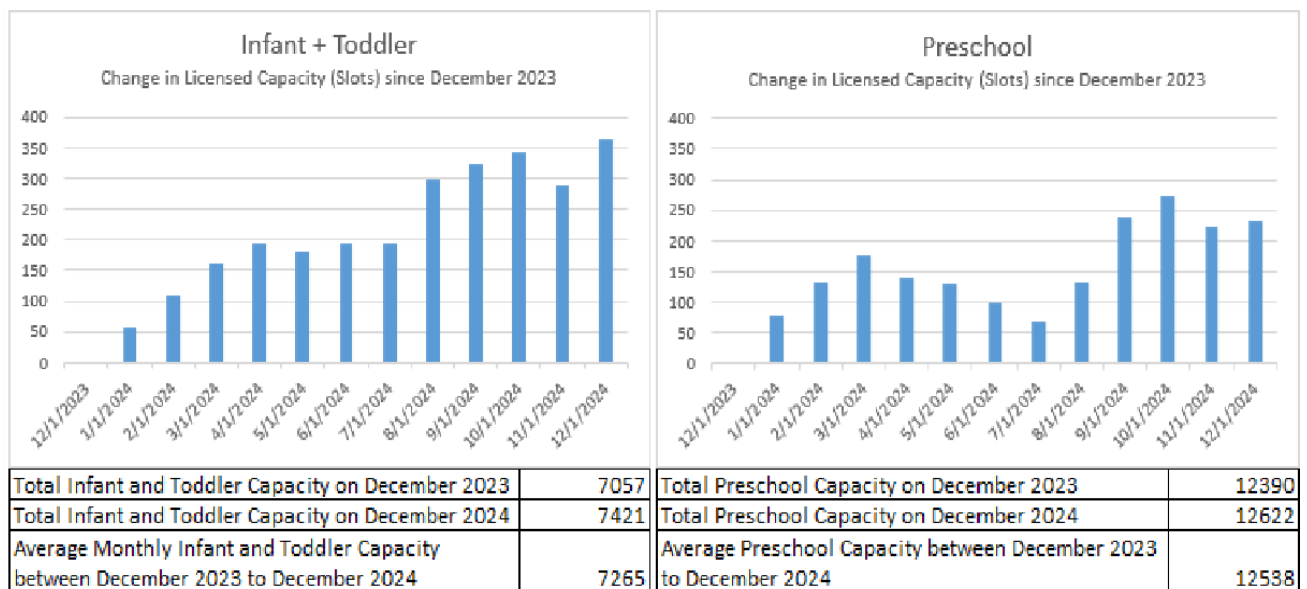
Question 6: Describe how PDG B-5 funds have helped programs to serve more children and families and improve the overall participation of all children in a mixed delivery system.

Several steps have been taken to increase service and engagement to improve the overall engagement of all children, including children with specialized needs, in a mixed delivery system. Per our proposal and in alignment with the requirements of the PDG grant, Vermont defined the populations we most need to reach as: infants and toddlers; children and/or families in need of mental health and emotional supports; low-income families; families where a parent is incarcerated; those who are at risk of or who have experienced abuse, or neglect, or trauma; children with developmental disabilities or delays; families/children who are English language learners; families who are new to America; children who are experiencing homelessness; and children who are geographically isolated. As a designated rural state with nearly two-thirds of its residents in rural areas with a population of 5000 or less, most Vermont's families could be eligible for support within this grant.

In 2024, Vermont used PDG funds to distribute subgrants through the Vermont EC Fund. These grants increase the reach of EC care and education programs (particularly for infants and toddlers), pediatric and mental health services, family supports, nutrition, services, and other resources. Since gaps in the EC system more several impact some families more than others, grant funded projects will prioritize supporting those with greatest needs grant-funded projects will directly support these populations.

Funding/Sub-Grants: In 2024, a combination of significant investments through both Act 76 and PDG funds (disbursed through the Vermont EC Fund grants), alongside other investments in the early education system, created significant increase in licensed capacity. **Charts 1 & 2** illustrate increased infant and toddler capacity in Vermont child care settings. A spring and fall round of VECF subgrants added 375 child care spots (75 infant and toddler slots), primarily in rural locations and serving low-income families, and helped 33 programs provide EC services. The following are some highlights of VECF-funded projects:

- Special education--Turtle Island Children's Center is using PDG funds to launch a new special education program.
- Outdoor Spaces --- Looking to close the gap between children of varying abilities in their outdoor play space, Brookside Primary School will use grant funding to purchase playground materials that engage children with specialized mobility needs and will provide varying sensory experiences.
- EC literacy—Lydia Taft Library is using funding to expand EC literacy programming and services and create more community space for children and their families.
- Wraparound services--Myers Prouty Children's Campuses (MPCC) and Partner Programs is using funding to increase the Behavior Interventionist position to full-time, hire a part-time Family Support Worker and a part-time Speech and Language Pathologist, and provide a space for these services to take place. This consultant team will improve the quality of child care and family engagement, allowing MPCC and Partner Programs to increase their ability to connect families with local resources.



Charts 1 & 2

Family Engagement: BBF has a lengthy history of including family leaders in their work developing and monitoring the Vermont EC Action Plan (VECAP). As mentioned in answer #11, VIP B-5 funds in year two supported their work boosting engagement of families by updating Families and Communities Committee membership application to make it easier for families to apply. This committee works to develop a statewide approach that enriches and expands family

partnerships and leadership at the provider, agency, and community levels.

Developmental Screening – Developmental screening is a key VECAP and Healthy Vermonter’s 2030 indicator: % of children who have had a developmental screening in the first three years of life. To align early identification, screening and referral practices HMGVT hosts the ASQ Online Enterprise system for all early educators, medical providers, and families which has brought a steady increase in screenings as seen in **Chart 3**.

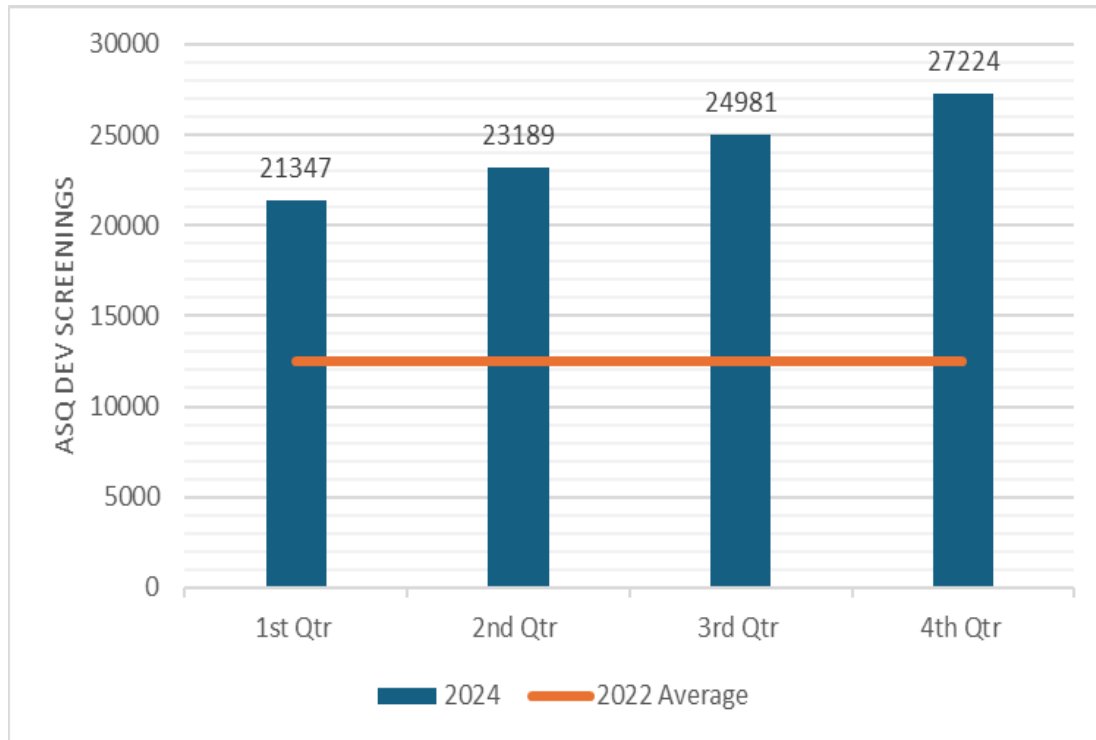


Chart 3: 2024 Data

Question 7: Did you use PDG B-5 funds for subgrants/contracts to expand access to ECCE programs and/or improve the quality of existing programs?

☒ Yes.

- If yes, total amount used for subgrants (Activity 6) **\$4,720,426** – represents 32%* of total award.

* Note this is calculate on budget including year one carryover.

Additional detail on our sub granting can be viewed on the VIP B-5 Year two Community Subgrant Award Chart

Breakdown:		
Bank Street College (4.1)	\$68,351	Review of apprenticeship program.
Community Grants: Special Accommodation Grants (6.2)	\$963,571	47 grants to childcare providers across the state to improve engagement for children with special needs.
Community Grants: Vermont EC Fund (6.1)	\$3,445,734	52 grants to community EC settings to support workforce, children, and family needs.
Community Mental Health Grants: Dept MH (6.3)	\$207,518	14 grants to support mental health services for children and families
ECCE Network Support Grants: Vermont EC Year 2 Award Networks (6.4)	\$35,252	Through VTAEYC – provision of funds and TA to statewide networks of child care providers.
Total	\$4,720,426	

In 2024, VECF grant awards were funded by PDG and will create slots in new and existing programs. These funds are a significant source of Vermont’s overall increased capacity as demonstrated in the **Table 4** and in our [detailed description of the projects](#). The table includes baseline 2023 baseline data for reference.

Table 4

2024 New Slots Supported by VIP B-5 VECF Sub-grants			
	Infant/Toddler	Preschool	School Age
	Existing Program	Existing Program	Existing Program
<i>2023 VT Increases (Baseline Data)</i>	252	373	491
Total Vermont New Slots	247	275	271
VIP B-5 Funded New Slots	128	119	12
VIP B-5 New Slots as a percentage of total increase	52%	43%	4%

STARS, Vermont’s QRIS, was revised and relaunched in 2023 to focus on continuous quality improvement and coaching supports. This was done with the goal of strengthening programs in the elements of quality the most impact improved child outcomes. STARS impacts nearly 26,000 existing program slots—nearly 78% of Vermont’s available capacity. PDG funds support STARS program management and facilitation of the Quality and Incentive Program.

Finally, VIP B-5 funded the launch of nine new early MTSS sites. These sites will receive ongoing coaching and support in Year 3 of VIP B-5 to engage in a continuous program improvement framework.

Please refer to our answer in question 10 to reference how we improved quality without direct impact on ECCE slots.

Question 9: Describe how and to what extent you are using PDG B-5 funds—both subgrants and non-subgrants—to expand access to quality ECCE programs. Please share

Sub-grants are a major part of the Vermont VIP B-5 work. Using well-established grant making systems, as well as new, innovative mental health grantmaking programs, we are able to distribute funds to communities where it is most needed and let them decide how it will be used. Two mechanisms that have been in place for several years that we are using to distribute grant funds are the Vermont EC Fund, and the Special Accommodations Grants.

Vermont EC Fund (VECF)

This fund is administered by partners at Building Bright Futures and distributes a high percentage of the project’s funds to those providing needed services in EC. BBF developed a revised application submission and review process that allows for many varied perspectives in making decisions about who to fund, as well as ensuring that more programs are able to apply for funding. Applications were kept simple and revised to include data collections that would inform future measurements of how VECF funds were impacting children and programs. The review of applications included reviewers from a wide variety of backgrounds representing a range of communities throughout Vermont.

Special Accommodations Grants (SAG)

Special Accommodation Grants (SAG) allow Vermont Licensed Specialized Child Care Programs to support children's participation within their program. Applications open on a rolling basis and allow programs to apply for supports for up to 12 months. **Tables 5 and 6** provide more detail on these grants.

Table 5

12/31/23 - 12/30/24 Special Accommodation Grant Data			
	Dollars Obligated	Children Served	Grants Awarded
PDG funds	\$963,570.57	53	47
ARPA plus other funding sources	\$617,562.67	49	42
Totals	\$1,581,133.20	102	89

Table 6

SAG Dollars by Usage Categories	
Training	\$8,322
Equipment to support children's participation	\$13,368
Staff to support children's participation	\$1,832,444
TOTAL	\$1,854,134

New Mental Health Grant Programs

Partners at the DMH developed three new grant programs to build capacity within Vermont's EC and Family Mental Health system. The first supports the expansion of Infant, EC, and Family Mental Health (IECFMH) Consultation and Education services. IECFMH Consultation and Education is a prevention based, problem-solving and capacity-building intervention implemented within a collaborative relationship between a professional consultant with mental health expertise and one or more caregivers, typically early care and education providers and/or family members. EC mental health consultation aims to build the capacity of EC professionals, families, programs, and systems to prevent, identify, treat and reduce the impact of mental health problems among children from birth to age six, and their families. The organizations who have received IECFMH Consultation grants are focused on their particular regional needs and building the capacity of caregivers to support the social and emotional needs of young children, reduce exclusionary discipline and increase capacity/stabilize ECE placements.

The other two grant programs focus on building the capacity of Vermont's MH system to provide two evidence-based EC dyadic therapies- Parent Child Interaction Therapy (PCIT) and Child Parent Psychotherapy (CPP).

PCIT is a specialized behavior management program for children ages two to six and their families. PCIT is appropriate for children who experience emotional and behavioral problems that are frequent and intense, who have experienced a traumatic event(s), family and community violence, physical and/or sexual abuse, chronic illness, family disruption, and autism spectrum disorder. Parents/caregivers receive real-time coaching from a trained therapist and work together to implement skills designed to help children reach their full potential. One PCIT grant recipient, Washington County Mental Health, has also begun working with local child care programs to introduce the PCIT concepts in an effort to stabilize placements/increase ECE capacity. They reported,

“One of the biggest successes this year was introducing PCIT concepts to childcares to implement. We have introduced concepts to three different centers and have asked teachers to implement TCIT concepts (labeled praise, listening practice...etc) to support the PCIT work we are doing. We have also delivered a workshop to a childcare on key PCIT concepts. Each provider role practiced implementing key skills.”

CPP is an attachment and trauma-focused treatment for children ages 0-5 and their caregiver(s). CPP is appropriate for children and families who have experienced traumatic event(s) including abuse and/or violence and family separation, who are experiencing mental health, attachment, and/or behavioral problems, or physical health difficulties. A core component of CPP training and certification includes acknowledging ruptures in safety and rebuilding protection.

DMH recognizes the benefits as well as the real costs associated with providers engaging in staff training and certification to deliver these evidence-based practices. Cost and staff turnover are the most common barriers cited that impedes the system in building capacity to deliver these therapies; these grant programs have been designed to address those barriers. Feedback from providers regarding these grant opportunities this year includes:

“The staff (delivering these therapies) experience the positive changes in families on a daily basis which reinforces why we do what we do.”

“The (PDG) mini grants are essential for the ongoing training requirements to maintain PCIT certification. We are excited what the future holds”

“We continue to appreciate the commitment of DMH to provide these opportunities (through PDG funding) to our teams and for the support of our infrastructure, including toys and tools which allow us to provide this therapy (PCIT). Without this financial support, our ability to provide this training would be severely limited as would our ability to create and utilize the tools needed for successful PCIT treatment. This has enabled us to consistently offer PCIT as a therapeutic service.

Section C: Improving ECCE Program Quality

Question 10: What approaches have you used with PDG B-5 funds to improve program quality? Check all that apply.

- ☒ Extending the duration of existing slots to support full-day/full-year. # slots____17 programs__ (if available)
- ☐ Improving class size and/or adult/child ratios.
- ☒ Expanding or revising program quality standards.

VIP B-5 allowed us to hire the STARS Program Administrator position, which leads the STARS Team and provides training and guidance on the system’s quality model and tools. Quality standards focus on Continuous Quality Improvement (CQI), improving adult-child interactions, family engagement, and responsive practices. Year two funds focused on STARS’ administrative CQI plan for improving the system based on analysis and stakeholder feedback.

In Year two, STARS saw an increased rate of engagement, receiving 267 applications (which include program CQI plans) compared to 123 in 2023 (31 after the new model launched).

- ☒ Monitoring, or continuous quality improvement efforts.
 - Developed a new framework for the continuous identification of needs through the meta-analysis of needs assessments conducted within a 5-year lookback period.
 - Extended the acclimation period to allow more programs to become familiar with the new standards and structure without losing their quality status.
 - Expanded coaching and mentoring opportunities through subgrants.
 - Increased use of consultation for and participation in external assessments of program quality.
 - Expanded family engagement standards to include Strengthening Families Framework.
 - Using both PDG and ARPA funds, designed and distributed resource bundles to all STARS programs.
 - Began revision of STARS Guidance Manuals for EC and afterschool programs.
 - In response to provider feedback, updated trainings on the new STARS model.
 - In response to feedback from community providers, improved process for Special Accommodation Grants' (SAG) application processes. Also extended the duration of the grants to 12 months, which promoted procedural efficiency and reflected stakeholder requests.
 - With partners at Northern Lights, increased the reach of existing and new professional development opportunities in quality standards.
 - Activity 6.1 with Vermont Early Childhood Funding grants – used Continuous Quality Improvement metric when reviewing applications for subgrants, and when providing TA/support
- ☒ Developmental, health, and behavioral health supports.
 - Special Accommodation Grants (Tables 7 & 8)
- ☒ Engaging children with or at risk of disabilities.
 - Special Accommodation Grants (Tables 7 & 8)
- ☒ Addressing suspension, expulsion, and other exclusionary practices. See also Q9 answer.
 - With AOA on our project team, we are fortunate as they have experience in this area through other projects they are working on, outside of VIP B-5. They are able to provide consultation to our team who interact with so many providers of EC services.
 - Our work in Early MTSS seeks to create a learning environment that provides supports for children before negative outcomes such as suspension or expulsion occur.
 - In our SAGs grantmaking, we often award grants that support children who are otherwise at risk of being expelled from programs that can't manage their behaviors. CDD consistently hears that programs need more support in managing children's behaviors and is reviewing options for providing additional trainings and services on behavioral supports to the field.

- ☒ Trauma-informed approaches for ECCE programs.
- See our MH focuses projects referenced in Question 9.
- ☒ Support transitions across EC programs and into the early elementary grades.
- ☒ Efforts to improve health and safety.
- One VIP B-5 activity is exclusively focused on health and safety.
- ☒ Other comprehensive services: In Person training and 1:1 technical assistance
- In year two, at least 264 participants engaged in STARS online webinars and in-person training and received 1:1 support to improve their program quality. These services are provided to all Vermont programs by VTAEYC under an initiative called the System for Program Access to Resources for Quality Supports (SPARQS). SPARQS is a significant partner in STARS quality improvement support. A tiered launch of SPARQS services began in fall 2023. In 2024, SPARQS provided 287 programs with STARS CLASS and PQA assessments, provided over 580 consultations with programs to develop service plans for ECE support, and engaged in 402 coaching and mentoring sessions with programs.
- With braided funding that includes PDG, SPARQS is also facilitating the redesigned Vermont Early Child Networks (VECN), which launched in August 2024. The networks provide peer connections, professional development, and quality supports to 17 regional networks and 5 virtual topic-based networks, including one specific to Family Child Care Home staff. Networks are one way that Vermont is using its VIP B-5 funds to support rural, isolated programs.
- As part of our PDG-funded work, all project activities receive evaluation consultation and technical assistance. The evaluation work, led by BBF, focuses on providing evaluation resources to each activity team, scheduling time to discuss implementation progress, plan data collection activities, discussing insights and lessons learned, and applying a continuous quality improvement lens to the work, which occasionally points to the need to pivot implementation plans.

Section D: Engaging Families and Increasing Family Voice

Question 11: How have you used PDG B-5 funds to maximize family and parental choice, knowledge of ECCE programs, or engagement as leaders in programs within the state's mixed delivery system, including helping parents overcome barriers to participate in ECCE programs? Check all that apply.

- ☒ Coordinating application, eligibility, and enrollment of families in ECCE and other programs and services across a range of programs to help meet family needs.

NOTE: See answer to question 12 re: updates to applications.

- ☒ Compensating parents through stipends, gift cards or other supports for participation in the development or updating of your statewide Needs Assessment and/or Strategic Plan.
- ☒ Increasing parents' awareness of the availability and quality of EC programs in

the mixed delivery system.

- ☒ Compensating parents and caregivers for participating in state/local-level advisory or policy development or implementation bodies.
- The Family Leadership Inventory highlights what leadership opportunities exist and whether or not parents and caregivers are compensated for their time. This work also led BBF to include the following policy recommendation in their slate of policy recommendations in 2025: Improve and provide transparency in family and parent compensation practices for involvement in state convened entities.
- ☒ Offering language services, transportation, child care, and/or other supports to minimize barriers to meaningful engagement of families as leaders in policy and program decisions.
- ☒ Other strategies? Please describe: Legislative Policy
- Many of the VIP B-5 partners were involved in supporting the implementation of [Vermont's Act 76](#) which, among other things, drove the creation of additional child care slots in the state. Elements of the law include making child care financial benefits available to more families, and providing child care providers with much-needed resources that could be used to hire new staff, expand facilities, or retain existing staff, among other things.
- VIP B-5 activities that reflect Act 76 goals and initiatives include Coordinated Intake and Referral (VDH/3.2), Special Accommodation Grants (CDD/6.2), Provision License Mentoring (AOE/4.6), CQI and Monitoring in Child Care (CDD/5.2), VECF (BBF/6.1), Infant, EC, and Family Mental Health grants (DMH/6.3), and Supporting Family Childcare in the mixed delivery system (CDD/6.4).
- Act 76 also mandated a [Quality and Capacity Incentive Program](#) which launched in 2024 with VIP B-5 fund support. The program includes three elements: 1) technical assistance related to quality (STARS) and capacity, 2) one-time quality (STARS) recognition bonuses, and 3) an annual quality (STARS) and capacity incentive for programs. The professional development bonuses were increased through this program for the first time in 20 years. Incentives are available for programs that attain their specialized child care status beginning on October 1, 2024.

Question 12: Describe how you have engaged family representatives as leaders in state-level EC initiatives, indicating which groups family representatives are engaged in and their role.

Family leadership and engagement can take many forms and be at many levels. Since the VIP B-5 is a systems level project, we also focused our family engagement efforts at the systems level, with the goal of increasing participation of parents in decision making processes for EC services and programs. Having family members involved at this level has been shown to build more effective and equitable systems. Year two began with a focus on establishing a foundation for the family leadership work in the coming months. Our VIP B-5 partners at BBF, along with their Families and Communities Committee, which consists of 50 members on the listserv and 8 active members at meetings, led this work, and started by updating the mission statement for the committee. The mission

of the group is:

The families and communities committee empowers families to participate in designing collaborative EC systems that represent the diverse needs of all families in Vermont. We prioritize and elevate parent and caregiver voices while strengthening connections, providing leadership development opportunities, and offering mutual support by building a statewide community.

Committee membership forms were updated to be easier to read and complete. The update included a clear plain language outline of expectations for being a part of the network. The update also included the addition of demographic data, location data, and questions that allowed the committee to better track the range of people that were participating in committee discussions.

After these foundational pieces were in place, the team directed their focus to the Family Leadership Inventory Project (FLIP). This project engaged partners from participating VIP B-5 agencies and beyond and leveraged these partnerships to collaboratively build a resource that elevates parent leadership efforts in the state while exploring their significance for policy making.

During quarter two, a survey was conducted to gather information from agencies and organizations that are offering state and systems-level parent leadership opportunities. The BBF data team and the FLIP advisory group provided analysis of the results and then designed a related inventory tool. In the 3rd quarter, the [family leadership dashboard](#) completed where families and agencies incorporating family leadership into their practice could easily go for additional information. Finally, a brief on the [Vermont Family Leadership Mapping Project](#) was finalized and disseminated.

Extending beyond the state borders, VIP partners at BBF hosted a panel of family leadership experts from Vermont, Maine, Missouri, and Pennsylvania, and the National Center for a Family and Parent leadership webinar that was attended live by over 50 parent leaders or other professionals, nationally. The presenters elevated initiatives that were designed to ensure that families play a leading role in EC systems. They talked about building pathways of support to engage families and parents, designing structures to prepare and guide agencies, and preparing stories to share in leadership activities. [Highlights of this event](#) were subsequently shared widely, and example are shared on the BBF website.

To support the growing network of family leaders in Vermont, the Committee hosted an in person social event for members to build relationships and connections with each other. Members have expressed the value of this type of connection in helping them leverage their roles in the system. About 20 families and children gathered at a Vermont state park for this event.

Question 13: Discuss how you used PDG B-5 funds to support the development or enhancement of your state B-5 EC care and education (ECCE) system. Please see the definition of ECCE System. Note Significant barriers and challenges.

Vermont works within a mixed-delivery system of high-quality services that centers on children and families. The system is robust, and includes services, supports, and resources across the domains of physical health, mental health, early care, education, home visiting, nutrition, family support, disability services, and more. Historically, complexities within the EC system have led to challenges with integration, alignment, and coordination. This has created barriers to taking advantage of high quality services, resources, and supports. Vermont's EC stakeholder network has been aware of these challenges for years and has used VIP B-5 funding to address them in multiple ways.

During our work in year two, we addressed the following challenges as we worked towards

increased coordination and collaboration of services:

1. Time constraints and inconsistent attendance at collaborative meetings.
2. Challenges in coordinating activities across partner institutions. Many PDG activities have long history of being managed by a single entity. While Vermont's cross-partner work on activities has been successful, transitioning to collaborative management or programming came with its challenges.
3. Staff turnover within some of Vermont's VIP B-5 partners, particularly in leadership roles and limited-service positions, created some short term staff shortages, and long-term planning challenges. Some of our network partners who were awarded grant funds also experienced difficulty in hiring, which led to some project delays.
4. Vermont's procurement processes and timelines have been created to facilitate thorough reviews of draft agreements, and to safeguard against problems that might lead to negative consequences like an audit finding. These processes have, at times, been at odds with our desire to contract with vendors quickly so that we could begin spending down grant funding. While procurement processes ended up drawing out timelines related to some of our activities, we also gained a better understanding of how to navigate these processes and will apply that knowledge in any future grant work requiring procurement and formal agreements.
5. Complexity of budget development. VIP B-5 project partners have at different points in year 2, been planning with different contingencies in mind, hoping that we would receive extensions to continue program work into 2026. Vermont partners have since come together with a shared understanding of grant timelines and requirements and have a plan in place to spend down our remaining PDG funds on time. But the initial window of uncertainty introduced complexity into the budgeting process and made some partners hesitant to commit to program models and timelines.
6. Capacity challenges. Capacity challenges. Limited capacity within Vermont's EC system sometimes meant that we weren't always able to leverage our programs and resource to fully meet the demands of the field. Some of our would-be subgrantees were also hesitant to apply for grant funding because they weren't sure of their capacity to support it. Vermont will continue to explore ways to increase the capacity of our EC system. We also recognize that the problems that we're experiencing reflect a national trend and have appreciated being able to discuss these challenges with other states and TA providers.
7. Data infrastructure and capacity: the Data infrastructure for Vermont's EC system is aging, and in the process of being overhauled. This has made data integration and alignment as a function of implementing VIP B-5 slow moving, and challenging. Creating new data systems is also a major expense; there is a significant need for funding in the EC sector to improve data system quality. This is a challenge that Vermont is actively addressing, but we also recognize that we have room to improve our data systems and practices; if Vermont applied for additional PDG funding in the future, we would likely continue to look for ways to use federal funding to support our data collection and analysis needs.
- 8.

Question 14: How have PDG B-5 funds helped you improve the coordination and delivery of early care and education services across program models and funding streams in the state's mixed delivery system? Please see the definitions for Mixed Delivery System.

Focusing on four core areas of the VIP B-5 project, as detailed below, the funding has allowed us to increase our ability to strengthen, align, and integrate program work.

1. Continuous Identification of Needs

Building Bright Futures (BBF) led Vermont's work on the federally required needs assessment activity. Instead of conducting a new primary data collection, BBF developed and implemented a replicable meta-analysis protocol using 12 needs assessments conducted across the broad EC system within the last five years (2019–2023). This protocol reduced duplicative data collection, elevated urgent and long-standing needs in Vermont's EC system, and will serve as a model for the monitoring and continuous identification of needs across complex systems over time. BBF developed the [Early Childhood Needs Assessment Directory](#) to make this information publicly available and to reduce the need for additional needs assessments when possible. This dashboard is part of [Vermont's Early Childhood Data & Policy Center](#), a centralized hub of the most high- quality, up-to-date information on the status of children and families across sectors. The dashboard is designed to be used to inform policy, funding, grant writing, and advocacy efforts.

1. Quality Improvement

In 2014, Vermont passed Act 166, which ensured that all 3- and 4- and 5- year-olds not enrolled in kindergarten receive up to 10 hours a week of publicly funded prekindergarten for 35 weeks within the academic year. The legislation charges joint administration by the AHS and the AOE in school-based programs, prequalified UPK centers, and family child care programs. Activity 5.1 is designed to improve quality/monitoring in these **UPK programs**. Early in year two, a new monitoring position funded by VIP B-5 was hired at the AOE and trained in the Pyramid Model practices, the Teaching Pyramid Observation Tool (TPOT), and trauma-informed practices, increasing overall staff capacity. The monitoring position was able to do several program visits together with CDD licensing staff which built capacity and efficiency and provided opportunities for jointly delivered technical assistance on site.

With increased staff capacity, the AOE was also able to update the UPK monitoring procedure manual, attend and conduct training events, participate in collaborative CDD/AOE utilization meetings, conduct bi-monthly interagency leadership meetings, and conduct updates to available resources through the widely distributed electronic newsletter, *The UPK Cafe*. As the year progressed and the collaboration between agencies got stronger, the AOE developed and launched a notification tool that alerts the CDD when approved UPK programs have lost a licensed educator and were subsequently given notice of the need to hire a replacement within approved time frames. This information is shared monthly with the CDD licensing team. In one jointly written quarterly report, the AOE/CDD team wrote their significant finding as *“Stronger communication equals stronger outcomes”* signaling a significant shift in the relationship as a direct result of this VIP activity.

Activity 5.2 funded QI activity reviews the application of CQI and monitoring in **child care settings**. The Step Ahead Recognition System (STARS) is Vermont's quality recognition and improvement system for EC and afterschool programs. It is a framework for assessing, improving, and communicating the quality of programs that are eligible for recognition through STARS. An updated version of the model was released in July 2023, and participating facilities were allowed an acclimation period during which they would not lose their STARS rating.

During year two, 268 applications for the program were received and processed. The new model included a requirement for sites to develop their own CQI plan and, with PDG funding, we were able to provide programs with CQI support. To accommodate the needs of the STARS

sites, a survey was conducted to assess what their training needs and preferences were, and to get important information to inform an update of the STARS guidance manuals. For example, with program feedback regarding Strengthening Families, a modification and abbreviation of the self assessment was made, resulting in increased family and program staff engagement.

Further support to sites was provided by connecting them to technical assistance and coaching through the System for Program Access to Resources for Quality Supports, or SPARQS program, administered through a separate funding source and agreement.

During year two, CDD collaborated with VTAEYC (which leads the SPARQS work) to plan and conduct a Community of Practice (CoP) for STARS family child care and center based child care facilities.

Finally, CDD established a new Quality and Capacity Incentive Program with a STARS component that was launched on October 1st, 2024. This program provides financial bonuses to programs for renewing and increasing their STARS level.

2. Family Engagement

Family engagement and keeping families at the center of our work has been a standing priority for Vermont's ECCE system, as shown in answer #12.

3. Workforce Development:

The STARS program's commitment to family engagement and the Strengthening Families approach includes asking providers to design and implement ways to enhance family engagement services. They can do this by meeting the Strengthening Families Protective Factor for concrete support in times of need, "Access to concrete support and services that address a family's needs and help minimize stress caused by challenges", within their programming.

Vermont is consistently increasing cross-sector staff training in developmental screening (ASQ) to improve early identification and referral for needed services.

The AOE's Early MTSS project is actively training members of the Early Childhood workforce at participating sites via coaching, training, and opportunities to network.

Question 15: How have PDG B-5 funds helped improve and expand use of your state's integrated data system, including connecting ECCE program and K-12 data?

In Vermont, we've worked hard to build a powerful collective strategy for data driven decision-making, represented in the [Early Childhood Data Integration in Vermont](#) vision statement. At its simplest level, our vision is to: 1) support collective understanding of young children's experiences with service provision, child and family outcomes, and the system of services across sectors, 2) commitment to advancing the visibility use of child development and EC systems research, 3) Translating this data into policies and programs that will improve quality of services for, Vermont's youngest and most vulnerable children and their families.

One of the most important parts of this work is relationship building. A key part of the data integration and alignment activity was convening data stewards and partners on a regular basis to align data collection strategies, problem solve, share resources and compile cross-sector data.

This last step of the data cycle, reporting the findings of data that has been collected and analyzed, has been a long-standing challenge in our Early Childhood system. Because VIP B-5 funds

were used to increase the number of data analysts who were working for the state, Vermont has had an increased ability to analyze and report on critical EC efforts. These efforts include the release of pre-K literacy, math, and social emotional proficiency data from 2018 to 2023, migration of developmental screening data to a centralized registry, and publishing public data on child and family use of Vermont's Child Care Financial Assistance Program. BBF also made significant improvements in centralizing and publicly disseminating high-quality, up-to-date data through [Vermont's Early Childhood Data Portal](#) and through BBF's keystone report on [The State of Vermont's Children](#).

Additional progress has been made with VIP B-5 funds to build a data bridge between the ASQ online screening data and the Universal Developmental Screening Registry (USDR). The USDR is a cross-sector screening data collection and communication platform available for all providers to use. As of late in the reporting year almost 25,000 screening results (ASQ-3 and ASQ:SE-2) had been imported. These efforts will allow USDR to be a useful vehicle to align early identification efforts across sectors and providers. The data analyst position at VDH who is leading this work is fully funded by VIP B-5 funds.

Launching this work was challenging, as every data steward who was working on this project was a newly hired person in their respective agencies. This required considerable time to provide those staff with an orientation to their work and to the landscape of EC, but those staff are now focused on completing the data bridge project and are making excellent progress. Although we are excited about what this project has accomplished, we also see that additional work will be needed to strengthen Vermont's EC data collection practices, and that this will require a further investment of time and money.

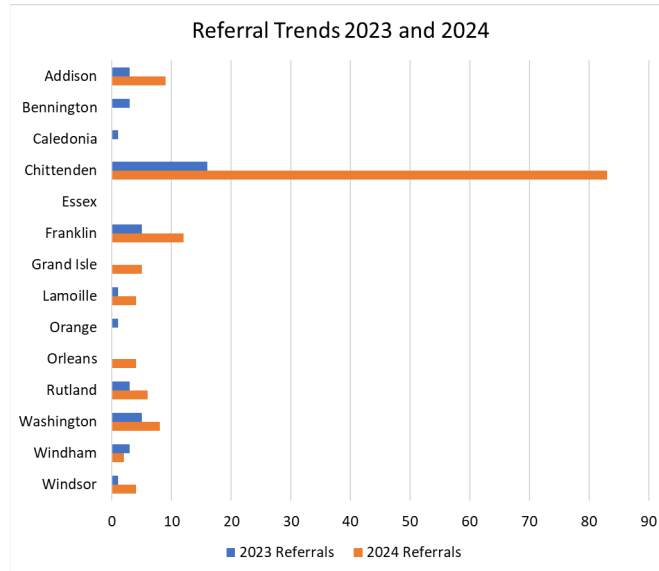
As we move forward and continue this work, evaluating and improving our state data will continue to be a goal in the VIP project and beyond. Without a centralized or integrated EC data system, we are relying heavily on the work across agency data stewards to develop and refine our collection efforts. Vermont's Act 76, enacted into law in 2023, mandated several policy changes that are impacting EC service delivery. As a result of this law, and partially funded by PDG, Vermont is collecting richer demographic information for children enrolled in the state's Child Care Financial Assistance Program (CCFAP). [CCFAP data](#) is publicly available and updated quarterly. This data helps us get a better understanding of the population characteristics of recipients of CCFAP.

Question 16: Describe how PDG B-5 funds were used to improve the coordination and referral of programs across the state B-5 ECCE system serving vulnerable and rural populations.

Partially funded by VIP B-5, HMGVT is leading the coordinated intake and referral activity in Vermont. HMGVT's trained child development specialists connect families with young children to basic needs, high quality parent education information, and developmental resources. This activity is conducted and tracked through Vermont's evidence-based Centralized Information and Referral System (CIRS) and touches most areas of the EC system. HMGVT received 1,292 calls and referrals in 2024, a 30% increase over 2023 data. **Chart 5** shows the 2023/2024 trend in statewide referrals made specifically for CIS early intervention, home visiting, and EC mental health services. This trend marks an exponential, or 226%, increase in referrals to CIS, from 42 referrals made in 2023 to 137 in 2024. This increase was due to both quality improvement and communications efforts. For example, the Strong Families Vermont Home Visiting (SFHV) communications campaign resulted in increased referrals to both nurse and family support home visiting. In 2024, HMGVT received 54 SFHV webform referrals through VDH's [SFHV web site](#) and made 25 referrals for nurse home visiting, up from only four referrals in 2022

prior to VIPB-5 efforts.

Chart 5



HMGVT has a long history of active outreach to populations across Vermont and primarily serves low-income callers and other priority populations. These include but are not limited to families who have a child with developmental delays, English language learners, and those experiencing homelessness, geographic isolation, incarcerated parents, abuse, neglect or trauma. During this reporting year they supported over 1,060 callers and provided over 1,148 referrals

HMGVT staff partner with the Janet S Munt Family Room, a parent child center serving many types of families. HMGVT bi-lingual staff provide weekly outreach at playgroups and provided one family with referrals and care coordination this quarter. An average of 16 families were in attendance each week. Part of CQI and improving our evaluation, HMGVT is developing a new quarterly and annual data dashboard with key data points to demonstrate impact on these and other populations. This effort has involved developing new custom data forms and data branching to improve our data collection and reporting.

The Vermont VIP team is committed to using PDG implementation as a way to improve coordination and collaboration across partners. Also in year two, our full project team Community of Practice December call focused on outreach to these populations. During breakout time small groups shared experiences and brainstormed solutions to working with these populations. Some highlights of those discussions are below.

- We will make an impact on these populations by building the capacity of childcares to address the unique experiences of these children in an equitable and well-informed manner.
- More coordinated communication efforts would be helpful across the system. A centralized “output center” would be helpful.
- Relationship building is key and that should include follow up after we talk to them – what do we do with the information they share?
- Data folks sometimes want to hear more about the people, not just the data. It is motivating.
- Do we have information or data to show why people might not engage or show up for services and opportunities? This is important to know.
- Improve translation services to lessen this barrier.
- Build workforce capacity enable better and targeted outreach to different populations.

Varying outreach strategies have been proven effective.

- Fixing data challenges including lack of continuity for information storage and fragile systems
- Limited availability of working data systems, resulting in the need to run reports in fragile legacy system

The Vermont Integration Project B-5 team is rolling, and excited about year three and beyond. The PDG funding has been instrumental in getting the ball rolling on many aspects of the work in EC in Vermont. Like any new project team, we went through some phases of development, which were at times exacerbated by the limitations and challenges within the parameters of running a federal grant in a state system. As we close out year two we agree that we have hit a stride and not only are we accomplishing the goals of the current project but with the proverbial “juices flowing” we are now thinking creatively about the future of EC in Vermont.