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Quality Progress Report (QPR)

For

Vermont

FFY 2024

QPR Status: Accepted as of 2025-03-31 19:08:38 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, 2023, through September 30, 2024), unless otherwise stated. Data should reflect the cumulative totals for the fiscal year being reported, unless otherwise stated.

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

How is the QPR Organized?

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

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

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

When is the QPR Due to ACF?

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

Glossary of Terms

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

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

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

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

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

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

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

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

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

Provider means the entity providing child care services.

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

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

1) Overview

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

1.1 State or Territory Child Care Provider Population

1.1.1 Total Number of Licensed Providers:

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

☒ Licensed center-based programs **655**

☐ Unable to provide number. Indicate reason:

Additional clarification: Based on most recent submission of the FY 2024 ACF-800 data there were 497 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 **413**

☐ Unable to provide number. Indicate reason:

Additional clarification: Based on most recent submission of the FY 2024 ACF-800 data there were 315 licensed family child care homes receiving CCDF funding. Please report the number of ALL licensed family child care homes operating in the state here, regardless of receipt of CCDF funding.

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

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

2.1 Lead Agency Progression of Professional Development

2.1.1 Professional Development Registry:

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

☒ Yes. If yes, describe: **The Division uses Bright Futures Information System (BFIS), which is an integrated child care information system, to collect data on the workforce. Data is collected on the number of individuals working directly with children, their role in the program, and the education and credentials of those individuals.**

☐ 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: **Child Care Regulations require all professional development activities shall meet all criteria as defined by NLCDC and shall be verified and documented in the individual's BFIS Quality and Credential Account. Professional development hours may be applied toward meeting the individual's IPDP.**

☐ No. If no, describe:

2.1.3 Number of Participants in Professional Development Registry:

Total number of participants in the registry as of September 30, 2024 **9808**

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: **The Professional Development Registry is embedded in Vermont's integrated professional development system agreement. Vermont funds the professional development system with CCDF funds, and we cannot report on the specific dollar amount spent on the professional development registry.**

☐ No

2.2 Workforce Development

2.2.1 Professional Development and Career Pathways Support:

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

☒ Scholarships (for formal education institutions) **276**

☒ Financial bonus/wage supplements tied to education levels **490**

☒ Career advisors, mentors, coaches, or consultants **1729**

☐ Reimbursement for training

☐ Loans

☒ Substitutes, leave (paid or unpaid) for professional development **132 TEACH recipients received paid leave time**

☒ Other. Describe: **Student loan repayment assistance 71**

28 advisors provided 1,729 advisements (please note that Northern Lights filtered the types of support provided to the workforce, and the decrease from last year is a more accurate reflection of the advisements provided.)

☐ N/A. Describe:

2.2.2 Spending - Professional Development and Career Pathways Support:

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

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

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

☐ No

2.3 Child Care Provider Qualifications

2.3.1 Number of Licensed Child Care Programs Qualifications:

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

- ☒ Child Development Associate (CDA) **237**
- ☒ Associate's degree in an early childhood education field (e.g. psychology, human development, education) **289**
- ☒ Bachelor's degree in an early childhood education field (e.g. psychology, human development, education) **920 (434 Masters, 11 Doctorate)**
- ☒ State child care credential **580**
- ☐ State infant/toddler credential
- ☒ Unable to report this data. Indicate reason: **The data represents all individuals in the BFIS database which is inclusive of all staff. The numbers represented here are a reflection of the difference between the total and the numbers which could be isolated as being the teachers/directors/family child care providers seen in questions 2.3.2**

2.3.2 Number of Licensed CCDF Child Care Programs Qualifications:

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

- ☒ Child Development Associate (CDA) **138**
- ☒ Associate's degree in an early childhood education field (e.g. psychology, human development, education) **203**
- ☒ Bachelor's degree in an early childhood education field (e.g. psychology, human development, education) **573 (260 Masters, 6 Doctorate)**

☒ State child care credential **138**

☐ State infant/toddler credential

☒ Unable to report this data. Indicate reason: **The data represents teachers and directors and not all staff. Vermont's antiquated BFIS system can be unreliable. The state is prioritizing workforce reporting in CDDIS Phase II so that we may more readily produce accurate numbers for reporting.**

2.4 Technical Assistance for Professional Development

2.4.1 Technical Assistance Topics:

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

☒ Business Practices

☐ Mental health for children

☐ Emergency Preparedness Planning

☒ Other. Describe other technical assistance available to providers as part of the professional development system: **Career Resource Advisors provide professional development TA. Resource Advisors provide career advising support to the early childhood and afterschool workforce, plan and coordinate Northern Lights professional development offerings, and participate in community and other activities to support the career needs of the early childhood and afterschool workforce.**

2.4.2 Spending - Technical Assistance for Professional Development:

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

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

☒ CCDF quality funds

☐ Non-CCDF funds

☐ CARES funds

☐ CRRSA Funds

☒ ARP Supplemental Discretionary

☐ ARP Stabilization 10% set-aside

☐ Unable to report. Indicate reason:

[] No

2.5 Spending – Training and Professional Development

2.5.1 Spending – Training and Professional Development:

What is the total amount spent across all funding sources (i.e., CCDF quality set aside, non-CCDF funds, CARES, CRRSA, ARP Supplemental Discretionary, and ARP Stabilization 10% set-aside) to support the training and professional development of the child care workforce during October 1, 2023 to September 30, 2024? **\$4289554**

[] 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 state measures the number of individuals with Vermont level certificates or credentials and/or degrees and looks for an increase in this information. The number of individuals with state certificates or credentials (duplicate count) increased from 786 in 2013 to 3,522 in September 2020.

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: **The state measures the number of individuals with Vermont level certificates or credentials and/or degrees and looks for an increase in this information. The number of individuals with state certificates or credentials and/or degrees (duplicate count) increased from 3,672 in FFY23 to 4,412 in September 2024.**

3) Improving early learning and development guidelines

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

3.1 Early Learning and Development Guidelines

3.1.1 Spending - Early Learning and Development Guidelines:

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

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

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

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

☐ Unable to report total amount spent. Indicate reason

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

☒ No

3.2 Progress Update

3.2.1 Progress Update - Early Learning and Development Guidelines:

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

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

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

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:
VELS is an activity under the current Preschool Development Grant. The Agency of Education is in the process of contracting with a web developer for a new VELS website. In addition, VELS PreK modules are being developed by Early Education Team at the Agency of Education utilizing the agency's Learning Management System. The website and Professional Development rollout will occur in 2025. The AOE has developed an addendum updating standards in the areas of Social Studies: Global Citizenship, Social Studies: Financial Literacy, Creative Arts and Expression: Digital Media Arts

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

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

4.1 Quality rating and improvement system status

4.1.1 QRIS or other system of quality improvement status:

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

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

- General description of QRIS: **Quality early childhood care and education (ECCE) is provided by programs that strive to realize the promise of each and every child. These programs focus on child health and safety; early care, education and child development; family and community engagement; and leadership and management systems. They seek to move up the quality continuum in VT Step Ahead Recognition System (STARS), the state's quality rating and improvement system (QRIS), and to achieve high quality standards as indicated by 5 STARS, Accreditation and/or federal Head Start Monitoring (Blue Ribbon Commission final report, 2016); VT defines high quality child care as 3, 4 and 5 star programs. These are the top tiers in our QRIS system: STARS (STep Ahead Recognition System).**
- How many tiers/levels? **5** [insert number of tiers below as required and describe each tier and check off which are high quality]
 - Tier/Level 1: **All regulated early childhood and afterschool programs in good standing automatically earn STARS level 1 status. At this level, programs are meeting the Vermont licensure requirements.**
[] High Quality
 - Tier/Level 2: **STAR Level 2 is a self-study level and is the foundation of the Continuous Quality Improvement plan for programs. For licensed early childhood programs including public school-operated pre-K programs, each classroom or group will demonstrate they, as a group, have acquired knowledge on each of the required topics: Vermont Early Learning Standards, Developmentally Appropriate Practices, External Program Assessment, Child Observation, Advancing Equity in Early**

Childhood Settings, and Strengthening Families Program Self-Assessment or Youth Thrive Survey.

☐ High Quality

- **Tier/Level 3: At STARS Level 3, the program and staff have engaged in self-study of external program assessments and family and youth engagement practices. The program and staff have knowledge of the Vermont Early Learning Standards, Developmentally Appropriate Practices, child observation and documentation techniques, and training in cultural competency and awareness. At this level, STARS standards focus on implementing improvements identified in Level 2 and continuing to assess program strategies and practices. The Strengthening Families and Youth Thrive surveys and child observations and youth voice continue to be the STARS tools to assess program strengths and areas for improvement. Level 3 programs also receive external consultation from a STARS-approved observer via the System for Program Access to Resources for Quality Supports (SPARQS) using the state-approved assessment tools most relevant to your program type and the ages of children served.**

☒ High Quality

- **Tier/Level 4: At STARS Level 4, programs receive a scored or rated external assessment from a STARS-approved observer via SPARQS and achieve results at least in the middle range as defined by the authors of the tool used (CLASS or PQA). At this level, programs meet STARS standards that focus on implementing improvements identified in Level 3 and continue to assess program strategies and practices. The program's structure addresses at least three Family Protective Factors or Youth Thrive Protective Factors (as defined by the Center for the Study of Social Policy) and the programs measure its effectiveness in strengthening families and engaging youth voice. The Strengthening Families and Youth Thrive surveys and child observations and youth voice continue to be the STARS tool to assess program strengths and areas for improvement. Programs and staff are familiar with processes for child assessment and child screening using state-approved tools such as TS Gold, ASQ, Work Sampling and High Scope.**

☒ High Quality

- **Tier/Level 5: NAEYC and Head Start accredited programs automatically meet Level 5 STARS Standards. If programs are not nationally accredited,**

they receive a scored or rated assessment from a STARS approved observer via SPARQS and achieve results in the high range as defined by the authors of the tool used (CLASS or PQA). At this level, programs meet STARS standards that focus on implementing improvements identified in Level 4 and continue to assess program strategies and practices. Programs' structure addresses at least three Family Protective Factors or Youth Thrive Protective Factors (as defined by the Center for the Study of Social Policy) and measures its effectiveness in strengthening families and engaging youth voice. The Strengthening Families and Youth Thrive surveys and child observations and youth voice continue to be the STARS tool to assess program strengths and areas for improvement. Programs and staff are familiar with processes for child assessment and child screening using state approved tools such as TS Gold, ASQ, Work Sampling and High Scope.

☒ 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: **520**
 - Total number of licensed family child care homes meeting high quality definition: **190**
 - Total number of CCDF providers meeting high quality definition: **574**
 - Total number of children served by providers meeting high quality definition: **25,469 (total capacity for providers with high quality)**

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

- General description of pilot QRIS (e.g., in a few localities, or only a few levels):
- Which localities if not state/territory-wide?

- How many tiers/levels? [insert number of tiers below as required and describe each tier and check off which are high quality
 - Tier/Level 1:
[] High Quality
 - Tier/Level 2:
[] High Quality
 - Tier/Level 3:
[] High Quality
 - Tier/Level 4:
[] High Quality
 - Tier/Level 5:
[] High Quality
 - Tier/Level 6:
[] High Quality
 - Tier/Level 7:
[] High Quality
 - Tier/Level 8:
[] High Quality
 - Tier/Level 9:
[] High Quality
 - Tier/Level 10:
[] High Quality
- Total number of licensed child care centers meeting high quality definition:
- Total number of licensed family child care homes meeting high quality definition:
- Total number of CCDF providers meeting high quality definition:
- Total number of children served by providers meeting high quality definition:
- [] The lead agency is operating another system of quality improvement.
 - General description of other system:
 - Describe assessment scores, accreditation, or other metrics associated with this system:
 - Describe how “high quality” is defined in this system?
 - Total number of licensed child care centers meeting high quality definition:
 - Total number of licensed family child care homes meeting high quality definition:
 - Total number of CCDF providers meeting high quality definition:
 - Total number of children served by providers meeting high quality definition:

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

- Do you have a definition of high quality care?

☐ Yes, define:

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

☐ No

4.1.2 Spending - Quality rating and improvement system status:

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

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

☐ CCDF quality funds

☒ Non-CCDF funds

☐ CARES funds

☐ CRRSA Funds

☒ ARP Supplemental Discretionary

☐ ARP Stabilization 10% set-aside

☐ Unable to report. Indicate reason:

☐ No

4.2 Quality Rating and Improvement Systems participation

4.2.1 QRIS or other system of quality improvement participation:

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

☒ Licensed child care centers

☒ Licensed family child care homes

☐ License-exempt providers

☒ Programs serving children who receive CCDF subsidy

- ☒ Early Head Start programs
- ☒ Head Start programs
- ☒ State Prekindergarten or preschool programs
- ☒ Local district-supported Prekindergarten programs
- ☒ Programs serving infants and toddlers
- ☒ Programs serving school-age children
- ☐ Faith-based settings
- ☐ Tribally operated programs
- ☐ Other. Describe:

4.3 Quality Rating and Improvement Systems Benefits

4.3.1 Quality Rating and Improvement Systems Benefits:

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

- ☒ One-time grants, awards or bonuses
 - ☐ Licensed child care centers **48**
 - ☐ Licensed family child care homes **52**
- ☐ On-going or periodic quality stipends
 - ☐ Licensed child care centers
 - ☐ Licensed family child care homes
- ☐ Higher CCDF subsidy rates (including tiered rating)
 - ☐ Licensed child care centers
 - ☐ Licensed family child care homes
- ☐ 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 **Effective 7/1/2023, Vermont no longer has a tiered rating system related to payment amounts. The state rates are set to a higher amount to support all programs to achieve a higher quality of care for all children. Programs will still have a tiered rating system, but it will no longer be tied to payment.**

4.3.2 Spending - Quality Rating and Improvement Systems Benefits:

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

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

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

☐ No

4.4 Spending – Quality Rating and Improvement Systems

4.4.1 Spending – Quality Rating and Improvement Systems:

What is the total amount spent across all funding sources (i.e., CCDF quality set aside, non-CCDF funds, CARES, CRRSA, ARP Supplemental Discretionary, and ARP Stabilization 10% set-aside) related to QRIS or other quality rating systems during October 1, 2023 to September 30, 2024? **\$300000**

☒ Unable to report total amount spent. Indicate reason **Our QRIS system (STARS) was revised and relaunched on 7/1/2023. There were internal staffing costs, but most of the spending associated with the QRIS system was concentrated in the coaching support and assessment program (SPARQS). It is hard to disentangle these systems, and funds, as they are intertwined. Staffing was paid by our PDG grant.**

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 state measures the increase in percent of programs participating at 3, 4, or 5 star level of QRIS, and the capacity at the 3, 4, and 5 star level. The percentage of programs achieving 3 or**

more STARS has increased from 21% in state fiscal year 2010 (July 1, 2009 to June 30,2010) to 70% in state fiscal year 2020 (July 1, 2019 to June 30, 2020). The percentage of regulated child care capacity has increased from 45% in state fiscal year 2014 (July 1, 2013to June 30, 2014) to 78% in state fiscal year 2020 (July 1, 2019 to June 30, 2020).

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: The state measures the increase in percent of programs participating at 3, 4, or 5 star level of QRIS, and the capacity at the 3, 4, and 5 star level. Participation rates for high-quality programs (3, 4, and 5 STARS) as of September 30, 2024 are as follows:

-3 STAR programs 166(16%), decreased from 17% in FFY23

-4 STAR programs 292(27%), decreased from 29% in FFY23

-5 STAR programs 252(24%), decreased from 25% in FFY23

The slight decrease can be attributed to implementing the revised STAR system.

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

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

5.1 Infant/Toddler Specialists

5.1.1 Infant/Toddler Specialists:

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

☐ Yes

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

☒ 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

5.1.3 Spending – Infant/Toddler Specialists:

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

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

☐ CCDF quality funds

☐ Non-CCDF funds

☐ CARES funds

☐ CRRSA Funds

☐ ARP Supplemental Discretionary

☐ ARP Stabilization 10% set-aside

☐ Unable to report. Indicate reason:

☒ No

5.2 Staffed Family Child Care Networks

5.2.1 Number and Description of Staffed Family Child Care Networks:

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

☐ Number of staffed family child care networks:

- ☐ Describe what the network/hub provides to participating family child care providers:

☒ No staffed family child care networks operate in state/territory

5.2.2 Spending - Staffed Family Child Care Networks:

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

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

☐ CCDF quality funds

☐ Non-CCDF funds

☐ CARES funds

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

☒ No

5.3 Spending - Programs and services for infants and toddlers

5.3.1 Spending - Programs and services for infants and toddlers:

What is the total amount spent across all funding sources (i.e., CCDF quality set aside, non-CCDF funds, CARES, CRRSA, ARP Supplemental Discretionary, and ARP Stabilization 10% set-aside), above and beyond to the 3% infant and toddler set-aside, to improve the supply and quality of child care programs and services for infants and toddlers during October 1, 2023 to September 30, 2024? **\$2316771**

☐ Unable to report total amount spent. Indicate reason:

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

5.4 Progress Update

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

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

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

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

The capacity for infants and toddlers in the state in STARS participating programs decreased from December 2015 - December 2017 from 5547 to 5350, it then increased to 5709 in December 2018. This increase is tied to the increase in programs participating in STARS, as the overall capacity for infants and toddlers has decreased (7086 in December 2015 to 6564 in December 2019). This is attributed to the statewide loss of family child care programs. However, even with the overall decrease in capacity, the capacity for infants and toddlers in high quality programs has increased significantly from 3683 in December 2015 to 5118 in December 2019. The information is available to the public here:

(<https://humanservices.vermont.gov/our-impact/performance-scorecards> target="_blank")
<https://humanservices.vermont.gov/our-impact/performance-scorecards>.

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: **Vermont partners with First Children's Finance to implement the infant and toddler capacity-building program. In the federal fiscal year 2024, the state awarded infant and toddler capacity-building grants to 61 programs, creating an estimated 212 infant and 264 toddler slots. Additionally, 70 infant spaces, 110 spaces for toddlers, and 127 spaces for preschool-aged children have been maintained.**

When surveying the total amount of infant and toddler spaces over the years of 2022, 2023, and 2024 we see a modest increase in center based care each year. Family child care capacity is also recovering, although still not yet at pre-Covid levels. However, the capacity building initiatives coupled with the quality dollars earmarked in VT Act 76 are beginning to support additional infant and toddler spots in 3,4, and 5 STAR programs.

Infant capacity in 3-5 STAR programs increased from 2861 in 2022, to 2887 in 2023, to 2889 in 2024. Toddler spaces have dropped from 2791 in 2022, to 2769 in 2023, to 2717 in 2024. However, looking at the capacity building data from First Children's Finance indicates that there are spaces being created and not yet "online" .

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

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

6.1 Spending – Child Care Resource and Referral Services

6.1.1 Spending – Child Care Resource and Referral Services:

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

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

☐ CCDF quality funds

☐ Non-CCDF funds

☐ CARES funds

☐ CRRSA Funds

☐ ARP Supplemental Discretionary

☐ ARP Stabilization 10% set-aside

☐ Unable to report. Indicate reason:

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

☐ 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. Vermont currently contracts with 12 agencies across the state for child care referral services. All 12 agencies have performance measures outlined in each of the grants related to the services that are provided. Referral Performance Measures: 1. 80% of referral clients have been offered information about quality care indicators. The agencies have maintained over 90% of referral clients offered information on quality care indicators from 2014 - 2020. 2. 80% of referral clients surveyed indicate that the service was helpful to them. The agencies have maintained over 90% of referral clients indicating the service was helpful to them from 2014-2020. 3. 75% of regulated child care programs have referral information updated in the past 3 months. At the end of calendar year 2020 69% of regulated child care programs with referral information updated in 3 months in BFIS. This is a performance measure that agencies have struggled with. In FFY18 the Division started monitoring this referral performance measure by having grant monitors randomly reviewing referral information entered by referral specialists. In FFY2020 the COVID-19 pandemic impacted the programs that were open to families which made it difficult for referral specialists to update information. However, the pandemic provided us systems through surveys to gather information which we hope will improve the accuracy of information going forward.

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: Vermont currently contracts with 11 agencies across the state in 12 regions for child care referral services. All 11 agencies have performance measures outlined in each of the contracts related to the services that are provided. Regular bi-annual reporting resumed with the mid year reporting period in January 2024. Referral Performance Measures: 1. 80% of referral clients have been offered information about quality care indicators. For the reporting period January- June 2024, an average of 94% of referral clients were offered information about quality care indicators. 2. 80% of referral clients surveyed indicate that the service was helpful to them. For the reporting period January- June 2024, an average of 95% of referral clients indicated the service was helpful to them. 3. 80% of regulated child care programs have referral information updated in the past 3 months. At the end of calendar year 2022, 59% of regulated child care programs with active referral agreements in BFIS were updated within the last 3 months of 2022. This is a performance measure that agencies have struggled with since monitoring of this measure began in FFY18. In early 2023, a statewide training was held to review referral practices. This served as a refresher for both new and seasoned staff to ensure statewide consistency. There was great improvement with this performance measure by April

2023, when 86% of regulated child care programs with active referral agreements in BFIS were updated within the last 3 months. As of June 2024, 84% of regulated child care programs with active referral agreements in BFIS were updated within the last 3 months.

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

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

7.1 Complaints about providers

7.1.1 Number of Complaints about providers:

How many complaints were received regarding providers during October 1, 2023 to September 30, 2024? **417 (332 completed; 15 still in progress; 37 not accepted; 33 rejected)**

7.1.2 Spending - Complaints about providers:

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

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

☒ CCDF quality funds

☐ Non-CCDF funds

☐ CARES funds

☐ CRRSA Funds

☐ ARP Supplemental Discretionary

☐ ARP Stabilization 10% set-aside

☐ Unable to report. Indicate reason:

☐ No

7.2 Licensing Staff

7.2.1 Number of Licensing Staff:

How many licensing staff positions were there in the state or territory during October 1, 2023 to September 30, 2024? Number of staff **23 (12 licensors who conduct routine annual inspection visits; 5 child care business technicians; 4 licensing supervisors; 1 admin coordinator; 1 director)**

7.2.2 Spending – Licensing Staff:

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

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

☒ CCDF quality funds

☐ Non-CCDF funds

☐ CARES funds

☐ CRRSA Funds

☐ ARP Supplemental Discretionary

☐ ARP Stabilization 10% set aside

☐ Unable to report. Indicate reason:

☐ No

7.3 Health and Safety Standards Coaching and Technical Assistance

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

How many child care programs received coaching or technical assistance to improve their understanding and adherence to CCDF health and safety standards as a result of an inspection or violation during October 1, 2023 to September 30, 2024? **The licensing unit conducted 159 technical assistance site visits during this period.**

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

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

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

☒ CCDF quality funds

☐ Non-CCDF funds

☐ CARES funds

☐ CRRSA Funds

☐ ARP Supplemental Discretionary

☐ ARP Stabilization 10% set-aside

☐ Unable to report. Indicate reason:

[] No

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

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

What is the total amount spent across all funding sources (i.e., CCDF quality set aside, non-CCDF funds, CARES, CRRSA, ARP Supplemental Discretionary, and ARP Stabilization 10% set-aside) on facilitating compliance with lead agency requirements for inspections, monitoring, health and safety standards and training, and lead agency licensing standards during October 1, 2023 to September 30, 2024? **\$550000**

[] 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. **The spending includes spending on licensing staff and the purchase of tablets for the licensing team.**

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 state measures the increase in percent of programs participating at 3, 4, or 5 star level of QRIS, and the capacity at the 3, 4, and 5 star level. The percentage of programs achieving 3 or more STARS has increased from 21% in state fiscal year 2010 (July 1, 2009 to June 30,2010) to 70% in state fiscal year 2020 (July 1, 2019 to June 30, 2020). The percentage of regulated child care capacity has increased from 45% in state fiscal year 2014 (July 1, 2013to June 30, 2014) to 78% in state fiscal year 2020 (July 1, 2019 to June 30, 2020).**

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: **The state measures the increase in the percentage of programs participating at 3, 4, or 5-star levels of QRIS. The percentage of regulated child care capacity in high-quality care decreased from 79.3% at the end of state fiscal year 2023 to 76.4% at the end of state fiscal year 2024. The total number of high-quality programs dropped from 733 by the end of SFY23 to 710 by the end of SFY24. However, the overall number of licensed providers increased from 1,043 to**

1,068. The decrease could be attributed to the revision of Vermont's QRIS program in July 2023. Many child care programs are still getting used to the new system. Vermont launched a quality incentive program in October 2024 and hopes to increase the number of high-quality programs in FFY25.

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

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

8.1 Evaluation and assessment of center-based programs

8.1.1 Evaluation and assessment of center-based programs:

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

☒ QRIS

☒ CLASS

☐ ERS

☐ FCCERS

☐ ITERS

☐ State evaluation tool. Describe

☐ Core Knowledge and Competency Framework

☒ Other. Describe **Teaching Pyramid Observation Tool (TPOT) and The Pyramid Infant-Toddler Observation Scale (TPITOS) for Early Multi-Tiered Systems of Support implementation sites**

☐ Do not evaluate and assess quality and effective practice

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

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

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

☒ CCDF quality funds

☐ Non-CCDF funds

☐ CARES funds

☐ CRRSA Funds

☒ ARP Supplemental Discretionary

☐ ARP Stabilization 10% set-aside

☐ Unable to report. Indicate reason:

☐ No

8.2 Evaluation and assessment of family child care programs

8.2.1 Evaluation and assessment of family child care programs:

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

☒ QRIS

☒ CLASS

☐ ERS

☐ FCCERS

☐ ITERS

☐ State evaluation tool. Describe

☐ Core Knowledge and Competency Framework

☒ Other. Describe **Teaching Pyramid Observation Tool (TPOT) and The Pyramid Infant-Toddler Observation Scale (TPITOS) for Early Multi-Tiered Systems of Support implementation sites**

☐ 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: **The funding for both center-based and family child care-based evaluations was included in the SPARQs agreement. That partner provided both coaching and assessments for both provider types.**

☐ No

8.3 Spending - Evaluation and assessment of child care programs

8.3.1 Spending - Evaluation and assessment of child care programs:

What is the total amount spent across all funding sources (i.e., CCDF quality set aside, non-CCDF funds, CARES, CRRSA, ARP Supplemental Discretionary, and ARP Stabilization 10% set-aside) on evaluating and assessing the quality of child care programs, practice, or child development during October 1, 2023 to September 30, 2024?
\$1884710

☐ 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 state measures the increase in percent of programs participating at 3, 4, or 5 star level of QRIS, and the capacity at the 3, 4, and 5 star level. The percentage of programs achieving 3 or more STARS has increased from 21% in state fiscal year 2010 (July 1, 2009 to June 30, 2010) to 70% in state fiscal year 2020 (July 1, 2019 to June 30, 2020). The percentage of regulated child care capacity has increased from 45% in state fiscal year 2014 (July 1, 2013 to June 30, 2014) to 78% in state fiscal year 2020 (July 1, 2019 to June 30, 2020).**

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: **The state measures the increase in the percentage of programs participating at 3, 4, or 5-star levels of QRIS. The percentage of regulated child care capacity in high-quality care decreased from 79.3% at the end of state fiscal year 2023 to 76.4% at the end of state fiscal year 2024. The total number of high-quality programs dropped from 733 by the end of SFY23 to 710 by the end of SFY24. However, the overall number of licensed providers increased from 1,043 to 1,068. The decrease could be attributed to the revision of Vermont's QRIS program in July 2023. Many child care programs are still getting used to the new system. Vermont launched a quality incentive program in October 2024 and hopes to increase the number of high-quality programs**

in FFY25.

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

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

9.1 Accreditation Support

9.1.1 Accreditation Support:

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

☒ Yes, providers were supported in their pursuit of accreditation

- a. Licensed center-based programs **22**
- b. License-exempt center-based programs **0**
- c. Licensed family child care homes **6**
- d. License-exempt family child care homes (care in providers' home) **0**
- e. Programs serving children who receive CCDF subsidy **28**

☐ 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, 2023 to September 30, 2024? **\$12000**

☐ 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 state measures the number of regulated child care programs and family child care homes that are nationally accredited. The number of nationally accredited programs has decreased from 81 programs in 2012 to 45 programs accredited in 2020. Programs have indicated the cost of achieving and maintaining accreditation is difficult, especially in maintaining qualified staff. Vermont supports programs through bonuses, and by streamlining and supporting accreditation through the QRIS program - STARS.**

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: **Vermont measures the number of nationally accredited regulated child care programs and family child care homes through the National Association for the Education of Young Children and the National Association for Family Child Care. The number of nationally accredited programs was 9 in 2023 and 28 in 2024. Vermont supports programs through accreditation grants for the application and reapplication fees, provides bonuses for achieving accreditation, and streamlines and supports accreditation through the QRIS program - STARS. After a dip in participation, more programs have accessed accreditation support through a broader outreach partnership with the Vermont Association for the Education of Young Children.**

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

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

10.1 High-Quality Program Standards

10.1.1 High-Quality Program Standards:

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

- ☒ QRIS, check which indicators the lead agency has established:
- ☐ Health, nutrition, and safety of child care settings
 - ☒ Physical activity and physical development in child care settings
 - ☒ Mental health of children
 - ☐ Learning environment and curriculum
 - ☐ Ratios and group size
 - ☒ Staff/provider qualifications and professional development
 - ☒ Teacher/provider-child relationships
 - ☒ Teacher/provider instructional practices
 - ☒ Family partnerships and family strengthening
 - ☐ Other. Describe:
- ☒ Early Learning Guidelines
- ☐ State Framework. Describe
- ☒ Core Knowledge and Competencies
- ☐ Other. Describe
- ☐ N/A – did not help provider develop or adopt high quality program standards

10.1.2 Spending - High-Quality Program Standards:

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

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

- ☒ CCDF quality funds
- ☒ Non-CCDF funds

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

What is the total amount spent across all funding sources (i.e., CCDF quality set aside, non-CCDF funds, CARES, CRRSA, ARP Supplemental Discretionary, and ARP Stabilization 10% set-aside) to support providers in the development or adoption of high-quality program standards related to health, mental health, nutrition, physical activity, and physical development during October 1, 2023 to September 30, 2024? **\$1884711**

- ☐ 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. **PDG funds were also used to support the QRIS system.**

- ☐ 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. **The state measures the increase in percent of programs participating at 3, 4, or 5 star level of QRIS, and the capacity at the 3, 4, and 5 star level. The percentage of programs achieving 3 or more STARS has increased from 21% in state fiscal year 2010 (July 1, 2009 to June 30, 2010) to 70% in state fiscal year 2020 (July 1, 2019 to June 30, 2020). The percentage of regulated child care capacity has increased from 45% in state fiscal year 2014 (July 1, 2013 to June 30, 2014) to 78% in state fiscal year 2020 (July 1, 2019 to June 30, 2020).**

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: **The state measures the increase in the percentage of programs participating at 3, 4, or 5-star levels of QRIS. The percentage of regulated child care capacity in high-quality care decreased**

from 79.3% at the end of state fiscal year 2023 to 76.4% at the end of state fiscal year 2024. The total number of high-quality programs dropped from 733 by the end of SFY23 to 710 by the end of SFY24. However, the overall number of licensed providers increased from 1,043 to 1,068. The decrease could be attributed to the revision of Vermont's QRIS program in July 2023. Many child care programs are still getting used to the new system. Vermont launched a quality incentive program in October 2024 and hopes to increase the number of high-quality programs in FFY25.

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

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

11.1 Sustainability funding to child care providers

11.1.1 Sustainability funding to child care providers:

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

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

☐ 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, 2023 to September 30, 2024?

☒ Yes. Describe: **The Child Development Division used ARPA funds to continue the build-out of CDDIS and began the design process for the second phase (Licensing and Workforce Registry).**

☐ No

11.2.2 Spending - Data Systems Investment:

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

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

☐ CCDF quality funds

☒ Non-CCDF funds

☐ CARES funds

☐ CRRSA Funds

☒ ARP Supplemental Discretionary

☐ ARP Stabilization 10% set-aside

☐ Unable to report. Indicate reason:

☐ No

11.3 Supply and Demand Analysis

11.3.1 Supply and Demand Analysis:

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

☐ Yes. Describe findings:

☒ No

11.3.2 Spending - Supply and Demand Analysis:

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

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

☐ CCDF quality funds

☐ Non-CCDF funds

☐ CARES funds

☐ CRRSA Funds

☐ ARP Supplemental Discretionary

☐ ARP Stabilization 10% set-aside

☐ Unable to report. Indicate reason:

☒ No

11.4 Supply and Demand Initiatives

11.4.1 Supply and Demand Initiatives:

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

☐ Child care deserts

☒ Infants/toddlers

☒ Children with disabilities

☐ English language learners

☐ Children who need child care during non-traditional hours

☒ Other. Describe: **Funds were used to address the need for school-aged care**

11.4.2 Spending - Supply and Demand Initiatives:

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

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

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

☐ No

11.5 Provider Compensation and Benefits

11.5.1 Spending - Provider Compensation and Benefits:

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

- ☐ Financial bonuses (not tied to education levels)
- ☐ Salary enhancements/wage supplements
- ☐ Health insurance coverage
- ☐ Dental insurance coverage
- ☐ Retirement benefits
- ☐ Loan Forgiveness programs
- ☐ Mental Health/Wellness programs
- ☐ Start up funds

☒ Other. Describe: **Licensed and regulated programs were awarded state-funded Readiness payments between Sept 2023 and April 2024. Some programs indicated in the survey that they used the funds to provide raises, increased benefit packages, or other supports such as mental health initiatives. Due to the Readiness program's structure and payment processes, it is impossible to give a defined number of impacted providers, as we can not parse the number of individuals from the number of programs that participated.**

☐ N/A. Describe:

11.5.2 Spending - Provider Compensation and Benefits:

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

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

☒ CCDF quality funds

☒ Non-CCDF funds

☐ CARES funds

☐ CRRSA Funds

☒ ARP Supplemental Discretionary

☐ ARP Stabilization 10% set-aside

☐ Unable to report. Indicate reason:

☐ No

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

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

What is the total amount spent across all funding sources (i.e., CCDF quality set aside, non-CCDF funds, CARES, CRRSA, ARP Supplemental Discretionary, and ARP Stabilization 10% set-aside) on other activities to improve the quality of child care services during October 1, 2023 to September 30, 2024? **\$8000000**

☐ 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. **As noted above, there was 21,000,000 distributed from the Readiness payment program. However, while we know some programs invested in compensation and benefits we also know that not all did. Therefore, while we mention it as a source of funding I did not include it in the total amount spent.**

11.7 Progress Update

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

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

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

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

N/A

Please include information on the outcomes and numerical targets achieved based on the measurable indicators of progress specified in section 7.10.2 of the 2022-2024 CCDF Plan: Vermont's system for Program Access to Resources for Quality Supports (SPARQS) supports quality improvement by offering child care and afterschool programs across the state, quality coaching, and mentoring to support the culture of quality throughout Vermont's early childhood education program and began in July 2023. A team of quality support specialists provides comprehensive support through self-directed program resources, direct consultation and referrals, training and updates, and coaching and mentoring. In FFY 24, SPARQS provided the following services:

- 204 Unique Program Coaching Requests, approximately 800 coaching engagements
- 75 of associated service plans report technical assistance embedded in a coaching relationship and 12 direct referrals to an external partner (though countless referrals are made to resources to help the program with goals, support, and quality improvement).
- 92 distinct programs requested consultations, which included a site visit and CLASS observation, a complete unscored report, and a follow-up conversation. All were completed.
- 97 total trainings, with 2,432 total attendees

SPARQS was launched in July 2023 so this was the first full year for which we have data. Since the launch of this program, CDD has approved the hiring for three additional reviewers/coaches to address the backlog as the assessment and coaching supports have proven to be highly popular. We will have additional yearly data for comparison in the 2025 QPR. We are also pursuing the Teachstone database in order to obtain data in real-time across the entirety of the regulated child care system for the QRIS CLASS assessment based system. We anticipate that data to start being collected by the end of 2025.

Additionally, Vermont's Business Technical Assistance Program provides expert business training, technical assistance, and consulting to help start, sustain, and grow child care businesses. BTAP programs and services assist entrepreneurs in launching, stabilizing, improving, and expanding child care businesses. They approach child care leaders as entrepreneurs, increasing their capacity to start and operate financially sustainable child care businesses. Vermont's Child care businesses can participate in various training, workshops, cohorts, and individual consultations at no cost. In FFY24, BTAP provided training to 221 participants and technical assistance to 315 clients. We had no data to report in FY23 as the

program was in the nascent stage. We look forward to having more data for comparison in the 2025 QPR.

Phase 2 of the Child Development Division Information System (CDDIS) is underway. The CDD is currently gathering information and requirements about the Childcare Licensing Unit's needs. This next stage of development will replace the old Bright Futures Information.

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. **The annual aggregate data report of serious injuries and deaths is reviewed annually by the CDD licensing leadership team. The team reviews the data with a eye towards not only the circumstances of what happened as well as what training needs to both the field and to licensors would be helpful in order to prevent these situations from occurring again. Additionally, the licensing leadership team, in collaboration with our Deputy Commissioner if needed, reviews any potential changes to the regulations that could/should shift to increase child safety within programs.**

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. **During this review period, the licensing unit successfully implemented our comprehensive checklists and are now regulating all the required CCDF health and safety standards that exist in our current set of rules. Our licensing team received intensive TA to meet our objectives in this area. As there were no serious injuries or deaths in this reporting year, CDD did not review or make any changes to our licensing regulations, enforcement mechanisms, or policies.**