Quality Progress Report (QPR) For Connecticut FFY 2020

1) Overview

To gain an understanding of the availability of child care in the State/Territory please provide the following information on the total number of child care providers. Please enter N/A when necessary.

1.1 State or Territory Child Care Provider Population

Enter the total number of child care providers that operated in the State/Territory as of September 30 of the last federal fiscal year. These counts should include all child care providers, not just those serving children receiving CCDF subsidies. Please enter N/A when necessary.

oviders, not just those serving children receiving CCDF subsidies. Please enter l
hen necessary.
a. Licensed family child care # 1,892
□ N/A
Describe:
b. Legally exempt family child care (care in providers' home) # 0
▼ N/A
Describe:
Connecticut's Licensing Regulations allows informal care to be provided
byneighbors but does not track the number of providers. Connecticut's Care 4
KidsSubsidy Program does not allow any licensed exempt non-relatives to care
forchildren. Only relatives who are related to the child by blood, marriage, or
adoptionand are at least 20 years or older. Relative is defined in Pub L. 113-186
andregulation, 45 CFR Part § 98.41 (a) as grandmother/grandfather,
greatgrandmother/grandfather, aunt/ uncle, and sibling are eligible to receive a
Care 4Kids subsidy.
c. Licensed center-based programs # 1,403
□ N/A
Describe:

Connecticut Page 1 of 63

d. Legally exempt center-based programs #	649
□ N/A	
Describe:	
e. In-home (care in the child's own home) #	3.283
□ N/A	0,200
Describe:	
f. Other (explain)	

1.2 Goals for Quality Improvement

Based on Question 7.1.1 and 7.1.2 from the FFY2019-2021 CCDF State Plan, please report your progress on the State or Territory's overarching goals for quality improvement during October 1 to September 30 of the last federal fiscal year. You may include any significant areas of progress that were not anticipated in the Plan, as well. For each goal listed, briefly describe the improvement with specific examples or numeric targets where possible.

Connecticut is in the process of undertaking a significant statewide initiative to systemically improve the quality of early childhood programs serving children birth-5 years old. This quality improvement system will support continuous improvement to all provider settings, and provide families and communities evidence-based guidance about program quality when choosing a home-based or center-based setting. This system will be aligned with existing quality standards utilizing a streamlined infrastructure toward improving program quality and enhancing child and family outcomes. Connecticut will build on its robust licensing foundation and collaborate with national systems to align to the top tier of national quality standards. The system will also articulate professional and compliance indicators to support programs toward accreditation.

Connecticut will conduct a baseline program quality study to better understand how early care and education learning environments vary across the state and to help define program quality. Working with our research partner, UConn School of Social Work, we will identify tools and measurement strategies to be utilized in the baseline study. The OEC has expanded its staffing capacity for this development work and is prepared to deploy staff for data collection purposes.

Connecticut Page 2 of 63

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

Goal: Ensure the State/Territory's professional development systems or framework provides initial and ongoing professional development and education that result in a diverse and stable child care workforce with the competencies and skills to support all domains of child development. Please select N/A when necessary.

2.1 State/Territory Progression of Professional Development

2.1.1 Did the State/Territory use a workforce registry or professional development registry to track progression of professional development during October 1 to September 30 of the last federal fiscal year?

Yes.

If yes, describe:

- Connecticut's Office of Early Childhood administers the Early Childhood Professional Registry to track early childhood professionals and programs. As of September 30, 2020, the Registry had approximately 14,626 renewed accounts, with 26,280 accounts having activity from Oct 1, 2019 to Sept 30, 2020. The Registry membership is required of all teaching and administrative staff of state funded programs and those funded by Care 4 Kids Subsidy Program; also included are state wide trainers and consultants. The Registry allows participants to build a profile of their employment and education, and offers tools such as a Resume Builder, Licensing Head Teacher Request, Employment History and Scholarship Request.

N

If no, what alternative does the State/Territory use to track the progression of professional development for teachers/providers serving CCDF eligible children? Describe:

2.1.2 Are any teachers/providers required to participate?

Yes.

If yes, describe:

The Registry membership is required of all teaching and administrative staff of state funded programs and those funded by the Care 4 Kids Subsidy Program.

Connecticut Page 3 of 63

L No.
If no, describe:
2.1.3 How many people were in the registry as of September 30 of the last federal fiscal year? # 26,280
2.2 What supports did the State/Territory make available to teachers/providers to help them progress in their education and professional pathway between October 1 and September 30 of the last federal fiscal year (check all that apply)? If available, how many people received each type of support?
Scholarships (for formal education institutions) # 552
Financial bonus/wage supplements tied to education levels # 22
Career advisors, Mentors, Coaches, or Consultants # 3
Reimbursement for training #
Loans #
Other. Describe:
Describe.
□ N/A
Describe:
2.3 Did the State/Territory have other initiatives available to support professional development and the workforce during October 1 to September 30 of the last federal fiscal year? (e.g. Substitutes, sick/annual leave, release time, etc.)
Tyes.
If yes, describe:
▼ No.
For the questions 2.4 to 2.9 please report on the number of staff by qualification level

Connecticut Page 4 of 63

as of September 30th of the last federal fiscal year. Count only the highest level

attained by staff.

2.4 Licensed child care center director

a) How many had a Child Development Associate (CDA)?
☐ Unknown
Describe:
1,452 (total #) licensed child care center directors, 11 had a CDA (.76%)
Qualification / limitations: Only certain providers in CT are required to have OEC Registry accounts and, of those, only some are required to submit education qualifications; Care 4 Kids providers are required to have accounts but are not required to submit education earned.
#: 11
% : .76
b) How many had an Associate's degree in an early childhood education?
☐ Unknown
Describe:
1,452 (total #) licensed child care center directors, 124 had an Associate's degree (8.54%)
Qualification / limitations: Only certain providers in CT are required to have OEC
Registry accounts and, of those, only some are required to submit education
qualifications; Care 4 Kids providers are required to have accounts but are not
required to submit education earned
#: 124
% : 8.54
c) How many had a Bachelor's degree in an early childhood education?
☐ Unknown
Describe:
1,452 (total #) licensed child care center directors, 286 had a Bachelor's degree in early childhood (19.7%)
Qualification / limitations: Only certain providers in CT are required to have OEC Registry accounts and, of those, only some are required to submit education

Connecticut Page 5 of 63

qualifications; Care 4 Kids providers are required to have accounts but are not required to submit education earned

#: 286 %: 19.7

d) How many had a State child care credential?

Unknown

Describe:

1,452 (total #) licensed child care center directors, 4 had State child care credential (.28%)

Qualification / limitations: Only certain providers in CT are required to have OEC Registry accounts and, of those, only some are required to submit education qualifications; Care 4 Kids providers are required to have accounts but are not required to submit education earned

#: 4

%: .28

- e) How many had State infant and toddler credentials?
 - Unknown

Describe:

Connecticut does not have an infant/toddler credential.

#:

%:

f) How many had an "other" degree in a field related to early childhood education or coursework equivalent to a major relating to early childhood education with experience teaching appropriate age group?

Unknown

Describe:

1,452 (total #) licensed child care center directors, 8 had an "other" degree in a field related to early childhood education (.55%)

Qualification / limitations: Only certain providers in CT are required to have OEC Registry accounts and, of those, only some are required to submit education qualifications; Care 4 Kids providers are required to have accounts but are not

Connecticut Page 6 of 63

required to submit education earned

#: 8 %: .55

2.5 Licensed child care center teachers

a) How many had a Child Development Associate (CDA)?
☐ Unknown
Describe:
11,509 (total #) licensed child care center teachers, 250 have a CDA (2.17%)
Qualification / limitations: Only certain providers in CT are required to have OEC
Registry accounts and, of those, only some are required to submit education
qualifications; Care 4 Kids providers are required to have accounts but are not
required to submit education earned
#: 250
% : 2.17
b) How many had an Associate's degree in an early childhood education?
☐ Unknown
Describe:
11,509 (total #) licensed child care center teachers, 828 have an Associate's degree in early childhood(7.19%)
Qualification / limitations: Only certain providers in CT are required to have OEC
Registry accounts and, of those, only some are required to submit education
qualifications; Care 4 Kids providers are required to have accounts but are not
required to submit education earned
#: 828
% : 7.19
c) How many had a Bachelor's degree in an early childhood education?
☐ Unknown
Describe:
11,509 (total #) licensed child care center teachers, 721 had a Bachelor's degree in early childhood.(6.26%)

Connecticut Page 7 of 63

Qualification / limitations: Only certain providers in CT are required to have OEC Registry accounts and, of those, only some are required to submit education qualifications; Care 4 Kids providers are required to have accounts but are not required to submit education earned

#: 721 **%**: 6.26 d) How many had a State child care credential? Unknown Describe: 11,509 (total #) licensed child care center teachers, 25 had a State child care credential (.22%) Qualification / limitations: Only certain providers in CT are required to have OEC Registry accounts and, of those, only some are required to submit education qualifications; Care 4 Kids providers are required to have accounts but are not required to submit education earned #: 25 **%**: .22 e) How many had State infant and toddler credentials? Unknown Describe: Connecticut does not have an infant/toddler credential. #: %: f) How many had an "other" degree in a field related to early childhood education or coursework equivalent to a major relating to early childhood education with experience teaching appropriate age group? Unknown Describe: 11,509 (total #) licensed child care center teachers, 6 had an "other" degree in a field

Connecticut Page 8 of 63

Qualification / limitations: Only certain providers in CT are required to have OEC

related to early childhood education (.05%)

Registry accounts and, of those, only some are required to submit education qualifications; Care 4 Kids providers are required to have accounts but are not required to submit education earned

#: 6 %: .05

2.6 Licensed family child care providers

a) How many had a Child Development Associate (CDA)?
☐ Unknown
Describe:
1,057 (total #) licensed family child care providers, 80 had a CDA.(7.57%)
Qualification / limitations: Only certain providers in CT are required to have OEC
Registry accounts and, of those, only some are required to submit education
qualifications; Care 4 Kids providers are required to have accounts but are not
required to submit education earned
#: 80
% : 7.5
b) How many had an Associate's degree in an early childhood education?
☐ Unknown
Describe:
1,057 (total #) licensed family child care providers, 25 had an Associate's degree in early childhood (2.37%)
Qualification / limitations: Only certain providers in CT are required to have OEC
Registry accounts and, of those, only some are required to submit education
qualifications; Care 4 Kids providers are required to have accounts but are not
required to submit education earned
#: 25
% : 2.37
c) How many had a Bachelor's degree in an early childhood education?
□ Unknown

Connecticut Page 9 of 63

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1,057 (total #) licensed family child care providers, 8 had a Bachelor's degree in early childhood (.76%).

Qualification / limitations: Only certain providers in CT are required to have OEC Registry accounts and, of those, only some are required to submit education qualifications; Care 4 Kids providers are required to have accounts but are not required to submit education earned.

#: 8 %: .76

d) How many had a State child care credential?

Unknown

Describe:

1,057 (total #) licensed family child care providers, 0 had a State child care credential (0%)

Qualification / limitations: Only certain providers in CT are required to have OEC Registry accounts and, of those, only some are required to submit education qualifications; Care 4 Kids providers are required to have accounts but are not required to submit education earned

#: 0 %: 0

e) How many had State infant and toddler credentials?

✓ Unknown

Describe:

Connecticut does not have an infant/toddler credential.

#: %:

f) How many had an "other" degree in a field related to early childhood education or coursework equivalent to a major relating to early childhood education with experience teaching appropriate age group?

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Connecticut Page 10 of 63

Describe:

1,057 (total #) licensed family child care providers, 2 has an "other " degree in a related field (.19%).

Qualification / limitations: Only certain providers in CT are required to have OEC Registry accounts and, of those, only some are required to submit education qualifications; Care 4 Kids providers are required to have accounts but are not required to submit education earned

#: 2 %: .19

2.7 Licensed child care center directors who serve CCDF children

a) How m	any had a	Child Developme	ent Associate	(CDA)?
10000000				

Unknown Describe:

1,043 (total #) Licensed child care center directors who serve CCDF children 9 had a CDA (.86%).

Qualification / limitations: Only certain providers in CT are required to have OEC Registry accounts and, of those, only some are required to submit education qualifications; Care 4 Kids providers are required to have accounts but are not required to submit education earned

#: 9 %: .86

b) How many had an Associate's degree in an early childhood education?

Unknown

Describe:

1,043 (total #) Licensed child care center directors who serve CCDF children 103 has an Associate's degree in early childhood education (9.88%).

Qualification / limitations: Only certain providers in CT are required to have OEC Registry accounts and, of those, only some are required to submit education qualifications; Care 4 Kids providers are required to have accounts but are not required to submit education earned

Connecticut Page 11 of 63

#: 103 %: 9.8

C)) H	ow many	y had a	Bachelor's	degree in	an early	v childhood	education?

Unknown

Describe:

1,043 (total #) Licensed child care center directors who serve CCDF children 207 had a Bachelor's degree in early childhood education (19.85%).

Qualification / limitations: Only certain providers in CT are required to have OEC Registry accounts and, of those, only some are required to submit education qualifications; Care 4 Kids providers are required to have accounts but are not required to submit education earned

#: 207 %: 19.85

d) How many had a State child care credential?

Unknown

Describe:

1,043 (total #) Licensed child care center directors who serve CCDF children 3 has a State child care credential (.29%)

Qualification / limitations: Only certain providers in CT are required to have OEC Registry accounts and, of those, only some are required to submit education qualifications; Care 4 Kids providers are required to have accounts but are not required to submit education earned.

#: 3 %: .29

e) How many had State infant and toddler credentials?

Unknown

Describe:

Connecticut does not have an infant/toddler credential.

#: %:

Connecticut Page 12 of 63

How many had an "other" degree in a field related to early childhood education or coursework equivalent to a major relating to early childhood education with experience eaching appropriate age group?	
☐ Unknown	
Describe:	
1,043 (total #) Licensed child care center directors who serve CCDF children 5 ha	s an
"other" degree in a field related to early childhood education (.48%).	
Qualification / limitations: Only certain providers in CT are required to have OEC	
Registry accounts and, of those, only some are required to submit education	
qualifications; Care 4 Kids providers are required to have accounts but are not	
required to submit education earned	
#: 5	
%: .48	
2.8 Licensed child care center teachers who serve CCDF children	
a) How many had a Child Development Associate (CDA)?	
☐ Unknown	
Describe:	
9,501 (total #) Licensed child care center teachers who serve CCDF children, 218	has
a CDA (2.29%).	
Qualification / limitations: Only certain providers in CT are required to have OEC	
Registry accounts and, of those, only some are required to submit education	
qualifications; Care 4 Kids providers are required to have accounts but are not	
required to submit education earned.	
#: 218	
%: 2.29	
b) How many had an Associate's degree in an early childhood education?	
☐ Unknown	
Describe:	
9,501 (total #) Licensed child care center teachers who serve CCDF children, 663	has
an Associate's degree in early childhood (6.98%).	
Qualification / limitations: Only certain providers in CT are required to have OEC	

Connecticut Page 13 of 63

Registry accounts and, of those, only some are required to submit education qualifications; Care 4 Kids providers are required to have accounts but are not required to submit education earned.

#: 663 %: 6.98

c) How many had a Bachelor's degree in an early childhood education?

Unknown

Describe:

9,501 (total #) Licensed child care center teachers who serve CCDF children, 524 has a Bachelor's degree in early childhood education (5.52%)

Qualification / limitations: Only certain providers in CT are required to have OEC Registry accounts and, of those, only some are required to submit education qualifications; Care 4 Kids providers are required to have accounts but are not required to submit education earned.

#: 524 %: 5.52

d) How many had a State child care credential?

Unknown

Describe:

9,501 (total #) Licensed child care center teachers who serve CCDF children, 16 had a State child care credential (.17%)

Qualification / limitations: Only certain providers in CT are required to have OEC Registry accounts and, of those, only some are required to submit education qualifications; Care 4 Kids providers are required to have accounts but are not required to submit education earned.

#: 16 %: .17

e) How many had State infant and toddler credentials?

Unknown

Describe:

Connecticut does not have an infant/toddler credential.

Connecticut Page 14 of 63

#: %:
f) How many had an "other" degree in a field related to early childhood education or coursework equivalent to a major relating to early childhood education with experience teaching appropriate age group?
☐ Unknown
Describe:
9,501 (total #) Licensed child care center teachers who serve CCDF children, 2 has an
"other" degree in a field related to early childhood education (.02%).
Qualification / limitations: Only certain providers in CT are required to have OEC Registry accounts and, of those, only some are required to submit education qualifications; Care 4 Kids providers are required to have accounts but are not required to submit education earned.
#: 2 %: .02
2.9 Licensed family child care providers who serve CCDF children
a) How many had a Child Development Associate (CDA)?
☐ Unknown
Describe:
802 (total #) Licensed family child care providers who serve CCDF children, 75 had a CDA (9.35%).
Qualification / limitations: Only certain providers in CT are required to have OEC
Registry accounts and, of those, only some are required to submit education
qualifications; Care 4 Kids providers are required to have accounts but are not
required to submit education earned
#: 7 5
% : 9.35

Connecticut Page 15 of 63

b) How many had an Associate's degree in an early childhood education?

Unknown

Describe:

802 (total #) Licensed family child care providers who serve CCDF children, 16 has an Associate's degree (2%).

Qualification / limitations: Only certain providers in CT are required to have OEC Registry accounts and, of those, only some are required to submit education qualifications; Care 4 Kids providers are required to have accounts but are not required to submit education earned.

#: 16 %: 2

c) How many had a Bachelor's degree in an early childhood education?

Unknown

Describe:

802 (total #) Licensed family child care providers who serve CCDF children, 4 has a Bachelor's degree in early childhood education(.50%).

Qualification / limitations: Only certain providers in CT are required to have OEC Registry accounts and, of those, only some are required to submit education qualifications; Care 4 Kids providers are required to have accounts but are not required to submit education earned.

#: 4 %: .50

d) How many had a State child care credential?

Unknown

Describe:

802 (total #) Licensed family child care providers who serve CCDF children, 0 has a State child care credential (0%).

Qualification / limitations: Only certain providers in CT are required to have OEC Registry accounts and, of those, only some are required to submit education qualifications; Care 4 Kids providers are required to have accounts but are not required to submit education earned.

#: 0

Connecticut Page 16 of 63

%: 0

□ N/A

e) How many had State infant and toddler credentials?
✓ Unknown
Describe:
Connecticut does not have an infant/toddler credential.
#: %:
f) How many had an "other" degree in a field related to early childhood education or coursework equivalent to a major relating to early childhood education with experience teaching appropriate age group?
☐ Unknown
Describe:
802 (total #) Licensed family child care providers who serve CCDF children, 1 had an
"other" degree in a field related to early childhood education (.12%).
Qualification / limitations: Only certain providers in CT are required to have OEC
Registry accounts and, of those, only some are required to submit education
qualifications; Care 4 Kids providers are required to have accounts but are not
required to submit education earned.
#: 1
% : .12
2.10 Spending
2.10.1. Did the State/Territory spend CCDF quality set aside funds to support the training and professional development of the child care workforce during October 1 to September 30 of the last federal fiscal year? This includes CCDF funds from all available appropriation years that were spent during the fiscal year. If so, what estimated percentage of CCDF quality dollars was spent on supporting the training and professional development of the child care workforce Yes.
If yes, %: 15
□ No

Connecticut Page 17 of 63

2.10.2 Did the State/Territory use other non-CCDF funds to support the training and professional development of the child care workforce (for example, TANF funds spent directly on quality, Preschool Development Funds, state or local funds, etc.) during October 1 to September 30 of the last federal fiscal year? If yes, describe the source of the funding and the total amount.
☐ Yes.
If yes, describe:
▼ No
□ N/A
Describe:
2.10.3 Did the State/Territory spend at least some of the increased CCDF funds from the Consolidated Appropriations Act, 2018 towards supporting the training and professional development of the child care workforce?
☐ Yes.
If yes, describe:
▼ No
□ N/A
Describe:

2.10.4 Did the State/Territory spend at least some of the CCDF funds from the Coronavirus Aid, Relief, and Economic Security (CARES) Act, 2020 towards supporting the training and professional development of the child care workforce?

Yes.

Describe:

If yes, describe:

Funding: \$15,000,000

The CT CARES for Child Care Businesses program offers an array of supports to CT licensed child care providers, including center-based, group family child care homes, and family child care homes during the COVID-19 emergency. The

Connecticut Page 18 of 63

following subsidies are available to help reduce business expenses:

- •Expense Kick Start: To help pay for operating costs such as mortgage payments, utilities and payroll. The subsidies are given to programs that are accredited through the National Association for Family Child Care (NAFCC) or the National Association for the Education of Young Children (NAEYC).
- •Supply Subsidy: To help pay for the added costs of maintaining safe and healthy services for children, families, and staff. The subsidy is intended to help cover the costs of increased cleaning supplies, personal protective equipment (PPE), and nursing/medical consultation.
- •Staff Training Subsidy: To help pay for the costs of First Aid, CPR, Medication Administration and Emergency Anaphylactic Medication Administration ("EpiPen®") trainings and certifications that were to expire during the COVID-19 emergency.
- •Background Check Subsidy: To help pay for the costs of criminal background checks for both new staff and renewals of licensed providers.

The CT Cares for Businesses program also offered a number of other supports, including:

- •Professional Development: The OEC developed webinars, online trainings, and course credit work to guide programs in child development, early learning standards, assessments and family engagement best practices during the COVID-19 emergency.
- •Business Support and Incentives: Individual and group training and coaching was coordinated by the Women's Business Development Council (WBDC) to support providers and programs apply for state and federal business supports and incentives.

Connecticut's Resource and Referral Agency, 211 Child Care, was a key partner in the implementation of the many CT CARES programs offered by the OEC to provide enhanced support to families for child care during the COVID-19 emergency. 211 Child Care tracked weekly data on the open and closed status of child care programs across the state.

No
N/A

Connecticut Page 19 of 63

Describe:

2.11 Progress Update:

Describe the measures used and progress made during October 1 to September 30 of the last federal fiscal year. Include examples and numeric targets where possible.

Connecticut is in the process of undertaking a significant statewide initiative to systemically improve the quality of early childhood programs serving children birth-5 years old. This quality improvement system will support continuous improvement to all provider settings, and provide families and communities evidence-based guidance about program quality when choosing a home-based or center-based setting.

This system will be aligned with existing quality standards utilizing a streamlined infrastructure toward improving program quality and enhancing child and family outcomes. Connecticut will build on its robust licensing foundation and collaborate with national systems to align to the top tier of national quality standards. The system will also articulate professional and compliance indicators to support programs toward accreditation.

Connecticut will conduct a baseline program quality study to better understand how early care and education learning environments vary across the state and to help define program quality. Working with our research partner, UConn School of Social Work, we will identify tools and measurement strategies to be utilized in the baseline study. The OEC has expanded its staffing capacity for this development work and is prepared to deploy staff for data collection purposes.

New Licenses Issued This Year:

Child Care Centers=64
Group Child Care Homes=1
Family Child Care Homes=118
Youth Camps=24

New Licenses Issued Previous Year:

Child Care Centers=65
Group Child Care Homes=2
Family Child Care Homes=177
Youth Camps=70

Connecticut Page 20 of 63

As of 9/30/19, the capacity of 1,402 licensed centers/groups was 100,625 and the capacity of 1,909 family child care homes was 16,996.

As of 9/30/20, the capacity of 1,401 licensed centers/groups was 101,794 and the capacity of 1,885 family child care homes was 16,775.

During this year, there were 9,083 violations cited during 4,219 licensing inspections (includes license-exempt programs and camps). During the previous year, there were 21,809 violations cited during 5,694 licensing inspections.

Accreditations

Number of program achieving national accreditation: (e.g. NAEYC, NAFCC):

- Nineteen (19) early childhood programs were awarded NAEYC initial accreditation.

Statewide Totals:

- •NAEYC Accredited Total = 478 primary (plus satellites) and 144 in process (registered through candidacy)
- •NAFCC Accredited Total = 47 and seven (7) in Self Study process

Degrees and credentials earned during Oct 1 2019-Sept 30, 2020:

- •CDA credential = 123
- •Associate degree ECE = 50
- •Bachelor's degree or higher ECE = 54

Online health and safety orientation completions: # completed 2,469.

3) Improving early learning and development guidelines

Goal: To ensure the State/Territory 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, professional development, and families.

3.1. Describe any changes or updates to the State or Territory's early learning and development guidelines during October 1 to September 30 of the last federal fiscal year

No changes have been made to the CT Early Learning and Development Standards during this time.

3.2 Spending

Connecticut Page 21 of 63

3.2.1. Did the State/Territory spend CCDF quality set aside funds during October 1 to September 30 of the last federal fiscal year on the development or implementation of early learning and development guidelines? This includes CCDF funds from all available appropriation years that were spent during the fiscal year. If so, what was the percentage of CCDF quality dollars spent on the development or implementation of early learning and development guidelines?

Yes.	
If yes, %: 2	
□ No	
□ N/A	
Describe:	

3.2.2. Did the State/Territory use other non-CCDF funds to develop or implement early learning and development guidelines (for example, TANF funds spent directly on quality, Preschool Development Funds, state or local funds, etc.) during October 1 to September 30 of the last federal fiscal year? If yes, describe the source of the funding and the total amount.

Yes.

If yes, describe:

WIDA Early Years promotes equitable early care and education (ECE) opportunities for young multilingual children. In partnership with OEC, WIDA Early Years scheduled and facilitated a Statewide Planning Team Convening, two WIDA Promising Practices Kit Roll Out Events and two WIDA Early Years Partnership Kick Off Events. These events reached 60 early care and education providers and professionals, introducing and gathering input regarding future use of the WIDA Early Years resources in CT. Twenty-two participants completed the WIDA Essential Institutes I and II Professional Learning Cohort. This intensive program prepares participants to facilitate local professional learning opportunities for early care and education audiences around the WIDA Early Years Essential Actions. Using a blended learning design that spans 4 months, this program engages participants in activities focused on enhanced facilitation techniques, as well as strategies for planning and evaluating effective professional learning.

Funding: \$70,000

Connecticut Page 22 of 63

□ No	
□ N/A	
Describe:	
	rritory spend at least some of the increased CCDF funds from the ations Act, 2018 on developing or implementing early learning and s?
If yes, describe:	
☑ No	
□ N/A	
Describe:	
	rritory spend at least some of the CCDF funds from the Coronavirus mic Security (CARES) Act, 2020 on developing or implementing early ent guidelines?
☑ No	
□ N/A	
Describe:	

3.3 Progress Update:

Describe the measures used and progress made during October 1 to September 30 of the last federal fiscal year. Include examples and numeric targets where possible.

Connecticut's Early Learning and Development Standards (CT ELDS) for children birth to age 5, which are aligned to the CT Core Standards (kindergarten through Grade 12) were released in 2013, following an extensive development process that included a content validation study conducted by NAEYC. The CT ELDS include a Dual Language Development Framework. In 2016, supplementary guidance regarding implementation of the CT ELDS

Connecticut Page 23 of 63

was released, which includes strategies for supporting young children with special needs and dual language learners across the domains and strands in the CT ELDS. In addition, specific guidance documents were released addressing the broader considerations for implementing the CT ELDS to support children with special needs and Dual Language Learners. In addition to the documents, the intermediate CT ELDS training specifically addressing meeting the needs of Dual Language Learners.

As a part of the Preschool Development Grant, the OEC has partnered with WIDA Early Years to utilize their resources and conduct a Professional Learning Cohort of trainers around supporting multi-lingual learners. The goal is to integrate the WIDA Early Years resources with other efforts related to the CT ELDS.

The OEC has trained and approved 71 CT ELDS trainers. While OEC sponsored training on CT DOTS was limited, records show 27 individuals completed introductory training on CT ELDS and 5 individuals completed Intermediate CT ELDS training between 10/1/19 and 9/30/20.

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

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

Please provide your State/Territory's definition of high quality care, and how it relates to the tiers of your QRIS (if applicable). This may include the State/Territory's RTT-ELC definition of high quality or high quality definition as part of the State/Territory's Quality Rating Improvement System (QRIS). If no QRIS exists describe other measures used to assess quality (may include assessment scores, accreditation, or other metric):

Connecticut defines high quality care by the providers valid accreditation status.

Connecticutrecognizes four accreditations: National Association for the Education of Young Children(NAEYC), National Association for Family Child Care (NAFCC), Council on Accreditation(COA), and New England Association of School and Colleges (NEASC).

4.1 Did the status of your State/Territory quality rating and improvement system
(QRIS) change during October 1 to September 30 of the last federal fiscal year?
Yes, the State/Territory QRIS is now operating
State/Territory-wide

Connecticut Page 24 of 63

localities, or only a few levels
Yes, the State/Territory is now operating another system of quality improvement.
Describe:
Yes, the State/Territory no longer has a QRIS.
No, the status of the State/Territory QRIS has not changed as of September 30th of the last federal fiscal year.
4.2 Did the types of providers included in the State/Territory QRIS change during October 1 to September 30 of the last federal fiscal year? If yes, check which types of providers were added or removed (check all that apply):
Added licensed family child care
Removed licensed family child care
Added legally exempt family child care (care in providers' home)
Removed legally exempt family child care (care in providers' home)
Added licensed center-based programs
Removed licensed center-based programs
Added legally exempt center-based programs
Removed legally exempt center-based programs
Added in-home (care in the child's own home)
Removed in-home (care in the child's own home)
Other.
Describe:
✓ No
4.3 Is participation in the State/Territory QRIS mandatory for any group of providers?
☐ Yes
Describe;
□No

Connecticut Page 25 of 63

V	N/A
	Describe;
	Connecticut is currently not operating a QRIS.
Septe a) b) c) d) e)	nter the number of programs that met the State's high quality definition as of mber 30 the last fiscal year: Licensed family child care # 39 Legally exempt family child care (care in providers' home) # Licensed center-based programs # 294 Legally exempt center-based programs # 59 In-home (care in the child's own home) #
	Describe: There are no legally exempt family child care providers in Connecticut.
a) b) c)	mber 30 of the last federal fiscal year: Birth to 35 months # 2314 3 years up to kindergarten entry # 3897 School Aged (post kindergarten entry) # 912 Other. Describe:
	N/A Describe:
of Sep a) b)	rovide the percentage of CCDF children in high quality care by age grouping as otember 30 of the last federal fiscal year: Birth to 35 months % 25 3 years up to kindergarten entry % 37 School Aged (post kindergarten entry) % 11
d)	Other. Describe: 1. Of the 9,392 (total #) CCDF children birth to 35 months, 2,314 (25%) were served in high quality settings.

Connecticut Page 26 of 63

2. Of the 10,629 (total #) CCDF children 3 years old up to kindergarten entry 3,897

(37%) were served in high quality settings.

quality settings.
□ N/A Describe:
4.7 Provide the number of programs that participated in the State/Territory's QRIS in the last fiscal year.
4.7.1 What is the total number of <i>eligible</i> child care settings for QRIS or other transparent system of quality indicators?
i. Licensed Child Care Centers:
#
✓ N/A
Describe:
Connecticut is currently not operating a QRIS.
ii. Licensed Family Child Care Homes: #
▼ N/A
Describe:
Connecticut is currently not operating a QRIS.
iii. License-Exempt Providers: #
✓ N/A
Describe:
Connecticut is currently not operating a QRIS.
4.7.2 Of the total number eligible, what is the total number and percentage of child care

settings in the State/Territory that participated in the QRIS or other transparent system of quality indicators?

Connecticut Page 27 of 63

i. Licensed Child Care Centers:
✓ N/A
Describe:
Connecticut is currently not operating a QRIS.
#
%
ii. Licensed Family Child Care Homes:
✓ N/A
Describe:
Connecticut is currently not operating a QRIS.
#
%
iii. License-Exempt Providers:
✓ N/A
Describe:
Connecticut is currently not operating a QRIS.
#
%
4.8 Did the State/Territory provide one-time grants, awards or bonuses connected to (or related to) QRIS during October 1 to September 30 of the last federal fiscal year? I yes, how many were provided to the following types of programs during October 1 to September 30 of the last federal fiscal year?
a) Licensed center-based programs: # 0
b) Licensed Family Child Care Homes: # 37c) Legally exempt care in providers home: # 0
d) Legally exempt center-based programs: # 0 e) In-home (care in the child's own home): # 0
□ No
✓ N/A
Describe:
na
N/A Describe:

Connecticut Page 28 of 63

4.9 Did the State/Territory provide on-going or periodic quality stipends connected to (or related to) QRIS during October 1 to September 30 of the last federal fiscal year? It yes, how many programs received on-going or periodic quality stipends connected to (or related to) QRIS during October 1 to September 30 of the last federal fiscal year? Yes a) Licensed center-based programs: # b) Licensed Family Child Care Homes: # c) Legally exempt care in providers home: # d) Legally exempt center-based programs: # e) In-home (care in the child's own home): # No N/A
Describe:
 4.10 Did the State/Territory provide ongoing technical assistance related to the QRIS or other quality rating system during October 1 to September 30 of the last federal fiscal year? If so, how many programs received ongoing technical assistance during October 1 to September 30 of the last federal fiscal year? Yes a) Licensed center-based programs: # b) Licensed Family Child Care Homes: # c) Legally exempt care in providers home: # d) Legally exempt center-based programs: # e) In-home (care in the child's own home): #
No
□ N/A
4.11 Did the State/Territory provide higher subsidy rates related to the QRIS or other quality rating system during October 1 to September 30 of the last federal fiscal year? If so, how many programs received higher subsidy payment rates due to their QRIS rating during October 1 to September 30 of the last federal fiscal year? Yes
a) Licensed center-based programs: # 294

Connecticut Page 29 of 63

 b) Licensed Family Child Care Homes: # 39 c) Legally exempt care in providers home: # 0 d) Legally exempt center-based programs: # 59 e) In-home (care in the child's own home): # 0 ✓ N/A
Describe:
na
4.12 Spending
4.12.1 Did the State or Territory use CCDF quality set aside funds to support QRIS or other quality rating system during October 1 to September 30 of the last federal fiscal year? This includes CCDF funds from all available appropriation years that were spent during the fiscal year. If so, what estimated percentage of CCDF quality dollars was spent supporting QRIS or other quality related improvements? ✓ Yes.
If yes, %: 27
□ No
□ N/A Describe:
Describe.
4.12.2 Did the State or Territory use other non-CCDF funds to support QRIS or other quality rating system (for example, TANF funds spent directly on quality, Preschool Development Funds, state or local funds, etc.) during October 1 to September 30 of the last federal fiscal year? If yes, describe the source of the funding and the total amount. Yes. If yes, %:
No N/A Describe:

Connecticut Page 30 of 63

4.12.3 Did the State/Territory spend at least some of the increased CCDF funds from the

Consolidated Appropriations Act, 2018 to support QRIS or other quality rating systems?
☐ Yes.
If yes, describe:
✓ No
□ N/A
Describe:
4.12.4 Did the State/Territory spend at least some of the CCDF funds from the Coronavirus Aid, Relief, and Economic Security (CARES) Act, 2020 to support QRIS or other quality rating systems? Tyes. If yes, describe:
▼ No
□ N/A
Describe:

4.13 Progress Update:

Describe the measures used and progress made during October 1 to September 30 of the last federal fiscal year. Include examples and numeric targets where possible.

New Licenses Issued This Year:

Child Care Centers=64

Group Child Care Homes=1

Family Child Care Homes=118

Youth Camps=24

New Licenses Issued Previous Year:

Child Care Centers=65

Group Child Care Homes=2

Family Child Care Homes=177

Youth Camps=70

During this year, there were 9,083 violations cited during 4,219 licensing inspections (includes license-exempt programs and camps). During the previous year, there were

Connecticut Page 31 of 63

21,809 violations cited during 5,694 licensing inspections.

During this year, 64% of inspections conducted (2,716 out of 4,219 total) had no violations found. In the previous year, 42% of inspections conducted (2,406 out of 5,694 total) had no violations found. These numbers include license exempt providers and camps. Due to COVID, more partial inspections (vs. full inspections) were conducted during this year.

Programs who received NAFCC or NAEYC accreditation received higher child care subsidy

reimbursement rates.

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

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

- 5.1. Provide the total number of State funded Infant Toddler Specialists available to providers during October 1 to September 30 of the last federal fiscal year.
 - a) Number of Specialists available to all providers #
 - b) Number of Specialists available to providers serving CCDF children #
 - c) Number of infant toddler specialists available specifically trained to support FCC providers #
 - d) Number of providers served #
 - e) Total number of children reached #
 - N/A

Describe:

Connecticut does not have a credential or certificate for Infant Toddler Specialist.

Connecticut's early childhood teacher credential has an infant/toddler endorsement.

- 5.2. Provide the number of professionals receiving any State- funded on-site coaching in infant and toddler practice during October 1 to September 30 of the last federal fiscal year.
 - a) Number of licensed center-based teachers #
 - b) Number of licensed family child care providers #
 - c) Number of license-exempt providers of care in their home #

Connecticut Page 32 of 63

d) Number of center directors #
▼ N/A
Describe:
No specific on-site coaching in infant and toddler practices were provided.
5.3. Of the number of professionals listed in question 5.2, what percentage served
CCDF children during October 1 to September 30 of the last federal fiscal year? a) Number of licensed center-based teachers #
b) Number of licensed family child care providers #
c) Number of license-exempt providers of care in their home # d) Number of center directors #
▼ N/A
Describe:
This data is not collected.
 5.4. Provide the total number of State funded infant and toddler health consultants in the State or Territory during October 1 to September 30 of the last federal fiscal year. a) Consultants available in State # b) Consultants available to providers serving CCDF children # N/A
Describe:
Connecticut does not designate health consultants with an infant and toddler endorsement. All health consultants are approved and support programs serving children birth - 12 years.
5.5. Did the State/Territory conduct an analysis of supply and demand for infant toddler slots and to identify areas of focus to build supply during October 1 to September 30 of the last federal fiscal year? \[\sum \text{Yes} \]
(please provide link)
☑ No
□ N/A
Describe:

Connecticut Page 33 of 63

- 5.6. Provide the number of staffed FCC networks supported by the CCDF funds through direct agreement with a centralized hub or community-based agency during October 1 to September 30 of the last federal fiscal year.
 - a) Number of staffed FCC networks: # 13

Describe what the hub provides to participating FCC providers:

The OEC extended funding for six pilot Staffed Family Child Care Networks. During the COVID-19 emergency, the OEC funded an additional seven Staffed Family Child Care Networks to provide statewide support for family child care providers. The funding for these Networks is to support providers during the COVID-19 emergency, to increase the supply of infant and toddler care, and to reduce administrative costs of family childcare providers through technical assistance, training and back office support.

□ N/A	
Describe:	

5.7 Spending

5.7.1. Did the State or Territory use CCDF quality set aside funds in addition to the 3% infant and toddler set-aside to improve the supply and quality of child care programs and services for infants and toddlers during October 1 to September 30 of the last federal fiscal year? If so, what estimated percentage of CCDF quality dollars was spent supporting the quality and supply of infant and toddler care? The State or Territory should not include the 3% infant and toddler set-aside in the estimated percentage.

Yes.	
If yes, %:	35
□ No	
□ N/A	
Describe:	

5.7.2. Did the State or Territory use other non-CCDF funds to improve the supply and quality of child care programs and services for infants and toddlers (for example, TANF funds spent directly on quality, Preschool Development Funds, state or local funds, etc.) during October 1 to September 30 of the last federal fiscal year? If yes, describe the source of the funding and the total amount.

Connecticut Page 34 of 63

Yes.
If yes, describe:
✓ No
□ N/A
Describe:
7.3. Did the State/Territory spend at least some of the increased CCDF funds from the onsolidated Appropriations Act, 2018 to improve the supply and quality of child care rograms and services for infants and toddlers?
☐ Yes.
If yes, describe:
✓ No
□ N/A
Describe:

5.7.4. Did the State/Territory spend at least some of the CCDF funds from the Coronavirus Aid, Relief, and Economic Security (CARES) Act, 2020 to improve the supply and quality of child care programs and services for infants and toddlers?

Yes.

If yes, describe:

Funding: \$5,600,000

Beginning April 4, 2020 through July 3, 2020, *CT Cares for Child Care* provided additional funding to any Connecticut licensed child care provider (center-based, group family child care homes, and family child care homes) who were open to provide child care services to essential workers during the COVID-19 emergency. The intent of the program was to ensure a supply of high-quality child care remain available for essential workers and maintain an adequate and stable supply of high-quality child care for infants and toddlers. The funds were paid directly to providers to cover the additional costs associated with meeting the enhanced health and safety standards due to the COVID-19 emergency.

Connecticut's Resource and Referral Agency, 211 Child Care, was a key partner in

Connecticut Page 35 of 63

the implementation of the many **CT CARES** programs offered by the OEC to provide enhanced support to families for child care during the COVID-19 emergency. 211 Child Care tracked weekly data on the open and closed status of child care programs across the state.

Funding: \$15,000,000

The CT CARES for Child Care Businesses program offers an array of supports to CT licensed child care providers, including center-based, group family child care homes, and family child care homes during the COVID-19 emergency. The following subsidies are available to help reduce business expenses:

- •Expense Kick Start: To help pay for operating costs such as mortgage payments, utilities and payroll. The subsidies are given to programs that are accredited through the National Association for Family Child Care (NAFCC) or the National Association for the Education of Young Children (NAEYC).
- •Supply Subsidy: To help pay for the added costs of maintaining safe and healthy services for children, families, and staff. The subsidy is intended to help cover the costs of increased cleaning supplies, personal protective equipment (PPE), and nursing/medical consultation.
- •Staff Training Subsidy: To help pay for the costs of First Aid, CPR, Medication Administration and Emergency Anaphylactic Medication Administration ("EpiPen®") trainings and certifications that were to expire during the COVID-19 emergency.
- •Background Check Subsidy: To help pay for the costs of criminal background checks for both new staff and renewals of licensed providers.

The CT Cares for Businesses program also offered a number of other supports, including:

- •Professional Development: The OEC developed webinars, online trainings, and course credit work to guide programs in child development, early learning standards, assessments and family engagement best practices during the COVID-19 emergency.
- •Business Support and Incentives: Individual and group training and coaching was coordinated by the Women's Business Development Council (WBDC) to support providers and programs apply for state and federal business supports and incentives. Connecticut's Resource and Referral Agency, 211 Child Care, was a key partner in the implementation of the many CT CARES programs offered by the OEC to provide enhanced support to families for child care during the COVID-19 emergency. 211 Child Care tracked weekly data on the open and closed status of child care programs

Connecticut Page 36 of 63

	across	the	state.
	No		
Г	N/A		
	Describ	oe:	

The CCDBG Act of 2014 included changes targeted at improving the supply and quality of infant-toddler care. Lead Agencies are encouraged to systematically assess and improve the overall quality of care infants and toddlers receive, the systems in place or needed to support and enhance the quality of infant and toddler providers and the capacity of the infant and toddler workforce to meet the unique needs of very young children, and the methods in place to increase the proportion of infants and toddlers in higher quality care.

5.8 Progress Update:

Describe the measures used and progress made during October 1 to September 30 of the last federal fiscal year. Include examples and numeric targets where possible.

Connecticut's Staffed Family Child Care Network pilot project is overseen by the OEC with the guidance of two key national leaders in this area. A major focus of the Network activities center on shared services strategies that support business practices for family child care providers. The OEC works closely with Opportunities Exchange (OppEx), the national organization leading this work. The design of each Family Child Care Network is unique to its participants, but all share the goals of strengthening business and pedagogical (teaching and learning) leadership across participating sites through structures that enable sharing of staff, information, resources and technology. During the COVID-19 emergency, the OEC funded an additional seven Staffed Family Child Care Networks to provide statewide support for family child care providers.

Each Network's activities, including shared services, are defined through the assistance of an evaluation consultant, whose expertise is in the areas of logic model development and program evaluation. Additional statewide supports were also provided by all Staffed Family Child Care Network as a response to the COVID-19 emergency. These supports included:

- Behavioral health consultation CTs Early Childhood Consultation Partnership (ECCP) provided telephone and online opportunities to answer questions regarding social and emotional and behavioral concerns for children up to age 5.
- Health consultation CTs Nurses' Association offered phone support health consultation to licensed family child care providers.
- Business consultation and training was provided through webinars on risk management

Connecticut Page 37 of 63

and updating family contracts after COVID. The CT Women's Business Development Council supported providers through one-one business coaching.

Outcomes and progress of the funded Staffed Family Child Care Networks during this period include:

- Seven <u>new</u> Staffed Family Child Care Networks were established to provide statewide support of family child care providers. See link for SFCC Network locations: https://www.ctoec.org/covid-19/ctcares-programs/ctcares-for-family-child-care/find-your-family-child-care-network/
- 1,700 providers are participating members of a Staffed Family Child Care Network;
- Networks placed a total of 5,701 outbound calls to licensed family child care providers;
- Networks supported 121 providers in reopening programs after the COVID-19 emergency; and
- 1,716 family child care providers attended or were referred to a business training.

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

Goal: State/Territory 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 State/Territory.

- 6.1. Describe how CCDF quality funds were used to establish or expand a statewide system of child care resource and referral services during October 1 to September 30 of the last federal fiscal year.
 - Produced and published the Annual Capacity and Availability Enrollment Report which provides a snap shot of the availability of child care in CT and the number of children served. Link to annual survey: https://resources.211childcare.org/reports/annual-survey-2018-2/
 - Enhanced 211 Child Care search engine to better inform parents on child care options in their community and consumer education resources to assist them in selecting a quality program.

COVID-19 Emergency Support:

- Implemented monitoring system to track programs "open/closed" status and space availability during pandemic to inform stakeholders and serve families
- Enhanced referrals for public school personnel during pandemic
- Conducted media campaigns for essential health care workers to find Child Care during COVID 19
- Implemented CTCARES For Front Line Workers to enroll and provide eight weeks of child care payments for a total of 2,064 families and 3, 342 children.

Connecticut Page 38 of 63

6.2. Did the State/Territory change its use of symbols or simple icons, such as stars or levels, to communicate levels of quality for child care programs beyond what may be communicated to parents about licensing status and compliance during October 1 to September 30 of the last federal fiscal year? Tyes Describe:
▼ No
□ N/A
Describe:
6.3 Spending
6.3.1. Did the State or Territory use CCDF quality set aside funds to establish or expand a statewide CCR&R during October 1 to September 30 of the last federal fiscal year? This includes CCDF funds from all available appropriation years that were spent during the fiscal year. If so, what estimated percentage of CCDF quality dollars was spent to establish or expand a statewide CCR&R? Yes.
If yes, %: 5 ☐ No ☐ N/A
Describe:
6.3.2. Did the State or Territory use other non-CCDF funds to establish or expand a statewide CCR&R (for example, TANF funds spent directly on quality, Preschool Development Funds, state or local funds, etc.) during October 1 to September 30 of the last federal fiscal year? If yes, describe the source of the funding and the total amount.
▼ Yes.
If yes, describe:
Sparkler is an approved mobile application of the Ages and Stages Questionnaire -3
and Ages and Stages Social-Emotional Questionnaires. Sparkler helps organization
partner with parents to get young children ready for learning and life. Its mobile
platform and services leverage the untapped power of parents and the diverse

Connecticut Page 39 of 63

systems supporting families to serve young children better in the foundational early years.

Total number of children enrolled in Sparkler: 1,931. Number of ASQ-3 questionnaires completed: 1,529 Number of ASQ-Social Emotional Questionnaires completed: 350. Funding: \$400,000

No
N/A
Describe:

6.3.3. Did the State/Territory spend at least some of the increased CCDF funds from the Consolidated Appropriations Act, 2018 to establish or expand a statewide CCR&R?

Yes.
If yes, describe:

No
N/A
Describe:

6.3.4. Did the State/Territory spend at least some of the CCDF funds from the Coronavirus Aid, Relief, and Economic Security (CARES) Act, 2020 to establish or expand a statewide CCR&R?

Yes.

If yes, describe:

Funding: \$15,000,000

The CT CARES for Child Care Businesses program offers an array of supports to CT licensed child care providers, including center-based, group family child care homes, and family child care homes during the COVID-19 emergency. The following subsidies are available to help reduce business expenses:

•Expense Kick Start: To help pay for operating costs such as mortgage payments, utilities and payroll. The subsidies are given to programs that are accredited through the National Association for Family Child Care (NAFCC) or the National Association for the Education of Young Children (NAEYC).

Connecticut Page 40 of 63

- •Supply Subsidy: To help pay for the added costs of maintaining safe and healthy services for children, families, and staff. The subsidy is intended to help cover the costs of increased cleaning supplies, personal protective equipment (PPE), and nursing/medical consultation.
- •Staff Training Subsidy: To help pay for the costs of First Aid, CPR, Medication Administration and Emergency Anaphylactic Medication Administration ("EpiPen®") trainings and certifications that were to expire during the COVID-19 emergency.
- •Background Check Subsidy: To help pay for the costs of criminal background checks for both new staff and renewals of licensed providers.

The CT Cares for Businesses program also offered a number of other supports, including:

- •Professional Development: The OEC developed webinars, online trainings, and course credit work to guide programs in child development, early learning standards, assessments and family engagement best practices during the COVID-19 emergency.
- •Business Support and Incentives: Individual and group training and coaching was coordinated by the Women's Business Development Council (WBDC) to support providers and programs apply for state and federal business supports and incentives.

Connecticut's Resource and Referral Agency, 211 Child Care, was a key partner in the implementation of the many CT CARES programs offered by the OEC to provide enhanced support to families for child care during the COVID-19 emergency. 211 Child Care tracked weekly data on the open and closed status of child care programs across the state.

Funding: \$5,600,000

Beginning April 4, 2020 through July 3, 2020, CT Cares for Child Care provided additional funding to any Connecticut licensed child care provider (centerbased, group family child care homes, and family child care homes) who were open to provide child care services to essential workers during the COVID-19 emergency. The intent of the program was to ensure a supply of high-quality child care remain available for essential workers and maintain an adequate and stable supply of high-quality child care for infants and toddlers. The funds were paid directly to providers to cover the additional costs associated with meeting the enhanced health and safety standards due to the COVID-19 emergency.

Connecticut Page 41 of 63

Connecticut's Resource and Referral Agency, 211 Child Care, was a key partner in the implementation of the many CT CARES programs offered by the OEC to provide enhanced support to families for child care during the COVID-19 emergency. 211 Child Care tracked weekly data on the open and closed status of child care programs across the state.

No	
□ N/A	
Describe:	

6.4. Progress Update:

Describe the measures used and progress made during October 1 to September 30 of the last federal fiscal year. Include examples and numeric targets where possible.

The OEC worked closely with families and child care providers across the state to get them the specific help needed during the COVID-19 emergency through a series of targeted, timely, short-term CTCARES programs. These programs offered emotional and social, practical, and financial resources and support to child care providers and families statewide. Connecticut's Resource and Referral Agency, 211 Child Care, was a key partner in the implementation of the CTCARES programs and provided enhanced support to families to find child care during the COVID-19 emergency. 211 Child Care provided weekly data on open/ closed status of child care programs across the state.

- CTCARES for Front Line Workers: provided eight weeks of child care payments for a total of 2,064 families and 3, 342 children.
- Through a dedicated phone line for Health Care Workers and Education Staff, 298 calls were received to support child care during COVID 19.

7) Facilitating compliance with State/Territory requirements for inspection, monitoring, health and safety standards and training, and State/Territory licensing standards

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

7.1. Has the State/Territory aligned health and safety standards with the following:

Connecticut Page 42 of 63

a) Caring for Our Children Basics
✓ Yes.
□ No.
If not, describe:
b) Head Start
☐ Yes.
✓ No.
If not, describe:
Connecticut does not follow Head Start standards.
c) State pre-k Yes.
☑ No.
If not, describe:
Connecticut does not follow Connecticut State pre-k standards.
7.2. Check if pre-service/ongoing (or both) training is provided to child care staff of the following: □ Licensing Standards □ Ongoing health and safety training or education □ Monitoring Protocols □ N/A □ Describe:

7.3 Complaints regarding child care providers received during October 1 to September 30 of the last federal fiscal year

7.3.1 How many complaints were received regarding providers during October 1 to September 30 of the last federal fiscal year?

a) Licensed providers # 533

Connecticut Page 43 of 63

- b) Licensed-exempt providers # 7
- 7.3.2 What was the average length of time between receiving the complaint and taking steps to respond to a complaint during October 1 to September 30 of the last federal fiscal year? Complaints involving allegations of abuse or neglect receive an initial response in 48-72 hours. All other complaints average an initial response in 3-5 days.
- 7.3.3 How many complaints received an on-site follow-up inspection during October 1 to September 30 of the last federal fiscal year ? # 533
- 7.3.4 How many of the complaints resulted in one or more substantiated violations in the program or provider site identified during October 1 to September 30 of the last federal fiscal year ? # 524
- 7.3.5 How many child care providers had CCDF funding revoked as a result of an inspection during October 1 to September 30 of the last federal fiscal year? # 8
- 7.3.6 How many child care providers closed as a result of an inspection during October 1 to September 30 of the last federal fiscal year? # 9
- 7.3.7 Please provide any additional information regarding health and safety complaints and inspections in the State or territory during October 1 to September 30 of the last federal fiscal year:

59 complaints regarding illegal operation were received during this year. 28 illegal complaints were substantiated during this year (includes youth camps)

- 7.4 How many child care staff, including caregivers, teachers, and directors, received coaching or TA to improve their understanding and adherence to health and safety standards (as a result of an inspection) during October 1 to September 30 of the last federal fiscal year?
 - a) Licensed child care center staff: #
 - b) Licensed family child care staff: #
 - c) Licensed exempt child care staff: #
 - d) Licensed exempt family child care staff: #
 - e) N/A

Describe:

No child care staff received coaching or TA to improve their understanding and adherence to health and safety standards.

7.5 Spending

7.5.1 Did the State or Territory spend CCDF quality set aside funds on facilitating compliance with State/Territory requirements for inspections, monitoring, health and safety standards

Connecticut Page 44 of 63

ast federal fiscal year? This includes CCDF funds from all available appropriations years hat were spent during the fiscal year. If so, what estimated percentage of CCDF quality dollars was spent on facilitating compliance with State/Territory requirements? Yes.
If yes, %: 9
□ No
□ N/A
Describe:
7.5.2 Did the State or Territory use other non-CCDF funds (for example, TANF funds spent directly on quality, Preschool Development Funds, state or local funds, etc.) on facilitating compliance with State/Territory requirements for inspections, monitoring, health and safety standards and training, and State/Territory licensing standards during October 1 to September 30 of the last federal fiscal year? If yes, describe the source of the funding and the total amount. Yes. If yes, describe:
▼ No
□ N/A
Describe:
7.5.3. Did the State/Territory spend at least some of the increased CCDF funds from the Consolidated Appropriations Act, 2018 to facilitate compliance with State/Territory requirements for inspections, monitoring, health and safety standards and training, and State/Territory licensing standards? Yes. If yes, describe:
▼ No
□ N/A
Describe:

and training, and State/Territory licensing standards during October 1 to September 30 of the

Connecticut Page 45 of 63

7.5.4. Did the State/Territory spend at least some of the CCDF funds from the Coronavirus Aid, Relief, and Economic Security (CARES) Act, 2020 to facilitate compliance with State/Territory requirements for inspections, monitoring, health and safety standards and training, and State/Territory licensing standards?

✓ Yes.

If yes, describe:

Funding: \$15,000,000

The CT CARES for Child Care Businesses program offers an array of supports to CT licensed child care providers, including center-based, group family child care homes, and family child care homes during the COVID-19 emergency. The following subsidies are available to help reduce business expenses:

- •Expense Kick Start: To help pay for operating costs such as mortgage payments, utilities and payroll. The subsidies are given to programs that are accredited through the National Association for Family Child Care (NAFCC) or the National Association for the Education of Young Children (NAEYC).
- •Supply Subsidy: To help pay for the added costs of maintaining safe and healthy services for children, families, and staff. The subsidy is intended to help cover the costs of increased cleaning supplies, personal protective equipment (PPE), and nursing/medical consultation.
- •Staff Training Subsidy: To help pay for the costs of First Aid, CPR, Medication Administration and Emergency Anaphylactic Medication Administration ("EpiPen®") trainings and certifications that were to expire during the COVID-19 emergency.
- •Background Check Subsidy: To help pay for the costs of criminal background checks for both new staff and renewals of licensed providers.

The CT Cares for Businesses program also offered a number of other supports, including:

- Professional Development: The OEC developed webinars, online trainings, and course credit work to guide programs in child development, early learning standards, assessments and family engagement best practices during the COVID-19 emergency.
- •Business Support and Incentives: Individual and group training and coaching was coordinated by the Women's Business Development Council (WBDC) to support providers and programs apply for state and federal business supports

Connecticut Page 46 of 63

and incentives.

Connecticut's Resource and Referral Agency, 211 Child Care, was a key partner in the implementation of the many CT CARES programs offered by the OEC to provide enhanced support to families for child care during the COVID-19 emergency. 211 Child Care tracked weekly data on the open and closed status of child care programs across the state.

□ No
□ N/A
Describe:

7.6 Progress Update:

Describe the measures used and progress made during October 1 to September 30 of the last federal fiscal year. Include examples and numeric targets where possible.

New Licenses Issued This Year:

Child Care Centers=64

Group Child Care Homes=1

Family Child Care Homes=118

Youth Camps=24

New Licenses Issued Previous Year:

Child Care Centers=65

Group Child Care Homes=2

Family Child Care Homes=177

Youth Camps=70

During this year, 64% of inspections conducted (2,716 out of 4,219 total) had no violations found. In the previous year, 42% of inspections conducted (2,406 out of 5,694 total) had no violations found. These numbers include license exempt providers and camps. Due to COVID, more partial inspections (vs. full inspections) were conducted during this year.

8) Evaluating the quality of child care programs in the State/Territory, including evaluating how programs positively impact children

Connecticut Page 47 of 63

Goal: State/Territory investment in effective quality improvement strategies using reliable data from evaluation and assessment

8.1. What assessment tool(s) did the State/Territory use in center based programs during October 1 to September 30 of the last federal fiscal year?

a) To measure program quality, describe:

The ERS (ECERS-3, ITERS-3, and the SACERS-U) and the Program Administration Scale (PAS) were used for monitoring non-accredited programs receiving state early care and education funding.

b) To measure effective practice, describe:

N/A

c) To measure age appropriate child development, describe:

In September 2018, CT developed and disseminated the Connecticut Documentation and Observation for Teaching System (CT DOTS), an assessment framework to guide early care and education providers in the process of monitoring children's progress on the skills, abilities and behaviors aligned to the CT ELDS. No data regarding child development is collected at the state level.

d) Other, describe:

The OEC has trained and approved 42 CT DOTS trainers. While OEC sponsored training on CT DOTS was limited, records show 59 individuals completed introductory training on CT DOTS between 10/1/19 and 9/30/20.

N/A

Describe:

8.2. What assessment tool(s) did the State/Territory use to measure quality of program and effective practice in family child care programs during October 1 to September 30 of the last federal fiscal year?

a) To measure program quality, describe:

Family Child Care Environmental Rating Scale (FCCERS) were used by four of the thirteenfunded OEC Staffed Family Child Care Networks.

Connecticut Page 48 of 63

b) To measure effective practice, describe:
Business Administration Scale (BAS)used by two of the OEC funded Staffed FamilyChild
Care Networks.
c) To measure age appropriate child development, describe:
Ages and Stages Developmental Screening Tool was used by two of the funded Staffed
Family Child Care Networks.
d) Other, describe:
☑ N/A
Describe:
na
8.3 Spending
8.3.1. Did the State or Territory spend CCDF quality set aside funds on evaluating the quality of child care programs, practice, or child development during October 1 to September 30 of the last federal fiscal year? This includes CCDF funds from all available appropriation years that were spent during the fiscal year. If so, what estimated percentage of CCDF quality dollars was spent on evaluating child care programs, practice, or child development? Yes.
If yes, %:
✓ No
□ N/A
Describe:
8.3.2 Did the State or Territory use other non-CCDF funds development (for example, TANF funds spent directly on quality, Preschool Development Funds, state or local funds, etc.) to evaluate the quality of child care programs, practice, or child development during October 1 to September 30 of the last federal fiscal year? If yes, describe the source of the funding and the total amount. Tyes.

Connecticut Page 49 of 63

If yes, describe:	
✓ No	
□ N/A	
Describe:	
3.3.3 Did the State/Territory spend at least some of the increased CCDF funds from the Consolidated Appropriations Act, 2018 on evaluating the quality of child care programs in heir state?	
Tyes.	
If yes, describe:	
☑ No	
□ N/A	
Describe:	
3.3.4. Did the State/Territory spend at least some of the CCDF funds from the Coronavirus Aid, Relief, and Economic Security (CARES) Act, 2020 on evaluating the quality of child caprograms in their state? Yes. If yes, describe:	
□ No □ N/A □ Departing:	
Describe:	

8.4 Progress Update:

Describe the measures used and progress made during October 1 to September 30 of the last federal fiscal year. Include examples and numeric targets where possible.

Staffed Family Child Care Networks:

Outcomes and progress of the funded Staffed Family Child Care Networks during this period include:

Connecticut Page 50 of 63

- Seven <u>new</u> Staffed Family Child Care Networks were established to provide statewide support of family child care providers. See link for SFCC Network locations: https://www.ctoec.org/covid-19/ctcares-programs/ctcares-for-family-child-care/find-your-family-child-care-network/
- 1,700 providers are participating members of a Staffed Family Child Care Network;
- Networks placed a total of 5,701 outbound calls to licensed family child care providers;
- Networks supported 121 providers in reopening programs after the COVID-19 emergency; and
- 1,716 family child care providers attended or were referred to a business training.

Center-Based:

The ERS (ECERS-3, ITERS-3, and the SACERS-U) and the Program Administration Scale (PAS) were used for monitoring non-accredited programs receiving state early care and education funding. The tools were used to develop quality improvement plans and support non-accredited programs to achieve accreditation.

9) Supporting providers in the voluntary pursuit of accreditation

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

9.1. How many providers did the State or Territory support in their pursu	uit of
accreditation during October 1 to September 30 of the last federal fiscal	year?

- a) Number of licensed center based providers # 47
- b) Number of licensed FCC providers # 0
- c) Number of center based providers that serve CCDF children # 28
- d) Number of FCC providers that serve CCDF children # 0

N/A	
Descr	ibe:

9.2 Spending

9.2.1 Did the State or Territory spend CCDF quality set aside funds on accreditation during October 1 to September 30 of the last federal fiscal year? This includes CCDF funds from all available appropriation years that were spent during the fiscal year. If so, what estimated percentage of CCDF quality dollars was spent on evaluating child care programs, practice, or child development?

V	Yes
m I	res

Connecticut Page 51 of 63

If yes, %: 7
□ No
□ N/A
Describe:
9.2.2 Did the State or Territory use other non-CCDF funds development (for example, TANF funds spent directly on quality, Preschool Development Funds, state or local funds, etc.) to support accreditation during October 1 to September 30 of the last federal fiscal year? If yes, describe the source of the funding and the total amount. Yes.
If yes, describe:
No N/A Describe:
9.2.3. Did the State/Territory spend at least some of the increased CCDF funds from the Consolidated Appropriations Act, 2018 to support accreditation for child care providers? Yes.
If yes, describe:
No N/A Describe:
9.2.4. Did the State/Territory spend at least some of the CCDF funds from the Coronavirus Aid, Relief, and Economic Security (CARES) Act, 2020 to support accreditation for child care providers?
▼ Yes.
If yes, describe:
Funding: \$5,600,000
Beginning April 4, 2020 through July 3, 2020, CT Cares for Child Care provided

Connecticut Page 52 of 63

additional funding to any Connecticut licensed child care provider (center-based, group family child care homes, and family child care homes) who were open to provide child care services to essential workers during the COVID-19 emergency. The intent of the program was to ensure a supply of high-quality child care remain available for essential workers and maintain an adequate and stable supply of high-quality child care for infants and toddlers. The funds were paid directly to providers to cover the additional costs associated with meeting the enhanced health and safety standards due to the COVID-19 emergency.

Connecticut's Resource and Referral Agency, 211 Child Care, was a key partner in the implementation of the many CT CARES programs offered by the OEC to provide enhanced support to families for child care during the COVID-19 emergency. 211 Child Care tracked weekly data on the open and closed status of child care programs across the state.

Funding: \$15,000,000

The CT CARES for Child Care Businesses program offers an array of supports to CT licensed child care providers, including center-based, group family child care homes, and family child care homes during the COVID-19 emergency. The following subsidies are available to help reduce business expenses:

- •Expense Kick Start: To help pay for operating costs such as mortgage payments, utilities and payroll. The subsidies are given to programs that are accredited through the National Association for Family Child Care (NAFCC) or the National Association for the Education of Young Children (NAEYC).
- •Supply Subsidy: To help pay for the added costs of maintaining safe and healthy services for children, families, and staff. The subsidy is intended to help cover the costs of increased cleaning supplies, personal protective equipment (PPE), and nursing/medical consultation.
- •Staff Training Subsidy: To help pay for the costs of First Aid, CPR, Medication Administration and Emergency Anaphylactic Medication Administration ("EpiPen®") trainings and certifications that were to expire during the COVID-19 emergency.
- •Background Check Subsidy: To help pay for the costs of criminal background checks for both new staff and renewals of licensed providers.

The **CT Cares for Businesses** program also offered a number of other supports, including:

•Professional Development: The OEC developed webinars, online trainings, and

Connecticut Page 53 of 63

course credit work to guide programs in child development, early learning standards, assessments and family engagement best practices during the COVID-19 emergency.

•Business Support and Incentives: Individual and group training and coaching was coordinated by the Women's Business Development Council (WBDC) to support providers and programs apply for state and federal business supports and incentives. Connecticut's Resource and Referral Agency, 211 Child Care, was a key partner in the implementation of the many CT CARES programs offered by the OEC to provide enhanced support to families for child care during the COVID-19 emergency. 211 Child Care tracked weekly data on the open and closed status of child care programs across the state.

No
N/A
Describe:

9.3 Progress Update:

Describe the measures used and progress made during October 1 to September 30 of the last federal fiscal year. Include examples and numeric targets where possible.

Connecticut's Early Childhood Professional Registry will monitor progress and achievement of NAEYC and NAFCC accreditation. The data tracked includes benchmarks such as submission of required documents, achievement of staff qualifications requirements in each system and for CT's qualifications requirements, and the number of individuals who have achieved compliance with CCDF Professional Development Requirements.

NAEYC Accredited: 478 NAFCC Accredited: 47

Online Health and Safety Orientation:

- # Completed Care 4 Kids Oct 1, 2019 to Sept 30, 2020 (=2,469)
 - 175 completed 2 -hour English
 - 21 completed 2 -hour Spanish
 - 1,365 completed 5- hour English
 - 28 completed 5- hour Spanish
 - 852 completed 18- hour English
 - 28 completed 18 -hour Spanish

Connecticut Page 54 of 63

Completed Care 4 Kids Total to Date through Sept 30, 2020 (=15,990)

- 971 completed 2- hour English
- 282 completed 2- hour Spanish
- 11,137 completed 5 -hour English
- 42 completed 5 -hour Spanish
- 3,525 completed 18- hour English
- 33 completed 18 -hour Spanish

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

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

10.1 Quality Indicators

Torr Quanty marcators
10.1.1 Does the State/Territory have quality improvement standards that include indicators covering the following areas beyond what is required for licensing? Yes.
No. Skip to 10.2
10.1.2 If yes, check which indicators, the State/Territory 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:

Connecticut Page 55 of 63

10.2 Spending

10.2.1. Did the State or Territory spend CCDF quality set aside funds on supporting the development or adoption of high-quality program standards related to health, mental hea nutrition, physical activity, and physical development during October 1 to September 30 of the last federal fiscal year? This includes CCDF funds from all available appropriation year that were spent during the fiscal year. If so, what estimated percentage of CCDF quality dollars was spent on these standards? Yes.	of
If yes, %: ☑ No	
□ N/A	
Describe:	
10.2.2 Did the State or Territory use other non-CCDF funds development (for example, TANF funds spent directly on quality, Preschool Development Funds, state or local funds etc.) to support the development or adoption of high-quality program standards related to health, mental health, nutrition, physical activity, and physical development during Octobe to September 30 of the last federal fiscal year? If yes, describe the source of the funding the total amount.	er 1
Yes. If yes, describe:	
CT Association of Infant Mental Health delivered two infant mental health trainings. One Training Series was offered in English in the Fall of 2020. Twenty-five early cand education providers completed the series. The second an evening Training Series was offered in Spanish in the Spring 2020. Seventeen early care and education providers attended this session. Funding: \$46,000	are
□ No	
□ N/A	
Describe:	

10.2.3 Did the State/Territory spend at least some of the increased CCDF funds from the Consolidated Appropriations Act, 2018 to support the development or adoption of high-

Connecticut Page 56 of 63

quality program st	andards?
Yes.	
If yes, desc	ribe:
✓ No	
□ N/A	
Describe:	
Aid, Relief, and E	te/Territory spend at least some of the CCDF funds from the Coronavirus conomic Security (CARES) Act, 2020 to support the development or quality program standards?
No N/A Describe:	

10.3 Progress Update:

Describe the measures used and progress made during October 1 to September 30 of the last federal fiscal year. Include examples and numeric targets where possible.

In Connecticut, the Connecticut Pyramid Partnership (CPP) serves as the leadership team to promote implementation of the Pyramid Model.

The CPP team has been meeting to discuss the Pyramid Model and coordinate efforts to support social and emotional competence in young children. In June of 2018, the team formalized its role as a State Leadership Team (SLT). The group began using the Pyramid Model Benchmarks of Quality (BOQ) as the organizing document for its work. This document is used to assess progress and plan future actions for implementation statewide. The BOQs are used to track progress on the stages of planning and installation, implementation and scale-up and planning for sustainability.

Connecticut Page 57 of 63

Implementation Program-Wide Implementation began in July, 2019 in four towns and six programs in Connecticut. The programs (Cohort 1) were chosen by the CPP based on their applications and their readiness to commit to full Pyramid Implementation. In year two, a second cohort of six early childhood programs were selected to participate in the Program-Wide Implementation.

The first cohort of six early childhood programs continued to work on their implementation plan and a second cohort of six early childhood programs was trained to begin implementation to fidelity. Connecticut developed on-line training on the Pyramid practices that focus on the relationship of Pyramid to other state frameworks such as the CT ELDS and CTs Family Engagement Framework The trainings have also been modified with an increased prominence on anti-racism and equity. Approximately 120 providers and staff have completed the 18 -hour module foundational training. A third cohort has been selected and training for 6 new program leadership teams began.

11) Other activities to improve the quality of child care services as long as outcome measures relating to improved provider preparedness, child safety, child well-being, or kindergarten-entry are possible

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

11.1 Progress Update:

Describe the measures used and progress made during October 1 to September 30 of the last federal fiscal year. Include examples and numeric targets where possible:

NA

11.1.1 Did the State/Territory set up a grant program designed to sustain the child care supply or provide sustainability funding to child care providers due to Coronavirus Disease 2019 (COVID-19) pandemic?

Yes.

If yes, describe al:

The CT CARES for Child Care Businesses program offers an array of supports to CT

Connecticut Page 58 of 63

licensed child care providers, including center-based, group family child care homes, and family child care homes during the COVID-19 emergency. The following subsidies are available to help reduce business expenses:

- •Expense Kick Start: To help pay for operating costs such as mortgage payments, utilities and payroll. The subsidies are given to programs that are accredited through the National Association for Family Child Care (NAFCC) or the National Association for the Education of Young Children (NAEYC).
- •Supply Subsidy: To help pay for the added costs of maintaining safe and healthy services for children, families, and staff. The subsidy is intended to help cover the costs of increased cleaning supplies, personal protective equipment (PPE), and nursing/medical consultation.
- •Staff Training Subsidy: To help pay for the costs of First Aid, CPR, Medication Administration and Emergency Anaphylactic Medication Administration ("EpiPen®") trainings and certifications that were to expire during the COVID-19 emergency.
- •Background Check Subsidy: To help pay for the costs of criminal background checks for both new staff and renewals of licensed providers.

The CT Cares for Businesses program also offered a number of other supports, including:

- •Professional Development: The OEC developed webinars, online trainings, and course credit work to guide programs in child development, early learning standards, assessments and family engagement best practices during the COVID-19 emergency.
- •Business Support and Incentives: Individual and group training and coaching was coordinated by the Women's Business Development Council (WBDC) to support providers and programs apply for state and federal business supports and incentives.

Connecticut's Resource and Referral Agency, 211 Child Care, was a key partner in the implementation of the many **CT CARES** programs offered by the OEC to provide enhanced support to families for child care during the COVID-19 emergency. 211 Child Care tracked weekly data on the open and closed status of child care programs across the state.

and check which types of providers were eligible and number served:
☑ Licensed center-based programs
766
Legally exempt center-based programs #
Licensed family child care

Connecticut Page 59 of 63

910
Legally exempt family child care (care in providers' home)
#
☐ In-home (care in the child's own home)
#
Other
(explain)
□ No
□ N/A
Describe:

11.1.2 Did the State/Territory provide cleaning supplies and/or personal protective equipment (PPE) to child care providers either through funding or directly in-kind due to Coronavirus Disease 2019 (COVID-19) pandemic?

✓ Yes.

079

If yes, describe al:

During the COVID-19 emergency, the Office of Early Childhood, in conjunction with the State Unified Command, offered open child care providers the opportunity to access supplies to expand their purchases of needed materials. Community locations have distributed cleaning supplies and Personal Protective Equipment (PPE) to open providers since April. As the availability and need of these items changes, the Office of Early Childhood continues to address these needs. Additionally, supplies may be purchased through vendors vetted by the Department of Administrative Services. The vendor list is available at: Access Personal Protective Equipment.

The CT CARES for Child Care Businesses program offers an array of supports to CT licensed child care providers, including center-based, group family child care homes, and family child care homes during the COVID-19 emergency. The following subsidy was available to help reduce business expenses.

- **Supply Subsidy**: To help pay for the added costs of maintaining safe and healthy services for children, families, and staff. The subsidy is intended to help cover the costs of increased cleaning supplies, personal protective equipment (PPE), and nursing/medical consultation.

Connecticut Page 60 of 63

and check which types of providers were eligible:
☑ Licensed center-based programs
✓ Legally exempt center-based programs
☑ Licensed family child care
Legally exempt family child care (care in providers' home)
In-home (care in the child's own home)
☑ Other
(explain)
Licensed Youth Camps were also eligible.
□ No
□ N/A
Describe:
11.2 Spending:
11.2.1 Did the State or Territory spend CCDF quality set aside funds on other activities to improve the quality of child care services during October 1 to September 30 of the last federal fiscal year? This includes CCDF funds from all available appropriation years that were spent during the fiscal year. If so, what estimated percentage of the CCDF quality
dollars was spent on these standards? Yes.
dollars was spent on these standards? Yes.
dollars was spent on these standards?
dollars was spent on these standards? Tyes. If yes, %:
dollars was spent on these standards? ☐ Yes. If yes, %: ☑ No
dollars was spent on these standards? ☐ Yes. If yes, %: ☑ No ☐ N/A

Connecticut Page 61 of 63

	If yes, describe:
-	No N/A
	Describe:
Conso servic safety	B Did the State/Territory use at least some of the increased CCDF funds from the olidated Appropriations Act, 2018 on other activities to improve the quality of child care sees as long as outcome measures relating to improved provider preparedness, child r, child well-being, or kindergarten-entry are possible? Yes. If yes, describe:
1	No N/A Describe:

11.2.4 Did the State/Territory spend at least some of the CCDF funds from the Coronavirus Aid, Relief, and Economic Security (CARES) Act, 2020 on other activities to improve the quality of child care services as long as outcome measures relating to improved provider preparedness, child safety, child well-being, or kindergarten-entry are possible?

Yes.

If yes, describe:

Funding: \$15,000,000

The CT CARES for Child Care Businesses program offers an array of supports to CT licensed child care providers, including center-based, group family child care homes, and family child care homes during the COVID-19 emergency. The following subsidies are available to help reduce business expenses:

- •Expense Kick Start: To help pay for operating costs such as mortgage payments, utilities and payroll. The subsidies are given to programs that are accredited through the National Association for Family Child Care (NAFCC) or the National Association for the Education of Young Children (NAEYC).
- •Supply Subsidy: To help pay for the added costs of maintaining safe and healthy services for children, families, and staff. The subsidy is intended to help

Connecticut Page 62 of 63

cover the costs of increased cleaning supplies, personal protective equipment (PPE), and nursing/medical consultation.

•Staff Training Subsidy: To help pay for the costs of First Aid, CPR, Medication Administration and Emergency Anaphylactic Medication Administration ("EpiPen®") trainings and certifications that were to expire during the COVID-19 emergency.

•Background Check Subsidy: To help pay for the costs of criminal background checks for both new staff and renewals of licensed providers.

The CT Cares for Businesses program also offered a number of other supports, including:

- •Professional Development: The OEC developed webinars, online trainings, and course credit work to guide programs in child development, early learning standards, assessments and family engagement best practices during the COVID-19 emergency.
- •Business Support and Incentives: Individual and group training and coaching was coordinated by the Women's Business Development Council (WBDC) to support providers and programs apply for state and federal business supports and incentives.

Connecticut's Resource and Referral Agency, 211 Child Care, was a key partner in the implementation of the many CT CARES programs offered by the OEC to provide enhanced support to families for child care during the COVID-19 emergency. 211 Child Care tracked weekly data on the open and closed status of child care programs across the state.

No	
□ N/A	
Describe):

12) Lead Agencies must submit an annual report, as required at 45 CFR § 98.53(f)(4), describing any changes to State/Territory regulations, enforcement mechanisms, or other State/Territory 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.

Connecticut Page 63 of 63

a) 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.

There were no deaths in in child care programs reported during this year. There were 23 serious injuries reported during this year. None of the serious injuries occurred in license exempt programs receiving CCDF funds. Of the 23 serious injuries, 14 occurred at youth camps and all injuries were self-reported. All self-reported camp incidents were reviewed by a licensed nurse and it was determined that there were no concerns that would warrant a need for a site visit or further review.

b) Describe any changes to State regulations, enforcement mechanisms, or other States policies addressing health and safety based on the annual review and assessment.

Based on the review of these serious injuries that were all self- reported, it was determined that there were no concerns that would warrant a need to change state regulations, enforcement mechanisms, or other State policies.

Connecticut Page 64 of 63