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.

a. Licensed family child care # 1934
   - N/A
   - Describe:

b. Legally exempt family child care (care in providers' home) # 0
   - N/A
   - Describe:
   Connecticut's Licensing Regulations does allow informal care to be provided by neighbors but the OEC does not track number of providers. Connecticut's Care 4 Kids Subsidy Program does not allow any licensed exempt non-relatives to care for children. Only relatives who are related to the child by blood, marriage, or adoption and are at least 20 years or older. Relative is defined in Pub L. 113-186 and regulation, 45 CFR Part § 98.41 (a) as grandmother/grandfather, great grandmother/grandfather, aunt/ uncle, and sibling are eligible to receive a Care 4 Kids subsidy.

c. Licensed center-based programs # 1410
   - N/A
   - Describe:
d. Legally exempt center-based programs # 328
   □ N/A
   Describe:

e. In-home (care in the child’s own home) # 3307
   □ N/A
   Describe:

f. Other (explain)
   NA

1.2 Goals for Quality Improvement

Based on Question 7.1.1 from the FFY2016-2018 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.

Increase the number and capacity of programs that achieve licensing and maintain compliance with licensing standards
- 255 new licenses issued (includes 47 youth camps). As of 10/1/17, the capacity of 1,426 licensed centers/groups was 100,032 and the capacity of 2,034 family child care homes was 18,056. As of 9/30/18, the capacity of 1,412 licensed centers/groups was 100,277 and the capacity of 1,941 family child care homes was 17,231

Increase the number of NAEYC and NAFCC accredited programs.
- NAFCC: FY17 total of 2 family child care homes were accredited FY18 total of 9 family child care homes were accredited. Each program received a bonus for completion of the accreditation process.
- NAEYC: Seventy-three (73) early childhood programs were awarded initial accreditation. OEC requires all state funded child care programs to be accredited and OEC notes increased participation each year with newly funded programs.

Increase the number of programs that meet other quality standards
- Connecticut General Statutes (C.G.S.) Section 10-16p (revised through Public Acts 11-54, 12-50 and 14-39 and 15-134), requires state funded programs to meet the goal of the attainment of a Qualified Staff Member (QSM) status for teachers in each classroom and attainment of NAEYC Accreditation or Head Start approval. Each state funded program is required to designate one Qualified Staff Member (QSM) per classroom or group: the qualification are a CDA credential plus 12 ece credits (expires June 30, 2020).
As of 10/27/18 of the 389 state-funded programs 285 (73%) meet the QSM requirement.
- The Connecticut Director's Credential (CDC) is a credential with three levels of proficiency issued through Charter Oak State College. The Credential is awarded to a professional working in the field of early care and education, who has obtained knowledge and competencies in the Connecticut Core Areas of Knowledge for Directors.
  Total new CDC awards: 19
- Fiscal Management Training Series:
  - National Center on Early Childhood Quality Assurance (NCQA) Training of Trainers: Strengthening Business Practices. 10 trainers were trained
  - The Connecticut Office of Early Childhood elected to extend the content of the NCQA training to underscore what both state and federal policy makers believe to strengthen early childhood programs' fiscal management in order to improve the delivery of high quality for children. OEC developed additional training content to extend the topic offered in the NCQA training. OEC offered a pilot training on the blended model to 10 center-based and 11 family child care providers.
- Essential Program Practices for Relationship-Based Care: A Training for Trainer/TA Providers (TFT): 10 technical assistance providers trained.
- Family Child Care Networks
  - Issued RFP and awarded funding to 7 pilot Networks
  - Each network identified and developed shared service alliances
  - Total family child care providers served: 707
- Early Childhood Teacher Credential (ECTC) awarded:
  - Associates level: 28 with a total awarded credential 249
  - Bachelors level: 41 with a total awarded credential 220
- Early childhood Environmental Rating Scale (ECERS): 30 programs completed the rating scale

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:
  Office of Early Childhood offersthe Early Childhood Professional Registry to
Connecticut's early childhood professionals and programs for young children. The Registry has over 17,000 participants in roles including teaching staff members, program administrators, trainers and consultants. Registry participants are able to build a profile of their employment and education. In addition, the Registry offers tools such as the Resume Builder, licensing Head Teacher Request, Employment History, and Scholarship Request.

☐ No.
   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:
   All programs that receive state-funds including child care subsidy (Care 4 Kids) are required to enrolled all teaching staff and adminstrators.

☐ No.
   If no, describe:

2.1.3 How many people were in the registry as of September 30 of the last federal fiscal year? # 17818

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) # 267
   ☑ Financial bonus/wage supplements tied to education levels # 20
   ☑ Career advisors, Mentors, Coaches, or Consultants # 3
   ☐ Reimbursement for training
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.)

☐ Yes.
   If yes, describe:

☐ No.

For the questions 2.4 to 2.9 please report on the number of staff by qualification level 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:

   #: 8
   %: .78

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

☐ Unknown
   Describe:
c) How many had a Bachelor's degree in an early childhood education?
   - Unknown
   - Describe:

   #: 248
   %: 24.1

d) How many had a State child care credential?
   - Unknown
   - Describe:

   #: 4
   %: .39

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:

   #: 6
   %: .58

**2.5 Licensed child care center teachers**

a) How many had a Child Development Associate (CDA)?
   - Unknown
b) How many had an Associate’s degree in an early childhood education?
   - Unknown

   Describe:

   #: 316
   %: 3.73

   Unknown

   Describe:

   #: 784
   %: 9.25

   Unknown

   Describe:

   #: 689
   %: 8.13

   Unknown

   Describe:

   #: 0
   %: 0

   Unknown

   Describe:

   Connecticut does not have an infant/ toddler credential.

   #:
   %:

   Unknown

   Describe:

   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:

#: 5
%: .06

**2.6 Licensed family child care providers**

a) How many had a Child Development Associate (CDA)?

☐ Unknown

Describe:

#: 100
%: 12.22

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

☐ Unknown

Describe:

#: 17
%: 2.08

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

☐ Unknown

Describe:

#: 6
%: .73

d) How many had a State child care credential?

☐ Unknown

Describe:

#: 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?

- Unknown
- Describe:

- #: 1
- %: .12

### 2.7 Licensed child care center directors who serve CCDF children

a) How many had a Child Development Associate (CDA)?

- Unknown
- Describe:

- #: 7
- %: .84

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

- Unknown
- Describe:

- #: 82
- %: 9.82

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

- Unknown
- Describe:

- #: 182
- %: 21.8

d) How many had a State child care credential?

- Unknown
Describe:

#: 3
%: .36

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:

#: 3
%: .36

2.8 Licensed child care center teachers who serve CCDF children

a) How many had a Child Development Associate (CDA)?
   - Unknown
   
   Describe:

#: 267
%: 3.59

b) How many had an Associate’s degree in an early childhood education?
   - Unknown
   
   Describe:

#: 658
%: 8.84

c) How many had a Bachelor’s degree in an early childhood education?
d) How many had a State child care credential?

Unknown
Describe:

#: 182
%: 21.8

e) How many had State infant and toddler credentials?

Unknown
Describe:
Connecticut does not have an infant/toddler credential.

#: 29
%: .39

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:

#: 3
%: .04

2.9 Licensed family child care providers who serve CCDF children

a) How many had a Child Development Associate (CDA)?

Unknown
Describe:

#: 90
%: 13.87
b) How many had an Associate's degree in an early childhood education?

- Unknown
- Describe:

  #: 13
  %: 2

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

- Unknown
- Describe:

  #: 2
  %: .31

d) How many had a State child care credential?

- Unknown
- Describe:

  #: 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?

- Unknown
- Describe:

  #: 0
  %: 0
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, %: 14

☐ No

☐ N/A

Describe:

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:

Scholarship, State Funded School Readiness Quality Improvement Funds to state-funded early care and education programs, PDG supporting social emotional development and supporting children with challenging behaviors. State funds to supplement Head Start for quality improvement and innovation.

☐ No

☐ N/A

Describe:

2.10.3 Does the State/Territory expect to 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?
2.11 Progress Update:
Describe the measures the State/Territory used to evaluate progress to improve the quality of child care programs during October 1 to September 30 of the last federal fiscal year. Include examples and numeric targets where possible.

- **Increase in number of programs participating in training on ELDS, CKC and all required health and safety topics;**
  - 183 early care and education providers received training on the CT Documentation and Observation System (CT DOTS), the assessment that is aligned to the CT ELDS and was rolled out fall of 2018
  - 57 early care and education providers received training on the CT ELDS
  - 110 early care and education providers received training on Pyramid Model practices
  - 60 trainers attended train-the-trainer sessions for the CT ELDS and/or CT DOTS
  - 24 trainers attended a training of trainers for the Core Knowledge and Competency Framework (CKCs)
  - 8,527 completions of Online Health and Safety Orientation

- **Increase in number and capacity of programs achieving licensure;**
  255 new licenses issued (includes 47 youth camps). As of 10/1/17, the capacity of 1,426 licensed centers/groups was 100,032 and the capacity of 2,034 family child care homes was 18,056. As of 9/30/18, the capacity of 1,412 licensed centers/groups was 100,277 and the capacity of 1,941 family child care homes was 17,231.

- **Increase in number of program achieving national accreditation: (e.g. NAEYC, NAFCC):** Seventy-three (73) early childhood programs were awarded NAEYC initial accreditation. 12 family child care programs were awarded NAFCC

- **Decrease in numbers of licensing violations:**
  10/1/16 to 9/30/17 there were 31,186 violations from licensing visits. From 10/1/17 to 9/30/18 there was a decrease to 25,988 violations from licensing visits. From numbers include youth camps and license-exempt programs.

- **Number of individual achieving degrees or credentials:**
  - CDA: 200
  - Associate degree: 117
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

ELDS were developed in 2015 and no updates were completed during this period.

3.2 Spending

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, %: 3
☐ 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.
3.2.3. Does the State/Territory expect to spend at least some of the increased CCDF funds from the Consolidated Appropriations Act, 2018 on developing or implementing early learning and development guidelines

☐ Yes.
   If yes, describe:

☐ 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.

- Development and field tested Connecticut's Documentation & Observation for Teaching System (CT DOTS) framework.
- Developed CT DOTS user manual and flip chart for early childhood programs.
- Provided statewide trainings and webinar on Connecticut's Early Learning and Development Standards (ELDS).
- 58 providers participating in training on the Connecticut Early Learning and Development Standards between 7/1/2018 and 9/30/2018.

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. Connecticut recognizes 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

☐ Yes, the State/Territory QRIS is now operating as a pilot, in a few 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):

☐ Yes

☐ 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
   ☐ N/A
      Describe;

4.4 Enter the number of programs that met the State’s high quality definition as of September 30 the last fiscal year:
   a) Licensed family child care # 18
   b) Legally exempt family child care (care in providers' home) # 0
   c) Licensed center-based programs # 359
   d) Legally exempt center-based programs # 245
   e) In-home (care in the child's own home) # 0
   ☐ N/A
      Describe:

4.5 Enter the number of CCDF children in high quality care by age grouping as of September 30 of the last federal fiscal year:
   a) Birth to 35 months # 2379
   b) 3 years up to kindergarten entry # 3512
   c) School Aged (post kindergarten entry) # 945
   d) Other. Describe:
      NA
4.6 Provide the percentage of CCDF children in high quality care by age grouping as of September 30 of the last federal fiscal year:
   a) Birth to 35 months % 24
   b) 3 years up to kindergarten entry % 37
   c) School Aged (post kindergarten entry) % 11
   d) Other. Describe:
      NA

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 *eligible* child care settings for QRIS or other transparent system of quality indicators?

   i. Licensed Child Care Centers:
      #
      N/A
      Describe:
      CT piloted a QRIS in the 2017-2018 state fiscal year.

   ii. Licensed Family Child Care Homes:
      #
      N/A
      Describe:
      CT piloted a QRIS in the 2017-2018 state fiscal year.
iii. License-Exempt Providers:

☐ N/A

Describe:
CT piloted a QRIS in the 2017-2018 state fiscal year.

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?

i. Licensed Child Care Centers:

☐ N/A

Describe:
CT piloted a QRIS in the 2017-2018 state fiscal year.

# %

ii. Licensed Family Child Care Homes:

☐ N/A

Describe:
CT piloted a QRIS in the 2017-2018 state fiscal year.

# %

iii. License-Exempt Providers:

☐ N/A

Describe:
CT piloted a QRIS in the 2017-2018 state fiscal year.

# %

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? If yes, how many were provided to the following types of programs during October 1 to
September 30 of the last federal fiscal year?

- Yes
  a) Licensed center-based programs: # 0
  b) Licensed Family Child Care Homes: # 40
  c) 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:

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? If 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: # 40
  b) Licensed Family Child Care Homes: # 13
  c) Legally exempt care in providers home: # 0
  d) Legally exempt center-based programs: # 7
  e) In-home (care in the child's own home): # 0
- No
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: #
  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:

4.12 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, %: 8

☐ No

☐ N/A

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, describe:
15% of State Funded School Readiness Quality Improvement Funds to state-funded early care and education programs were used to support programs efforts related to accreditation.

☐ No
☐ N/A
Describe:

4.12.3. Does the State/Territory expect to 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:

4.13 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.

The OEC Division of Licensing monitored progress towards the following outcomes:

- **Number programs that achieve licensing** From 10/1/17 to 9/30/18 255 were newly licensed programs. For the previous year 10/1/16 to 9/30/17 221 were newly licensed programs including licensed youth camps.

- **Number of programs that maintain compliance with licensing standards**: Of the 3,943 licensed programs (including youth camps), 3,892 programs maintained compliance with licensing standards in that they had no formal discipline taken against their license.

CT piloted a QRIS in the 2017-2018 state fiscal year. The draft QRIS model that was piloted included specific requirements across 3 pillars with 5 star levels for each pillar. Licensing was a pre-requisite for entering the QRIS, with successive levels designed to support
movement toward accreditation and/or progress on state priorities. Data from the pilot, which involved 66 programs (40 center-based, 14 family child care, 7 public school, 2 college lab schools, and 4 other programs), has been analyzed and revisions are underway.

Programs who receive NAFCC or NAEYC accreditation are offered higher 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 #
   d) Number of center directors #

☑ N/A

Describe:
No specific on-site coaching in infant and toddler practice was 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:
No specific on-site coaching on infant and toddler practice to any providers in Connecticut.

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 consultant with an infant and toddler endorsement. All OEC approved Health Consultants are approved and serve 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?

□ Yes

(please provide link)  https://www.ct.gov/oec/site/default.asp

□ No

□ N/A

Describe:

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: # 7

Describe what the hub provides to participating FCC providers:

The OEC convened a meeting of key stakeholders to develop Connecticut's Framework for Staffed Family Child Care Networks. The Framework identified the primary components of staffed family child care networks and was used in the development of a competitive Request for Proposals. The OEC awarded funding to seven family childcare networks across the state. The funding for these networks is to increase the supply of infants and toddlers, 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, %: 50

☐ 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.
5.7.3. Does the State/Territory expect to spend at least some of the increased CCDF funds from the Consolidated Appropriations Act, 2018 to improve the supply and quality of child care programs and services for infants and toddlers?

☐ Yes.
    If yes, describe:

☒ No
☐ N/A
    Describe:

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.
The staffed Family Child Care Network pilot project is overseen by OEC with the guidance of two critical national leaders in this area. A major focus of the implementation of the network activities centers on the inclusion of shared services concepts that support business sustainability for family child care providers. The OEC works closely with the national organization leading this effort in the early childhood industry, TSNE MissionWork, fiduciary for Opportunities Exchange (OppEx). The design of each Family Child Care Network is unique to its participants, but all share the goal of strengthening business and pedagogical
(teaching and learning) leadership across participating sites by creating structures that enable sharing of staff, information and resources. Each network's activities, including shared services, are defined through the assistance of an evaluation consultant, whose expertise in the areas of logic model development and shared services maintains accountability to the intent of the project. This evaluation component is led, and reported to OEC by Carl Sussman, a national expert whose, consulting practice focuses on evaluation, outcome measure, and performance management systems.

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 Connecticut and children served.
- Enhancement to 211 Child Care search engine to better education parents on child care options in their community and provides consumer education to assist them in selecting a quality program.
- Developed and maintained public calendar of training and technical assistance offerings.
- Developed materials and communication for statewide campaign on Safe Sleep and Trusted Licensed Care. Provided safe sleep sack to all licensed providers serving infants. Multi-strategy mass media campaign including tv, radio and billboard ads.

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?

☐ Yes

Describe:

☐ No
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, %: 13

☐ 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:

State funds support OEC staff who provide expertise and oversight on development and implementation of quality activities.

☐ No

☐ N/A

Describe:

6.3.3. Does the State/Territory expect to spend at least some of the increased CCDF funds to establish or expand a statewide CCR&R?

☐ Yes.
If yes, describe:

211 Child Care website enhancements included posting health and safety monitoring reports.

☐ 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.

- Developed materials and communication for statewide campaign on Safe Sleep and Trusted Licensed Care.
- Provided safe sleep sack to all licensed providers serving infants.
- Multi-strategy mass media campaign including TV, radio, billboard ads, and window clings for all licensed providers.

**Trusted Licensed Care Campaign:**
Focused on both parents and providers.

For Parents
- Promote benefits of choosing a licensed child care provider
- Educate on how to check if a provider is licensed
  • How to set up a home child care program
  • Benefits of becoming licensed
  • How to become licensed

The campaign contained specific behavior change information, inspirational and supportive messages, and educational information to ensure a check on providers’ license status before selecting child care.

**Safe Sleep Campaign:**
Focused on parents and providers
Objectives:
• Focus on the primary aspects of life-saving safe sleep for infants
• Use straightforward & easy-to-comprehend messaging

The campaign focused on specific behavior change information, inspirational and support messages, and educational information messages, and educational information to help tired parents prepare for changes in sleep with a new baby.
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:

a) Caring for Our Children Basics
   - Yes.
   - No.
   If not, describe:

b) Head Start
   - Yes.
   - No.
   If not, describe:
   Connecticut does no 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 on 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 # 984
   b) Licensed-exempt providers # 17

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 is estimated to be 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? # 788

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? # 850

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? # 15

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? # 23

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:
   150 complaints regarding illegal operation were received during this year. 49 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: # 57
   b) Licensed family child care staff: # 11
   c) Licensed exempt child care staff: # 0
   d) Licensed exempt family child care staff: # 0
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 and training, and State/Territory licensing standards during October 1 to September 30 of the last federal fiscal year? This includes CCDF funds from all available appropriations years that 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, %: 8

☐ 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:

State funds support OEC staff who provide expertise and oversight on development and implementation of quality activities.

☐ No

☐ N/A

Describe:

7.5.3. Does the State/Territory expect to spend at least some of the increased CCDF funds from the Consolidated Appropriations Act, 2018 facilitate compliance with State/Territory
requirements for inspections, monitoring, health and safety standards and training, and State/Territory licensing standards?

- Yes.
  - If yes, describe:
    - Criminal Background System updates

- 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.

The OEC will measure the number and capacity of programs that achieve licensing and maintain compliance with licensing standards.

255 new licenses issued (includes 47 youth camps). As of 10/1/17, the capacity of 1,426 licensed centers/groups was 100,032 and the capacity of 2,034 family child care homes was 18,056. As of 9/30/18, the capacity of 1,412 licensed centers/groups was 100,277 and the capacity of 1,941 family child care homes was 17,231.

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

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:

ERS (ECERS-3, ITERS-3, and the SACERS-U) was used as a part of the QRIS pilot and for monitoring non-accredited programs receiving state early care and education funding.
b) To measure effective practice, describe:
NA

c) To measure age appropriate child development, describe:
OEC implemented a new assessment system, the CT Documentation and Observation for Teaching System (CT DOTS) which is a framework for documenting progress on the skills, abilities, and behaviors from the CT ELDS. Materials are available for all programs and professional development focused on center- and school-based programs has been offered across the state. The use of this tool is not required and no data from this tool is collected by the state.

d) Other, describe:
NA

☐ 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:
FCCERS was used as a part of the QRIS pilot.

b) To measure effective practice, describe:
NA

c) To measure age appropriate child development, describe:
NA

d) Other, describe:
NA

☐ N/A
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.

☑ Yes.

If yes, describe:

OEC staff provide expertise and oversight on development and implementation of quality activities for PDG.

☐ No

☐ N/A

Describe:

8.3.3. Does the State/Territory expect to spend at least some of the increased CCDF funds from the Consolidated Appropriations Act, 2018 on evaluating the quality of child care programs in their state?

☐ Yes.
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.
CT piloted a QRIS in the 2017-2018 state fiscal year. The draft QRIS model that was piloted included specific requirements across 3 pillars with 5 star levels for each pillar. Licensing was a pre-requisite for entering the QRIS, with successive levels designed to support movement toward accreditation and/or progress on state priorities. Data from the pilot, which involved 66 programs (40 center-based, 14 family child care, 7 public school, 2 college lab schools, and 4 other programs), has been analyzed and revisions are underway. This work is conduct by OEC internally.

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 pursuit of accreditation during October 1 to September 30 of the last federal fiscal year?
   a) Number of licensed center based providers # 83
   b) Number of licensed FCC providers # 0
   c) Number of center based providers that serve CCDF children # 61
   d) Number of FCC providers that serve CCDF children # 0

   N/A
   Describe:

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?

☑ Yes.

If yes, %: 2

☐ 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. Does the State/Territory expect to 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:

9.3 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: 547
NAFCC Accredited: 22

Online Health and Safety Orientation Training 09/30/2018
2 hour Training - English 582 completions
2 hour Training - Spanish 230 completions
5 Hour Training 6,513 completions
18 Hour Training 1,202 completions
Total trainings completed: 8,527

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

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
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 health, 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 years that were spent during the fiscal year. If so, what estimated percentage of CCDF quality dollars was spent on these standards?

☐ Yes.

If yes, %: 2

☐ 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 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:

CT used state funds provided training on the Pyramid Observation Tool

☐ No
10.2.3 Does the State/Territory expect to spend at least some of the increased CCDF funds from the Consolidated Appropriations Act, 2018 to support the development or adoption of high-quality program standards?

☑ Yes.
If yes, describe:

☐ 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.

Connecticut convened a Social Emotional Institute which was held in October 2017.

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 kindergarten-entry

11.1 Progress Update:
Based on the State/Territory’s response to Question 7.9.1 of the FFY2016-2018 CCDF Plan describe progress made during October 1 to September 30 of the last federal fiscal year. Include examples and numeric targets where possible. If the State or Territory is using measures not described in the current State Plan to evaluate please also describe:

No additional information to provide for this period.
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.

   If yes, %:
   ☑ No
   ☐ N/A
   Describe:

11.2.2 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 improve the quality of child care services 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:

11.2.3 Does the State/Territory expect to use at least some of the increased CCDF funds from the Consolidated Appropriations Act, 2018 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:

   ☑ No
   ☐ N/A
Describe:

12) Lead Agencies must submit an annual report, as required at 45 CFR Â§ 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. (Note: This requirement is effective FFY 2019. States/Territories do not have to include this report with the FFY 2018 QPR submission.)

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 nine children deaths in unlicensed and licensed family child care homes in 2016 and 2017. The Office of the Child Advocate (OCA) conducted an extensive review of the general practices of the OEC with respect to the monitoring of licensed and unlicensed family child care settings. Such report identified several recommendations. The OEC conducted its own review of its practices and thoroughly considered the recommendations of the OCA.

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

Actions taken include proposing revisions to licensing regulations which contain enhanced requirements regarding safe sleep practices and supervision of sleeping infants, implementation of a more stringent protocol for enhanced monitoring of individuals who lose their license, developed protocol for additional monitoring visits in follow-up to more serious violations, implementation of a policy for notifying parents when their child care provider is no longer licensed, implementation of media campaigns around safe sleep and TLC: Trusted Licensed Care.