

Quality Progress Report (QPR) For Kansas FFY 2019

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 # 3692

N/A

Describe:

b. Legally exempt family child care (care in providers' home) # 0

N/A

Describe:

Except for relative care providers who meet the required definition, Child Care provided in these situations are not eligible to receive CCDF subsidy. The following situations DO NOT require a license, and are considered "inconsequential care" in Kansas:

- When child care is provided for children in their own home;
- When child care is provided for children who are relatives of the child care provider;
- When child care is arranged between friends or neighbors on an irregular basis; or when child care is provided for not more than two children unrelated to the child care provider for not more than 20 hours a week. The total hours shall be determined by adding the hours each child is cared for during the week.
- There were 293 out of home relative providers enrolled with DCF to provide child care as of the end of FFY 2019.

c. Licensed center-based programs # 1251

N/A

Describe:

d. Legally exempt center-based programs # 1

N/A

Describe:

Legally exempt center-based care is not tracked in Kansas. The Kansas Department for Children and Families does have a memorandum of understanding with one (1) federally regulated center.

e. In-home (care in the child's own home) # 0

N/A

Describe:

- In-home care is not tracked in Kansas. Child care provided in these situations are not eligible to received CCDF subsidy unless they meet the definition of relative care and are enrolled with the Kansas Department for Children and Families to provide child care. There were 65 relative providers enrolled with DCF to provide in-home child care as of the end of FFY2019.

f. Other (explain)

Number of in home relative providers 65

Number of out of home relative provicers 293

1.2 Goals for Quality Improvement

Based on Question 7.1.1 from the FFY2016-2018 CCDF State Plan for the FFY2018 QPR and Question 7.1.2 from the FFY2019-2021 CCDF State Plan for FFY2019-2021 QPRs, 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.

Review of CCDF funded quality programs are done annually as contracts are renewed. Fiscal and program outcomes are reviewed as part of this annual review. Review of all quality efforts are assessed every three years in conjunction with the completion of the

CCDF state plan. During this time our work on our developing QRIS (now titled Links to Quality) program established the goals to 1) Focus on the few and the powerful (quality indicators) 2) Build the system with sustainability in mind from the start. (It is better to start small and add to than to pull from later) 3) Kansas has a strong system of early education and child care supports, use these rather than build a new system and 4) Seek provider and parent engagement and offer choice.

Links to Quality (L2Q) is currently in a two-year pilot which began in April 2018. It was created with the support of early childhood organizations across the state and led by the Kansas Department for Children and Families. The pilot is a trial run to ensure that all L2Q materials and procedures operate as planned. We have chosen three topic links which contain indicators that have been identified as contributing to high-quality child care. Our Quality Indicators are built on the foundation of licensing. The development of the Quality Indicators is based on findings from research and stakeholder meetings. These indicators/links include: Program Leadership, Family Partnerships, and Learning and Development. Within each indicator there are benchmarks which are activities a child care provider must engage in or complete to satisfy the requirements of each indicator. The child care provider submits evidence through an online system to support the activities required in each benchmark. L2Q is innovative in design to recognize rather than rate quality. We have chosen to value our providers and their work. Through the portfolio review process, we are utilizing Appreciate Inquiry to provide feedback on submitted evidence to meet L2Q Quality indicators. This will encourage and motivate their progress and honor their accomplishments. Throughout the pilot, we will be evaluating and modifying each link before statewide implementation. No program will be awarded a link during the pilot process until final review and evaluation has been conducted. L2Q is structured into five Learning Communities. Members of each learning community include child care providers, community consultants and other early learning childhood professionals. These communities meet monthly to share common goals, work collaboratively to improve their program quality and progress through the L2Q indicators. Learning communities are in five county clusters in 17 counties. Our pilot participants include both family and child care programs. During the L2Q pilot, participants will be given various technical assistance based on their need. This can include: peer-to-peer meetings, coaching, mentoring, technical assistance, training (online and face-to-face), reviewing and assessing. Community consultants have specifically provided the following technical assistance from October 2018 to September 2019.

On-site (in person) 338

Phone 136
Email 94
Technology Based 71
Off-site (in person) 14

Each program is eligible for financial incentives and grants throughout the pilot. One type of incentive is a participation incentive. These are limited to the L2Q pilot period and given to L2Q child care providers to encourage, support and retain their participation during the pilot period. Programs receive a monthly stipend to use for expenses such as substitute pay, travel and other expenses experienced during the pilot. A grant is another incentive, programs eligible to receive during the pilot. Programs are paid through a grant application process. These grants promote flexibility to achieve professional goals identified in self-assessments and Quality Improvement plans. Incentives include but are not limited to the following: purchasing supplies, developing and copying materials, paying substitutes, distributing parent surveys, hosting family engagement activities and completing professional development. The awarded amount varies depending on the licensed capacity of each program. Recognition incentives are the final method to award motivation to programs. This incentive is to reward L2Q Child Care Providers when they achieve milestones during the L2Q journey. Recognition incentives include but are not limited to the following: positive and motivational appreciation notes and tokens, spotlight on the program's success in printed publications, such as newsletters, Kansas Child Magazine and social media posts.

Grants awarded to participants in Links to Quality (QRIS)
14 Licensed Center-based Programs \$8,470.00
25 Licensed Family Child Care Homes \$10,125.00

On-going stipends to participants in Links to Quality (QRIS)
181 Licensed Center-based Programs \$12,425.00
297 Licensed Family Child Care Homes \$20,525.00

The L2Q Pilot will be using several assessment tools throughout the pilot. At the beginning of the Family Partnership link each program will receive training on family engagement and use the Strengthening Families Self-Assessments. This assessment provides strategies to strengthen family connections within each program. L2Q Child Care Providers will use the self-assessment to review their current practices and determine which current practices are building the protective factors and which practices need improvement.

Strengthening Families Self-Assessment:

Family Child Care Homes 25

Child Care Centers 15

Strengthening Families Trainings taken:

Strengthening families through positive connections 11

Family engagement and Partnership Standards 4

Family Partnerships 9

Support Kansas Families 1

Support Children and Families through traumatic times 1

Involving Families 6

Family Resilience in Strengthen Families 4

Within the Learning and Development link providers will use the Nutrition and Physical Activity Self-Assessment for Child Care (NAP SACC). This tool will assist child care programs to compare their nutrition and physical activity practices to best practice standards. The NAP SACC is an interactive tool that allows child care programs to complete and save their self-assessments online. The self- assessment tool offers action plans, goal setting, and tips and materials to guide them in their nutrition and physical activity journey.

Baseline information and objective measurements obtained from the pilot will ensure our quality indicators have the greatest impact on the quality of services, avoid any duplication of existing standards and requirements and serve as a tool to unite early childhood programs under a common vision of quality that applies to all settings and sectors. After the pilot is completed, a comprehensive evaluation and needs assessment will be completed by our implementation and evaluation partners. These will include recommendations and considerations for future statewide implementation.

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:

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:

L2Q participants receive relationship-based consultation and technical assistance to develop and meet goals indicated in their Quality Improvement Plans (QIP). Participants have developed and implemented plans in the area of Program Leadership and Family Partnerships during FY2019. Participants develop these plans with the feedback from self-assessments for BAS/PAS and Strengthening Families. Providers may also use their feedback from evaluation to inform goal-setting on the QIP.

Kansas currently has regulations addressing all Health and Safety Topics within the new CCDBG Act of 2014 and topics are addressed in a variety of degrees throughout Orientation and/or Pre-Service training. Training on these topics is available through various websites and training organizations. DCF supports workforce training and professional development through our workforce development contract with the Kansas Child Care Training Opportunities, Inc. (KCCTO). Required Health and Safety Training may be completed through KCCTO through one 18-hour, two-week module or individual courses offered. These trainings cover all required Health and Safety Topic areas except for pediatric first aid and pediatric cardiopulmonary resuscitation(CPR) certification. KCCTO has also developed 9 follow-up courses that build on these existing health and safety courses.

Training Requirements include:

- Pediatric first aid and pediatric cardiopulmonary resuscitation (CPR) certification (a face-to-face skill test is required, and a copy of the current certification card must be on file)
- Recognizing and reporting signs of child abuse or neglect (including prevention of shaken baby syndrome and abusive head trauma, and the reporting of suspected child abuse or neglect)
- Basic child development including supervision of children (state regulation)
- Safe sleep practices and sudden infant death syndrome

- Prevention and control of infectious disease (including immunizations)
- Prevention and response to emergencies caused by food and allergic reactions
- Building and premises safety (including identification and protection from hazards that can cause bodily injury)
- Emergency preparedness and response planning (for natural disasters or human-caused events)
- Handling of hazardous materials
- Transporting children safely
- Medication administration

A program director is required to have KDHE approved annual training. A program director may take a KDHE approved training and take that knowledge to staff. The intent is that the program director utilizes what was learned, make it applicable to the program and then provide that overall training to staff. Annual staff training may also include clock hours for staff meetings that includes job-related training conducted for staff members. Documentation must be on file for review by the licensing surveyor.

In 2017 Kansas amended child care provider regulations. The number of annual training hour requirements were increased and is being phased in gradually. For 2019 calendar year, 12 clock-hours are required. For 2020 and subsequent years, 16 clock hours will be required. These changes were based on recommendations from the Child Care Licensing Systems Improvement Team. It is the expectation of the licensing program that providers will take a variety of training offered and not repeat the same training every year. KDHE does not compare training from year to year, however it is based on program experience that providers prefer to take new available training. DCF subsidy providers are required to have 4 hours of the annual clock hour training that meets the health and safety requirements of the ten topic areas provided above. KDHE child care licensing surveyors verify the training information and report to DCF child care staff when this is not met.

KCCTO, our workforce professional development contractor, offers online and community-based courses. Course offerings include health and safety training modules that are required for newly licensed child care providers. Offerings also include a variety of content topics on social emotional, cognitive and physical development; behavior management, challenging behaviors, and reducing expulsion and prevention; cultural and linguistic responsiveness through family engagement and learning environments aligned with the Kansas Early Learning Standards; caring for

and supporting the development of children with disabilities and developmental delays.

Number of course enrollments 69,262 (includes WFD and ITSN)

Number of courses available to be offered - 110

Number of times training events offered - 1,015

Kansas Early Learning Standards - 228 enrollments

KCCTO continues its role as a CDA Resource Center. Information now included on the CDA Resource Center webpage includes an updated CDA Training Track application and a new open-source Canvas "course" (CDA Credentialing Process Quick Tips) which includes general CDA credentialing information/resources as well as directions and videos outlining how to apply for KCTO's CDA Training Track. Through KCCTO online courses, the KCCTO CDA Training Track allows individuals to receive all 120 training hours within 8 Competency Areas identified by the CDA Council, with the goal of completing the 120 hours within a year. Participants enrolled in the training track receive support in planning their training hours and technical assistance throughout their enrollment, with specific check-in points identified. The CDA Resource Center includes an online version of the CDA Scholarship Application (\$425), which also includes an online reference form emailed directly to the references the scholarship applicant indicates on his or her scholarship application. Applicants still have the option to print and mail their scholarship application if preferred. Additionally, Training and Technical Assistance Specialists continue to track the progress of CDA Training Track participants to plan for future technical assistance contacts. CDA communities of practice (COPs) are also in development, along with other general CDA COPs. The CDA COP will replace the previous CDA Central Canvas "course."

Number of providers actively pursuing a CDA on training track - 117

Number of CDA completions - 50

Number of CDA scholarships - 12

Infant Toddler Specialist Network (ITSN) tracks professional development progression through Technical Assistance (TA) plans. TA plans are long term investment of ITSN resources to bring about change involving the development of written outcomes, action plan, and plan for implementation follow-up. Development of a plan includes information gathered for ITSN TA intake as well as number of children impacted by plan. Information on a Quality Improvement Plan (QIP) includes description of the

program's current status and proposed status, anticipated outcomes, activities to be implemented, resources needed, persons responsible, timelines, and measurable/observable results with documented data and/or products. KCCTO's ITSN role is to help programs prioritize where their major efforts will be invested.

Number of written Technical Assistance Plans during FFY2019 - 149.

2.1.2 Are any teachers/providers required to participate?

Yes.

If yes, describe:

No.

If no, describe:

There are no requirements for teachers/providers to participate in alternatives to a workforce registry.

2.1.3 How many people were in the registry as of September 30 of the last federal fiscal year? # 0

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)

70

Financial bonus/wage supplements tied to education levels

58

Career advisors, Mentors, Coaches, or Consultants

2012

Reimbursement for training

169

Loans

#

Other.

Describe:

- CDA Scholarship - 12

- Trainer mini grants - 12

- ITSN TA Quality Improvement Plans (classroom materials and resources to carry out plans) - 149
- ITSN TA New Provider Quality Improvement Plans (could include training reimbursements, classroom materials or resources) - 55

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.)

Yes.

If yes, describe:

Other organizations within the state may provide funding that supports professional development and the workforce. There are other non-CCDF funded professional development events available to the child care workforce, but specifications of other statewide initiatives for the child care workforce are unknown.

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:

Kansas does not have a workforce registry. This data is unavailable.

#:

%:

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

Unknown

Describe:

Kansas does not have a workforce registry. This data is unavailable.

#:

%:

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

Unknown

Describe:

Kansas does not have a workforce registry. This data is unavailable.

#:

%:

d) How many had a State child care credential?

Unknown

Describe:

Kansas does not have a workforce registry. This data is unavailable.

#:

%:

e) How many had State infant and toddler credentials?

Unknown

Describe:

Kansas does not have a workforce registry. This data is unavailable.

#:

%:

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:

Kansas does not have a workforce registry. This data is unavailable.

#:
%:

2.5 Licensed child care center teachers

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

[checked] Unknown

Describe:

Kansas does not have a workforce registry. This data is unavailable.

#:
%:

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

[checked] Unknown

Describe:

Kansas does not have a workforce registry. This data is unavailable.

#:
%:

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

[checked] Unknown

Describe:

Kansas does not have a workforce registry. This data is unavailable.

#:
%:

d) How many had a State child care credential?

[checked] Unknown

Describe:

Kansas does not have a workforce registry. This data is unavailable.

#:
%:

e) How many had State infant and toddler credentials?

Unknown

Describe:

Kansas does not have a workforce registry. This data is unavailable.

#:

%:

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:

Kansas does not have a workforce registry. This data is unavailable.

#:

%:

2.6 Licensed family child care providers

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

Unknown

Describe:

Kansas does not have a workforce registry. This data is unavailable.

#:

%:

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

Unknown

Describe:

Kansas does not have a workforce registry. This data is unavailable.

#:

%:

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

Unknown

Describe:

Kansas does not have a workforce registry. This data is unavailable.

#:
%:

d) How many had a State child care credential?

Unknown

Describe:

Kansas does not have a workforce registry. This data is unavailable.

#:
%:

e) How many had State infant and toddler credentials?

Unknown

Describe:

Kansas does not have a workforce registry. This data is unavailable.

#:
%:

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:

Kansas does not have a workforce registry. This data is unavailable.

#:
%:

2.7 Licensed child care center directors who serve CCDF children

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

Unknown

Describe:

Kansas does not have a workforce registry. This data is unavailable.

#:

#: %:

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

Unknown

Describe:

Kansas does not have a workforce registry. This data is unavailable.

#: %:

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

Unknown

Describe:

Kansas does not have a workforce registry. This data is unavailable.

#: %:

d) How many had a State child care credential?

Unknown

Describe:

Kansas does not have a workforce registry. This data is unavailable.

#: %:

e) How many had State infant and toddler credentials?

Unknown

Describe:

Kansas does not have a workforce registry. This data is unavailable.

#: %:

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:

Kansas does not have a workforce registry. This data is unavailable.

#:

%:

2.8 Licensed child care center teachers who serve CCDF children

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

Unknown

Describe:

Kansas does not have a workforce registry. This data is unavailable.

#:

%:

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

Unknown

Describe:

Kansas does not have a workforce registry. This data is unavailable.

#:

%:

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

Unknown

Describe:

Kansas does not have a workforce registry. This data is unavailable.

#:

%:

d) How many had a State child care credential?

Unknown

Describe:

Kansas does not have a workforce registry. This data is unavailable.

#:
%:

e) How many had State infant and toddler credentials?

[checked] Unknown

Describe:

Kansas does not have a workforce registry. This data is unavailable.

#:
%:

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?

[checked] Unknown

Describe:

Kansas does not have a workforce registry. This data is unavailable.

#:
%:

2.9 Licensed family child care providers who serve CCDF children

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

[checked] Unknown

Describe:

Kansas does not have a workforce registry. This data is unavailable.

#:
%:

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

[checked] Unknown

Describe:

Kansas does not have a workforce registry. This data is unavailable.

#:
%:

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

Unknown

Describe:

Kansas does not have a workforce registry. This data is unavailable.

#:

%:

d) How many had a State child care credential?

Unknown

Describe:

Kansas does not have a workforce registry. This data is unavailable.

#:

%:

e) How many had State infant and toddler credentials?

Unknown

Describe:

Kansas does not have a workforce registry. This data is unavailable.

#:

%:

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:

Kansas does not have a workforce registry. This data is unavailable.

#:

%:

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, %: 8.82

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:

Other organizations within the state may provide funding that supports the training and professional development of the child care workforce. There are other non-CCDF funded professional development events available to the child care workforce. The funding sources for these training events are unknown.

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?

Yes.

If yes, describe:

No

N/A

Describe:

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.

Current funding is provided to Kansas Department of Health and Environment (KDHE), Kansas Early Head Start (KEHS), Kansas Child Care Training Opportunities (KCCTO), and Child Care Aware. Quality Data collected is based upon data requested within the Federal QPR report. Quality Indicators are currently under development within the QRIS framework. Kansas Department of Children and Families (DCF), the Lead Agency, will develop quality measures in collaboration with the QRIS Advisory Group. KDHE Infant-Toddler supports professional development through the Kansas In-service Training System (KITS). KITS is a program of the University of Kansas Life Span Institute designed to provide a training and resource system for early intervention networks and early childhood special education program staff through collaborative training and technical assistance activities on a comprehensive statewide basis. DCF supports the statewide Infant Toddler Specialist Network (ITSN), a subcontracted partnership between KCCTO and KITS.

The L2Q Pilot will be using several assessment tools throughout the pilot. At the beginning of the Family Partnership link each program will receive training on family engagement and use the Strengthening Families Self-Assessments. This assessment provides strategies to strengthen family connections within each program. L2Q Child Care Providers will use the self-assessment to review their current practices and determine which current practices are building the protective factors and which practices need improvement. With these improvements needs, the providers will create a Quality Improvement Plan to help them address the step to make these improvements.

Strengthening Families Self-Assessment:

Family Child Care Homes 25

Child Care Centers 15

Strengthening Families Trainings taken:

Strengthening families through positive connections 11

Family engagement and Partnership Standards 4

Family Partnerships 9

Support Kansas Families 1
Support Children and Families through traumatic times 1
Involving Families 6
Family Resilience in Strengthen Families 4

KCCTO workforce professional development online courses are developed using research-based and best practice standards, such as, but not limited to, Caring for Our Children National Health and Safety Performance Standards, Zero to Three, Teaching Strategies, American Academy of Pediatrics, Child Care Exchange, Kansas Early Learning Standards, Kansas Family Engagement and Partnership Standards, collaboration and partnerships with experts in their field, and a variety of other researched-based resources. The design of the KCCTO courses ensure increased knowledge through discussion boards with feedback from the trainers. The feedback provides clarification, strategies and information for participants to gain a better understanding of the course content, strategies for implementation in their program and personalized technical assistance through discussions of individual situations that arise during the course. KCCTO collects Pre-and Post-Assessment data as well a course evaluation information is collected for all online and community-based training events. Participant knowledge gain from course content is measured in the change in scores from the pre-test to the post-test. This information is reviewed quarterly to identify areas to improve learning outcomes to be used in course and assessment updates.

KCCTO also provides training and technical assistance for infant and toddler programs and providers through ITSN. KCCTO workforce development trainers and ITSN specialists have a working knowledge Kansas Early Learning Standards to incorporate standards into site-visits, technical assistance and course development and delivery. In addition, Kansas Early Learning Standards (KELS) online course is available to familiarize child care providers with the standards from birth through kindergarten. There is currently a variety of training opportunities available that align with KELS and include courses on social emotional, physical and cognitive development; nutrition and physical activity; Implementing behavior management strategies, including positive behavior interventions and support models; engaging parents and families in culturally and appropriate ways to expand knowledge and skills; implementing developmentally appropriate instruction, curricula and learning environments that are culturally and linguistically responsive; caring for children in areas of high poverty and unemployment; and caring for and supporting the development of children with disabilities and developmental delays.

The Kansas Early Learning Standards (KELS) provide developmentally appropriate guidance

as a starting point for individual adaptations and modifications to be created to meet the special needs of any child. The KELS are used in the development of coursework and technical assistance offered to providers. Cultural and linguistic indicators are embedded in Early Learning Standards and Core Competencies. Professional development trainings are designed within the guidelines of standards and competencies. Cultural and linguistic activities are embedded within the courses.

KCCTO Workforce Development offered 1,015 online and community based training events

Number of courses available WFD 110; ITSN 32; Training of Trainers 2 (Total 144)

Number of KCCTO enrollment total 69,262

WFD Online 64,991

WFD In-person 707

ITSN Online 1,423

ITSN In-person 2,098

Training of Trainers 43

Number of unique participants total 12,349

WFD Online 9,471

WFD In-person 649

ITSN Online 997

ITSN In-person 1,199

Training of Trainers 33

Average change in scores measured by pre-test to post-test was 17% increase in knowledge.

KCCTO's online health and safety foundation courses are available in one 18-hour module.

All 10 courses are also available individually. There are 9 ongoing health and safety courses.

Number of duplicated enrollments in Health and Safety foundation modules 48,650 and 4,865 participants

Number of duplicated enrollments in individual Health and Safety foundation courses 4,123 and 1,723 participants

Number of duplicated enrollments in ongoing Health and Safety foundation courses 1,787 and 1,413 participants

KCCTO ITSN offered 89 community-based trainings to 2098 participants to increase and improve classroom strategies

KCCTO ITSN offered 49 online trainings to 1,423 participants to increase knowledge and improve classroom strategies.

Number of providers who received on-site technical assistance - 1,307 participants.

KCCTO workforce development offered one community based KELS training that had 25 participants. There were 228 enrollments in 12 offerings of the online course. Average change in scores measured by pre-test to post-test was 23% increase in knowledge.

KELS Material Distributed (paper):

130 - KELS Document KELS Material Distributed (flash drive)

127 - KELS Document KELS information posted on website

459 ITSN referrals to website individuals referred to website

KELS information is posted on KITS website and can be accessed at any time:

<http://kskits.org/kels-toolkit> (link to basic information)

<https://kskits.drupal.ku.edu/kels-toolkit-materials> (link to KELS toolkit - including KELS document, 10 Training Modules, Kansas Resources, Position Statements, Alignments, and other Support Materials) <http://kskits.org/virtual-kit-early-learning-standards> (short 2-page information sheet with outside links to information)

The Kansas Family Engagement and Partnership Standards for Early Childhood are structured to align with KELS and the Kansas School Readiness Framework. The Kansas Family Engagement and Partnership Standards for Early Childhood are also linked with indicators from KELS. KCCTO offers a Family Engagement and Partnership Standards course. This course familiarizes participants with the Kansas Family Engagement and Partnership Standards for Early Childhood. Participants obtain knowledge about the purpose of the standards and how they relate to other state standards, such as the Kansas Early Learning Standards. Upon completion of the course, participants will be familiar with the 5 Family Engagement and Partnership Standards, as well as describe program practices that help support the standards.

Training: KCCTO online: offered 6 times; enrollment 113; average score change 6%

KCCTO workforce development provides virtual (phone/email) TA to training participants. During FFY19 there were 834 TA contacts to providers, directors, assistant providers and directors, substitute providers, lead teachers and program support staff.

KCCTO's ITSN evaluates progress and quality improvement through their Technical

Assistance Plans. Number of written Technical Assistance Plans during FFY 2019 - 149

TA Plans with follow-up (global assessment scale -GAS**) at 6 months: 25

Numbers of GAS scores/measures at 6 months that performance was maintained or improved: 23

Number of Activities written on TA Plans: 342 (activities are the action steps leading to identified outcomes to be achieved)

Number of Activities written on TA Plans that were completed: 320

****Global Assessment Scale (GAS):** There are two purposes for the GAS: First it serves as a measurement of the TA plan's long-term outcome(s). As such, goals that are written into the GAS should reflect outcomes or effects on the outcome(s) of the plan rather variables (e.g. methods or procedures). Secondly, the GAS provides a standard measurement of the impact of technical assistance and the sustainability of those changes, which can be used for reporting and/or program evaluation.

Comprehensive services are offered to families through the Kansas Early Head Start (KEHS) Child Care partnership with plans to target services in areas with significant concentrations of poverty, unemployment and high out of home placements (foster care). The KEHS program utilizes the use of the Thelma Harmes Environmental tool to assess partners. Based upon this tool; 95% of the Child Care Center Partners had a score of 5 or higher on the Thelma Harmes Rating Scale for FY19. 98% of the Family Child Care Partners had a score of 5 or higher on the Thelma Harmes Rating Scale for FY19. 95% of the Grantee child Care Center Site staff had a score of 5 or higher on the Thelma Harmes Rating Scale for FY19. KEHS grantees had 27 child care partnerships. They had 336 KEHS slots.

Kansas Enrichment Network (KEN) provides the means to strengthen the infrastructure of afterschool programs that target low-income populations and students at-risk of dropping out of school. KEN's activities include technical assistance and training opportunities through bi-annual conferences, on-site technical assistance to state-wide school age programs and specialized technical assistance and training opportunities that focus on topics that are appropriate for school age children. KEN, and partnering organizations, collaborate with school age program workforce to promote safe, healthy and enriching learning opportunities to prepare students for the future.

Coordinated activities and measures of impact for school age programs include the following:

Conferences 3 (clock hours provided)

Training Events 7

Number of site visits to 21st Century Learning Community Center(CCLC) and Quality Matters 128

Number of counties represented 45

Number of youth impacted (cumulative for all events and self-reported) 28,413

Number of staff who will be trained by attendee (self-reported) 2,991

Topics addressed: Quality programming, parent engagement, older youth programming, STEM, STEAM, social and emotional learning, staff burnout, summer learning, cultural diversity, physical activity, social media, grant writing and 21st century skills.

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

Kansas had no changes to the Kansas Early Learning Standards (KELS) during this time 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, %:

No

N/A

Describe:

Kansas made no changes to the KELS during this time period.

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:

No

N/A

Describe:

Kansas made no changes to the KELS during this time period.

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.

There have been no revisions or updates to the Kansas Early Learning Standards (KELS). KELS are accessible to parents, providers and the community through many agency websites.

Kansas Child Care Training Opportunities (KCCTO), our Infant Toddler Specialist Network and professional development contractor, continues to offer training and technical assistance on KELS and disseminates the KELS toolkit and standards. Training and distribution during FFY2019 includes:

Training KCCTO on-site - offered 1 time; enrollment 25

Training: KCCTO online -- offered 12 times; enrollment 228; average score change 23%

Material Distributed (paper): 130 - KELS Document

KELS Material Distributed (flash drive): 127

KELS Document KELS information posted on website: 459 individuals referred to website

KELS information is posted on KITS website and can be accessed at any time:

<http://kskits.org/kels-toolkit> (link to basic information)

<https://kskits.drupal.ku.edu/kels-toolkit-materials> (link to KELS toolkit - including KELS document, 10 Training Modules, Kansas Resources, Position Statements, Alignments, and other Support Materials) <http://kskits.org/virtual-kit-early-learning-standards> (short 2-page information sheet with outside links to information)

The Kansas Family Engagement and Partnership Standards for Early Childhood are structured to align with KELS and the Kansas School Readiness Framework. The Kansas Family Engagement and Partnership Standards for Early Childhood are also linked with indicators from KELS.

KCCTO offers a Family Engagement and Partnership Standards course. This course familiarizes participants with the Kansas Family Engagement and Partnership Standards for Early Childhood. First, participants will obtain knowledge about the purpose of the standards and how they relate to other state standards, such as the Kansas Early Learning Standards. Upon completion of the course, participants will be familiar with the 5 Family Engagement and Partnership Standards, as well as describe program practices that help support the standards.

Training: KCCTO online: offered 6 times; enrollment 113; average score change 6%

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):*

Quality in Kansas is defined as "Quality early care and education provides a safe, stable, and

nurturing environment where every child can thrive." Because we are still completing the pilot process for Links to Quality, we do not yet have a complete definition of the standards for quality in the State of Kansas. Many organizations, stakeholders, and others are working collaboratively through advisory groups, work groups, and research to establish and define a standard of quality.

At this time, we have defined Quality Indicators (Links) to examine with pilot participants. They are: Program Leadership, Family Partnerships, and Learning and Development. These quality indicators are built upon the foundation of licensing requirements. The development of these quality Indicators is based on findings from research and advisory groups. Within each Link there are requirements a child care provider must engage in to meet the indicator.

Links to Quality (L2Q), Kansas' QRIS system, is currently in a two-year pilot which began in April 2018. It was created with the support of early childhood organizations across the state and led by the Kansas Department for Children and Families. We have chosen to value our providers and their work. Through the portfolio review process, we are utilizing Appreciate Inquiry to provide feedback on submitted evidence to meet L2Q Quality indicators. This will encourage and motivate their progress and honor their accomplishments. Throughout the pilot, we will be evaluating and modifying each link before statewide implementation. No program will be awarded a link during the pilot process until final review and evaluation has been conducted.

L2Q is structured into five Learning Communities. Members of each learning community include child care providers, community consultants and other early learning childhood professionals. These communities meet monthly to share common goals, work collaboratively to improve their program quality and progress through the L2Q indicators. Learning communities are in five county clusters in 17 counties. Our pilot participants include both family and child care programs. During the L2Q pilot, participants will be given various technical assistance based on their need. This can include: peer-to peer meetings, coaching, mentoring, technical assistance, training (online and face-to-face), reviewing and assessing.

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 #
- b) Legally exempt family child care (care in providers' home) #
- c) Licensed center-based programs #
- d) Legally exempt center-based programs #
- e) In-home (care in the child's own home) #

N/A

Describe:

Quality in Kansas is defined as "Quality early care and education provides a safe, stable, and nurturing environment where every child can thrive." Because we are still completing the pilot process for Links to Quality, we do not yet have a complete definition of the standards for quality in the State of Kansas. Many organizations, stakeholders, and others are working collaboratively through advisory groups, work groups, and research to establish and define a standard of quality.

Links to Quality is currently in a 2-year pilot to determine and evaluate the quality indicators and QRIS processes. No "links" have or will be awarded based on these indicators during this pilot. Twenty-five (25) family child care providers and 15 child care centers participated during this reporting period.

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 # 50
- b) 3 years up to kindergarten entry # 63
- c) School Aged (post kindergarten entry) # 25
- d) Other. Describe:

L2Q shows 39 of 40 programs had at least 1 child receiving subsidy during the period of October 2018 to September 2019, this is up from 21 programs in FY18. Number of children in care on September 30:

Birth to 35 months - 50

36 to 71 months - 63

School Aged (72 months or more) - 25

Links to Quality is still completing the pilot process for Links to Quality, we do not yet have a complete definition of the standards for quality in the State of Kansas. Many organizations, stakeholders, and others are working collaboratively through advisory groups, work groups, and research to establish and define a standard of quality. Both family child care and center child care facilities are participating in the pilot, as well as providers currently providing child care to families receiving and not receiving child care subsidy.

N/A

Describe:

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 % 3
- b) 3 years up to kindergarten entry % 4
- c) School Aged (post kindergarten entry) % 2
- d) Other. Describe:

L2Q shows 39 of 40 programs had at least 1 child receiving subsidy during the period of October 2018 to September 2019, this is up from 21 in FY18. Percentage of children in care on September 30, based on licensed capacity, not on actual number of children in care:

Birth to 35 months - 3%

36 to 71 months - 4%

School Aged (72 months or more) - 2%

Links to Quality is still completing the pilot process for Links to Quality, we do not yet have a complete definition of the standards for quality in the State of Kansas. Many organizations, stakeholders, and others are working collaboratively through advisory groups, work groups, and research to establish and define a standard of quality. Both family child care and center child care facilities are participating in the pilot, as well as providers currently providing child care to families receiving and not receiving child care subsidy.

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

i. Licensed Child Care Centers:

15

N/A

Describe:

ii. Licensed Family Child Care Homes:

25

N/A

Describe:

iii. License-Exempt Providers:

#

N/A

Describe:

Kansas only has one exempt provider in the state, and they are not licensed, which was the minimum requirement from Links to Quality pilot.

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:

Links to Quality is currently in a 2-year pilot to determine and evaluate the quality

indicators and QRIS processes. No "links" have or will be awarded based on these indicators during this pilot. Twenty-six (25) family child care providers and Fifteen (15) child care centers participated during this reporting period

%

ii. Licensed Family Child Care Homes:

N/A

Describe:

Links to Quality is currently in a 2-year pilot to determine and evaluate the quality indicators and QRIS processes. No "links" have or will be awarded based on these indicators during this pilot. Twenty-six (25) family child care providers and Fifteen (15) child care centers participated during this reporting period

%

iii. License-Exempt Providers:

N/A

Describe:

Kansas only has one exempt provider in the state, and they are not licensed, which was the minimum requirement from Links to Quality pilot.

%

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: # 14
- b) Licensed Family Child Care Homes: # 25
- 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: # 15
- b) Licensed Family Child Care Homes: # 25
- 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:

4.10 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: # 15
- b) Licensed Family Child Care Homes: # 25
- 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:

4.11 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, %: 8.39

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, %:

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.

Links to Quality (L2Q) is currently in a two-year pilot which began in April 2018. It was created with the support of early childhood organizations across the state and led by the Kansas Department for Children and Families. The L2Q Pilot is using several assessment tools throughout the pilot. Program Leadership is the first link in the pilot. Programs will be utilizing the Business and Program Administrative Scales (BAS/PAS). Prior to completing their own self-assessment, each program completed program specific online training provided by the McCormick Institute. Upon the completion of the self-assessment the programs developed and implemented their Quality Improvement Plans focus on the business practices within their programs.

As an example of the benefit of Program Leadership. A Family Child Care Provider with the help of the skills she gained as part of Program Leadership, has started the process of growing her program. She has joined the Chamber of Commerce in her town and is working with them and the Local Action Council to arrange funding for the purchase of a building near the towns historic downtown. With this purchase she will be able to make the move from a family child care to a center child care with the potential to care for 42 children ranging in age from infant to preschool.

Family Partnerships is the second link and encourages support and communication with families. Programs will be utilizing the Strengthening Families self-assessment along with a

strengthening families training of their choice in the creation of their Quality Improvement Plans (QIPs).

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 # 7
- b) Number of Specialists available to providers serving CCDF children # 7
- c) Number of infant toddler specialists available specifically trained to support FCC providers # 7
- d) Number of providers served # 439
- e) Total number of children reached # 2371

N/A

Describe:

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 # 279
- b) Number of licensed family child care providers # 102
- c) Number of license-exempt providers of care in their home # 0
- d) Number of center directors # 58

N/A

Describe:

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 # 84
- b) Number of licensed family child care providers # 63
- c) Number of license-exempt providers of care in their home # 0

d) Number of center directors # 71

N/A

Describe:

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:

Unknown, this data is not available.

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)

http://www.dcf.ks.gov/services/ees/Documents/Child_Care/SupplyDemand2019%20final.pdf

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: #

Describe what the hub provides to participating FCC providers:

N/A

Describe:

Lead Agency does not fund staffed Family Childcare Networks. Unknown, no data is available.

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, %: 37.08

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.

Yes.

If yes, describe:

Unknown, this data is not available.

No

N/A

Describe:

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 Infant Toddler Specialist Network (ITSN) evaluates progress and quality improvement through their Technical Assistance Plans.

Number of written Technical Assistance Plans during FY2018 - 149

Number of professionals who received coaching --439

TA Plans with follow-up (global assessment scale -GAS**) at 6 months: 25

Numbers of GAS scores/measures at 6 months that performance was maintained or improved: 23

Number of Activities written on TA Plans: 342 (activities are the action steps leading to identified outcomes to be achieved)

Number of Activities written on TA Plans that were completed: 320

Average number of months for completed plans - 10.3 months

Number of onsite visits: 899

Other contacts

Phone: 643

Email: 1,600

Text: 1,428

Intense TA by topics Include:

Primary topics

86 - environments

38 - materials and activities

2 - schedules and routines

8 - behavior

4 - relationships

3- staff training

3 - business practices

4 - other

Secondary Topics

20 - environments

80 - materials and activities

8 - schedules and routines

10 - behavior

2 - special needs/inclusion

14 - relationships

3 - staff training

4 - business practices

****Global Assessment Scale (GAS):** There are two purposes for the GAS: First it serves as a measurement of the TA plan's long-term outcome(s). As such, goals that are written in to the GAS should reflect outcomes or effects on the outcome(s) of the plan rather than process variables (e.g. methods or procedures). Secondly, the GAS provides a standard measurement of the impact of technical assistance and the sustainability of those changes, which can be used for reporting and/or program evaluation.

Child care programs participating in intensive, on-site TA and have TA plans receive financial support through ITSN Quality Improvement Plan (QIP). Supports include learning materials to assist in completion of their TA plan outcomes.

Number of incentives awarded:

Reimbursements for training - 134

Financial incentives for classroom resources - 149

ITSN Staff continually collaborate to develop training, virtual kits, and TA packets based on current TA plans and long- and short-term consultation. ITSN provides technical assistance to all caregivers, teachers and toddlers serving infants and toddlers. All programs can receive Level 1 training which includes face-to-face, email, phone and texts. Level 2 TA includes identifying and providing resources and training to assist programs to meet their needs. Supports to providers who are not on TA Plans are tracked through the collection of dissemination of materials (packets; professional resource books, handouts: referrals to websites, committees such as community child care planning groups and local ICC's).

Supports to providers not on a TA Plan:

Level 1 TA

Web Based Resources: 1,153

Books: 650

Handouts: 4,850

1st Contact Packet: 147
New Provider Packet: 99
Other Resources: 495
LTSAE Materials: 64
ITSN Flyer/Brochure: 765
ITSN Specialist Flyer: 1,637
KITS Website: 899 hits on KCCTO-KITS ITSN
157 hits on TA Packets, 2 hits on virtual kits,
92 hits on new provider packet, 17 hits on initial contact packet
44 hits on brochure,
132 hits on newsletter
241 hits on KELS
Additional resources shared by exhibitor displays at 7 meetings, conferences and events
Level 2 TA (contacts to providers/programs)

Number of trainings offered/cancelled: 6
Number Conducted: 113

Communities of Practice Offered

Center Directors - Book Study 6 participants

Community based trainings are developed and offered based on the feedback and needs of the child care programs they serve.

ITSN community-based training - 89 events reached 1,199 participants

ITSN sends out a program packet to new providers within 30 days of active license and follows up within 60 days. Professional development events for new providers include "Orientation to Early Childhood". Intensive on-site TA with support is offered to newly licensed child care programs. Programs participating in Intensive on-site TA can receive Quality Improvement Plan incentives to assist in reaching their goals. Data shows training and TA to newly licensed providers that includes:

Number of new provider emails and packets 161
Number of initial contact - new providers 459
Number of follow-up contact - new providers 254
Number of new provider intensive TA plans written - 42
Number of reimbursements for training to providers on a new provider intense - 134
Number of completed new provider TA plans during FFY2019 - 19
Orientation to Early Childhood Community-based training - # of times offered 12; 138 participants attended

On-site TA with supports to newly licensed child care programs - 336 on site TA
New programs TA supports included 259 phone contacts, 759 emails and 690 text support
New Program quality improvement financial incentives -55 incentives distributed
Number of reimbursements for training to providers on a new provider intense - 134

ITSN Staff advise providers and programs on progression of professional development and education. Advisement includes 66 referrals to KCCTO for the CDA training track and provided advising/consultation for 29 Kansas Association for Infant and Early Childhood Mental Health) KAIMH endorsements

Information regarding developmentally appropriate services are included in the Kansas Early Learning Standards (KELS). Thru work with the Kansas Department of Education (KSDE) and the Kansas State Agencies Early Childhood team, the Lead Agency collaborated with the Kansas In-service Training System (KITS) to develop a toolkit and develop training coursework regarding the newly updated Kansas Early Learning Standards (KELS). KCCTO utilizes the toolkit when providing technical assistance and training. Infant Toddler Specialist Network (ITSN) Training/TA dissemination of Kansas Early Learning Standards(KELS) materials:

Training KCCTO on-site - offered 1 time; enrollment 25

Training: KCCTO online -- offered 12 times; enrollment 228; average score change 23%

Material Distributed (paper): 130 - KELS Document

KELS Material Distributed (flash drive): 127

KELS Document KELS information posted on website: 459 individuals referred to website

KELS information is posted on KITS website and can be accessed at any time:

<http://kskits.org/kels-toolkit> (link to basic information)

<https://kskits.drupal.ku.edu/kels-toolkit-materials> (link to KELS toolkit - including KELS document, 10 Training Modules, Kansas Resources, Position Statements, Alignments, and other Support Materials) <http://kskits.org/virtual-kit-early-learning-standards> (short 2-page information sheet with outside links to information)

The Kansas Family Engagement and Partnership Standards for Early Childhood are structured to align with KELS and the Kansas School Readiness Framework. The Kansas Family Engagement and Partnership Standards for Early Childhood are also linked with indicators from KELS.

ITSN -Family Engagement Standards Booklets distributed - 55

Comprehensive services are offered to families through the Kansas Early Head Start (KEHS) Child Care partnership with plans to target services in areas with significant concentrations of poverty, unemployment and high out of home placements (foster care). The KEHS program utilizes the use of the Thelma Harmes Environmental tool to assess partners. Based upon this tool; 95% of the Child Care Center Partners had a score of 5 or higher on the Thelma Harmes Rating Scale for FY19. 98% of the Family Child Care Partners had a score of 5 or

higher on the Thelma Harmes Rating Scale for FY19. 95% of the Grantee child Care Center Site staff had a score of 5 or higher on the Thelma Harmes Rating Scale for FY19. KEHS grantees had 27 child care partnerships. They had 336 KEHS slots.

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.

Resource and referral services provide consumer education for parents about quality childcare, how to choose quality child care, and to assist parents in locating quality child care based upon their children's and family's needs. Four Child Care Resource and Referral Agencies (CCR&Rs) provide service to all 105 counties in Kansas. They directly serve families, child care providers/early education staff and communities in every county in Kansas. Resource and referral services are voluntary services provided to families by Child Care Aware of Kansas under contract with DCF, the lead agency.

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

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, %: 10.81

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:

No

N/A

Describe:

This data is unknown.

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:

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.

Child care consumer education and child care referral services are offered statewide. Services to families include providing individualized referrals and resources to parents and guardians about child care services including child development, delays in development, school-ages services, and affordable options to meet their children's needs. Providers are part of an established referral system to link families with child care providers. Through the referral database, Child Care Aware of Kansas collects data regarding childcare program vacancies and other information that will assist parents in meeting the needs of their families. The CCR&R contractor provides services to communities that include collaboration with organizations that provide direct services to families and child care providers to assure services are provided seamlessly across service area boundaries. The contractor also collects data and provides information for the completion of the annual report on the supply and demand of quality child care services within the state.

During FFY2019 Child Care Aware of Kansas services to families, providers and communities throughout Kansas included the following:

Number of all families requesting child care referrals 14,860

Number of DCF families requesting child care services 4,457

Number of all children needed child care 9,962

Number of DCF children needing child care 4,900

Child care settings sought by all families seeking child care (families can choose more than one option)

Child Care Center 11,545

Family Child Care 18,569

Preschool 2,897

School Age Program 1,863

Head Start Program 2,656

Child care settings sought by DCF families seeking child care (families can choose more than one option)

DCF Child Care Center 4,213
DCF Family Child Care 6,089
DCF Preschool 1,110
DCF School Age Program 829
DCF Head Start Program 1,208

Number by ages of **all** children in family referrals (infants, toddlers, preschool and school age)

Infant 0-17 months 3,910
Toddler 18 months to Age 2 1,971
Preschool Age 3 &4 2,386
School Age Kindergarten Age 5 and up 1,695

Number by ages of **DCF** children in family referrals (infants, toddlers, preschool and school age)

Infant 0-17 months 1,448
Toddler 18 months to Age 2 1,203
Preschool Age 3 &4 1,232
School Age Kindergarten Age 5 and up 1,197

Number of all family referrals by shift

Weekend, evening or overnight 3,288
Number of DCF referrals by shift
Weekend, evening or overnight 2,316

Each family receives a referral packet that is individualized based on the needs of the families. Families receive packets in print form and electronically.

Number of consumer education materials distributed to families through the resource center (electronic and printed) 41,847

Each family receives the opportunity to complete a survey to evaluate referral services.

CCR&Rstaff send the survey electronically and make follow-up calls. The survey asks the families if they found child care through the referral list.

Number of families who completed the survey 1884

Number of families who answered the question 1674

Number of families who found child care from the referral list provided 706

Number of DCF families who completed the survey 946

Number of families who answered the question 870

Number of DCF families who found child care from referral list 421

Community supports include promotion of R&Rservices, sharing consumer education resources and collaboration with community leaders focused on child care issues.

Number of communities that received support services 37

Consumer education materials are distributed to child care providers to increase their knowledge and share with families. Materials are distributed electronically, at conferences and professional development events. There were 41,642 consumer education materials distributed to providers. Topics include business/economic, child development, emergency preparedness/safety, family engagement, health/nutrition, infants, new provider, physical activity, preschool, R&RServices, School Age, school readiness, social-emotional and toddler.

Each quarter, CCR&Rstaff reach out to providers to update vacancy information on their referral database/provider portal. A minimum of 50% of providers were reached to update their vacancies. Provider vacancy updates average for contract ended June 30, 2019 was 65%. Under the new resource and referral contract 100% of providers are to be reached and 85% of the providers will update their vacancies. The new requirement was met with 86% of providers updating their vacancy information for the time period of July - September 2019.

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:

c) State pre-k

Yes.

No.

If not, describe:

Programs operated by a local unit of government or school district, which meet for no more than four consecutive hours per day or for no more than two consecutive weeks are exempt from licensure. Preschools operated on the premises of private schools providing kindergarten through grade six shall be governed by Kansas statutes applicable to private schools. K.S.A. 65-501

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 # 755
- b) Licensed-exempt providers # 0

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?

Up to 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 ? # 755

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 ? # 270

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? # 1

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? # 5

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:

534 complaints were substantiated due to noncompliance with child care laws and regulations. Five facilities were closed by revocation of the license due to substantiated complaints or other noncompliance. Guidance for licensing surveyors requires that complaint investigations be started within 5 days. Pre-work started within this time frame includes reviewing the facility history, preparing initial questions, and determining what the potential regulatory non-compliance is. This does not mean that the surveyor has been to the facility by this date, but as evident by the first on site date of Notice of Survey Findings and the date of the complaint this is often the case. Serious complaints that come in are started immediately.

For FFY 2019, there were 21 children substantiated or affirmed for abuse that involved a day care facility. Please note that this is the total number of children involved and not the number of incidents. Broken down by licensed child care home and licensed center care, it is 11 children for the licensed child care home and 10 children for the licensed center care.

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: # 7
- b) Licensed family child care staff: # 2
- c) Licensed exempt child care staff: # 0
- d) Licensed exempt family child care staff: # 0

e) N/A

Describe:

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, %: 32.79

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. 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:

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.

Online Information Dissemination System (OIDS)

The online availability of facility compliance history significantly increases the ability of Kansas families to research their child care options and make more informed child care choices. The portal is used frequently by the public to review a provider's compliance history, which then allows for informed decisions to be made when selecting child care. During the federal fiscal year, the portal averaged over **7,980** facility searches monthly to view 10,779 **facility findings**. In addition, the KDHE website includes consumer information, current Bureau forms and regulations, and links to related websites including DCF and Child Care Aware of KS.

Inspection Surveys Child care licensing surveyors inspect facilities to determine compliance with health and safety regulations for the protection of children and to provide regulatory consultation and referrals as indicated. In FFY19 surveyors:

- Conducted approximately 5,647 initial, annual and compliance inspections;
- Investigated 940 complaints; 185 were for illegal care;
- Investigated and provided technical assistance in approximately 14 incidents of

- communicable diseases in child care settings involving about 82 children and 9 adults;
- Provided orientation training (classroom setting or individual) to 1,208 potential providers (day care home, group day care home and center-based);
 - Referred 848 families to the statewide network of licensed child care resource and referral agencies for assistance in locating child care.

The Kansas Licensing Indicator System (KLIS)

Approximately 44% of all facilities with a pending annual inspection due for the FFY19 qualified for the KLIS survey. KLIS allows surveyors to spend more time providing technical assistance to support facilities with reaching and maintaining compliance; and conducting full inspections and monitoring noncompliant providers.

CLARIS Provider Access Portal

During the FFY19 the online child care application system CAPP was decommissioned and the new CLARIS Provider Access Portal went live in April 2019. The online application features the option for providers to enroll with DCF to serve families receiving child care subsidies, eliminating the need to submit separate applications to each agency. The ability to submit an initial or renewal application or to update affiliate information online significantly reduces the length of time necessary to process an application and issue a license compared to the paper-intensive process. There was an average of 37% of all applications submitted online during the FFY19. The online application was unavailable for approximately 5 months during the fiscal year. The last quarter of the fiscal year showed a promising 59% of all applications received online.

The Kansas Department of Health and Environment (KDHE) utilizes data from the web-based survey tool to pull information.

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:

The Kansas QRIS System, Links to Quality is in pilot, processes and assessment tools are being utilized and reviewed as part of the pilot phase from October 1, 2018 to

September 30, 2019. The Program Leadership Link establishes requirements for business practices with input from the Program Administrative Scale (PAS). In the Family Partnership link, each program will receive training on family engagement and use the Strengthening Families Self-Assessments. L2Q Child Care Providers will use the self-assessments to review their current practices and determine which current practices to build on. These assessments provide strategies used in the completion and implementation of their Quality Improvement Plans.

Baseline information and objective measurements obtained from the pilot will ensure our quality indicators have the greatest impact on the quality of services, avoid any duplication of existing standards and requirements and serve as a tool to unite early childhood programs under a common vision of quality that applies to all settings and sectors. After the pilot is completed, a comprehensive evaluation and needs assessment will be completed by our implementation and evaluation partners. These will include recommendations and considerations for future statewide implementation.

To measure program quality in centers Infant Toddler Specialists (ITS) use the following:

Infant Toddler Environmental Rating Scale

Early Childhood Environmental Rating Scale

Disseminated the Kansas Family Engagement Standards (print and online materials- with assessment grids for Families as: Foundation, Communicators, Advocates, Partners, and Community Members) : <http://kskits.org/kansas-family-engagement-partnership-standards-early-childhood>)

Disseminated Kansas Early Learning Standards (print and online materials - with standards for Approaches to Learning, Physical Health and Development, Social and Emotional Development, Communication and Literacy, Mathematics, Science, Social Studies, and Creative Arts) : <http://kskits.org/kels-toolkit>)

KCCTO workforce professional development online courses are developed and assessed using research-based and best practice standards, such as, but not limited to, Caring for Our Children National Health and Safety Performance Standards, Zero to Three, Teaching Strategies, American Academy of Pediatrics, Child Care Exchange, Kansas Early Learning Standards, Kansas Family Engagement and Partnership Standards, collaboration and partnerships with experts in their field, and a variety of other researched-based resources. Participants must complete an assessment at the end of

the online trainings. The design of the KCCTO courses ensure increased knowledge through discussion boards with feedback from the trainers. The feedback provides clarification, strategies and information for participants to gain a better understanding of the course content, strategies for implementation in their program and personalized technical assistance through discussions of individual situations that arise during the course. KCCTO collects Pre-and Post-Assessment data as well a course evaluation information is collected for all online and community-based training events. Participant knowledge gain from course content is measured in the change in scores from the pre-test to the post-test. This information is reviewed quarterly to identify areas to improve learning outcomes to be used in course and assessment updates.

b) To measure effective practice, describe:

Baseline information and objective measurements obtained from the pilot will ensure our quality indicators have the greatest impact on the quality of services, avoid any duplication of existing standards and requirements and serve as a tool to unite early childhood programs under a common vision of quality that applies to all settings and sectors. After the pilot is completed, a comprehensive evaluation and needs assessment will be completed by our implementation and evaluation partners. These will include recommendations and considerations for future statewide implementation.

The Learning and Development link has been developed but was not completed during the requested time frame. Programs are currently working on goals and requirements to complete this link.

ITSN Specialists measure effective practice through the following:

Observations and Observational Checklists:

Materials from the National Center for Pyramid Model Innovations, Center on the Social and Emotional Foundations for Early Learning

DAP Practice Implementation Guides

ASQ3 and ASQ:SE2 Competency Checklists

Preventive Strategies Checklist for Toddlers and Twos

STEM for Babies and Toddlers Implementation Checklist Utilization of Division for Early Childhood Recommended Practices

KCCTO workforce trainers actively engage participants during training by providing feedback and opportunities to reflect and engage with other participants. The feedback provides clarification, strategies and information for participants to gain a better understanding of the course content, strategies for implementation in their program and personalized technical assistance through discussions of individual situations that arise during the course. KCCTO trainers follow-up with online course participants to offer personalized technical assistance/consultation.

c) To measure age appropriate child development, describe:

During Family Partnership, programs are encouraged to have open dialogue with families and share information which would include age appropriate child development.

The Learning and Development link has been developed but was not completed during the requested time frame. Programs are currently working on goals and requirements to complete this link.

KEHS grantees and ITSN Specialists use the following to measure age appropriate child development in family child care programs:

Ages and Stages Questionnaire - ASQ 3

Ages and Stages Questionnaire - Social Emotional - ASQ-SE 2

KCCTO workforce development measurements of age appropriate child development are embedded in the coursework and opportunities for feedback, questions, discussions and further technical assistance/consultation.

d) Other, describe:

ITSN continues to collaborate with DCF and KDHE to identify, develop and promote new and existing initiatives that support safety to identify/develop/promote new and existing initiatives that support safety (SIDS, safe care seats, vaccinations); early identification of infants and toddlers with special health and developmental needs (e.g., KIDOS, CDC Learn the Signs Act Early); promote healthy attachment to a limited number of caregivers (e.g., adopt full inclusion/no expulsion policies, ECMH consultation); culturally and linguistically responsive practices.

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:

The Kansas QRIS System, Links to Quality is in pilot, processes and assessment tools are being utilized and reviewed as part of the pilot phase from October 1, 2018 to September 30, 2019. Program Leadership Link establishes requirements for business practices with input from the Business Administrative Scale (BAS). The Family Partnership link each program will receive training on family engagement and use the Strengthening Families Self-Assessments. L2Q Child Care Providers will use the self-assessments to review their current practices and determine which current practices to build on. These assessments provide strategies used in the completion and implementation of their Quality Improvement Plans.

Baseline information and objective measurements obtained from the pilot will ensure our quality indicators have the greatest impact on the quality of services, avoid any duplication of existing standards and requirements and serve as a tool to unite early childhood programs under a common vision of quality that applies to all settings and sectors. After the pilot is completed, a comprehensive evaluation and needs assessment will be completed by our implementation and evaluation partners. These will include recommendations and considerations for future statewide implementation.

Currently, the Infant Toddler Specialist Network (ITSN) utilizes many tools to assess providers and to assist individual child care providers with their quality improvement plans.

To measure program quality Infant Toddler Specialists (ITS) use the following:

Family Child Care Environmental Rating Scale

Disseminated the Kansas Family Engagement Standards (print and online materials: <http://kskits.org/kansas-family-engagement-partnership-standards-early-childhood>)

Disseminated Kansas Early Learning Standards (print and online materials: <http://kskits.org/kels-toolkit>)

KCCTO workforce professional development online courses are developed and assessed using research-based and best practice standards, such as, but not limited to, Caring for Our Children National Health and Safety Performance Standards, Zero to Three, Teaching Strategies, American Academy of Pediatrics, Child Care Exchange, Kansas Early Learning Standards, Kansas Family Engagement and Partnership Standards, collaboration and partnerships with experts in their field, and a variety of other researched-based resources. Participants must complete an assessment at the end of the online trainings. The design of the KCCTO courses ensure increased knowledge through discussion boards with feedback from the trainers. The feedback provides clarification, strategies and information for participants to gain a better understanding of the course content, strategies for implementation in their program and personalized technical assistance through discussions of individual situations that arise during the course. KCCTO collects Pre-and Post-Assessment data as well a course evaluation information is collected for all online and community-based training events. Participant knowledge gain from course content is measured in the change in scores from the pre-test to the post-test. This information is reviewed quarterly to identify areas to improve learning outcomes to be used in course and assessment updates.

b) To measure effective practice, describe:

Baseline information and objective measurements obtained from the pilot will ensure our quality indicators have the greatest impact on the quality of services, avoid any duplication of existing standards and requirements and serve as a tool to unite early childhood programs under a common vision of quality that applies to all settings and sectors. After the pilot is completed, a comprehensive evaluation and needs assessment will be completed by our implementation and evaluation partners. These will include recommendations and considerations for future statewide implementation.

Learning and Development link has been developed but was not completed during the requested time frame. Programs are currently working on goals and requirements to complete this link.

ITSN specialist measure effective practice in family child care programs by the following:

Observation by ITSN Specialists using Observational Checklists

Materials from the National Center for Pyramid Model Innovations, Center on the Social

and Emotional Foundations for Early Learning
DAP Practice Implementation Guides
ASQ3 and ASQ:SE2 Competency Checklists
Active Learning Checklists for Infants, Ones, and Twos
Utilization of Division for Early Childhood Recommended Practices
Global Assessment Scale (GAS) **

****Global Assessment Scale (GAS):** There are two purposes for the GAS: First it serves as a measurement of the TA plan's long-term outcome(s). As such, goals that are written into the GAS should reflect outcomes or effects on the outcome(s) of the plan rather variables (e.g. methods or procedures). Secondly, the GAS provides a standard measurement of the impact of technical assistance and the sustainability of those changes, which can be used for reporting and/or program evaluation.

KCCTO workforce trainers actively engage participants during training by providing feedback and opportunities to reflect and engage with other participants. The feedback provides clarification, strategies and information for participants to gain a better understanding of the course content, strategies for implementation in their program and personalized technical assistance through discussions of individual situations that arise during the course. KCCTO trainers follow-up with online course participants to offer personalized technical assistance/consultation.

[c\) To measure age appropriate child development, describe:](#)

During Family Partnership, programs are encouraged to have open dialogue with families and share information which would include age appropriate child development.

Learning and Development link has been developed but was not completed during the requested time frame. Programs are currently working on goals and requirements to complete this link.

KEHS grantees and ITSN Specialists use the following to measure age appropriate child development in family child care programs:

Ages and Stages Questionnaire - ASQ 3

Ages and Stages Questionnaire - Social Emotional - ASQ-SE 2

KCCTO workforce development measurements of age appropriate child development are embedded in the coursework and opportunities for feedback, questions, discussions and further technical assistance/consultation.

d) Other, describe:

ITSN continues to identify and promote materials that support new and existing initiatives:

Disseminated the Center for Disease Control - Learn the Signs Act Early Information

Disseminated Developmental Materials - Milestones Moments and Track Your Child's Developmental Milestones

Disseminated Zero to Three - Behavior Has Meaning Developmental Wheels

N/A

Describe:

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:

Spending is within our infant Toddler Specialist Network which is funded with our 3% Infant and Toddler set aside funds.

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:

No

N/A

Describe:

Unknown, this data is not available

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.

If yes, describe:

No

N/A

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.

Baseline information and objective measurements obtained from the pilot will ensure our quality indicators have the greatest impact on the quality of services, avoid any duplication of existing standards and requirements and serve as a tool to unite early childhood programs under a common vision of quality that applies to all settings and sectors. After the pilot is completed, a comprehensive evaluation and needs assessment will be completed by our implementation and evaluation partners. These will include recommendations and considerations for future statewide implementation.

These indicators/links include: Program Leadership, Family Partnerships, and Learning and Development. Within each indicator there are benchmarks which are activities a child care provider must engage in or complete to satisfy the requirements of each indicator and

submits evidence through an online system. L2Q is innovative in design to recognize rather than rate quality. We have chosen to value our providers and their work. Through the portfolio review process, we are utilizing Appreciate Inquiry to provide feedback on submitted evidence to encourage and motivate their progress and honor their accomplishments. Throughout the pilot, we will be evaluating and modifying each link before statewide implementation.

KCCTO - all online and community based courses average change in measured pre-test to post-test was 17% increase in knowledge. (other specific scores are previously reported separately)

KCCTO's ITSN evaluates progress and quality improvement through their Technical Assistance Plans.

Number of written Technical Assistance Plans during FFY 2019 - 149

TA Plans with follow-up (global assessment scale -GAS**) at 6 months: 25

Numbers of GAS scores/measures at 6 months that performance was maintained or improved: 23

Number of Activities written on TA Plans: 342 (activities are the action steps leading to identified outcomes to be achieved)

Number of Activities written on TA Plans that were completed: 320

KEHS Grantees make appropriate referrals based on the finding from the Ages and Stages Questionnaires they utilize.

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

N/A

Describe:

While CCDF funded activities may assist Child Care Provider pursuing accreditation, CCDF funding is not designated to support this specific activity.

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, %:

No

N/A

Describe:

While CCDF funded activities may assist child care providers pursuing accreditation, CCDF funding is not designated to support this specific activity.

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:

Unknown, this data is not available.

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.

While CCDF funded activities may assist child care providers pursuing accreditation, CCDF funding is not designated to support this specific activity.

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

- 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:

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, %:

No

N/A

Describe:

Spending in this area has already been reported and is included in our percentages reported in Section 2.10 of this report.

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:

No

N/A

Describe:

Unknown this data is not available.

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.

KCCTO, our professional development contractor, offers online and community-based courses. Courses are aligned with the Kansas Early Learning Standards (KELS) and include health, nutrition and safety; physical activity and physical development; learning environments and curriculum, instructional practices and family partnership and family engagement.

Thru work with the Kansas Department of Education (KSDE) and the Kansas State Agencies Early Childhood team, the Lead Agency collaborated with the Kansas In-service Training System (KITS) to develop a toolkit and develop training coursework regarding the newly updated Kansas Early Learning Standards (KELS). KCCTO utilizes and promotes the toolkit when providing training and professional development. KCCTO and Infant Toddler Specialist Network (ITSN) Training/TA dissemination of Kansas Early Learning Standards(KELS) materials includes:

Training KCCTO on-site - offered 1 time; enrollment 25

Training: KCCTO online -- offered 12 times; enrollment 228; average score change 23%

Material Distributed (paper): 130 - KELS Document

KELS Material Distributed (flash drive): 127

KELS Document KELS information posted on website: 459 individuals referred to website

KELS information is posted on KITS website and can be accessed at any time:

<http://kskits.org/kels-toolkit> (link to basic information)

<https://kskits.drupal.ku.edu/kels-toolkit-materials> (link to KELS toolkit - including KELS document, 10 Training Modules, Kansas Resources, Position Statements, Alignments, and other Support Materials) <http://kskits.org/virtual-kit-early-learning-standards> (short 2-page information sheet with outside links to information)

Kansas Child Care Training Opportunities (KCCTO), our Infant Toddler Specialist Network and professional development contractor, offers training and technical assistance on KELS and disseminates the KELS toolkit and standards. Training and distribution during FFY2019 includes:

Training KCCTO on-site - offered 1 time; enrollment 25

Training: KCCTO online -- offered 12 times; enrollment 228; average score change 23%

Material Distributed (paper): 130 - KELS Document

KELS Material Distributed (flash drive): 127

Document KELS information posted on website: 459 individuals referred to website KELS information is posted on KITS website and can be accessed at any time:

<http://kskits.org/kels-toolkit> (link to basic information)

<https://kskits.drupal.ku.edu/kels-toolkit-materials> (link to KELS toolkit - including KELS document, 10 Training Modules, Kansas Resources, Position Statements, Alignments, and other Support Materials) <http://kskits.org/virtual-kit-early-learning-standards> (short 2-page information sheet with outside links to information)

The Kansas Family Engagement and Partnership Standards for Early Childhood are structured to align with KELS and the Kansas School Readiness Framework. The Kansas Family Engagement and Partnership Standards for Early Childhood are also linked with indicators from KELS.

KCCTO offers a Family Engagement and Partnership Standards course. This course familiarizes participants with the Kansas Family Engagement and Partnership Standards for Early Childhood. First, participants will obtain knowledge about the purpose of the standards and how they relate to other state standards, such as the Kansas Early Learning Standards. Upon completion of the course, participants will be familiar with the 5 Family Engagement and Partnership Standards, as well as describe program practices that help support the standards.

Training: KCCTO online: offered 6 times; enrollment 113; average score change 6%
ITSN -Family Engagement Standards Booklets distributed - 55

The Infant Toddler Specialist Network (ITSN) evaluates progress and quality improvement through their Technical Assistance Plans.

Number of written Technical Assistance Plans during FY2018 - 149

Number of professionals who received coaching --439

TA Plans with follow-up (global assessment scale -GAS**) at 6 months: 25

Numbers of GAS scores/measures at 6 months that performance was maintained or improved: 23

Number of Activities written on TA Plans: 342 (activities are the action steps leading to identified outcomes to be achieved)

Number of Activities written on TA Plans that were completed: 320

Average number of months for completed plans - 10.3 months

Number of onsite visits: 899

Other contacts

Phone: 643

Email: 1,600

Text: 1,428

Intense TA by topics Include:

Primary topics

86 - environments

38 - materials and activities

2 - schedules and routines

8 - behavior

4 - relationships

3- staff training

3 - business practices

4 - other

Secondary Topics

20 - environments

80 - materials and activities

8 - schedules and routines

- 10 - behavior
- 2 - special needs/inclusion
- 14 - relationships
- 3 - staff training
- 4 - business practices

****Global Assessment Scale (GAS):** There are two purposes for the GAS: First it serves as a measurement of the TA plan's long-term outcome(s). As such, goals that are written in to the GAS should reflect outcomes or effects on the outcome(s) of the plan rather than process variables (e.g. methods or procedures). Secondly, the GAS provides a standard measurement of the impact of technical assistance and the sustainability of those changes, which can be used for reporting and/or program evaluation.

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 for FFY2018 QPR and Question 7.11 of the FFY2019-2021 CCDF Plan for FFY2019-2021 QPRs 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:

The Kansas Department for Children and Families has an interagency memorandum of agreement with the Kansas Department of Education and the Kansas Department of Health and Environment to support the Kansas Coordinating Council on Early Childhood Developmental Services, also referred to as the State Interagency Coordinating Council(SICC). The SICC is established to ensure that a comprehensive service delivery system of integrated services is available in Kansas for all children with or at risk of developmental delays from birth to age five and their families. The SICC serves as a liaison with local Interagency coordinating councils (LICCs) and advises and assists KDHE, the lead

agency for Part C of the federal individuals with Disabilities Education Act (IDEA). Objectives include coordination with state agencies; collaboration with leadership of the Special Education Advisory Council (SEAC); advising and assisting the lead agencies for Part B and B 619 as related to state and federal performance measures; providing an annual report to the Governor; an annual performance Report (APR) to the Office of Special Education Programs of the US Department of Education. These objectives were met during this CCDF reporting period.

Kansas Enrichment Network (KEN) provides the means to strengthen the infrastructure of afterschool programs that target low-income populations and students at-risk of dropping out of school. KEN's activities include technical assistance and training opportunities through bi-annual conferences, on-site technical assistance to state-wide school age programs and specialized technical assistance and training opportunities that focus on topics that are appropriate for school age children. KEN, and partnering organizations, collaborate with school age program workforce to promote safe, healthy and enriching learning opportunities to prepare students for the future.

Coordinated activities and measures of impact for school age programs include the following:

Conferences 3 (clock hours provided)

Training Events 7

Number of site visits to 21st Century Learning Community Center(CCLC) and Quality Matters 128

Number of counties represented 45

Number of youth impacted (cumulative for all events and self-reported) 28,413

Number of staff who will be trained by attendee (self-reported) 2,991

Topics addressed: Quality programming, parent engagement, older youth programming, STEM, STEAM, social and emotional learning, staff burnout, summer learning, cultural diversity, physical activity, social media, grant writing and 21st century skills.

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, %: 2.11

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:

Unknown, this data is unavailable.

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.

All injury reports submitted by a licensed program received as a result of a complaint are reviewed by the Child Care Licensing Regional Administrator who is the custodian of the record. A review may result in an investigation or enforcement action if deemed appropriate. Data is reviewed annually and may result in additional training made available by the local licensing surveyor. Data is also used when considering amendments to regulations that impact the health and safety of children in care, however there are no regulations currently being amended.

KDHE Child Care Regulations require that a licensed facility report any death of a children to the Kansas Department of Health and Environment within 24 hours. A compliant investigation is initiated as appropriate.

All deaths that occurs in a licensed facility is reported to the Kansas Death Review board upon request. Data is tracked regarding the cause, including space the death occurred (outside, crib, etc.) certification information such as CPR/First Aid, and noncompliance cited and enforcement initiated if applicable.

KDHE also tracks deaths that occur in an illegal care facility.

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

1. The KDHE enforcement fine matrix was amended to ensure that a fine could be assessed for noncompliance that is considered significant and adverse. All monies received as a result of an enforcement go to the State General Fund and do not go to the program.

2. A violation report was updated to include documentation regarding the 4-hour health and safety topic inclusion in the total annual professional development/in-service requirement.

3. A violation report is used for surveyor quarterly training and county specific location information is used by licensing surveyors to determine additional trainings made available in their area.

4. K.A.R. 28-4-133 was drafted and is specific to License and Group Day Care Homes, Child

Care Centers and Preschools. This regulation requires the reporting of any critical incident that occurs in the facility to the department.