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Quality Progress Report (QPR)

For

Montana

FFY 2024

QPR Status: Work in Progress as of 2025-01-30 21:30:01 GMT

The Quality Progress Report (QPR) collects information from states and territories (hereafter referred to as lead agencies) to describe investments to improve the quality of care available for children from birth to age 13. This report meets the requirements in the Child Care and Development Block Grant (CCDBG) Act of 2014 for lead agencies to submit an annual report that describes how quality funds were expended, including the activities funded and the measures used to evaluate progress in improving the quality of child care programs and services.

For purposes of simplicity and clarity, the specific provisions of applicable laws printed herein are sometimes paraphrases of, or excerpts and incomplete quotations from, the full text. The lead agency acknowledges its responsibility to adhere to the applicable laws regardless of these modifications.

The contents of this document do not have the force and effect of law and are not meant to bind the public in any way. This document is intended only to provide clarity to the public regarding existing requirements under the law or agency policies.

QUALITY PROGRESS REPORT

The Quality Progress Report (QPR) collects information from lead agencies to describe investments to improve the quality of care available for children from birth to age 13. This report meets the requirements in the Child Care and Development Block Grant (CCDBG) Act of 2014 for lead agencies to submit an annual report that describes how quality funds were expended, including the activities funded and the measures used to evaluate progress in improving the quality of child care programs and services. Lead agencies are also required to report on their Child Care and Development Fund (CCDF) quality improvement investments through the CCDF Plan, which collects information on the proposed quality activities for a three-year period; and through the ACF-696, which collects quarterly expenditure data on quality activities.

The annual data provided by the QPR will be used to describe how lead agencies are spending a significant investment per year to key stakeholders, including Congress, federal, state and territory administrators, providers, parents, and the public.

Specifically, this report will be used to:

- Ensure accountability and transparency for the use of CCDF quality funds, including a set-aside for quality infant and toddler care and activities funded by American Rescue Plan (ARP) Act
- Track progress toward meeting state- and territory-set indicators and benchmarks for improvement of child care quality based on goals and activities described in CCDF Plans; and
- Understand efforts in progress towards all child care settings meeting the developmental needs of children
- Inform federal technical assistance efforts and decisions regarding strategic use of quality funds.

What Period Must Be Included: All sections of this report cover the federal fiscal year activities (October 1, 2023, through September 30, 2024), unless otherwise stated. Data should reflect the cumulative totals for the fiscal year being reported, unless otherwise stated.

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

How is the QPR Organized?

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

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

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

When is the QPR Due to ACF?

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

Glossary of Terms

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

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

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

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

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

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

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

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

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

Provider means the entity providing child care services.

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

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

1) Overview

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

1.1 State or Territory Child Care Provider Population

1.1.1 Total Number of Licensed Providers:

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

☒ Licensed center-based programs **337**

☐ Unable to provide number. Indicate reason:

Additional clarification: Based on most recent submission of the FY 2024 ACF-800 data there were 296 licensed center-based programs receiving CCDF funding. Please report the number of ALL licensed center-based programs operating in the state here, regardless of receipt of CCDF funding.

☒ Licensed family child care homes **547**

☐ Unable to provide number. Indicate reason:

Additional clarification: Based on most recent submission of the FY 2024 ACF-800 data there were 118 licensed family child care homes receiving CCDF funding. Please report the number of ALL licensed family child care homes operating in the state here, regardless of receipt of CCDF funding.

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

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

2.1 Lead Agency Progression of Professional Development

2.1.1 Professional Development Registry:

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

☒ Yes. If yes, describe: **Montana Early Childhood Project Practitioner Registry**

☐ No. If no, what alternative does the lead agency use to track the progression of professional development for teachers/providers serving children who receive CCDF subsidy? Describe:

2.1.2 Participation in Professional Development Registry:

Are any teachers/providers required to participate?

☒ Yes. If yes, describe: **All licensed center based child care and family child care providers are required to participate.**

☐ No. If no, describe:

2.1.3 Number of Participants in Professional Development Registry:

Total number of participants in the registry as of September 30, 2024 **4740**

2.1.4 Spending - Professional Development Registry:

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

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

☒ CCDF quality funds

☐ Non-CCDF funds

☐ CARES funds

☐ CRRSA Funds

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

☐ No

2.2 Workforce Development

2.2.1 Professional Development and Career Pathways Support:

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

- ☒ Scholarships (for formal education institutions) **135**
- ☒ Financial bonus/wage supplements tied to education levels **1**
- ☒ Career advisors, mentors, coaches, or consultants **21**
- ☐ Reimbursement for training
- ☐ Loans
- ☐ Substitutes, leave (paid or unpaid) for professional development
- ☐ Other. Describe:
- ☐ N/A. Describe:

2.2.2 Spending - Professional Development and Career Pathways Support:

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

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

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

☐ No

2.3 Child Care Provider Qualifications

2.3.1 Number of Licensed Child Care Programs Qualifications:

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

☒ Child Development Associate (CDA) **229**

☒ Associate's degree in an early childhood education field (e.g. psychology, human development, education) **184**

☒ Bachelor's degree in an early childhood education field (e.g. psychology, human development, education) **386**

☒ State child care credential **446**

☒ State infant/toddler credential **570**

☐ Unable to report this data. Indicate reason:

2.3.2 Number of Licensed CCDF Child Care Programs Qualifications:

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

☒ Child Development Associate (CDA) **120**

☒ Associate's degree in an early childhood education field (e.g. psychology, human development, education) **123**

☒ Bachelor's degree in an early childhood education field (e.g. psychology, human development, education) **131**

☒ State child care credential **247**

☒ State infant/toddler credential **336**

☐ Unable to report this data. Indicate reason:

2.4 Technical Assistance for Professional Development

2.4.1 Technical Assistance Topics:

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

☒ Business Practices

☒ Mental health for children

☒ Diversity, equity, and inclusion

☒ Emergency Preparedness Planning

☒ Other. Describe other technical assistance available to providers as part of the professional development system: **The Child Care Training site includes classes for child care providers on all the above topics. For each class, we assign an instructor who is available to answer questions and offer clarifications. These instructors are vetted and trained specialists in the topics to which they are assigned. Zero to Five provides training on best business practices.**

2.4.2 Spending - Technical Assistance for Professional Development:

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

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

☒ CCDF quality funds

☐ Non-CCDF funds

☐ CARES funds

☐ CRRSA Funds

☒ ARP Supplemental Discretionary

☐ ARP Stabilization 10% set-aside

☐ Unable to report. Indicate reason:

☐ No

2.5 Spending – Training and Professional Development

2.5.1 Spending – Training and Professional Development:

What is the total amount spent across all funding sources (i.e., CCDF quality set aside, non-CCDF funds, CARES, CRRSA, ARP Supplemental Discretionary, and ARP Stabilization 10% set-aside) to support the training and professional development of the child care workforce during October 1, 2023 to September 30, 2024? **\$88610**

☐ Unable to report total amount spent. Indicate reason:

Optional: Use this space to tell us any additional information about how funds were spent that is not captured in the items already reported. **CCT contract 25%, PDG - LEarnERs- \$8049, Teaching Strategies \$7125, Development is a Journey.**

2.6 Progress Update

2.6.1 Progress Update – Training and Professional Development:

Supporting the training and professional development of the child care workforce

Measurable indicators of progress the state/territory reported in section 6.3.2 of the FFY 2022-2024 CCDF Plan.

The STARS to Quality team looks several data sets within the Practitioner Registry.

STARS to Quality program staff are required to participate on the Registry, which helps the STARS to Quality team collect valuable data about professional development and education based on individuals' levels on the Career Path. The Career Path promotes professional development for early care and education practitioners by providing a framework for recording and recognizing experience, training, and educational accomplishments. The Career Path outlines eleven levels of career development based on training, education, and experience in the field. The Membership Level, formerly the Early Childhood Practitioner level, was removed for a brief time and then modified and added back to the Career Path in 2018, when Child Care Licensing implemented rule that all individuals in licensed and registered programs must be current on the Career Path. Any individual developing a plan for professional growth in early care and education can chart a course on the Career Path. From 2019 to 2020, there was a 4% increase in STARS Registry participants and nearly a 17% increase in all current Registry Participants. The following shows Practitioner Registry participant numbers for FY2020 by Registry level.

Membership Level

STARS to Quality: 62

Statewide workforce: 202

Level 1

STARS to Quality: 383

Statewide workforce: 1,428

Level 2

STARS to Quality: 622

Statewide workforce: 1,213

Level 3

STARS to Quality: 195

Statewide workforce: 312

Level 4

STARS to Quality: 88

Statewide workforce: 165

Level 5

STARS to Quality: 100

Statewide workforce: 152

Level 6

STARS to Quality: 34

Statewide workforce: 71

Level 7

STARS to Quality: 29

Statewide workforce: 59

Level 8

STARS to Quality: 98

Statewide workforce: 172

Level 9

STARS to Quality: 30

Statewide workforce: 65

Level 10

STARS to Quality: 2

Statewide workforce: 3

Educational Growth

From 2019 to 2020 there was nearly a 7 % increase in Bachelor's degrees attained among STARS to quality Registry participants.

Number of STARS to Quality providers with increased educational levels in FY2020:

Associate degree: 163

Bachelor's Degree: 371

Master's Degree: 65

Doctorate: 3

Some College: 232

High School + MACTE (Montessori Accreditation Council for Teacher Education) certification and/or CDA (any type): 79

High School + MT Infant Toddler Certification and/or MT Preschool Certification: 309

Please include information on the outcomes and numerical targets achieved based on the measurable indicators of progress specified in section 6.3.2 of the FFY 2022-2024 CCDF Plan: The following data details the members at each of the 11 levels of the practitioner registry.

Total registry participants: 4,809

Membership (Level 0): 412

Level 1: 1961

Level 2: 963

Level 3: 370

Level 4: 388

Level 5: 505

Level 6: 194

Level 7: 41

Level 8: 184

Level 9: 58

Level 10: 3

The numbers resulted in a static number of users of 4,809, and an increase at levels 4, 6 and 8. Additionally, in late 2023 and early 2024, ECP pulled together a group of stakeholders to help redesign the career path to recognize in the pathways, increased ability for practitioners with career longevity and approved trainings to move up the pathways. These changes were implemented in June of 2024. After the update, the distribution of registry members shifted such that 1,190 practitioners were qualified to move up to higher levels in the registry. The total number of members in levels 0, 1 and 2 decreased, while the number of practitioners who qualified for levels 3-6 increased. The data demonstrates that Montana has had success supporting practitioners to increase their level on the registry.

Detailed quarterly reports are submitted to the Early Childhood Services Bureau by the Early Childhood Project that indicate data regarding the Practitioner Registry, the Professional Development Approval System, and incentives and awards. Customized reports about the workforce, including wages, are available upon request and developed as needed. The Career Development Advisory Board receives a full annual report of ECP operations for review at their annual spring meeting. The ECP develops an annual Work Plan that identifies goals, objectives and activities for each year. The ECP and each CCR&R agency is monitored by the Early Childhood Services Bureau on a regular basis to ensure completion of goals, objectives and activities and to address successes, challenges and needs related to performance. For the reporting timeframe, 4,809 individuals are current on the ECP Registry. The ECP received a total of 5,073 registry applications, down from 5,176 applications in FY23. ECP registry has been a

required activity for licensed providers and we are starting to see the numbers level out. ECP approves individuals for a Director's Credential and during the reporting time frame there are 59 current up from 34 during the same reporting period in FY23. ECP approved 841 training events, and 694 training events were completed for a total of 3,280.75 training hours during FY24. This is down from the previous reporting year, but individual training requests were higher, with 2,176 in FY24 compared to 1,368 in FY23.

3) Improving early learning and development guidelines

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

3.1 Early Learning and Development Guidelines

3.1.1 Spending - Early Learning and Development Guidelines:

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

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

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

What is the total amount spent across all funding sources (i.e., CCDF quality set aside, non-CCDF funds, CARES, CRRSA, ARP Supplemental Discretionary, and ARP Stabilization 10% set-aside) on improving upon the development or implementation of early learning and development guidelines? **\$3552**

☐ Unable to report total amount spent. Indicate reason

Optional: Use this space to tell us any additional information about how funds were spent that is not capture in the item already reported: **Early learning standards improvement process and printing.**

☐ No

3.2 Progress Update

3.2.1 Progress Update - Early Learning and Development Guidelines:

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

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

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

Quality funds are used to maintain and implement early learning and development guidelines. ECSB looks at website analytics pertaining to MELS, including the link to the electronic version of the MELS. ECSB reviews the number of printed copies distributed each year. An online course is available for the MELS through ChildCareTraining.org. The training is a required course in STARS to Quality at STAR 2 for lead teachers, and is open for all other child care providers to take. Number of individuals completing the course, in addition to course evaluations, are reviewed to measure progress and quality of the MELS.

Please include information on the outcomes and numerical targets achieved based on the measurable indicators of progress specified in section 6.4.3 of the FFY 2022-2024 CCDF Plan:

During FFY24, 349 individuals took online Montana Early Learning Standards training, a decrease from our previous fiscal year. However, the Lead Agency's QRIS system has begun a 2-year redesign during which practitioners are not required to take this training to achieve their level. Montana still recommends participation in these free, valuable trainings. Additionally, 3,280.75 hours of trainings were taken to support the 11 knowledge base areas.

Additionally, MELS is going through a formal update. Below is a detailed list of activities.

Meetings held with leadership: 19

Meetings held with whole group: 5

Narratives:

Weekly meetings held with state team, Federal T&TA, & Montana Early Childhood Higher Education co-chairs, for leadership discussions, planning and research

Over the reporting period a large continuation of effort to ensure subject matter experts to include, STAR five level providers, state higher education, tribal representation, office of public instruction, for deep engagement and committed involvement in MELS revision.

40 Stakeholders engaging in the revision process.

Through PDG BF B5 funding an in-person work group meeting, with members attending from

around the state, was held in November.

A virtual follow up meeting in December was held for all members to provide same discussions and work dissemination as November meeting.

Leading regular and ongoing communications to involve all members in agreements for moving the work forward.

Held virtual meetings for all members with Out of School Time Federal T&TA facilitator to present research and connections with other states also revising their state standards.

Held virtual full group meeting in January, results of preliminary findings, set small group leadership and team roles, timeline agreements for work moving forward.

Through facilitation and full group feedback and analysis leadership team created the Plan Do Study Act framework and deliverables for age band small working groups.

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

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

4.1 Quality rating and improvement system status

4.1.1 QRIS or other system of quality improvement status:

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

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

- General description of QRIS: **Montana has a five tiered rating system. Montana defines high quality care as programs achieving a STAR 3, 4 and 5 in STARS to Quality, Montana's QRIS. All levels are determined based on programs meeting a variety of criteria including, for levels 2-5, assessment scores. Environment Rating Scales and Program/Business Administration scales are administered by contracted assessors. Each level of STARS requires different thresholds of achievement.**
- How many tiers/levels? **5** [insert number of tiers below as required and describe each tier and check off which are high quality]
 - Tier/Level 1: **Programs must serve a minimum 10% of children with high needs in their programs**
[] High Quality
 - Tier/Level 2: **Programs must serve a minimum of 10% of children with high needs in their programs. Directors/Providers are required to current on the workforce registry and be at a level 2 or higher on the career path. Quality incentives are awarded.**
[] High Quality
 - Tier/Level 3: **Requires an Environmental Rating Scale (ERS) and a Business management Assessment (PAS- Program Administration Scale (Center) or BAS-Business Administration Scale (Family/Group)) administered by contracted reliable assessors. Quarterly incentives are awarded. Programs must serve a minimum of 10% of children with high needs in their programs.**
[x] High Quality

- Tier/Level 4: Requires an Environmental Rating Scale (ERS) and a Business management Assessment (PAS- Program Administration Scale (Center) or BAS-Business Administration Scale (Family/Group)) administered by contracted reliable assessors. Requires programs to offer developmental screening using a valid and reliable tool at the chosen tool's recommended intervals for all children enrolled. Screening data must be entered into the STARS application site. Quarterly incentives are awarded. Programs must serve a minimum 15% of children with high needs in their programs.
☒ High Quality
- Tier/Level 5: Requires an Environmental Rating Scale (ERS) and a Business management Assessment (PAS- Program Administration Scale (Center) or BAS-Business Administration Scale (Family/Group)) administered by contracted reliable assessors. Requires programs to offer developmental screening using a valid and reliable tool at the chosen tool's recommended intervals for all children enrolled. Requires a program to be NAEYC, NAFCC, or Montessori Accredited. Screening data must be entered into the STARS application site. Quarterly incentives are awarded. Programs must serve a minimum 15% of children with high needs in their programs.
☒ High Quality
- Tier/Level 6:
☐ High Quality
- Tier/Level 7:
☐ High Quality
- Tier/Level 8:
☐ High Quality
- Tier/Level 9:
☐ High Quality
- Tier/Level 10:
☐ High Quality
- Total number of licensed child care centers meeting high quality definition: **68**
- Total number of licensed family child care homes meeting high quality definition: **36**
- Total number of CCDF providers meeting high quality definition: **76**

- Total number of children served by providers meeting high quality definition:
1010

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

- General description of pilot QRIS (e.g., in a few localities, or only a few levels):
- Which localities if not state/territory-wide?
- How many tiers/levels? [insert number of tiers below as required and describe each tier and check off which are high quality
 - Tier/Level 1:
☐ High Quality
 - Tier/Level 2:
☐ High Quality
 - Tier/Level 3:
☐ High Quality
 - Tier/Level 4:
☐ High Quality
 - Tier/Level 5:
☐ High Quality
 - Tier/Level 6:
☐ High Quality
 - Tier/Level 7:
☐ High Quality
 - Tier/Level 8:
☐ High Quality
 - Tier/Level 9:
☐ High Quality
 - Tier/Level 10:
☐ High Quality

- Total number of licensed child care centers meeting high quality definition:
- Total number of licensed family child care homes meeting high quality definition:

- Total number of CCDF providers meeting high quality definition:
- Total number of children served by providers meeting high quality definition:

☐ The lead agency is operating another system of quality improvement.

- General description of other system:
- Describe assessment scores, accreditation, or other metrics associated with this system:

- Describe how “high quality” is defined in this system?
 - Total number of licensed child care centers meeting high quality definition:
 - Total number of licensed family child care homes meeting high quality definition:
 - Total number of CCDF providers meeting high quality definition:
 - Total number of children served by providers meeting high quality definition:
- ☐ The lead agency does not have a QRIS or other system of quality improvement.
- Do you have a definition of high quality care?
 - ☐ Yes, define:
 - Total number of licensed child care centers meeting high quality definition:
 - Total number of licensed family child care homes meeting high quality definition:
 - Total number of CCDF providers meeting high quality definition:
 - Total number of children served by providers meeting high quality definition:
 - ☐ No

4.1.2 Spending - Quality rating and improvement system status:

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

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

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

☐ No

4.2 Quality Rating and Improvement Systems participation

4.2.1 QRIS or other system of quality improvement participation:

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

- ☒ Licensed child care centers
- ☒ Licensed family child care homes
- ☐ License-exempt providers
- ☒ Programs serving children who receive CCDF subsidy
- ☒ Early Head Start programs
- ☒ Head Start programs
- ☐ State Prekindergarten or preschool programs
- ☐ Local district-supported Prekindergarten programs
- ☒ Programs serving infants and toddlers
- ☒ Programs serving school-age children
- ☒ Faith-based settings
- ☒ Tribally operated programs
- ☐ Other. Describe:

4.3 Quality Rating and Improvement Systems Benefits

4.3.1 Quality Rating and Improvement Systems Benefits:

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

- ☐ One-time grants, awards or bonuses
 - ☐ Licensed child care centers
 - ☐ Licensed family child care homes
- ☒ On-going or periodic quality stipends
 - ☐ Licensed child care centers **105**
 - ☐ Licensed family child care homes **66**
- ☒ Higher CCDF subsidy rates (including tiered rating)
 - ☐ Licensed child care centers **90**
 - ☐ Licensed family child care homes **43**
- ☐ Ongoing technical assistance to facilitate participation in QRIS or improve quality of programs already participating in QRIS (or some other technical assistance tied to QRIS)
- ☐ Other. Describe

4.3.2 Spending - Quality Rating and Improvement Systems Benefits:

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

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

☒ CCDF quality funds

☒ Non-CCDF funds

☐ CARES funds

☐ CRRSA Funds

☐ ARP Supplemental Discretionary

☐ ARP Stabilization 10% set-aside

☐ Unable to report. Indicate reason:

☐ No

4.4 Spending – Quality Rating and Improvement Systems

4.4.1 Spending – Quality Rating and Improvement Systems:

What is the total amount spent across all funding sources (i.e., CCDF quality set aside, non-CCDF funds, CARES, CRRSA, ARP Supplemental Discretionary, and ARP Stabilization 10% set-aside) related to QRIS or other quality rating systems during October 1, 2023 to September 30, 2024? **\$2938600**

☐ Unable to report total amount spent. Indicate reason

Optional: Use this space to tell us any additional information about how funds were spent that is not captured in the items already reported. **PDG BUILD, PDG Incentives, ECP subcontracting new world now, CCRR provider services 50%**

4.5 Progress Update

4.5.1 Progress Update – Quality Rating and Improvement Systems:

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

Measurable indicators of progress the state/territory reported in section 7.3.6 of the FFY 2022-2024 CCDF Plan:

Note: The information displayed is from the most recent approved FFY2022-2024 CCDF Plan. For STARS to Quality, ERS baseline assessments are conducted upon a program's acceptance into STARS. This allows the STARS to Quality team to gather baseline data and track progress as the program moves up in the framework. From FY2018-FY2020, there were 38 ECERS-R, 40 ITERS-R, and 49 FCCERS-R baseline assessments completed. Montana reviews STARS to Quality program movement in the framework. Beginning at STAR 3, the indicators are embedded into the framework to collect data and measure program progress towards increased quality. From FY2018-FY2020, 70% of ECERS-R assessments completed had a score of 4.0 or above. 80% of those scored a 4.0 or above in Language & Reasoning, and 84% scored a 4.0 or above in Interaction. 45% of ITERS-R assessments had a score of 4.0 or above. 70% of those scored a 4.0 or above in Listening & Talking, and 73% scored a 4.0 or above in Interactions. 58% of FCCERS-R assessments had a score of 4.0 or above. 88% of those scored a 4.0 or above in Listening & Talking, and 86% scored a 4.0 or above in Interactions. Data for training, technical assistance, and coaching within STARS programs is tracked and used to inform and build upon the overall system. In FY2020, individuals completed 36,646 hours of STARS to Quality qualified training. Currenting in STARS to Quality programs, there are 116 EC teachers that have an Associate's Degree, 284 have a Bachelor's Degree, 33 have a Master's Degree, and 443 teachers have Higher Education qualifications.

Please include information on the outcomes and numerical targets achieved based on the measurable indicators of progress specified in section 7.3.6 of the FFY 2022-2024 CCDF Plan: For STARS to Quality, ERS baseline assessments are conducted upon a program's acceptance into STARS. This allows the STARS to Quality team to gather baseline data and track progress as the program moves up in the framework. STARS to Quality is currently undergoing a redesign. Because of this, all programs participating as of June 1, 2024, were held at their current Star level and no new programs were accepted into STARS to Quality. The new QRS has a projected launch date of October 2025. Few baselines were completed as a result of not accepting new programs. From FFY2023-FFY2024, there were 2 ECERS-3, 4 ITERS-3, and 4 FCCERS-3 baseline assessments completed. Montana saw dramatic increases in ECERS-3 baseline scores in many items. There are 35 items to score in the ECERS-3 tool and 6 of these had an increase of 25% or higher. The item, Math in daily events, had the biggest increase at 73%. FCCERS-3 baseline assessment scores also showed a dramatic increase in 6 of the 33 possible items to be scored. The biggest increase of 67% was in the item, Supervision of Gross Motor Play. There was also a 65% increase in the item of Nature & Science.

Beginning at Star 3, the indicators are embedded into the framework to collect data and measure program progress towards increased quality. High stakes assessments are conducted for programs renewing or applying for a Star 3-5. Star 3 is the baseline for high quality with the

ERS minimum threshold score of a 3.0. The decision was made as part of the Redesign phase to continue conducting ERS assessments with certified, reliable assessors, but the assessments were not high stakes. Scores were for informational and goal setting purposes. Star 2 programs, not previously required to have an assessment, were required to have a new ERS assessment conducted. 61 Star 2 programs received new assessments with the ERS-3rd edition. They had previously been assessed in prior years using the ERS-Revised edition. 27 of these programs received an ECERS-3 with an average score of 3.65. Ten programs received an ITERS-3 assessment with an average score of 4.23 and 24 programs received a FCCERS-3 assessment with the average score being a 4.17. It is worth noting that an assessment score of at least a 3.0 is considered higher quality. Assessments in all three tools showed significantly higher scores in the Interactions subscale with an average of 5.41. This subscale includes items such as: Staff child interactions, peer interactions, child guidance, and interactions during indoor and outdoor play. Scores in the Language subscales were also higher with an average score of 4.69. This subscale includes helping children expand vocabulary, encouraging use of language, staff and children's use of books, and responding to children's communication. The data suggests the importance of relationship building which is essential to the health and wellbeing of the children in care.

Data for training, technical assistance, and coaching within STARS programs is tracked and used to inform and build upon the overall system. Currently there are 140 EC teachers with an associate's degree, 318 with a bachelor's degree, and 52 with a master's degree in the STARS to Quality program - a numerical increase in all categories.

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

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

5.1 Infant/Toddler Specialists

5.1.1 Infant/Toddler Specialists:

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

☐ Yes

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

☒ No, there are no infant/toddler specialists in the state/territory.

☐ N/A. Describe:

5.1.2 Infant/Toddler Specialists Supports Provided:

If yes, what supports do the infant/toddler specialists provide?

☐ Relationship-caregiving practices (or quality caregiving/developmentally appropriate practices)

☐ On-site and virtual coaching

☐ Health and safety practices

☐ Individualized professional development consultation (e.g., opportunities for or awareness on career growth opportunities, degree/credential programs)

☐ Group professional development

☐ Family engagement and partnerships

☐ Part C early intervention services

☐ Mental health of babies, toddlers, and families

☐ Mental health of providers

☐ Behavioral Health

☐ Other. Describe

5.1.3 Spending – Infant/Toddler Specialists:

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

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

☐ CCDF quality funds

☐ Non-CCDF funds

☐ CARES funds

☐ CRRSA Funds

☐ ARP Supplemental Discretionary

☐ ARP Stabilization 10% set-aside

☐ Unable to report. Indicate reason:

☒ No

5.2 Staffed Family Child Care Networks

5.2.1 Number and Description of Staffed Family Child Care Networks:

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

☒ Number of staffed family child care networks: **1**

- Describe what the network/hub provides to participating family child care providers: **Raise Montana supports family child care work to enhance the overall quality of early childhood programs, expand access to high-quality care, and ensure that Montana's early childhood workforce is prepared and supported. Raise provides several specific services for family child care providers such as shared services: substitute service, telehealth for all staff, payroll processing, management software, resource library, ECE friendly business directory, discounts and grants, and an ECE job board. Raise also provides a sliding fee scale to ensure all shared services are affordable and accessible. With shared services, Raise also provides emergency preparedness resources and supplies as well as trauma-informed care and professional development.**

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

5.2.2 Spending - Staffed Family Child Care Networks:

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

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

☐ CCDF quality funds

☐ Non-CCDF funds

☐ CARES funds

☐ CRRSA Funds

☒ ARP Supplemental Discretionary

☐ ARP Stabilization 10% set-aside

☐ Unable to report. Indicate reason:

☐ No

5.3 Spending - Programs and services for infants and toddlers

5.3.1 Spending - Programs and services for infants and toddlers:

What is the total amount spent across all funding sources (i.e., CCDF quality set aside, non-CCDF funds, CARES, CRRSA, ARP Supplemental Discretionary, and ARP Stabilization 10% set-aside), above and beyond to the 3% infant and toddler set-aside, to improve the supply and quality of child care programs and services for infants and toddlers during October 1, 2023 to September 30, 2024? **\$142949**

☐ Unable to report total amount spent. Indicate reason:

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

5.4 Progress Update

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

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

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

Note: The information displayed is from the most recent approved FFY2022-2024 CCDF Plan. **STARS to Quality tracks data for programs receiving ITERS and FCCERS assessments.**

STARS to Quality programs self-report enrollment and high needs numbers when submitting for a STAR level. Programs must serve 10% high needs children at STAR 1 through STAR 3, and 15% at STAR 4 and STAR 5. As of April 2021, it is reported that there are 429 infants and 617 toddlers enrolled across currently rated STARS to Quality programs. There are 79 infants and 309 toddlers reported to be enrolled in STAR 3-5 programs.

Please include information on the outcomes and numerical targets achieved based on the measurable indicators of progress specified in section 7.4.2 of the FFY 2022-2024 CCDF Plan: **Montana continues to support infant toddler practices by supporting providers participating in the voluntary QRIS with ITERS and FCCERS assessments. Providers were given the choice which ERS tool they wanted to use, if they served multiple ages. Additionally, Montana began the rebuild process for QRIS during this reporting period and it will continue over the next couple of years. During this time, Montana will engage in stakeholder work and develop new strategies to support Infant Toddler initiatives. We are engaging with federal technical assistance to build an Infant/Toddler network. Additionally, Montana worked to establish a process for supporting Infant/Toddler CDA through apprenticeship and this will begin in January of 2025.**

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

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

6.1 Spending – Child Care Resource and Referral Services

6.1.1 Spending – Child Care Resource and Referral Services:

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

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

☒ CCDF quality funds

☐ Non-CCDF funds

☐ CARES funds

☐ CRRSA Funds

☐ ARP Supplemental Discretionary

☐ ARP Stabilization 10% set-aside

☐ Unable to report. Indicate reason:

What is the total amount spent across all funding sources (i.e., CCDF quality set aside, non-CCDF funds, CARES, CRRSA, ARP Supplemental Discretionary, and ARP Stabilization 10% set-aside) to **establish, expand, modify, or maintain a statewide CCR&R** during October 1, 2023 to September 30, 2024? **\$1682646**

☐ Unable to report total amount spent. Indicate reason:

Optional: Use this space to tell us any additional information about how funds were spent
CCRR 50%

☐ No

6.2 Progress Update

6.2.1 Progress Update – Child Care Resource and Referral Services:

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

Measurable indicators of progress the state/territory reported in section 7.5.2 of the FFY 2022-2024 CCDF Plan:

Note: The information displayed is from the most recent approved FFY2022-2024 CCDF Plan. **Montana has 7 Child Care Resource and Referral agency regions. The CCR&Rs submit quarterly reports which include a great amount of data. Reports must be submitted no later than October 15, January 15, April 15, and July 15 for the preceding quarter. Each agency reports on the following data points, as well as other information requested by ECSB: Number of on-site visit with new providers; Number of new and closed providers in the region; Recruitment methods and results; Professional development; Number of programs receiving TA related to specific topics (i.e. health & safety, inclusion, emergency preparedness, etc.); STARS to Quality QRIS data, including number of programs recruited in the region; Meetings with Best Beginnings Scholarship families; Eligibility determination data; Referral data Consumer Education and Collaboration and referral to Family Engagement coordinator to support family needs.**

Data reported includes:

- Number of visits to the agency website

- Events attended

- Electronic media publications or broadcasts

- Locations of written material distribution

- Community service events

- Names of organizations collaborated with as well as the type of collaboration and the results/outcomes.

Quarterly reports are reviewed by the Lead Agency quarterly and considered part of desk monitoring. Feedback is provided via a desk monitoring form and clarifications and/or additional information is requested as needed. The Lead Agency schedules on-site contract monitoring visits annually and focused on areas of concerns that have been discovered in the Quarterly Reports and /or fiscal reviews. The Lead Agency also used the Quarterly Reports as an opportunity to share success and promote best practices across the state. Additional information, such as movement of STARS to Quality programs, recruitment efforts and kinds of TA provided to individual providers are also discussed during these monitoring visits. Montana also has a CCR&R network. The Montana Child Care Resource & Referral (MT CCR&R) Network is a statewide network of 7 community-based child care resource and referral agencies who

work to improve the quality, accessibility, and affordability of child care for all Montana's families. The mission of the Network is to support member organizations, advance the early childhood profession, and improve the quality, affordability, and accessibility of child care. This is done by providing training and support to member agencies; initiating projects to build child care supply and quality in urban and rural areas; educating policy makers, businesses, and the public on child care issues; advocating for child care professionals and families. The MT CCR&R Network meets quarterly, and often invites the Lead Agency to attend the meetings to provide updates, answer questions, and to collaborate together as a partnership.

Please include information on the outcomes and numerical targets achieved based on the measurable indicators of progress specified in section 7.5.2 of the FFY 2022-2024 CCDF Plan: The Lead Agency continues to have 6 Childcare Resource and Referral agencies during the reporting period, serving 7 local regions in Montana. All regions submitted quarterly reports timely. Additionally, all regions received on-site monitoring from the Lead Agency. The on-site monitors prepared questions from each regions submitted Quarterly Reports and asked CCRRs to provide information for file reviews on-site. Quarterly Reports were updated for this QPR year to focus on the areas of data that match the priorities of Montana's work. The Lead Agency continues to hold training sessions with the regions and the network to ensure data is collected consistently across regions when the Scope of Work and Quarterly reports are updated. In addition, the Lead Agency provided feedback to each CCRR after the submission of the first submitted quarterly report, providing examples of things that needed to be reported in a different way as well as distributing to all regions things that were working well. The following data points were collected and amalgamated from the CCRR quarterly reports

Visits to CCRR websites - 71,498

Events Attended or Hosted - 282. Trunk or Treat, Women Who Wine Gala, Great Fish Award Ceremony, Feed the Flathead Dinner, Library Resource Fair, Veteran's Food Pantry Resource Fair, Bigfork Food Bank Resource Fair, Lake County Baby Fair, Sanders County Community Baby Shower, Inclusive Easter Egg Hunt, Blue Ribbon, Eureka Rendezvous Days, Parent Night, Flathead Growth Summit, Heart Locker Block Party, Buddy Walk, Trego Learn and Play, Week of the Young Child Event Flathead, Week of the Young Child Lincoln County Event, Parent Café's (3), Community Collaboration Meeting, Kodo Kids Training, playgroups (2), University of Montana School of Law Community Resource Fair, Missoula CMT, IRC Partner meeting, Maternal Child Health Advisory Council, 0-5 Family Engagement Subcommittee (PLTI), Child and Family Services (CFS) Family Support Team meeting, Healthy Start Family Support Planning meeting, Ravalli County Child Care Initiative meeting, Ravalli Head Start Policy Council meeting, CCRRN Family Engagement/Referral CoP, Ravalli Head Start Policy Council training session, CCB

Good Cause/Special Needs training, CCRRN Eligibility CoP, Missoula Public Health NACCHO SPACECAT meeting, Code For America Form Fest, Child Development Center Child Find meeting, CCRRN Referral/Sub Pool discussion, Business and Child Care meeting for Ravalli Child Care Initiative, CoP state consultants, Trauma Informed Advisory Committee Mtg, Early Learning Fellows, Society of Human Resource Professionals award event, City Club - Mayoral Debate and Q&A, MNA Executive Director Forum, UM Nonprofit Management Course, R&R Net, referral and sub pool virtual meeting, CCT - rural provider PD needs, Families First - update on programming and staff transitions at FF, LENA - Sustainable, Scalable ECE systems, One HSN - how R&Rs use CCUBS, needs in new system, Development of the Library block - community planning, possible inclusion of child care, R&R Net, barriers to home providers accessing food purchasing via major suppliers, City Club - community luncheon/networking/outreach, w/ Raise MT, and FCMT - substitutes pool wage subsidy pilot - agreed to it in Region 2, Head Start Feed and Read - dinner and literacy event with Msla Head Start and Sentinel Kiwanis, Interim Legislative Committee Meeting - CCL rule package, online training on homelessness and autism, Head Start Health and Safety Assessment meeting - Policy council meeting, IRC Missoula Quarterly Meeting, SPACECAT Subgroup on Resource Guide, Expanding Housing Options Community Meeting, UW event for Grace Decker, City Club - State of Missoula, media interview - child care challenges, statewide meeting with CCL, Chamber of Commerce - Update Missoula, State Consultant CoP, Bitterroot Early Learning Network meeting, UM Early Childhood Institute Summit, Bitterroot Early Learning Network training, MSLA Society for Human Resource Managers - award event. Presented to honor previous CCR employee who won an award, Mayoral Debate - CC issues, Healthy Start Resource Mapping Meeting, i. Attended the Best Beginnings Child Care Scholarship Program Event in Beaverhead County-held a presentation and handed out applications, Presented ACES on 12/15/23 for Butte Head Start staff, Presented to Butte Head start Leadership on programs and services Butte 4-C's provides on 12/1/23, Attended Butte Head Start open house, United Way Day of the Child, Presented at the Butte Native Wellness Center on Butte 4-C's services, Provided resources for the Butte Color Run with Butte Cares, Shared Child Find screening on Facebook and Instagram, Butte 4-C's programs at a Butte Head Start collaborative meeting with other service providers, Powell county Health Fair at Deer Lodge Medical Center, Attended parent night at Youth Empowerment Services to provide information on the BBS, Attended parent night at Anaconda Early Head Start to provide information on the BBS, Partnered with Flint Creek Child Care and Granite County Schools in Granite County to offer 3 Safe Sitter Courses, 10/12 Substance Abuse Prevention Alliance mtg, 10/12 Community Networking Luncheon, 10/19 Cascade LEPC, 10/24 Chamber Nonprofit Alliance Mtg, 10/26 Presentation to Vocation Rehab about FC, 11/1 MSU GF Student Resource Fair, 11/3 Child Find, 11/15 Child Care Is a Business Affair event in Lewistown, 11/30 Cascade LEPC, 12/19 Toole County LEPC, 12/19 Resource Fair for Homeless Population, Financial Reality

Fair for students 1/8 & 1/9, Substance Abuse Prevention Alliance mtg, Cascade County LEPC 1/25, Chamber Luncheon 2/21, Cascade County LEPC 2/29, Brain Building Preschool Expo 3/2, Nonprofit Alliance Committee mtg 3/7, Cascade County CMT mtg 3/12, Substance Abuse Prevention Alliance mtg, Lewistown Health and Resource Fair 3/23, Cascade County LEPC 3/28, No More Violence Week Planning Meeting 4/2, CCDF State Plan: An Opportunity to Shape the Future of Child Care 4/3, Nonprofit Alliance Mtg 4/4, Radio Interview on No More Violence Week 4/4, Work Session for Financial Reality Fair 4/4, CAN Conference 4/9-4/11, No Small Matter Viewing 4/9, Crime Prevention Through Environmental Design 4/10, Fort Peck Tribal College Career Fair 4/10, Sextortion in 2024 What Everyone Needs to Know 4/11, Fort Belknap Tribal College Career Fair 4/11, Child Find 4/12, Stonechild Tribal College Career Fair 4/15, Blackfeet Tribal College Career Fair 4/16, Career Fair 4/24, Resource Table at Hope Conference in Lewistown 4/27, Nonprofit Showcase 5/2, Early Childhood Events Committee Mtg 5/7, SAPA Mtg 5/16, Financial Reality Fair CMR 5/21, Family Connections Voyagers Nonprofit Night 5/21, Financial Reality Fair Great Falls High 5/22, LEPC Mtg 5/30, B2SB Mtg 6/4, CMT Mtg 6/11, Pondera County LEPC, 6/13, SAPA Mtg 6/20, Alluvion Get Out and Play Event 6/30, Raise A Pint Night 7/1, Cascade Swim Event 7/26, Car Seat Safety Event 7/27, Conrad Swim Event 8/14, Back to School Blast 8/16, Touch a Truck 8/17, Cut Bank Resource Fair 9/18, SAPA Mtg 9/19, Early Childhood Coalition Reboot 9/26, etc.

Electronic media publications or broadcasts - 1629; Example of media publications. Monthly radio interviews, posts about finding childcare, upcoming events, Best Beginnings, surveys for providers and parents, posts for childcares looking for staff, newspaper ads. EX: Region 1 of 7 - reached 53,300 accounts (42,064 from ads, 12,662 organic), had 1,500 interactions and 1,700 link clicks. We published 297 posts on Facebook in that timeframe. Instagram had the following totals: 660 reach, 80 interactions, 47 posts. We gained 54 followers.

Locations of written material distribution: United Way, CASA, Intermountain, Postpartum Resource Group, Addiction Clinics, Schools in Flathead, Lake, Sanders, and Lincoln Counties, Hospitals in each county, WIC, Health Department, Family Resource Clinics, school parent nights and open house events, Missoula Food Bank, Hamilton Food Bank, Human Resource Council, Families First, YWCA, Blue Mountain Clinic, Partnership Health Center, Parenting Place, Public Health/WIC, Public Library, International Rescue Committee, Early Head Start, Child Start, Inc., Homeword, Office of Public Assistance, Job Service, Children's Science Museum, Gallatin Valley Health Department, Lewis & Clark Health Department, St. Peters Health - Hospital, Job Services- Bozeman, Exploration Works, Bozeman Deaconess Women's Health, Florence Crittenton, Roots Pediatric, Food Resource Center- Livingston, Food Bank, Food Share, Haven-Bozeman, Billings Clinic- West Yellowstone, Peace Place Respite Care, Little Learners Academy,

Echoz Pregnancy Center, Family Promise, Disaster and Emergency Services Lewistown, NeighborWorks Great Falls, River Run Apartments, Alluvion Health Main Clinic, Great Falls Public Library, Alluvion Health Speech Therapy Clinic, Blackfeet Manpower Training Center, School District 9 Young Parents Program Browning, City County Health Department Great Falls, Boys and Girls Clubs Great Falls, YWCA, Little Lambs Daycare, Benefis Teton Medical Center, Teton County Health Department, Center for Mental Health Conrad, Child and Family Services Conrad, Child Support Enforcement Conrad, Conrad Public Library, Hi-Line's Help for Abused Spouses, Logan Health ☐ Conrad, Pondera County Health Conrad, Child and Family Services Cut Bank, Glacier County Library, Job Service Cut Bank, Marias Healthcare Services, Youth Dynamics Shelby, Inner Reflections Healthcare, My Neighbor/My Student in Need GF, Northcentral Learning Resource Center, Rural Dynamics GF, St. Vincent DePaul, Child and Family Services Great Falls, Child Care Licensing Great Falls, Alliance for Youth Great Falls, Many Rivers Whole Health Clinic, Many Rivers Whole Health Addiction Care Manager, Great Falls Interfaith, GFPS Career & College Readiness Center, Eagle Mount, Girl Scouts, Rose Mountain Midwifery, Great Falls College MSU, MSU Extension Great Falls, Rescue Mission ☐ Cameron Family Center, Benefis Pediatrics | Therapy Center Benefis West, Benefis Pediatrics | Specialty Center, Great Falls Clinic Family Medical Center, Great Falls Clinic OB-GYN, Great Falls Clinic Pediatrics Main, Great Falls Clinic Walk-in, University of Providence, Flippin Family Fun, Kaboom, Golden Triangle Gym, Young Parents Education Center (YPEC), Great Falls High School, Child and Family Services Havre, Chippewa Cree Tribal TANF, Hi-Line Pregnancy Resource Center, District 4 HRDC, Havre Food Bank, Action for Eastern Montana Glasgow, Child and Family Services Glasgow, Frances Mahon Deaconess Hospital, Glasgow City-County Library, Job Service Glasgow, Office of Public Assistance & Pathways Glasgow, Valley County Health Department, WIC Glasgow, Action for Eastern Montana Sidney, Child and Family Services Sidney, Job Service Sidney, Richland County Library, Action for Eastern Montana Glendive, Child and Family Services Glendive, Glendive Medical Center, Glendive Public Library, Lil Mo's Daycare, Little Sprouts Academy, Our Savior Lutheran Childcare Ministry, Peggy Heyen's Daycare, Child and Family Services Wolf Point, Housing Authority Wolf Point, Indian Health Clinic Wolf Point, Tribal Social Services Fort Peck, Aaniiih Nakoda College, Harlem Public Library, Housing authority Fort Belknap, Indian Health Clinic Fort Belknap, Tribal Social Services Fort Belknap, Northern Montana Health Care (Family Medical Center), Salvation Army Family Service Center Havre, Salvation Army Family Store Havre, Blaine County Health Department, Kids Korner Daycare, Boys and Girls Club Fort Belknap, MSU Extension Fort Belknap, Red Whip Recreation Center, District 4 HRDC, etc.

Community service events - 110. Overlaps with events attended.

Organizations collaborated with - 158. Example of collaboration: Collaborative Housing Solutions - Working together to support families experiencing homelessness - Point in Time activities and distributing resources, Kalispell Heart Program ☐ Working to support at-risk families and start parent groups for young families ☐ Defining the best meeting space and incentive for families, St. Joseph's Medical Center ☐ Provide diapers, wipes, and literature for new families in Lake County ☐ Dispersed over 200 diaper packets to families, SKC Early Ed ☐ Present to Early Ed Class ☐ Will continue to do classes each semester, Rotary ☐ Made connections with group in hopes of collaboration opportunities ☐ building ongoing relationship, Neighborworks MT ☐ Brochure sharing for families looking for housing ☐ Warm hand-offs, School District 5 ☐ B-5 transition work ☐ members of district on workgroup, Sanders County Library ☐ Allows NC to use space to meet with families ☐ Helps get resources to families in Sanders County, Salvation Army ☐ They offer camps for kids, back to school help, and more ☐ we refer families, Sanders County Schools ☐ We worked with them to open childcare, and leave brochures and backpacks for families ☐ They refer families to us, Valley Neighbors ☐ Refugee family help ☐ Cross referrals, Spot to Talk ☐ information sharing ☐ cross referrals, Intermountain ☐ Information sharing ☐ cross referrals, Circle of Parents ☐ Support families with special needs ☐ support group help, KGEZ ☐ Monthly radio interviews ☐ Increase awareness of NC, Lake County CMT ☐ Monthly meetings ☐ provide information and resources to Lake County, Family Strong Eureka ☐ Attend events ☐ Helps us with a presence in Lincoln County, Trego Community Center ☐ Attend Learn and Play Quarterly ☐ offer supports to parents and information, Flathead Alliance to Stop Trafficking ☐ Monthly meetings ☐ Raise awareness about NC, did Red Sands Project, Community Management team Flathead ☐ Monthly meetings ☐ keep community informed of supports for families, Parks and Rec ☐ events ☐ We attend each other's events to keep community informed on programs and partnerships, Zero to Five Lincoln County ☐ monthly meetings ☐ cross referrals, Flathead Breastfeeding Coalition ☐ on pause ☐ Gave resources for mom groups, Local Emergency Preparedness Community ☐ quarterly meetings ☐ working on childcare emergency plan, Kalispell Chamber ☐ quarterly meetings ☐ childcare capacity initiative work, Bigfork Food Bank ☐ provide supports for families ☐ gave diapers, wipes and blankets to give away at food bank. , School District 50 ☐ Back to School Events ☐ Attend event to give away backpacks and resources to families, Ronan Schools ☐ Back to School events ☐ gave away backpacks and parent resources, Noxon Schools ☐ Back to School event ☐ Gave resources, signed EP MOU, Hot Springs Schools ☐ Back to School Event ☐ Gave resources, Dixon Schools ☐ Back to School Events ☐ Gave resources

Example of partnerships: Beautiful Beginnings, Bitterroot Early Learning Center, Boys and Girls Club of , Child Care Licensing, Child and Family Services Division, Family Support Team, Healthy Start , International Rescue Committee, Lifelong Learning Center, Maternal Child Health Advisory Council, Mineral County LEPC, County LEPC, Chamber of Commerce, City-County

Health Dept, CMT, County Public Schools, Housing Authority, PCC (Partnership Community Connect), Montana Advocates for Children, Montana Legal Services Association, Montana Resource and Referral Network, MT Preschool Alliance, Partnership for MT's Future, Partnership Health Center, Ravalli CMT, Ravalli COAD, Ravalli Head Start, St Patrick Hospital Social Services, United Way - Imagination Library, United Way - Zero to Five, WIC, YMCA, Zero to Five Access Committee, Zero to Five Family Engagement subcommittee, Healthy Start ☑ Bright by Text, ARPA Innovation Grantees, Central MT Child Care Alliance , County LEPC/DES, Chamber of Commerce, Public Schools, Head Start, Economic Development, Port Authorities, Boys and Girls Clubs, United Way of Cascade County, Exchange Club - Great Falls, RaiseMT & CCAoA, Benchmark, MAFB, GFPS, Central MT Coalition for Family Health, Alliance for Youth, SAPA, SHRM , Nonprofit Alliance, MNA, & Give Great Falls, Great Falls Area Community Foundation & MCF, Interfaith Association, MANG (Montana Air National Guard), MAFB, College of Great Falls MSU, Great Falls Public Schools, Woman Vote, ARPA Innovation Grantees, Central MT Child Care Alliance, etc.

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

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

7.1 Complaints about providers

7.1.1 Number of Complaints about providers:

How many complaints were received regarding providers during October 1, 2023 to September 30, 2024? **287**

7.1.2 Spending - Complaints about providers:

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

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

☐ CCDF quality funds

☐ Non-CCDF funds

☐ CARES funds

☐ CRRSA Funds

☐ ARP Supplemental Discretionary

☐ ARP Stabilization 10% set-aside

☐ Unable to report. Indicate reason:

☒ No

7.2 Licensing Staff

7.2.1 Number of Licensing Staff:

How many licensing staff positions were there in the state or territory during October 1, 2023 to September 30, 2024? Number of staff **21**

7.2.2 Spending – Licensing Staff:

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

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

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

☐ No

7.3 Health and Safety Standards Coaching and Technical Assistance

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

How many child care programs received coaching or technical assistance to improve their understanding and adherence to CCDF health and safety standards as a result of an inspection or violation during October 1, 2023 to September 30, 2024? **27**

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

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

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

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

☐ No

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

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

What is the total amount spent across all funding sources (i.e., CCDF quality set aside, non-CCDF funds, CARES, CRRSA, ARP Supplemental Discretionary, and ARP Stabilization 10% set-aside) on facilitating compliance with lead agency requirements for inspections, monitoring, health and safety standards and training, and lead agency licensing standards during October 1, 2023 to September 30, 2024? **\$1659839**

[] Unable to report total amount spent. Indicate reason:

Optional: Use this space to tell us any additional information about how funds were spent that is not captured in the items already reported. **CCDF Licensing, CCT online training 75%**

7.5 Progress Update

7.5.1 Progress Update - Compliance with health, safety, and licensing standards:

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

Measurable indicators of progress the state/territory reported in section 7.6.3 of the FFY 2022-2024 CCDF Plan:

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

In FY2020, over 10,000 individuals completed the required orientation courses which are all offered free of charge. From FY2019 and FY2020, 50 programs were supported with direct Support Plan Referrals through the CCR&Rs to address serious and/or continued licensing deficiencies. In FY2020, 13 programs received Emergency grants for a total of \$31,702.81, which supported programs to address licensing deficiencies. Seventy one programs received Start Up grants, which support programs starting a new childcare business to ensure that health and safety standards are being met prior to opening or within the first few months of operation. The total awarded for Start Up grants was \$184,186.44. CCR&R agencies track the total number of programs that technical assistance is provided for in certain areas for each quarter (the total annual number is a duplicated count). FY2019 and FY2020 over 3,800 programs statewide requested and were provided technical assistance specific to health and safety from their CCR&R agency.

Please include information on the outcomes and numerical targets achieved based on the measurable indicators of progress specified in section 7.6.3 of the FFY 2022-2024 CCDF Plan:

In FY2024, Montana's CCDF program supported licensed child care providers in achieving compliance and employing best practice with Montana's child care health, safety, and licensing standards through several activities. During this time 8,399 child care professionals completed the required Montana Child Care Licensing Orientation courses. These courses are provided

free of charge to Montana's child care workforce through the online training platform ChildCareTraining.org. In FY2024, the Child Care Resource and Referral agencies issued \$252,000 in Provider Financial Assistance grants to licensed child care providers to assist with meeting health and safety standards. These grants were awarded in amounts up to \$3,000 per application. The Child Care Resource and Referral agencies in concert with the state child care licensing program, engaged in 32 Support Plans which provided child care providers with planned technical assistance to improve health and safety practices.

Montana has also continued to focus on expediting the time an individual has to wait to receive background check results allowing vetted staff to start in the classroom sooner. The Lead Agency provides free background checks to child care professionals who get their fingerprints at one of the state's Livescan locations. The Livescan allows for quick submission of fingerprints. Montana also invested in a fingerprint scanner that enables the electronic transmission of hard copy fingerprints to the Montana Division of Criminal Investigation. This helps expedite the process for people submitting hard copy fingerprints. In the past year, Montana has implemented an interface with the Montana Department of Justice to allow automatic approval for candidates who do not have a background check finding.

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

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

8.1 Evaluation and assessment of center-based programs

8.1.1 Evaluation and assessment of center-based programs:

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

☒ QRIS

☐ CLASS

☒ ERS

☐ FCCERS

☒ ITERS

☐ State evaluation tool. Describe

☐ Core Knowledge and Competency Framework

☐ Other. Describe

☐ Do not evaluate and assess quality and effective practice

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

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

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

☒ CCDF quality funds

☐ Non-CCDF funds

☐ CARES funds

☐ CRRSA Funds

☐ ARP Supplemental Discretionary

☐ ARP Stabilization 10% set-aside

☐ Unable to report. Indicate reason:

☐ No

8.2 Evaluation and assessment of family child care programs

8.2.1 Evaluation and assessment of family child care programs:

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

- ☒ QRIS
- ☐ CLASS
- ☒ ERS
- ☒ FCCERS
- ☐ ITERS
- ☐ State evaluation tool. Describe
- ☐ Core Knowledge and Competency Framework
- ☐ Other. Describe
- ☐ Do not evaluate and assess quality and effective practice

8.2.2 Spending - Evaluation and assessment of family child care programs:

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

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

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

☐ No

8.3 Spending - Evaluation and assessment of child care programs

8.3.1 Spending - Evaluation and assessment of child care programs:

What is the total amount spent across all funding sources (i.e., CCDF quality set aside, non-CCDF funds, CARES, CRRSA, ARP Supplemental Discretionary, and ARP Stabilization 10% set-aside) on evaluating and assessing the quality of child care programs, practice, or child development during October 1, 2023 to September 30, 2024?
\$78724969

[] Unable to report total amount spent. Indicate reason:

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

8.4 Progress Update

8.4.1 Progress Update - Evaluation and assessment of child care programs:

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

Measurable indicators of progress the state/territory reported in section 7.7.2 of the FFY 2022-2024 CCDF Plan:

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

The Lead Agency collects the scores of all of the Environment Rating Scales and measure progress of STAR Level 3, 4, and 5 programs within a determined time period. Programs must achieve a certain score within the Environment Rating Scales in order to advance or maintain levels from STAR 3 and up. The number of programs receiving STAR 3, 4, and 5 will be a measure toward achieving the quality of child care. From FY2018-FY2020; 70% of ECERS assessments, 45% of ITERS assessments, and 58% of FCCERS assessments had an overall score of 4.0 or above. There was an average of 80% of programs that had a score of greater than 4.0 in the Environment Rating Scale items of Listening and Talking and Language and Reasoning. Data also shows there was an average of 80% of programs that scored greater than a 4.0 in Interactions. Overall BAS scores increased from an average of 4.2 in FY2020 to an average of 5.15 in FY2021. Overall PAS scores increased from an average of 4.8 in FY2020 to an average of 5.66 in FY2021. Montana had 22 STAR 4 programs in 2020 and there are projected to be 19 in 2021. There were 5 STAR 5 programs in 2020 and there are projected to be 19 in 2021. A survey is conducted for all programs who receive program assessments to collect information on the benefits of receiving an assessment, how programs use the information from their assessment and the resources they used to guide their quality improvement to achieve higher quality scores. The last complete responses from our Assessment Survey are from the July 2019 application period before the pandemic halted all assessments, as they are conducted in person. 80% of survey respondents felt the frequency of assessments have been helpful. Montana sends out resources for all STARS programs in the form of Guidance and Procedures; the ERS, PAS, BAS scale books; and the All About ECERS & ITERS books. 97% of respondents utilize the STARS Guidance and Procedures, 86% reference the scale books and 67% utilize the All About books. Additionally, survey respondents indicated the Resource & Referral Agencies

STARS consultants and coaches were instrumental and valuable resources for STARS program participation.

Please include information on the outcomes and numerical targets achieved based on the measurable indicators of progress specified in section 7.7.2 of the FFY 2022-2024 CCDF Plan: The Lead Agency collects the scores of all of the Environment Rating Scales and measure progress of STAR Level 3, 4, and 5 programs, with the addition of STAR 2 programs starting July 1, 2023 within a determined time period. In FFY2024; 46% of ECERS assessments, 88% of ITERS assessments, and 75% of FCCERS assessments of STAR 2 and 4 programs had an overall score of 4.0 or above. Assessments in all 3 tools showed significantly higher scores in the Interactions subscale with an average of 5.41. This subscale includes items such as: Staff child interactions, peer interactions, child guidance, and interactions during indoor and outdoor play. Scores in the Language subscales were also higher with an average score of 4.69. This subscale includes helping children expand vocabulary, encouraging use of language, staff and children's use of books, and responding to children's communication. The data suggests the importance of relationship building which is essential to for the health and wellbeing of the children in care.

Montana uses Business assessments in the States QRIS at STAR levels 3-5 as a measure of quality for program management. Family/Group programs receive a Business Assessment Scale (BAS) and Center programs receive a Program Administration Scale (PAS). There were 14 PAS assessments conducted with an average score of 4.83 out of a total possible of 7. There was a 56% increase in scores in the item of Family Communication and a 26% increase in scores in both Program Planning and Program Evaluation. There was 9 BAS assessments conducted with an average score of 5.25. This is a 15% increase from the previous FFY. Significantly high scores of 5.5-6.3 were found in Provider-Family Communication, Marketing and Community Relations, and Recordkeeping. Montana had 212 programs voluntarily participating in STARS to Quality in FFY2024. There were 16 STAR 5 programs, 40 STAR 4, 47 STAR 3, 68 STAR 2, 4 STAR 1, and 37 at the incoming level of Pre-STAR. Montana's QRIS system is undergoing a redesign. All programs were held at their current Star level as of July 1, 2023, and no new programs were or have been accepted as of June 1, 2023. The Quality Unit surveyed all participating STARS to Quality participants as part of the Redesign process. Survey questions consisted of the providers level of QRIS support and communication from their local R&R's, what supports were the most helpful, if there were benefits of STARS required trainings, accreditation, and solicited information on suggested improvement strategies. Respondents reported the required Pyramid Model courses to be the most beneficial to all staff role types. Ranging from 63%-72% based on pyramid model training level.

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

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

9.1 Accreditation Support

9.1.1 Accreditation Support:

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

☒ Yes, providers were supported in their pursuit of accreditation

- a. Licensed center-based programs **4**
- b. License-exempt center-based programs **0**
- c. Licensed family child care homes **2**
- d. License-exempt family child care homes (care in providers' home) **0**
- e. Programs serving children who receive CCDF subsidy **0**

☐ No lead agency support given to providers in their pursuit of accreditation.

☐ N/A. Describe:

9.1.2 Spending – Accreditation Support:

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

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

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

What is the total amount spent across all funding sources (i.e., CCDF quality set aside, non-CCDF funds, CARES, CRRSA, ARP Supplemental Discretionary, and ARP Stabilization 10% set-aside) on accreditation during October 1, 2023 to September 30, 2024? **\$6350**

☐ Unable to report total amount spent. Indicate reason:

Optional: Use this space to tell us any additional information about how funds were spent
ECP

☐ No

9.2 Progress Update

9.2.1 Progress Update – Accreditation Support:

Supporting providers in the voluntary pursuit of accreditation.

Measurable indicators of progress the state/territory reported in section 7.8.2 of the FFY 2022-2024 CCDF Plan:

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

The Lead Agency will use the following additional criteria to evaluate progress in improving quality of child care programs and services in Montana: Number of NAEYC and NAFCC accredited programs that reach a STAR 5 level; Number of programs accessing and using available funds through the Early Childhood Project accreditation scholarships. In FY2020, 8 licensed programs statewide were supported through ECP with an accreditation scholarship. There are currently 6 programs at STAR 5, which means they are accredited through either NAEYC or NAFCC. It is projected that by 6/30/2021 there will be 19 programs at STAR 5. Of those, 11 would be nationally accredited.

Please include information on the outcomes and numerical targets achieved based on the measurable indicators of progress specified in section 7.8.2 of the FFY 2022-2024 CCDF Plan:

In FY2024, ten licensed programs were supported through ECP with an accreditation scholarship, NAEYC 7 and NAFCC 6. Montana is in the middle of a redesign for the QRS program and even with the hold, there are still 16 STAR 5 level programs This is a small decrease but programs have closed.

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

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

10.1 High-Quality Program Standards

10.1.1 High-Quality Program Standards:

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

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

10.1.2 Spending - High-Quality Program Standards:

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

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

- ☒ CCDF quality funds
- ☒ Non-CCDF funds

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

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

- ☐ Unable to report total amount spent. Indicate reason:

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

- ☐ No

10.2 Progress Update

10.2.1 Progress Update - High-Quality Program Standards:

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

Measurable indicators of progress the state/territory reported in section 7.9.2 of the FFY 2022-2024 CCDF Plan:

Note: The information displayed is from the most recent approved FFY2022-2024 CCDF Plan. **A basic three-hour Montana Early Learning Standards (MELS) course is required for STARS to Quality program staff and is available on-line. This course was developed to ensure MELS is integrated into the QRIS system and can be utilized to support the state's progress in improving quality overall. Additionally, course approval requires training sponsors to identify specific MELS domains and subdomains that are addressed in the course. This information is included on the Statewide Training Calendar posting of the event. Child Care Resource & Referral agencies provide individualized technical assistance upon request. The Early Childhood Project is also available for support as trainings are being developed (i.e. training approval guide) and track the number of trainings when submitting a course for approval required to Identify the sub-domains in the early learning standards that apply to the course. The Early Childhood Project also tracks the number of participants that take the course and the number of standards exposed to, which region the training is occurring in, and the type of sponsoring**

agency (i.e. Head Start or a CCR&R). The targeted outcome is all early childhood provider are familiar with the standards and integrate the MELS to their curriculum. Tracking of the domains and subdomains in courses and training are used to evaluate state's progress in improving the quality of child care programs and services.

Please include information on the outcomes and numerical targets achieved based on the measurable indicators of progress specified in section 7.9.2 of the FFY 2022-2024 CCDF Plan: STARS to Quality is open to any licensed/registered child care program to participate. STARS to Quality professional development opportunities will continue to be available to providers in Montana whether they are participating in STARS to Quality. Data collected and evaluated includes: number of STARS providers signing up for STARS required professional development, number of STARS providers completing professional development opportunities, role types of providers signing up for and completing professional development opportunities. Professional development completion is not tracked separately for individuals in STARS to Quality programs, versus non-STARS to Quality programs. A total of 2,164 individuals across all role types completed at least one STARS to Quality training during the reporting year. This number has again decreased from previous reporting year. This is a decrease from last year but as reported earlier, Montana has put their QRS on hold and although providers are encouraged to take STARS courses, they are not required. Providers are allowed to take trainings of their choice, and this is likely decreasing the STARS previously required course completion.

The target outcome in 7.9.2 of the state plan was for all providers are familiar with the standards and integrate the Montana Early Learning Standards to their curriculum. Last year, 349 MELS training events took place.

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

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

11.1 Sustainability funding to child care providers

11.1.1 Sustainability funding to child care providers:

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

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

All types of licensed and registered providers were eligibility with served

☐ Licensed center-based programs

☐ License-exempt center-based programs

☐ Licensed family child care homes

☐ License-exempt family child care homes (care in providers' home)

☐ In-home (care in the child's own home)

☒ Other (explain) **All types of licensed and registered providers**

☐ No.

☐ N/A. Describe:

11.1.2 Spending – Sustainability funding to child care providers:

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

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

☐ CCDF quality funds

☒ Non-CCDF funds

☐ CARES funds

☐ CRRSA Funds

☐ ARP Supplemental Discretionary

☐ ARP Stabilization 10% set-aside

☐ Unable to report. Indicate reason:

☐ No

11.2 Data Systems Investment

11.2.1 Data Systems Investment:

Did the state/territory invest in data systems to support equitable access to child care (e.g., modernizing and maintaining systems; technology upgrades and data governance improvements to provide more transparent and updated information to parents; a workforce registry; updated QRIS systems; CCR&R updates; monitoring systems) from October 1, 2023 to September 30, 2024?

☒ Yes. Describe: In Spring of 2024, the Lead Agency engaged in a competitive RFP to procure a new comprehensive data system, Montana Access to Quality Child Care System (MAQCS) to replace Montana's Child Care Under the Big Sky (CCUBS) legacy Oracle forms database. MAQCS will allow easier access for providers to their licensing, subsidy and payment, and quality information. Families will be able to apply for subsidy and manage their cases more readily. And the Lead Agency will be able to query its program data more easily to provide reports, both internal and external, and answer data requests more quickly. The MAQCS RFP was successful in finding a vendor for the RFP. The initial launch date of the new system will be November of 2025.

The Lead Agency also amended a contract with its inspection tool vendor to include modifications to the tool to capture changes to the child care rules and changeover to MAQCS, and conduct a key indicators assessment. The key indicator assessment work is an ongoing project for the child care licensing program as they seek to implement a differential monitoring model.

☐ No

11.2.2 Spending - Data Systems Investment:

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

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

☐ CCDF quality funds

☐ Non-CCDF funds

☐ CARES funds

☐ CRRSA Funds

☒ ARP Supplemental Discretionary

- ☐ ARP Stabilization 10% set-aside
☐ Unable to report. Indicate reason:

☐ No

11.3 Supply and Demand Analysis

11.3.1 Supply and Demand Analysis:

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

☒ Yes. Describe findings: **Access to child care is essential to a healthy economy, allowing parents of young children to engage in the labor force and preparing the state's future workforce through high-quality early childhood education. Despite the state's reliance on child care to meet workforce needs, Montana parents and businesses have suffered from a lack of access to care. In 2023, more than 66,000 Montana parents were unable to fully engage with the labor force due to family responsibilities and a lack of childcare. Accurate and consistent reporting on the magnitude of the gap between the supply and demand for child care is essential to understanding the severity of the shortage, and to measuring the state's success in closing this gap. This paper provides a consistent definition of child care supply and demand in the state, and therefore; a measure of the gap between the two. The definitions of child care supply and demand, and the gap analysis presented is intended to reflect the existing best practices and most current methodology. This report will be updated as new information becomes available**

☐ No

11.3.2 Spending - Supply and Demand Analysis:

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

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

- ☐ CCDF quality funds
☐ Non-CCDF funds
☐ CARES funds
☐ CRRSA Funds
☐ ARP Supplemental Discretionary

- ☐ ARP Stabilization 10% set-aside
- ☐ Unable to report. Indicate reason:

☒ No

11.4 Supply and Demand Initiatives

11.4.1 Supply and Demand Initiatives:

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

- ☐ Child care deserts
- ☐ Infants/toddlers
- ☐ Children with disabilities
- ☐ English language learners
- ☐ Children who need child care during non-traditional hours
- ☒ Other. Describe: **NA**

11.4.2 Spending - Supply and Demand Initiatives:

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

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

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

☒ No

11.5 Provider Compensation and Benefits

11.5.1 Spending - Provider Compensation and Benefits:

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

- ☐ Financial bonuses (not tied to education levels)
- ☐ Salary enhancements/wage supplements
- ☒ Health insurance coverage **400**
- ☐ Dental insurance coverage
- ☐ Retirement benefits
- ☐ Loan Forgiveness programs
- ☐ Mental Health/Wellness programs
- ☐ Start up funds
- ☐ Other. Describe:
- ☐ N/A. Describe:

11.5.2 Spending - Provider Compensation and Benefits:

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

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

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

☐ No

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

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

What is the total amount spent across all funding sources (i.e., CCDF quality set aside, non-CCDF funds, CARES, CRRSA, ARP Supplemental Discretionary, and ARP Stabilization 10% set-aside) on other activities to improve the quality of child care services during October 1, 2023 to September 30, 2024? **\$10174444**

[] Unable to report total amount spent. Indicate reason:

Optional: Use this space to tell us any additional information about how funds were spent that is not captured in the items already reported. **MACQS, Sanswrite, Health insurance shared service RAISE, child care worker program PDG.**

11.7 Progress Update

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

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

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

Note: The information displayed is from the most recent approved FFY2022-2024 CCDF Plan. **The Center for Health and Safety Culture (Center) at Montana State University partnered with the Montana Department of Public Health and Human Services in their efforts to support positive early childhood development for Montana’s young children (birth to age 5) and their families. Specifically, this project created resources (including universal media to reach families and caregivers and training for Montana’s early childhood system) to engage families in best practices to improve early childhood learning and development, health, and family support. The resources developed are based on Center’s Positive Culture Framework. Montana made certain resources were available for families for young children with special needs and built on the previously completed work that provided supports for children ages 5-21.**

The Center for Health and Safety Culture collects and reviews analytics pertaining to parentingmontana.org, a website created to easily provide resources and consumer education to Montana families. This data is regularly shared with ECSB. The Center for Health and Safety Culture receives input from the general public, and sends out regular surveys to parents in order to learn how to improve their resources and meet the needs of Montana families. CCR&R distribute these resources, and report data quarterly to ECSB through their CCR&R quarterly reports. ECSB reviews the data to ensure consumer education is provided consistently and effectively throughout the communities in each CCR&R region.

Please include information on the outcomes and numerical targets achieved based on the measurable indicators of progress specified in section 7.10.2 of the 2022-2024 CCDF Plan: **Montana uses Business assessments in the States QRIS at STAR levels 3-5 as a measure of**

quality for program management. Family/Group programs receive a Business Assessment Scale (BAS) and Center programs receive a Program Administration Scale (PAS). Montana's QRIS system is undergoing a redesign. All programs were held at their current Star level as of July 1, 2023, and no new programs were or have been accepted as of June 1, 2023. Prior to the Redesign, Programs requesting to earn a Star 1-2 were required to do a self-assessment with the tool based on their program type. The self-assessment score sheets were to be uploaded into the criteria and were required yearly. Programs requesting a Star 3-5 are required to receive a formal assessment completed by a certified assessor and achieve a minimum score of 3.0, 4.0 or 5.0 based on the Star level requested. These assessments are done on a 3-year cycle and have continued to be required during the Redesign period but the scores do not impact the programs Star level and results are for informational purposes only at this time. These PAS and BAS tools address provider preparedness, child safety, child well-being, and kindergarten-entry within the subscales and indicators. Examples include scoring on the number of staff in a classroom to maintain quality supervision as a safety measure; Risk Management addresses fire, storm, and indoor emergency drills, Certified CPR/1st Aid, children's health and risk management plans; Family Communications pertains to communicating with families in various modes, family's perspectives as their child's first teacher, and formal conferences to help with developmental progress leading into kindergarten. Montana collects and analyzes this data on an annual basis for those programs who receive an assessment in that year to make decisions regarding program and provider professional development and to determine potential supports. In FFY2024, there were 14 PAS assessments conducted with an average score of 4.83 out of a total possible of 7. There was a 56% increase in scores in the item of Family Communication and a 26% increase in scores in both Program Planning and Program Evaluation. There was 9 BAS assessments conducted with an average score of 5.25. This is a 15% increase from the previous FFY. Significantly high scores of 5.5-6.3 were found in Provider-Family Communication, Marketing and Community Relations, and Recordkeeping.

Parentingmontana.org continues to be an active consumer education for to Montana families.

12) Annual Report

Lead agencies must submit an annual report, as required at 45 CFR § 98.53(f) (4), describing any changes to lead agency regulations, enforcement mechanisms, or other lead agency policies addressing health and safety based on an annual review and assessment of serious child injuries and any deaths occurring in child care programs receiving CCDF, and in other regulated and unregulated child care centers and family child care homes, to the extent possible.

12.1 Annual Report and Changes

12.1.1 Annual Report:

Describe the annual review and assessment of serious injuries and any deaths occurring in child care programs receiving CCDF, and in other regulated and unregulated child care centers and family child care homes, to the extent possible. **The Lead Agency collects data on death and serious injuries occurring in child care programs on an ongoing basis from licensing complaints, child protective service reports, and law enforcement reports. These data are collated by the complaints unit and reported annually on the state fiscal year cycle (July 1 – June 30). These data are reviewed by the Child Care Licensing program and evaluated for any patterns or trends.**

12.1.2 Annual Report Changes:

Describe any changes to lead agency regulations, enforcement mechanisms, or other lead agency policies addressing health and safety based on the annual review and assessment. **To better manage complaints and the ensuing investigations, the Child Care Licensing program has restructured their program to allow for a dedicated complaints staff. This person receives complaints and logs them, and then distributes them to the relevant licenser. The Child Care Licensing program has also worked more closely with Montana's Child Protective Services program on investigations, sharing relevant pieces of information that may aid one or both parties in their investigation. It should be noted that CPS has more investigative authority than the licensing program and the information provided by the licensing program can aid them in a decision.**

Recognizing that not all child care programs are administered the same as such do not all require the same level of support, the Child Care Licensing program has looked at ways to shift resources to better support programs with repeat deficiencies. In the last year, in partnership with SansWrite, the Child Care Licensing program has begun work on a Differential Monitoring project. The goal of this project is to develop a monitoring system, vetted and approved by the

Office of Child Care, that will allow shorter monitoring visits of programs with high compliance in key risk areas, and reallocate that staff time to programs with more deficiencies in need of more intense support. This project is currently in development.