THE PAPERWORK REDUCTION ACT OF 1995 (Pub. L. 104-13)

Public reporting burden for this collection of information is estimated to average 65.0 hours per response, including the time for reviewing instructions, gathering and maintaining the data needed, reviewing the collection of information, and completing the form.

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

Quality Progress Report (QPR)
For
South Dakota
FFY 2023

QPR Status: Accepted as of 2024-02-27 15:13:24 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, 2022, through September 30, 2023), 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?

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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.

Reporting Activities Related to ARP Act Child Care Stabilization Grants

The ARP Act included approximately $24 billion for child care stabilization grants, representing an important opportunity to stabilize the child care sector and do so in a way that builds back a stronger child care system that supports the developmental and learning needs of children, meets parents' needs and preferences with equal access to high-quality child care, and supports a professionalized workforce that is fairly and appropriately compensated for the essential skilled work that they do. Lead agencies must spend stabilization funds as subgrants to qualified child care providers to support the stability of the child care sector during and after the COVID-19 public health emergency. Please refer to the information memorandum ARP Act Child Care Stabilization Grants (CCDF-ACF-IM-2021-02) for further guidance on the child care stabilization grants made available through the ARP Act.

While the OCC has established a new data collection form, the ACF-901 – American Rescue Plan (ARP) Stabilization Grants Provider-Level Data, as the primary data collection mechanism for reporting related to ARP stabilization grants, Section 13 of the QPR asks about activities related to stabilization grants made possible through ARP funding. The OCC will inform lead agencies if the data reported through the ACF-901 is complete enough to warrant skipping Section 13 of the QPR. The following information is requested in Section 13:

- If the lead agency ran more than one grant program;
- How stabilization grants were used to support workforce compensation; and
- Methods to eliminate fraud, waste, and abuse when providing stabilization grants

Section 13 should be used to report on ARP Stabilization Grants ONLY. Other child care sustainability or stabilization grant programs established or ongoing using other funding mechanisms (i.e., CCDF or other supplemental funding e.g., CARES, CRRSA, ARP Supplemental Discretionary Funds) should be reported in Section 11.

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, 2023.

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, 2023. These counts should include all licensed child care providers, not just those serving children receiving CCDF subsidies.

[x] Licensed center-based programs **420**
      [ ] Unable to provide number. Indicate reason:

Additional clarification: Based on most recent submission of the FY 2023 ACF-800 data there were 313 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.

[x] Licensed family child care homes **362**
      [ ] Unable to provide number. Indicate reason:

Additional clarification: Based on most recent submission of the FY 2023 ACF-800 data there were 214 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, 2022, to September 30, 2023?

[x] Yes. If yes, describe: **The registry used to track professional development of early childhood practitioners in South Dakota is the Pathways to Professional Development Career Lattice.**
[ ] 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:
[x] No. If no, describe: **Participation in the Career Lattice is voluntary.**

2.1.3 Number of Participants in Professional Development Registry:

Total number of participants in the registry as of September 30, 2023 **207**

2.1.4 Spending - Professional Development Registry:

Were funds from <u>any sources</u> (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:

[x] 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, 2022 and September 30, 2023 (check all that apply)? If selected, how many staff received each type of support?

[x] Scholarships (for formal education institutions) **151**
[ ] Financial bonus/wage supplements tied to education levels
[x] Career advisors, mentors, coaches, or consultants **1**
[ ] Reimbursement for training
[ ] Loans
[ ] Substitutes, leave (paid or unpaid) for professional development
[x] Other. Describe: **43 individuals were awarded Child Development Associate (CDA) Assessment Scholarships and 2 individuals were provided CDA Renewal Scholarships.**
[ ] N/A. Describe:

2.2.2 Spending - Professional Development and Career Pathways Support:

Were funds from <u>any sources</u> (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?

[x] Yes, if so which funding source(s) were used?

[x] CCDF quality funds
[ ] Non-CCDF funds
[ ] CARES funds
[x] CRRSA Funds
[x] 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, 2023:

[x] Child Development Associate (CDA) **102**
[x] Associate's degree in an early childhood education field (e.g. psychology, human development, education) **58**
[x] Bachelor's degree in an early childhood education field (e.g. psychology, human development, education) **185**
[x] State child care credential **7**
[ ] State infant/toddler credential
[ ] 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, 2023:

[x] Child Development Associate (CDA) **102**
[x] Associate's degree in an early childhood education field (e.g. psychology, human development, education) **58**
[x] Bachelor's degree in an early childhood education field (e.g. psychology, human development, education) **185**
[x] State child care credential **7**
[ ] State infant/toddler credential
[ ] 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):

[x] Business Practices
[x] Mental health for children
[x] Diversity, equity, and inclusion

[x] Emergency Preparedness Planning
[ ] Other. Describe other technical assistance available to providers as part of the professional development system:

2.4.2 Spending - Technical Assistance for Professional Development:

Were funds from <u>any sources</u> (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?

[x] Yes, if so which funding source(s) were used?

    [x] CCDF quality funds
    [ ] Non-CCDF funds
    [ ] CARES funds
    [x] CRRSA Funds
    [x] 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 <u>training and professional development</u> of the child care workforce during October 1, 2022 to September 30, 2023? $**2326982**

[ ] 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. **Data provided is for child care directors as data is not currently collected available for all staff. The State is assessing the ability to collect data on educational qualifications within their new MIS, which is currently in process. In South Dakota, all state registered and licensed child care programs are considered to be eligible to receive CCDF Subsidy funding.**

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 ECE System conducts pre and post surveys to measure knowledge gained by providers attending the above referenced training opportunities. Pre/Post data is collected and reported on a regional level. Technical assistance outcomes are tracked utilizing a standardized data collection system that collects information from the child care provider prior to the technical assistance visit, at the end of the first onsite technical assistance visit, and at routine follow-up visits (30, 60, 90 and 120 days). This process measures behavior change as a provider progresses through the technical assistance process and puts the knowledge they have gained into practice. These forms collect information on five key measures that determine if a child care provider will do/does positively change practice. These measures are knowledge gained, confidence to put the intended action into practice, intent to put this knowledge into practice, practicing the action and if the intended action has become a habit. Technical assistance data is collected and maintained in a statewide database. It is reportable on a statewide or regional basis.

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: Pre and post surveys were completed by participants in every class offered by the Early Childhood Enrichment (ECE) system to measure participant knowledge gain in the following areas: health and safety (19.5%), space and materials (20%), activities and experiences (15.1%), relationships and interactions (26.7%), and program management (18.8%). Overall participant data showed an average increase in knowledge of 20% for all classes.

In addition, the ECE system measured behavior change at 30, 60 90, and 120-day timeframes throughout the technical assistance and coaching process. Data was collected on the provider's knowledge of and confidence to put the newly learned skills into practice. Providers participating in technical assistance showed an increase in knowledge and confidence levels from the initial visit to the final visit in the following areas: health and safety (25% knowledge/26.6% confidence), space and materials (21.1% knowledge/28.2% confidence), activities and experiences (16.1% knowledge/16.4% confidence), relationships and interactions (22.8% knowledge/24.4% confidence), and program management (32.7% knowledge/33.7% confidence).

Funding from CRRSA was utilized to provide full scholarships for Child Development Associate (CDA) training through the SD Early Childhood Enrichment offices. In June 1, 2023, continued funding for these scholarships was included as part of the CCDF quality funds. During FFY 23, 147 child providers received a CDA training, assessment, or renewal scholarship. In addition, a total of 49 scholarships were awarded to students pursuing an associate degree in early childhood at 3 South Dakota colleges and universities.

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 <u>any sources</u> (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, 2022 to September 30, 2023?

[x] Yes, if so which funding source(s) were used?

> [x] CCDF quality funds
> [ ] Non-CCDF funds
> [ ] CARES funds
> [x] CRRSA Funds
> [x] 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? $

> [x] Unable to report total amount spent. Indicate reason**Funding supported the transition of the Early Learning Guidelines training series to online, on-demand platform from live online delivery to increase access to the training. Funding for the transition of this training series along with 13 other series identified in the current QRIS pilot framework was paid under one contract. South Dakota is unable to separate the amount of funds used in the development of Early Learning Guidelines series vs other series, thus all expenditures are reported under Section 4 as it is part of the training content in the current QRIS pilot.**

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

[ ] No

3.2 Progress Update

3.2.1 Progress Update - Early Learning and Development Guidelines:

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

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

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

The ELDG training series provides an overview of the ELDG document and provides suggestions for how providers can utilize the document in their early childhood classrooms. The State will track the number of providers that participate in the State's Early Learning and Development Guidelines (ELDG) Training Series. In addition, the State will utilize data from Early Childhood Enrichment class pre and post surveys to measure knowledge gained of providers and measure progress and quality improvement.

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:

The Early Learning Guidelines 4-course series was delivered via the statewide online training calendar 3 times during the calendar year. In June 2023, the series transitioned to an online, on-demand platform to increase access to the series. During FFY23, 189 ½ hours of were provided reaching 115 unduplicated providers from 67 programs. Although the data collected above is for stand-alone classes on the state Early Learning Guidelines, information from the early learning and development guidelines is woven into other training offered to providers which is not reflected in the above reported totals.

In partnership with the South Dakota Head Start Collaboration Office located within the state Department of Education a small workgroup was formed to complete a review of the content of the SD Early Learning Guidelines document. The document has been revised based on the recommendations from the workgroup. The new document was sent to print in October 2023.

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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, 2022 to September 30, 2023?

[ ] The lead agency QRIS is operating state- or territory-wide.
- General description of QRIS:
- 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

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- 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:

[x] The lead agency QRIS is <u>operating a pilot</u> (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): **The South Dakota Quality Recognition and Information System (QRIS) pilot launched in 2023 to support, develop, implement, and evaluate quality criteria and measures that will assist supporting child care and school age programs in quality improvement. The pilot includes three specific frameworks that include quality benchmarks, self-assessment, coupled with Environment Rating Scale feedback. The QRIS Pilot utilizes a quality framework with three main components ▢ quality practices, workforce, and professional development. The QRIS pilot is intentionally built with coaching on continuous quality improvements, with professional development, and quality improvement grants. Currently, 17 family child care homes, 5 group family child care homes, 15 child care centers and 7 school age programs are in the pilot. The QRIS pilot aims to collect data and information about current SD child care programs to better inform policy decisions which impact efforts to strengthen quality childcare.**
- Which localities if not state/territory-wide? **An application to participate in the QRIS pilot was distributed to all state registered and licensed child care programs. Programs were selected to participate based on being in good standing with licensing and demographics to ensure the pilot included programs in urban and rural areas.**
- How many tiers/levels? **4** [insert number of tiers below as required and describe each tier and check off which are high quality
  - Tier/Level 1: **Learning: This level represents the beginning stages of understanding quality and meeting the basic requirements.**
    [ ] High Quality
  - Tier/Level 2: **Understanding: This level represents the beginning stages of understanding quality, with more indicators or evidence of quality present in the program.**
    [ ] High Quality
  - Tier/Level 3: **Applying: This level represents high quality across the three main components.**

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[x] High Quality
- Tier/Level 4: **Intentional: This level represents consistently attaining high quality across the indicators the three main components.**
  [x] 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: **0**
- Total number of licensed family child care homes meeting high quality definition: **0**
- Total number of CCDF providers meeting high quality definition: **0**
- Total number of children served by providers meeting high quality definition: **0**

[ ] 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:

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- 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 <u>any sources</u> (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?

[x] Yes, if so which funding source(s) were used?

[x] CCDF quality funds
[ ] Non-CCDF funds
[ ] CARES funds
[x] CRRSA Funds
[x] 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, 2022 to September 30, 2023 (check all that apply)?

[x] Licensed child care centers
[x] Licensed family child care homes
[ ] License-exempt providers
[x] Programs serving children who receive CCDF subsidy
[ ] Early Head Start programs
[ ] Head Start programs
[ ] State Prekindergarten or preschool programs
[ ] Local district-supported Prekindergarten programs
[x] Programs serving infants and toddlers

[x] Programs serving school-age children

[x] 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.

[x] One-time grants, awards or bonuses
  - o Licensed child care centers **11**
  - o Licensed family child care homes **0**

[ ] On-going or periodic quality stipends
  - o Licensed child care centers
  - o Licensed family child care homes

[ ] Higher CCDF subsidy rates (including tiered rating)
  - o Licensed child care centers
  - o Licensed family child care homes

[x] 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 <u>any sources</u> (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?

[x] Yes, if so which funding source(s) were used?

   [x] CCDF quality funds

   [ ] Non-CCDF funds

   [ ] CARES funds

   [x] CRRSA Funds

   [x] 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, 2022 to September 30, 2023? $**653983**

[ ] 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. **South Dakota recognizes national accreditation in addition to the QRIS pilot initiative. In SFY 23, 3 child care centers and 3 school-age programs were accredited.**

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. **N/A**

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: **In FFY 23, the South Dakota Department of Social Services worked with the South Dakota State University (SDSU) Quality Collaborative to design, develop and implement a pilot for the South Dakota's Quality Recognition and Information System (SD-QRIS). The SD-QRIS pilot will determine the quality criteria and measures that will be used to assist in supporting child care and out-of-school care quality improvement and assist parents in selecting quality child care.**

The pilot includes the review and revision of the draft quality framework, assessing QRIS models from other states and identifying leveraging opportunities; providing recommendations

and options that would best work for South Dakota. In FFY 23, the SDSU Quality Collaborative finalized the SD-QRIS frameworks (Phase 1), designed the pilot (Phase 2), and implemented the pilot (Phase 3). In fall 2024, the vendor will evaluate the success of the pilot model and provide recommendations to DSS for the potential full-scale implementation of the QRIS statewide (Phase 4). The unique and strong component of each framework is a strengths-based four-level system as a Continuous Quality Improvement (CQI) plan, wherein the emphasis is on creating a culture of quality enhancement. The pilot and the CQI plan will address quality in the following types of child care programs: registered Family Child Care (FCC) providers, licensed Child Care Centers (CCC), and licensed Out of School Time (OST).

In FFY 23, separate from the QRIS Pilot contract, Child Care Services provided funding to support 2 FTEs in the Early Childhood Enrichment (ECE) system as QRIS coaches to support programs in the QRIS pilot.

From October 2022 to May 2023, the Early Childhood Enrichment (ECE) system offered 14 training series that are part of the proposed QRIS framework. All class series were accessible to child care providers across the state thru live online classes. In June 2023, through a contract with the Child & Family Resource Network, part of the ECE system work was completed to move the series to an online, on-demand platform to increase accessibility to programs replacing the current live online delivery.

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, 2022 to September 30, 2023?

[x] Yes
- Number of specialists available to all providers **5**
- Number of specialists available to providers serving children who receive CCDF **5**
- Number of specialists available specifically trained to support family child care providers **5**
- Number of providers served **2418**
- Total number of children reached **27505**

[ ] 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?

[x] Relationship-caregiving practices (or quality caregiving/developmentally appropriate practices)
[x] On-site and virtual coaching
[x] Health and safety practices
[x] Individualized professional development consultation (e.g., opportunities for or awareness on career growth opportunities, degreed/credential programs)
[x] Group professional development
[x] 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 <u>any sources</u> (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?

[x] Yes, if so which funding source(s) were used?

    [x] 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, 2022 to September 30, 2023?

[ ] Number of staffed family child care networks:
    o Describe what the network/hub provides to participating family child care providers:
[x] No staffed family child care networks operate in state/territory

5.2.2 Spending - Staffed Family Child Care Networks:

Were funds from <u>any sources</u> (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:

[x] 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, 2022 to September 30, 2023? $0

[x] Unable to report total amount spent. Indicate reason: **South Dakota only expended the required 3% infant and toddler set-aside under CCDBG.**

Optional: Use this space to tell us any additional information about how funds were spent that is not captured in the items already reported. **South Dakota spending only included the 3% infant and toddler set-aside and did not go above and beyond ⬚to improve the supply and quality of child care programs and services for infants and toddlers⬚.**

5.4 Progress Update

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

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

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

Note: The information displayed is from the most recent approved FFY2022-2024 CCDF Plan. **The ECE System utilizes pre and post surveys to measure knowledge gained by providers attending infant/toddler specific training. In FFY 2020, overall providers showed a 20.7% increase in knowledge in infant and toddler classes. Technical assistance outcomes are tracked utilizing a standardized data collection system that collects information from the child care provider prior to the technical assistance visit, at the end of the first on- site technical assistance visit, and at routine follow-up visits (30, 60, 90 and 120 days). This process measures behavior change as a provider progresses through the technical assistance process and puts the**

knowledge they have gained into practice. These forms collect information on the five key measures that determine if a child care provider will/does positively change practice. These measures are knowledge gained, confidence to put the intended action into practice, intent to put this knowledge into practice, practicing the action and if the intended action has become a habit. In FFY 2020, 185 providers in 118 programs received on-site technical assistance from the ECE System. Providers participating in infant and toddler specific technical assistance through the ECE System showed an increase in knowledge and confidence levels from the initial visit to the final visit in the following areas: health and safety (28.5% knowledge/24.3% confidence), space and materials (25.6% knowledge/13.6% confidence), activities and experiences (31.3% knowledge/51.8% confidence), relationships and interactions (34.4% knowledge/49.4% confidence), and program management (14.4% knowledge/21.5% confidence).The measures for the infant toddler health and safety grants will be provider observations of improved quality environments for infants and toddlers. In FFY 20, 55 centers and 50 registered family child care programs received an infant toddler mini grant. The measures for the quality framework will be completion of an assessment that measures progress of achievement in the levels. The state QRIS is still being drafted so no current baseline measures are available. The measurable indicator of progress for mental health consultation is that children remain in the most appropriate environment while services and strategies are provided to improve areas of delay and provide continuity and consistency of care.

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: Five agencies that comprise the SD Early Childhood Enrichment (ECE) System provided 1,393 hours of infant/toddler specific training in FFY 2023 reaching 1,453 child care providers in 314 programs. Each agency collected pre and post data to measure the knowledge gain of providers attending infant/toddler specific training. The data is reported in the following areas: health and safety (14.5%), space and materials (20.7%), activities and experiences (15.4%), and relationships and interactions (20%). Overall providers showed a 17.7% increase in knowledge in infant and toddler classes.

In addition, the ECE System measured behavior change at 30, 60, 90 and 120-day timeframes throughout the technical assistance process. Data was collected on the provider's knowledge and confidence gain in putting the new skills into practices. In FFY 2023, 207 providers in 100 programs received on-site technical assistance from the ECE System. Providers participating in infant and toddler specific technical assistance through the ECE System showed an increase in knowledge and confidence levels from the initial visit to the final visit in the following areas: health and safety (23% knowledge/25.2% confidence), space and materials (20.1% knowledge/26.8% confidence), activities and experiences (28.7% knowledge/31.6%

confidence), relationships and interactions (29.8% knowledge/33% confidence), and program management (39.6% knowledge/39.3% confidence).

Child Development Associate (CDA) assessment scholarships in the Center-Based Infant-Toddler setting were made available to providers working in state registered and licensed child care programs. In FFY 23, 5 providers received this scholarship.

Child Care Services provided Infant and Toddler Mini-Grants to state registered and licensed child care programs with infant toddler classrooms to enhance infant and toddler care environments. Funds are used to purchase high quality items to support the development of infants and toddlers. In FFY 2023, grants were awarded to 37 state registered family child care providers and 62 centers.

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 <u>any sources</u> (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, 2022, to September 30, 2023?

[x] Yes, if so which funding source(s) were used?

[x] 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, 2022 to September 30, 2023? $**60340**

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

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

[ ] No

6.2 Progress Update

6.2.1 Progress Update – Child Care Resource and Referral Services:

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

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

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

Child Care Services contracts with 5 agencies known as Early Child Enrichment (ECE) offices to provide training and technical assistance to state registered and licensed child care providers to meet licensing requirements as well as improve program quality. However, the activities performed by these agencies do not align with the federal definition of a Child Care Resource & Referral (CCR&R) agency. The ECE System partners with CCS to provide services to child care providers and families that address other quality activities outlined in this plan thus measurable outcomes are reported under the other quality funding areas.

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:

South Dakota did not identify this area as a quality activity in the FFY 2022-2024 State Plan.

Although South Dakota does not have a child care resource and referral system based on the federal definition, the state does utilize a high percentage of quality funding to support and maintain the delivery of training and technical assistance to assist providers in meeting licensing training requirements and improving program quality. The State contracts with five agencies known as the Early Childhood Enrichment (ECE) System to provide these services across the state to regulated child care programs as well as parents and others involved in the day-to-day care of children.

Statewide child care referral services are made possible through a partnership with the South Dakota Department of Social Services, the South Dakota Early Childhood Enrichment (ECE) System, and the Helpline Center. Child Care Helpline operated by the Helpline Center provides child care referral services to families and works with providers to utilize the Provider Profile Registry going forward to update details about their child care program. In FFY 23, the Child Care Helpline supported 953 families providing the names of 3,562 child care programs as referrals for child care. In addition, 284 child care programs updated their profiles on the Provider Profile Registry.

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, 2022 to September 30, 2023? **415**

7.1.2 Spending - Complaints about providers:

Were funds from <u>any sources</u> (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:

[x] 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, 2022, to September 30, 2023? Number of staff **14**

7.2.2 Spending – Licensing Staff:

Were funds from <u>any sources</u> (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?

[x] Yes, if so which funding source(s) were used?

    [ ] CCDF quality funds
    [ ] Non-CCDF funds
    [ ] CARES funds
    [x] CRRSA Funds
    [x] 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, 2022, to September 30, 2023? **51**

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

Were funds from <u>any sources</u> (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?

[x] Yes, if so which funding source(s) were used?

    [x] 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 <u>facilitating compliance with lead agency requirements for inspections, monitoring, health and safety standards and training, and lead agency licensing standards</u> during October 1, 2022 to September 30, 2023? $**988097**

[ ] 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. **Health and Safety Grants are made available to state registered and licensed child care providers to assist them in coming into compliance with state regulations.**

Contract with a vendor to assist South Dakota in evaluating our licensing rules and processes. South Dakota completed a full child care licensing rules repeal and implemented a new rules chapter applicable to all provider types.

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.
During training opportunities, the ECE system conducts pre and post surveys to measure knowledge of providers gained. Technical assistance outcomes are tracked utilizing a standardized data collection system, based on behavior change theory, that collects information from the child care provider prior to the technical assistance visit, at the end of the first onsite technical assistance visit, and at routine follow-up visits (30,60,90, and 120 days). This process measures behavior changes as providers progress through the technical assistance process and put the knowledge they have gained through training into practice. These forms collect information on the five key measures that determine if a child care provider will/does positively change practice. These measures are knowledge gained, confidence to put the intended action into practice, intent to put this knowledge into practice, practicing the action and if the intended action has become a habit. Data from the pre/post surveys and technical assistance outcome tracking are utilized to revise course content and in the development of additional technical assistance supports. The measurable indicator of quality for the Health and

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Safety grants is to increase the number of programs that come into compliance with state regulations and improve the health and safety of children in care.

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: Pre and post surveys were completed by participants in every class offered by the Early Childhood Enrichment (ECE) system to measure participant knowledge gain in the following areas: health and safety, space and materials, activities and experiences, relationships and interactions and program management. Overall participants showed an average increase in knowledge of 15% for all classes provided to assist compliance with state registration and licensing standards.

In addition, the ECE system measured behavior change at 30, 60, 90, and 120 timeframes throughout the technical assistance process. Data was collected on the provider's knowledge of and confidence to put the new skill into practice. Overall participants reported an average increase in knowledge of 17.4% after receiving technical assistance to support compliance with state registration and licensing standards.

Access to training on the federally required health and safety training topics is provided by the Early Childhood Enrichment (ECE) System's online, on-demand Orientation to Early Childhood and School-Age Care Series. Following the state child care licensing rule implementation in July 2023, work began to review and revise the Orientation to Child Care Services to address the new regulations. In FFY 2023, 3,339 child care providers accessed the orientation training. Module 2 was released in December 2020 to enable providers to meet the ongoing training requirement in the same health and safety topic areas. During FFY 2023, 726 providers accessed the Module 2 training courses.

Funding from the Coronavirus Response and Relief Supplemental Appropriations Act (CRRSA) were used to contract with the state Early Childhood Enrichment (ECE) system to provide free certified CPR training to state registered and licensed child care providers from July 2021 ⬚ May 2023. In June 2023, funding to continue the free CPR training opportunity was provided from the CCDF Quality Funds. From October 2022 to May 2023, Child Care Services supported 962 child care providers with free certified CPR training. In June 2023, additional funding was provided through the CCDBG quality funds to continue funding CPR certification fees thru May 31, 2024. From June to September 2023, another 332 providers were financially supported in obtaining CPR certification.

In FFY 23, 19 health and safety grants to meet licensing compliance were awarded to programs.

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, 2022 to September 30, 2023?

[x] QRIS
[ ] CLASS
[x] ERS
[ ] FCCERS
[x] ITERS
[ ] State evaluation tool. Describe
[ ] Core Knowledge and Competency Framework
[x] Other. Describe **Devereux Early Childhood Assessment (DECA)**
[ ] Do not evaluate and assess quality and effective practice

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

Were funds from <u>any sources</u> (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?

[x] Yes, if so which funding source(s) were used?

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

[ ] No

8.2 Evaluation and assessment of family child care programs

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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, 2022 to September 30, 2023?

[x] QRIS
[ ] CLASS
[ ] ERS
[x] 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 <u>any sources</u> (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?

[x] Yes, if so which funding source(s) were used?

    [x] CCDF quality funds
    [ ] Non-CCDF funds
    [ ] CARES funds
    [x] CRRSA Funds
    [x] 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 <u>evaluating and assessing the quality of child care programs, practice, or child development</u> during October 1, 2022 to September 30, 2023? $0

[x] Unable to report total amount spent. Indicate reason: **Expenditures in this area included the conducting of pre and post Environmental Rating Scale observations as part of the Quality Recognition and Information System (QRIS) pilot. The Environmental Rating Scales are being used in the QRIS pilot to evaluate quality to support programs in continuous quality improvement efforts. As an activity within the QRIS pilot, South Dakota is unable to distinguish funding attributed specifically to the Environmental Rating Scales compared other components of the project so expenditures for these observations was included as part of the expenditures reported under Section 4.0. Expenditures associated with staff time to administer the Devereux Early Childhood Assessment (DECA) included staff time that was already included as part of the work paid under the Early Childhood Enrichment (ECE) contracts for training, technical assistance, and coaching reported in Section 2.0.**

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

8.4 Progress Update

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

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

Measurable indicators of progress the state/territory reported in section 7.7.2 of the FFY 2022-2024 CCDF Plan:
Note: The information displayed is from the most recent approved FFY2022-2024 CCDF Plan.
N/A

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:
South Dakota did not identify this area as a quality activity in the FFY 2022-2024 State Plan

The DECA tool is currently utilized for individual child observations in Rapid City and Sioux Falls. The Early Childhood Enrichment (ECE) office in Aberdeen and Brookings implemented a pilot program from October 2022-September 2023, with five classrooms located in child care centers. The pilot focused on identifying children's strengths related to within child protective factors of Attachment/Relationships, Initiative, and Self-Regulation. DECA classroom survey

results were used to set goals for the classroom as well as for building individualized plans to support building children's protective factors. During the project, classroom teachers administered pre-DECA child surveys, reflected on survey results, received a materials and activity toolkit, implemented classroom strategies, completed post-DECA surveys and evaluated classroom progress. Surveys were completed on 71 preschool-age children. During the coaching sessions, classroom teachers reflected on their own protective factors using the Devereux Adult Resiliency Survey. They identified areas of strength and areas for growth.

As part of the state Quality Recognition and Information System (QRIS) pilot, DSS adopted Environmental Rating Scale (ERS), including the Infant/Toddler Environment Rating Scale. Third Edition (ITERS-3), Early Childhood Environment Rating Scale, Third Edition (ECERS-3), the School-Age Care Environment Rating Scale, Updated (SACERS-U), and Family Child Care Environment Rating Scale, Third Edition (FCCERS-3). DSS currently has two full-time coaches contracted to conduct these external observations along with additional staff located in the SD Early Childhood Enrichment (ECE) System to support the QRIS pilot implementation as needed.

Through the Quality Recognition and Information System (QRIS) pilot, each program has an initial and post external Environmental Rating Scale (ERS) completed in 1 classroom per age-group or setting. The feedback from the observations is shared with the director and the leadership team to inform the program's continuous quality improvement (CQI) process. At part of this meeting, information on LearnERS software is also given to providers and staff in the pilot.

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, 2022 to September 30, 2023?

[ ] Yes, providers were supported in their pursuit of accreditation
   a. Licensed center-based programs
   b. License-exempt center-based programs
   c. Licensed family child care homes
   d. License-exempt family child care homes (care in providers' home)
   e. Programs serving children who receive CCDF subsidy

[x] No lead agency support given to providers in their pursuit of accreditation.
[ ] N/A. Describe:

9.1.2 Spending – Accreditation Support:

Were funds from <u>any sources</u> (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, 2022 to September 30, 2023? $

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

Optional: Use this space to tell us any additional information about how funds were spent
[x] 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.
N/A

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:
South Dakota did not identify this area as a quality activity in the FFY 2022-2024 State Plan.

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, 2022, to September 30, 2023?

[ ] 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
[x] Other. Describe **Through funding from the South Dakota Department of Health, the state Early Childhood Enrichment (ECE) system provided fitCare training and technical assistance and the Physical Activity Technical Assistance (PATA) program to support the development or revision of a program physical activity policy.**
[ ] N/A – did not help provider develop or adopt high quality program standards

10.1.2 Spending - High-Quality Program Standards:

Were funds from <u>any sources</u> (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?

[x] Yes, if so which funding source(s) were used?

> **[ ]** CCDF quality funds
> **[x]** 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 <u>support providers in the development or adoption of high-quality program standards related to health, mental health, nutrition, physical activity, and physical development</u> during October 1, 2022 to September 30, 2023? $**95658**
>
> **[ ]** 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. **Funding from the state Department of Health provided directly to the Early Childhood Enrichment agencies to support training and technical assistance for child care providers as part of the fitCare and Physical Activity Technical Assistance (PATA). Funding for the project in Rapid City and Sioux Falls to assist child care programs in supporting children with challenging behaviors is reported in Section 2.0 as part of the training and technical assistance contracts.**

[ ] 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.
Safe Sleep Policy training: The performance measure for the safe sleep policy training is a reduction in the number of instances of non-compliance of safe sleep practices by child care licensing in infant classrooms. In FFY 20, there were 20 citations for non-compliance with safe

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sleep practices. fitCare and Early Learning and Development Guidelines: The ECE System conducts pre and post surveys to measure knowledge of providers gained attending specific training series. In FFY 20, participant knowledge gain in the each of the following fitCare pillars was recorded: Recharge (5.7%), Mood (32.6%), Move (14.7%), and Food (7%). Technical assistance outcomes are tracked utilizing a standardized data collection system that collects information from the child care provider prior to the technical assistance visit, at the end of the first onsite technical assistance visit, and at routine follow-up visits (30,60,90, and 120 days). This process measures behavior change as provider's progress through the technical assistance process and put the knowledge they have gained into practice. These forms collect information on the five key measures that determine if a child care provider will/does positively change practice. These measures are knowledge gained, confidence to put the intended action into practice, intent to put this knowledge into practice, practicing the action and if the intended action has become a habit. In FFY 20, providers participating in technical assistance showed an increase in knowledge and confidence levels from the initial visit to the final visit in the area of Move (50% knowledge/48% confidence). Social Emotional Foundations Project: The measure of progress for this project is that the interventions provided by the ECE agencies and the local community mental health agency result in the child being able to remain in their current child care setting. In FFY 20, of the 81 children referred to the program, 42 remained in care, 23 are active cases and 28 were referred to community mental health or play therapists for additional support. Physical Activity Technical Assistance (PATA): Program progress in the PATA program is measured through 4 stages of involvement including (action with the director, action with staff, action with parents and maintenance). Successful completion of the program is documented as entering the maintenance stage of the program. To be considered in the maintenance stage, a program must have completed their program physical activity, supported their staff in obtaining the knowledge and skills needed to implement the policy and formally inserted the policy into their parent and staff handbook. CCS will track the number of programs in the maintenance stage along with the number of staff reached and children impacted through this program. In FFY 20, 30 programs (impacting 2,526 children and 591 providers) were actively working toward implementing a program physical activity policy. One program during this period fully implemented their policy and entered the maintenance phase of the program. In addition, during the federal fiscal year, the program provided support to another 23 programs (impacting 1,709 children and 460 providers) who had previously entered the maintenance phase of the program to ensure continued program wide implementation of the policy.

Please include information on the outcomes and numerical targets achieved based on the measurable indicators of progress specified in section 7.9.2 of the FFY 2022-2024 CCDF Plan: The Early Childhood Enrichment (ECE) System collaborates with the state Department of Health to administer the fitCare program. The goal of the fitCare program is to help child care

providers develop and maintain a healthy environment. The four pillars of fitCare are Recharge, Mood, Move and Food. In FFY 23, 134 individuals participated in the 4-class series. Pre and post data were tracked to measure participant knowledge gain and increases were noted in each of the areas: Recharge (3.4%), Mood (11.4%), and Move (13.3%) and Food (12.5%). Twelve child care providers participated in fitCare technical assistance following the completion of fitCare training.

Sanford Children's CHILD Services in southeastern South Dakota also collaborates with the state Department of Health office to administer the Physical Activity Technical Assistance (PATA) program. The PATA program works with child care programs to evaluate and promote best practices within their program physical activity policy. Six programs participated in the Physical Activity program in federal fiscal year 2023. Sixty-six programs have participated in the programs since it was launched. In addition, 3 programs that had completed the program were contacted to determine if additional supports were needed to continue to implement their program's physical activity policy. In FFY23, the main challenge that continued to impact program participation in the PATA program was the time investment of the directors and staff. With the current workforce issues, many directors are getting put into classrooms to meet ratio requirements. Finding the time to come up with a new policy and rolling it out to parents has been difficult for them.

The goal of the Foundations project is to assist programs in accessing technical assistance, coaching, and training to increase the early childhood provider's ability to manage difficult behaviors to prevent and/or limit expulsion and suspension practices in the early childhood setting. Currently the project provides services in two regional ECE service areas, Rapid City (western), and Sioux Falls (southeastern). In FFY 23, 120 children exhibiting challenging behaviors in 52 programs received support through the program. Of the 120 children referred to the program, 89 remained in care, 7 children's parents chose to move their child to another program and 33 were referred to community mental health or play therapists for additional support. Twenty-four children were expelled from the child care program after seeking assistance.

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, 2022 to September 30, 2023?

[ ] Yes. If yes, describe and check which types of providers were eligible and number served.
  [ ] Licensed center-based programs
  [ ] License-exempt center-based programs
  [ ] Licensed family child care homes
  [ ] License-exempt family child care homes (care in providers' home)
  [ ] In-home (care in the child's own home)
  [ ] Other (explain)
[x] No.
[ ] N/A. Describe:

11.1.2 Spending – Sustainability funding to child care providers:

Were funds from <u>any sources</u> (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:

[x] 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, 2022 to September 30, 2023?

[x] Yes. Describe: **The South Dakota Department of Social Services Office of Licensing and Accreditation which includes Child Care Licensing is in the process of developing a new Management Information System. This will be a newly created system allowing the office to function more efficiently to better serve child care providers, families and the public.**

The Division of Economic Assistance, Child Care Services is moving to a modernized platform for the eligibility and enrollment system utilized for Child Care Assistance (CCA). The new Eligibility and enrollment system will help to eliminate many of the system limitations and allow for advancement of the CCA program.
[ ] No

11.2.2 Spending - Data Systems Investment:

Were funds from <u>any sources</u> (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?

[x] Yes, if so which funding source(s) were used?

    [ ] CCDF quality funds
    [ ] Non-CCDF funds
    [ ] CARES funds
    [x] CRRSA Funds
    [x] 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, 2022 to September 30, 2023?

[ ] Yes. Describe findings:
[x] No

11.3.2 Spending - Supply and Demand Analysis:

Were funds from <u>any sources</u> (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:

[x] 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, 2022 to September 30, 2023? 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:

11.4.2 Spending - Supply and Demand Initiatives:

Were funds from <u>any sources</u> (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:

[x] 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, 2022 and September 30, 2023 (check all that apply)? If indicated, how many providers received each type of support?

    [ ] Financial bonuses (not tied to education levels)
    [ ] Salary enhancements/wage supplements
    [ ] Health insurance coverage
    [ ] Dental insurance coverage
    [ ] Retirement benefits
    [ ] Loan Forgiveness programs
    [x] Mental Health/Wellness programs **5**
    [ ] Start up funds
    [ ] Other. Describe:
    [ ] N/A. Describe:

11.5.2 Spending - Provider Compensation and Benefits:

Were funds from <u>any sources</u> (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?

[x] Yes, if so which funding source(s) were used?

> **[ ]** CCDF quality funds
> **[ ]** Non-CCDF funds
> **[ ]** CARES funds
> **[ ]** CRRSA Funds
> **[x]** 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 <u>other activities to improve the quality of child care services</u> during October 1, 2022 to September 30, 2023? $**17427472**

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

Optional: Use this space to tell us any additional information about how funds were spent that is not captured in the items already reported. **The Expansion & Startup grant program was implemented to support new child care programs and existing programs wishing to expand child care slots to serve additional children. This program was open during January-August 2023.**

11.7 Progress Update

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

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

Measurable indicators of progress the state/territory reported in section 7.10.1 of the 2022-2024 CCDF Plan:
Note: The information displayed is from the most recent approved FFY2022-2024 CCDF Plan.
N/A

Please include information on the outcomes and numerical targets achieved based on the measurable indicators of progress specified in section 7.10.2 of the 2022-2024 CCDF Plan: Funding from the Coronavirus Aid, Relief, and Economic Security Act were utilized to support children's and provider wellness and support program business practices. Beyond getting sick, many young children's well-being has been impacted by the pandemic. The children's books and training gave providers resources to support the wellness of children in their care. Children's books referencing topic areas, such as feelings, emotions, sharing, and making friends were disseminated through Using Books to Promote Relationship Skills classes based on the Pyramid Model Book Nooks through the Early Childhood Enrichment (ECE) system. Trainings and book sets are available for teachers of infants and toddlers, preschoolers, and school-age children. In FFY 23, these trainings reached 167 providers.

Child Care Services contracted with Worthy Well Empowered to deliver training in the Trauma Resource Institute's Community Resiliency Model (CRM). In FFY 23, 1,210 child care providers participated in one of 99 training opportunities or breakouts sessions at conferences. Based on surveys collected at the trainings held in FFY 23, 95.7% of participants were satisfied with their understanding of the Community Resiliency Model (CRM). Demographics of attendees showed that 68.6% of attendees worked in center-based programs while 15% worked as a family daycare provider. Nearly 50% of attendees had worked in child care for less than 2 years. In FFY 23, additional trainers in the ECE System will complete the CRM Trainer Certification process to continue to build capacity within system. This will promote sustainability of the project after the end of the contract with Worthy Well Empowered in May 2024.

Data from the Foundations program in Rapid City and Sioux Falls Early Childhood Enrichment (ECE) offices shows that children referred to play therapy services often ended up on waiting lists for services affecting their ability to remain in care. Recognizing a need to increase the number of registered Play Therapists for young children in South Dakota, a financial barrier to achieving registration was identified as a need. Utilizing CRRSA funding, financial scholarships were provided to assist individuals in enrolled in the Registered Play Therapy program at South Dakota State University (SDSU) to cover the cost of the supervision requirement in receiving the Registered Play Therapist (RPT) credential. A Memorandum of Understanding was signed by each scholarship recipient to facilitate selection of students with plans to serve children (ages 0-5) in South Dakota for one or two years. Funding for these scholarships ended in May 2023. Although information regarding how the addition of 18 new Play Therapists impacted waiting lists, several of these agencies/organizations indicated having a small or no waiting list.

In late August 2023, the Department of Social Services launched the Child Care Provider Mental

Health Voucher program. Through the program, individuals working in state licensed and registered childcare programs can choose from one of 17 participating mental health providers and receive up to eight mental health counseling sessions. Sessions are available in person or via telemedicine. During this reporting period, a total of 5 vouchers have been issued to 4 different providers since the launch of the program. The program is funded through a grant from the American Rescue Plan Act (ARPA) Discretionary Funds and will be managed by the DSS Division of Behavioral Health.

To support the need for child care business training, the SD Early Childhood Enrichment (ECE) System received funding to support a Child Care Summit for South Dakota child care directors and leaders. The 2nd annual event was held on July 21-22, 2023. Forty-five child care directors and leaders from across the state attended the training which included the following tracks: Inspiring Leaders, Respectful Conversations, and the state Leadership Series.

South Dakota utilized CRRSA and ARPA act funding to offer two grant program opportunities. Two rounds of expansion and startup grants occurred to increase the child care supply for South Dakota families. Expansion and startup grants were available to all interested people wanting to start a child care program or providers interested in expanding an existing program to serve children. Grant funds could be utilized for registration or licensing requirements, startup equipment and a portion of operational costs. There were 113 awards granted during the application phase of January-April 2023 (Round 1) and June-July 2023 (Round 2).

The Family Day Care Transition grant program was initiated to support the increase of availability to utilize registered family day care in South Dakota. Grant funds support state registration requirements as well as quality enhancement items. The grant opportunity started February 15, 2023 and applications are due by February 1, 2024. At the end of FFY23 a total of four providers received an award.

In addition, South Dakota utilized ARPA Act funding to provide funding to the Early Childhood Enrichment (ECE) system to provide supportive services to DSS for the purpose of recruiting and supporting individuals as they obtained their state family day care registration. Between October 2022 and June 2023, ECEs reported making 190 contacts with 139 child care providers throughout South Dakota. Of these providers, 22 reported being current, unregulated providers. Nine individuals completed the state registration process during the October 2022 through June 2023 timeframe.

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. **Data is collected monthly by the Office of Licensing and Accreditation (OLA) licensing specialists who complete a specific form with pertinent information regarding an injury or death. This form is submitted to the State Licensing Supervisor, who then enters the information into an excel data spreadsheet. This data is then gathered at the end of each federal fiscal year. A team then comprised Office of Licensing and Accreditation child care licensing staff and Child Care Services quality initiative staff meet annually to review data collected and discuss concerns and patterns that may have emerged. This year's team met on November 7, 2023.**

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. **There were no regulation, enforcement mechanism, or formal policy changes made as a result of the annual review.**

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13) American Rescue Plan (ARP) Act Child Care Stabilization Grants

Goal: To ensure the lead agency implements an equitable stabilization grant program. The American Rescue Plan (ARP) Act included approximately $24 billion for child care stabilization grants, representing an important opportunity to stabilize the child care sector and do so in a way that builds back a stronger child care system that supports the developmental and learning needs of children, meets parents' needs and preferences with equal access to high-quality child care, and supports a professionalized workforce that is fairly and appropriately compensated for the essential skilled work that they do. Lead agencies must spend most stabilization funds as subgrants to qualified child care providers to support the stability of the child care sector during and after the COVID-19 public health emergency. Section 13 should be used to report on ARP Stabilization Grants ONLY.

13.1 Multiple Grant Programs

13.1.1 ARP Act Stabilization multiple grant programs:

Did you run more than one grant program? If so, list the number of separate grant programs and describe their uses.

[ ] Yes. Describe:
[x] No

13.2 ARP Act Stabilization Grants workforce compensation

13.2.1 ARP Act Stabilization Grant strategies for workforce compensation:

Which of the following methods were used to support workforce compensation (e.g., bonuses, stipends, increased base wages, or employee benefits) with stabilization grants? (check all that apply)

[ ] Targeted grants to support workforce compensation (no other allowable uses)
[ ] Providing bonus funds to providers that increased child care staff compensation through stabilization grants
[ ] Requiring a specific percentage or amount of stabilization grant funding go toward child care staff compensation increases. Percent or amount for staff compensation:
[x] Other (Describe): **All ARP Act Stabilization grants were completed prior to the FFY 23 reporting period.**