Quality Progress Report (QPR)

For

Michigan

FFY 2023

QPR Status: Work in Progress as of 2023-12-20 14:36:08 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.

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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 **4526**
    [ ] Unable to provide number. Indicate reason:

Additional clarification: Based on most recent submission of the FY 2023 ACF-800 data there were 2062 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 **1944**
    [ ] Unable to provide number. Indicate reason:

Additional clarification: Based on most recent submission of the FY 2023 ACF-800 data there were 877 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: **Michigan launched MiRegistry, our professional development registry on April 1, 2018. MiRegistry offers a statewide training calendar; houses training and trainer approval; and offers full membership services including transcript review and career pathway placement and allows individuals to track employment, training and educational accomplishments. In addition, as of October 1, 2020, Great Start to Quality (GSQ) is now accessed via MiRegistry, so we are able to further connect professional development and staff qualification progression with quality rated programs. As of September 30, 2023, there were 13,224 (4485 new in FY 23) approved courses in MiRegistry and 1,990 approved trainers.**

[ ] 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?

[x] Yes. If yes, describe: **License exempt providers are required to utilize MiRegistry to complete their initial health and safety training orientation (Great Start to Quality Orientation). A license exempt provider must create an account in MiRegistry in order to register and complete orientation. A data share exists between MiRegistry and Bridges (Michigan's integrated subsidy eligibility system) to update initial orientation completion as part of the license exempt provider enrollment eligibility criteria. Beginning October 1, 2019, all providers participating in Great Start to Quality (GSQ) were required to utilize the registry to verify qualifications and professional development. In addition, beginning in March 2020, our required annual ongoing health**

and safety course is only offered through MiRegistry, so all providers must have an account, register and complete the training in MiRegistry to be in compliance.
[ ] No. If no, describe:

2.1.3 Number of Participants in Professional Development Registry:

Total number of participants in the registry as of September 30, 2023 **157,066**

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?

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

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

[ ] No

2.2 Workforce Development

2.2.1 Professional Development and Career Pathways Support:

How did the lead agency help teachers/providers progress in their education, professional development, and/or career pathway between October 1, 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) **1032**
    [x] Financial bonus/wage supplements tied to education levels **919**
    [x] Career advisors, mentors, coaches, or consultants **7**
    [ ] Reimbursement for training
    [ ] Loans
    [x] Substitutes, leave (paid or unpaid) for professional development **247**
    [x] Other. Describe: **MI has also supported 58 Professional Development Specialists to complete CDA verification visit for CDA candidates. Required health and safety trainings**

were offered to over 50,000 providers free of charge (initial and ongoing). In addition, as MI begins to implement early childhood apprenticeship opportunities we updated our career pathway document to include and recognize the apprenticeship certification.
[ ] 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
[x] Non-CCDF funds
[ ] CARES funds
[ ] 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) **3349**
[x] Associate's degree in an early childhood education field (e.g. psychology, human development, education) **1352**
[x] Bachelor's degree in an early childhood education field (e.g. psychology, human development, education) **3700**
[x] State child care credential **n/a**
[ ] 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) **1527**
[x] Associate's degree in an early childhood education field (e.g. psychology, human development, education) **757**
[x] Bachelor's degree in an early childhood education field (e.g. psychology, human development, education) **1587**
[ ] State child care credential
[ ] 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 any sources (e.g., CCDF quality set aside, non-CCDF funds, CARES, CRRSA, ARP Supplemental Discretionary, or ARP Stabilization 10% set-aside) spent to support this activity?

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

[x] CCDF quality funds
[x] Non-CCDF funds
[ ] CARES funds
[ ] CRRSA Funds
[ ] ARP Supplemental Discretionary
[ ] ARP Stabilization 10% set-aside

[ ] Unable to report. Indicate reason:

[ ] No

2.5 Spending – Training and Professional Development

2.5.1 Spending – Training and Professional Development:

What is the total amount spent across all funding sources (i.e., CCDF quality set aside, non-CCDF funds, CARES, CRRSA, ARP Supplemental Discretionary, and ARP Stabilization 10% set-aside) to support the training and professional development of the child care workforce during October 1, 2022 to September 30, 2023? $**3937183**

[ ] 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.

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.

One way we are looking at our progress around professional development, is to gather information on training content available to our early childhood and out of school time providers.We have pursued state level outreach to increase the number of trainers and training sponsors that are approved in MiRegistry and delivering approved training content through MiRegistry.We have increased the number of approved trainers by roughly 300 over the last year.These efforts have really built the content available to the above providers (family, center, and license exempt) and to those in the greater ECE and OST system (Early On®, MiAIMH, Youth Development, etc.) The following list shows the CKCC breakdown of all of the courses (training) currently in MiRegistry:

ECE - Child Development	**4,005**	**34.7%**
ECE - Family and Community Engagement	**1,237**	**10.7%**

ECE - Health, Safety, and Nutrition	1,522	13.2%
ECE - Interactions and Guidance	2,530	21.9%
ECE - Management	992	8.6%
ECE - Observation, Documentation, and Assessment	954	8.3%
ECE - Professionalism	1,225	10.6%
ECE - Teaching and Learning	3,607	31.3%
School Age - Child/Youth Growth and Development	43	0.4%
School Age - Child/Youth Observation and Assessment	18	0.2%
School Age - Cultural Competency and Responsiveness	21	0.2%
School Age - Family, School, and Community Relationships	22	0.2%
School Age - Interactions with Children and Youth	40	0.3%
School Age - Learning Environments and Curriculum	92	0.8%
School Age - Professional Development and Leadership	27	0.2%
School Age - Program Planning and Development	34	0.3%
School Age - Safety and Wellness	17	0.1%
School Age - Youth Engagement	11	0.1%
No CKCC Listed	1,154	10.0%

Capturing and acknowledging this data allows us to see where there are gaps and set

goals to increase content in a particular area. One goal we have is to increase the number of courses that support the out of school time workforce. Outreach and support to potential trainers and training sponsor organizations is something that we are planning over the next two years.

We also have information on who (by role) is attending training by CKCC area. (Note some courses have more than one CKCC content area covered.)

The last data that we use to ensure that we have training content available to support the areas mentioned above is through the process of qualification and through state level course development to meet a particular workforce need. Qualified courses are tied to supporting our QRIS, as there are indicators that allow a provider that completes training related to Cultural Competence/Inclusive Practices and/or Family Engagement scores higher than a provider who does not.

Course Qualifications:

Cultural Competency and Inclusive Practices: 1224 Courses

Family Engagement: 907 Courses

WIDA Multilingual: 5 Courses

State Level Courses:

McKinney Vento⬚Supporting Families Experiencing Homelessness How Child Care Providers Can Help: 1 course; 19 events offered

Child Care Center Administration Business Training Series: 9 courses; 20 events offered

Great Start to Quality Orientation: 1 course; 188 events offered

Collecting state level data through our workforce registry provides a real opportunity to set goals and measure progress. We are in the early stages of exploring and utilizing the data.

Another progress measure includes data around our T.E.A.C.H. program:

In fiscal year 20, 1,777 providers received T.E.A.C.H. scholarship funds to obtain the CDA credential or attend college courses. This resulted in 711 CDAs, associate, bachelor, or master's degrees. T.E.A.C.H. also provides seven full time counselors to support the workforce with navigating the CDA, higher education and scholarship options.

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: One way we are looking at our progress around professional development, is to gather information on training content available to our early childhood and out of school time providers. We have pursued state level outreach to increase the number of trainers and training sponsors that are approved in MiRegistry and delivering approved training content through MiRegistry. We have increased the number of approved trainers by roughly 180 over the last year. In addition, 4585 new courses were approved. These efforts have increased the amount of training available to   providers (family, center, and license exempt) and to those in the greater early childhood education and the out of school field time (Early On®, MiAIMH, Youth Development, etc.).

When reviewing the Core Knowledge/Competency areas for the approved courses in MiRegistry, we saw an increase in approved courses that were aligned to the School Age Competency areas. In FY 22 there were 325 courses aligned to School Age Competency Areas and in FY 23, there are 1197 courses aligned to School Age Competency Areas. The last data that we use to ensure that we have training content available to support the needs of our workforce is data that we collect through the process of qualification and through state level course development to meet a particular workforce need.

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Qualified courses are tied to supporting GSQ, as there are indicators specific to professional development that providers are encouraged to complete. The chart below provides data around specific topic (qualification) access and the number of providers by type that have completed professional development that meets the new GSQ Professional Development Indicators.

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?

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

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

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

    [ ] Unable to report total amount spent. Indicate reason

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

[x] 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. **State general funds are being used to update existing early learning and developmental guidelines. Our ELGs are fundamental to our quality rating and improvement indicators and our core competencies for both the early childhood and out of school time workforce. While there are not specific indicators that tie directly to implementation of the ELGs; certainly QRIS participation and quality indicator data and CKCC aligned professional development completion, relate to implementation of ELGs. Training and technical assistance around the updated ELGs has been proposed. If implemented, there could be measurable indicators tied to training completion and T/A consultation.**

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: **New early learning guidelines (ELGs) were approved in November 2022 by the State Board of Education. The purpose of these Early Childhood Standards of Quality for Birth to Kindergarten is to support the growth and development of all children throughout the state, birth to kindergarten; to support early childhood professionals in recognizing individual developmental trajectories and expressions of learning; and to guide programs toward the highest quality in their operations. These standards are organized into 17 sections that define a cohesive and research-based foundation for all early childhood professionals as these professionals use a wide variety of curricula, methodologies, and implementation strategies to meet the individual and collective needs of all children across the full range of backgrounds and experiences.**

In fiscal year 23, an online training to support the new ELGs: Introduction to Early Childhood Standards of Quality for Birth - Kindergarten was developed and launched in June 2023. 406 early educators have completed the state developed training. State leaders have also been sharing the new standards through statewide conference presentations and partner meetings to raise awareness.

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?

[x] The lead agency QRIS is operating state- or territory-wide.
- General description of QRIS: **Great Start to Quality (GSQ) is Michigan's system, which sets the quality standards and evaluates the quality of early care and education programs. It is funded by the Department of Education. Great Start to Quality includes 10 Great Start to Quality Resource Centers across the state that work with programs to take steps to improve their quality. Great Start to Quality also shares information about programs with families and helps families select the right program for their needs.**
- How many tiers/levels? **5** [insert number of tiers below as required and describe each tier and check off which are high quality]
    - Tier/Level 1: **Maintain Health and Safety: All programs in good standing with child care licensing, that have not started the quality improvement process or had a prior Quality Level that expired.**
        [ ] High Quality
    - Tier/Level 2: **Reflecting on Quality   Programs use Quality Indicators to reflect on program quality.**
        [ ] High Quality
    - Tier/Level 3: **Enhancing Quality-Programs set goals and receiving coaching and consultation for Validation and On-Site Observation**

        [x] High Quality
    - Tier/Level 4: **Enhancing Quality- Validated-Programs complete Validation and prepare for On-Site Observation.**
        [x] High Quality

- Tier/Level 5: **Demonstrating Quality-Programs meet threshold scores during On-Site Observation.**
  - **[x]** 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: **2,207**
- Total number of licensed family child care homes meeting high quality definition: **1,223**
- Total number of CCDF providers meeting high quality definition: **59.5%**
- Total number of children served by providers meeting high quality definition: **20,181**

[ ] 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):
- Which localities if not state/territory-wide?
- How many tiers/levels? [insert number of tiers below as required and describe each tier and check off which are high quality
  - Tier/Level 1:
    [ ] High Quality
  - Tier/Level 2:
    [ ] High Quality
  - Tier/Level 3:
    [ ] High Quality
  - Tier/Level 4:
    [ ] High Quality
  - Tier/Level 5:
    [ ] High Quality
  - Tier/Level 6:

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[ ] High Quality
- Tier/Level 7:
  [ ] High Quality
- Tier/Level 8:
  [ ] High Quality
- Tier/Level 9:
  [ ] High Quality
- Tier/Level 10:
  [ ] High Quality

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

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

[ ] The lead agency is operating another system of quality improvement.
- General description of other system:
- Describe assessment scores, accreditation, or other metrics associated with this system:
- Describe how "high quality" is defined in this system?
- Total number of licensed child care centers meeting high quality definition:
- Total number of licensed family child care homes meeting high quality definition:

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

[ ] The lead agency does not have a QRIS or other system of quality improvement.
- Do you have a definition of high quality care?
  [ ] Yes, define:
    - Total number of licensed child care centers meeting high quality definition:
    - Total number of licensed family child care homes meeting high quality definition:
    - Total number of CCDF providers meeting high quality definition:
    - Total number of children served by providers meeting high quality definition:
  [ ] No

4.1.2 Spending - Quality rating and improvement system status:

Were funds from <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

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
[x] Early Head Start programs
[x] Head Start programs
[x] 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
[x] Tribally operated programs
[x] Other. Describe: **Programs serving students with IEPs in general education/licensed child care settings**

4.3 Quality Rating and Improvement Systems Benefits

4.3.1 Quality Rating and Improvement Systems Benefits:

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

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

[x] On-going or periodic quality stipends
- o Licensed child care centers **3088**
- o Licensed family child care homes **161**

[x] Higher CCDF subsidy rates (including tiered rating)
- o Licensed child care centers **1189**
- o Licensed family child care homes **925**

[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
    [ ] 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? $**6406638**

[ ] 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. **In FY23 Michigan utilized funds (CCDF and PDG) for a multifaceted communications plan to introduce the reimagined GSQ, engage providers and educate parents about GSQ and how it supports finding a child care.**

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. **As a continuation of our Race to the Top ⯈ Early Learning Challenge (RTT-ELC) grant goals, we aim to maintain a GSQ participation rate of 50% of eligible licensed programs. We currently have 54% of the children receiving CDC subsidy in a 3, 4, or 5 star program. We will continue to measure and increase the number of high-quality licensed child care programs as well as the licensed capacity of those programs. Additionally, we will increase the participation rate of licensed child care programs that serve school age only children. Michigan is currently engaging stakeholders and an advisory group to reimagine and revise our quality rating improvement system. We will pilot potential revisions in 2021, with the goal of implementing a revised quality rating improvement system in fall of 2022.**

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: **After more than two years spent gathering feedback from partners, providers, Resource Centers, and the Great Start to Quality Advisory Committee, Michigan launched a more inclusive Quality Recognition and Improvement System (QRIS) February 1, 2023.**

GSQ's new model utilizes a continuous quality improvement system, shifting away from a points-based system and Star ratings. This reimagined system allows child care providers more flexibility as a provider driven process. GSQ's reimagined QRIS allows all program types and

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philosophies to show their strengths and create goals that align with the needs of the children and families they serve.

Early Childhood

Program Type

Eligible Programs Statewide

Maintaining Health & Safety

Reflecting on Quality

Enhancing Quality

Enhancing Quality Validated

Demonstrating Quality

Total in QI Process

Child Care Centers

4030

1605

225

925

1027

255

60.17%

Group Child Care Homes

1458

741

109

526

28

54

49.18%

Family Child Care Homes

1932

1163

154

557

30

28

39.80%

Tribal Center

13

7

0

1

4

1

46.15%

Tribal Home

1

1

0

0

0

0

0.00%

Out-of-School Time

488

426

14

35

6

7

12.70%

Total Programs:

7922

3943

502

2044

1088

345

50.23%

Total Percentages:

100%

49.77%

6.34%

25.80%

13.73%

4.35%

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 **14**
- Number of specialists available to providers serving children who receive CCDF **14**
- Number of specialists available specifically trained to support family child care providers **14**
- Number of providers served **178**
- Total number of children reached **4,127**

[ ] 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
[ ] 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
[ ] Family engagement and partnerships
[ ] Part C early intervention services
[x] Mental health of babies, toddlers, and families
[ ] Mental health of providers
[ ] Behavioral Health

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[x] Other. Describe Infant Toddler Specialists facilitate local Infant Toddler Learning Communities (ITLC), which are designed to provide a high-quality learning environment for infant and toddler care providers across the state. There are a total of 10 infant toddler quality improvement cohorts across Michigan, known as the Infant and Toddler Learning Communities (ITLC) with 14 Great Start to Quality Resource Center Infant and Toddler Specialists supporting this work.   In FY23, there were 178 providers served through the ITLC. Despite a decentralized approach to service delivery, deliberate regional and statewide collaboration continues to help partners deliver on a shared vision, mission, and set of values, which are outlined below.

The vision of the ITLC is: Step by step, our goal is to advance infant/toddler care through a trusted, dedicated, and knowledgeable workforce.

The mission is: The ITLC works to empower others and support relationship-based care practices to promote the well-being of Michigan's babies.

The core values of the ITLC are:

we believe in everyone's potential.

We promote continuous learning and sharing.

We believe in communities and practices that are relationship-based, safe, trusting, and respectful.

We are rooted in research and best-practices.

 The work carried out in support of the ITLC is multifaceted and engages in local, regional, and statewide activities. Great Start to Quality Resource Centers support this work in many different ways, including through the Infant and Toddler Specialist staff who utilize a relationship-based framework to support their local ITLC by providing training, resources, coaching and consultation on a variety of topics.

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?

[x] Number of staffed family child care networks: **22**
- o Describe what the network/hub provides to participating family child care providers: **Michigan's pilot of staffed family child care networks is designed to connect and stabilize home-based child care businesses using a Comprehensive Network Strategy (Home Grown Comprehensive Network Strategy). Networks are responsible for offering a menu of services to their networks including but not limited to trainings, technical assistance, tools, and peer support opportunities.**

Network services must focus on, but are not limited to, all the following:

Services that promote provider well-being and attachment to home-based child care work; this includes hosting monthly network meetings for members.

Services that promote economic well-being and sustainability.

Services that build on and enhance culturally relevant and community-

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embedded provider practices that contribute to positive child and family outcomes.

Holistic services for children and families beyond the support offered for providers.

Additionally, Networks must include providers as equal decision-making partners in network governance, operations, and accountability, as well as demonstrate an intentional focus on equity and culturally grounded service delivery.

Network hubs (9 total) are funded to support networks operationally, and transfer knowledge of best practices related to supporting a Comprehensive Network Strategy to the network staff and members. Network hubs meet through a monthly Peer Learning Community facilitated by the Early Childhood Investment Corporation (ECIC) to build community and knowledge. During Peer Learning Communities network hubs discuss successes and challenges related to facilitating the work of the networks, and elevate needs related to their success to ECIC. With the support of Home Grown, a national collaborative of funders committed to improving the quality of and access to home-based child care, ECIC has invited experts from across the country implementing the work of family child care networks to each Peer Learning Community session since they began in September 2023.

[ ] 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?

[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

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 <u>improve the supply and quality of child care programs and services for infants and toddlers</u> during October 1, 2022 to September 30, 2023? $**8583051**

[ ] 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.

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 quality improvements gained by providers who have engaged in the infant/toddler services through GSQ are not primarily reflected in increased star ratings. To better track these more nuanced changes, information is collected monthly from IT Specialists who support providers in their local learning communities. Preliminary results show that providers who attend more monthly group and individual supports have decreased feelings of isolation, learned and applied relationship-based care practices that enhance interactions between individuals in the environment, and engaged informal and informal activities to support developmentally appropriate practices for Michigan's youngest children in child care. Future analysis might

include how these supports impact business sustainability and workforce turnover. Michigan also supports partnerships centered on raising infant-toddler care quality in some of the State's most underserved communities and meets frequently with those projects (Educare/EHS-CCP) for updates on activities, including number of children served and quality improvement activities. Data is also being collected on the children and providers served by the Social Emotional Consultants to determine impact and plan for sustainability.

Data tracked by the Infant and Toddler Specialsits include: Participant demographic data (age, geographic location, race, ethnicity, gender, role within the program, etc.), particpation information (number or training or professional learning community meetings attended), ages of children served, number of children receiving DHHS subsidy, shifts and indications of quality rating Improvements. They also capture anectdotal data gained through refelction and observation.

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: The quality improvements gained by providers who have engaged in the infant/toddler services through GSQ are not primarily reflected in increased star ratings. To better track these more nuanced changes, information is collected monthly from IT Specialists who support providers in their local learning communities. Preliminary results show that providers who attend more monthly group and individual supports have decreased feelings of isolation, learned and applied relationship-based care practices that enhance interactions between individuals in the environment, and engaged informal and informal activities to support developmentally appropriate practices for Michigan's youngest children in child care. Future analysis might include how these supports impact business sustainability and workforce turnover.

Overview of ITLC Survey Data:

 Comparing Pre- and Post-Survey Responses: The post survey showed a significant increase in familiarity with the six essential practices. 50% of pre-survey respondents indicated that they were familiar, 43.6% indicated they were not and an additional 6.4% were somewhere in between. 92.47% of respondents in the post-survey noted that they were familiar, more than a 40% increase.

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Additionally, post ITLC survey data indicated that ITLC participants felt more confident in their caregiving practices:

92% felt very confident or confident in sharing information and engaging in culturally responsive practices

99% were very confident or confident as it related establishing safe, healthy routines and environment to support IT Learning.

Michigan also supports partnerships centered on raising infant-toddler care quality in some of the State's 25 most underserved communities and meets frequently with those projects (Early Head Start Child Care Partnerships) for updates on activities, including number of children served and quality improvement activities. We continue to collect data on the children and providers served by the Social Emotional Consultants to determine impact and plan for sustainability. Data tracked by the Infant and Toddler Specialists include: Participant demographic data (age, geographic location, race, ethnicity, gender, role within the program, etc.), participation information (number or training or professional learning community meetings attended), ages of children served, number of children receiving child care subsidy, shifts and indications of quality rating Improvements. They also capture anecdotal data gained through reflection and observation.

Shape

In fiscal year 23 work began to create a 45 hour Birth to Three Foundations training series to support infant and toddler educators with high quality content in an on demand, online format. This series meets the infant and toddler content licensing requirement for lead infant or toddler caregiver in a child care center. The series is expected to be released in fiscal year 24 and will couple the online content with infant toddler specialist support.

Social Emotional Consultation and Training

The Department, through an agreement with the Michigan Department of Health and Human Services (MDHHS) implements Infant Early Childhood Mental Health Consultation (IECMHC) across the state. In FY23, we increased from 23 to 31 counties served and from 13 consultants to 21 consultants through a learning collaborative that began in FY23. In addition, a program coordinator was added to the program to provide training and technical assistance the consultants and their supervisors across the state to provide support and guidance. MDHHS is partnering with Michigan State University to evaluate the program. In FY23, 34 training events for a total of 186 hours of professional development was offered serving 233 participants. Those receiving consultation services reported that expulsions were reduced by 77%, In addition, new resources were developed: new website, new logo and marketing materials and tools to share with providers and families.

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? $**6357677**

[ ] 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.

The GSQR Centers currently track provider professional development, # of participants, # of providers receiving quality improvement consulation, number of providers participating in GSQ, resources to support quality improvement, partnerships to support quality, referrals to social emotional consulation, referrals to education scholarships, infant toddler quality improvement cohorts, and infant toddler specialist data.

Please include information on the outcomes and numerical targets achieved based on the measurable indicators of progress specified in section 7.5.2 of the FFY 2022-2024 CCDF Plan:

The Great Start to Quality Resource Centers currently track provider professional development, number of participants, number of providers receiving quality improvement consultation, number of providers participating in GSQ, resources to support quality improvement, partnerships to support quality, referrals to social emotional consultation, referrals to education scholarships, infant toddler quality improvement cohorts, and infant toddler specialist data.

Shape

The GSQ public search tool was updated in FY23 as a result of an independent audit for accessibility by Child Trends and family focus groups conducted by the Yaffe Group. Improvements were made to enhance ADA compliance, including making the site easier to navigate, as well as to align with the new GSQ branding.

Program offerings are being updated to better reflect what families are looking for in a way that resonates with them. The system will default to a mapping feature making it easier for families to find care close to home, school, or work.

Families now have access to validation results. Once a program has reached the Enhancing Quality ⏹ Validated level, a document shows on the program's profile showing which indicators

were met. This gives families transparency into the process and families can compare programs within the same quality level.

Continued collaboration to plan, develop, and implement a comprehensive communication and marketing campaign for families and providers. Marketing materials ranged from social media posts to email newsletters, mailers, brochures, and booklets.

To better reach families, a Facebook page was created for just families to provide more targeted content. Instagram was also introduced to engage more families. Since its launch in May 2023, it gained 85 followers, reaching 324 people and engaging 102 people via likes. The new Facebook page created for families received 8,939 profile visits, earning 237 likes.

To align with messaging and branding all GSQ webpages, resources and tools were branded to ensure consistent messaging Updates included adding dynamic videos of Michigan child care providers, a more comprehensive footer that allows users to redirect to other webpages, categorized by audience, and changes to the format and color of the pages to help modernize and entice visitors to engage with the content. In FY23, the GSQ website had 582,940 page views and 190,259 visitors. The new Quality Improvement Process became the top five page on the website, earning over 28,000 views, because of Yaffe's ad marketing, GSQ's promotion on social media, e-newsletters, and engagement with providers and resource centers. Compared to FY22 the Find Programs webpage had over 10,000 more visitors, and the new child care subsidy eligibility calculator webpage took the top three with 61,679 pageviews.

In FY 23 the GSQ Resource Centers supported 9,843 families looking for childcare across the ten regions. In addition, 918 providers were referred to the TEACH scholarship program during coaching visits from GSQ Quality Improvement coaches and 82 referrals were made for social emotional consultation.

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? **1,712**

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)?

[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

7.2 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 **90**

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?

> [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

7.3 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? **Michigan does not currently track this data.**

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
> [x] 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

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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? $**11079232**

[ ] 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.

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.
With the reduction in caseloads and an increase in the number of on-site inspections we expect to increase the amount of time licensing consultants can spend with licensees to provide training, technical assistance, and consultation. Licensing will continue to track the number and type of on-site visits and begin tracking the following: number of in-service trainings that consultants provide, number of center orientations provided, number of conference presentations provided, number of consultants/area manager participation on local committees that are focused on improving child care quality, number of trainings that consultants attend, number of providers that have improved their quality rating from one fiscal year to the next. Twice a year ECIC provides MDE with a report that includes information on the health and safety visits that includes metrics, progress, successes, challenges, lessons learned and recommendations regarding monitoring and provider concerns. The report explains the outcome of the previous six months inspections, monitoring, training and compliance with health and safety standards.

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:
With the reduction in caseloads and an increase in the number of on-site inspections we expect to increase the amount of time licensing consultants can spend with licensees to provide

training, technical assistance, and consultation. Licensing will continue to track the number and type of on-site visits and begin tracking the following: number of in-service trainings that consultants provide, number of center orientations provided, number of conference presentations provided, number of consultants/area manager participation on local committees that are focused on improving child care quality, number of trainings that consultants attend, number of providers that have improved their quality rating from one fiscal year to the next.

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
[x] CLASS
[x] ERS
[ ] FCCERS
[x] ITERS
[ ] State evaluation tool. Describe
[ ] Core Knowledge and Competency Framework
[x] Other. Describe **SEL PQA**
[ ] 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
    [ ] CRRSA Funds
    [ ] ARP Supplemental Discretionary
    [ ] ARP Stabilization 10% set-aside
    [ ] Unable to report. Indicate reason:

[ ] No

8.2 Evaluation and assessment of family child care programs

8.2.1 Evaluation and assessment of family child care programs:

What measure(s) or tool(s) were used to evaluate and assess the quality of and effective practice in family child care programs during October 1, 2022 to September 30, 2023?

[x] QRIS
[x] CLASS
[ ] ERS
[x] FCCERS
[x] ITERS
[ ] State evaluation tool. Describe
[ ] Core Knowledge and Competency Framework
[x] Other. Describe **SEL PQA**
[ ] 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
    [ ] CRRSA Funds
    [ ] ARP Supplemental Discretionary
    [ ] ARP Stabilization 10% set-aside
    [ ] Unable to report. Indicate reason:

[ ] No

8.3 Spending - Evaluation and assessment of child care programs

8.3.1 Spending - Evaluation and assessment of child care programs:

What is the total amount spent across all funding sources (i.e., CCDF quality set aside, non-CCDF funds, CARES, CRRSA, ARP Supplemental Discretionary, and ARP Stabilization 10% set-aside) on <u>evaluating and assessing the quality of child care programs, practice, or child development</u> during October 1, 2022 to September 30, 2023? $**2149666**

[ ] 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.

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:
For licensed child care programs to participate in GSQ and receive a Quality Level, each program must have an Organization Profile, and qualification information for each educator (staff member) must be in MiRegistry. The application can be found in the Quality Improvement tab of the program's Organization Profile in MiRegistry. See more info here.

GSQ uses 40 indicators to measure the overall quality that programs provide across five categories in the Self-Reflection. These indicators are aligned with Michigan's Early Childhood Standards of Quality (ECSQ) and the National Association for the Education of Young Children (NAEYC). Click here for more information.

Quality Improvement Coaches (QICs) meet with programs to make and carry out plans for quality improvement.

Programs complete an application for Validation and On-Site Observation, indicating they are ready to have their Self-Reflection reviewed and move through the next steps in the process.

Program's update their Self-Reflection to align with improvements they have made or goals achieved.

Quality Improvement Consultants (QICs) review goals to discuss completion and outcomes with the program. They also review the Self-Reflection to ensure completion and discuss the observation tools the program can choose or their On-Site Observation.

Validation is the process by which members of the Validation Team and the Early Childhood Investment Corporation review a program's Self-Reflection responses and corresponding evidence to verify the program's high quality practices. The results of the Validation are shared publicly so families can review the strengths of each program during their search for child care.

A GSQ, or approved external Assessor, comes unannounced during a scheduled window of time and uses three reliable and valid tools to observe program practices. This provides objective results that highlight strengths in program quality and gives a clear picture of areas in which to improve. These three tools are:

Classroom Assessment Scoring System (CLASS)

Environment Rating Scales (ERS)

Social & Emotional Learning Program Quality Assessment (SEL PQA).

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:
N/A

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?

[x] QRIS, check which indicators the lead agency has established:
   [x] Health, nutrition, and safety of child care settings
   [x] Physical activity and physical development in child care settings
   [x] Mental health of children
   [x] Learning environment and curriculum
   [ ] Ratios and group size
   [x] Staff/provider qualifications and professional development
   [x] Teacher/provider-child relationships
   [x] Teacher/provider instructional practices
   [x] Family partnerships and family strengthening
   [ ] Other. Describe:
[x] Early Learning Guidelines
[ ] State Framework. Describe
[x] Core Knowledge and Competencies
[x] Other. Describe **Equity/Inclusive Practices**
[ ] 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?

   [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 **support providers in the development or adoption of high-quality program standards related to health, mental health, nutrition, physical activity, and physical development** during October 1, 2022 to September 30, 2023? $**1359171**

[ ] 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.

[ ] 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.
n/a

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:

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:

In FY23, the Child Care Licensing Bureau (CCLB) transitioned from the Bureau Information Tracking System (BITS) and launched a new data and licensing system called the Child Care Hub Information Records Portal (CCHIRP). CCHIRP provides several enhancements/benefits for Child Care Providers, LARA CCLB employees, CCLB partners, and the General Public. These enhancements/benefits include:

A modern, seamless user experience for Providers, CCLB employees, CCLB partners, and the General Public

Enhanced ability to interface with 10 different State of Michigan systems, designed for easy navigation

Improved reporting capabilities

Better system reliability and operational efficiency

Greater communication between CCLB, licensees, and community partners

Easier maintenance

Automation of manual business processes

Real-time application and licensure status

Credit-card payments for licenses and renewals

In FY23, there were many updates to the MiRegistry platform to support greater efficiency and enhance functionality. Enhancements include:

Data shares to support Training Sponsor Organizations with automatic attendance verification.

Development and report creation to support state funded pre-k (Great Start Readiness Program) staff qualification and benefit reporting

Conference module enhancements to allow for streamlined session entry and for coupon code pricing

License Exempt Training Report enhancements to allow Resource Centers to support license exempt providers with information to assist in planning professional development completion to achieve a higher rate of pay

To facilitate the implementation of GSQ's reimagined process, the QRIS system was rebuilt with infrastructure to support the new workflow. Rebuilding the system interface involved gathering technical requirements, rebuilding, testing, refining, and launching the new system on February 1, 2023. This process was completed in about 18 months.

While the look and feel of the QRIS interface did not change drastically, the business logic that powered the QRIS underwent extraordinary changes to support a more fluid process for providers. Most notably, the reimagined process relies heavily upon the timing of certain steps. Because these processes are almost impossible to test from a user's perspective, there were some issues upon system launch, which were corrected after the reimagined process launched. As launch issues were identified, GSQ staff and the QRIS vendor acted quickly to pinpoint and resolve them. GSQ regularly communicated issues and solutions to Resource Center staff, so that they had up-to-date information to support providers.

Reimagining the process also required significant changes to nightly data shares between

systems. Four nightly data shares were modified to accommodate the new data structure. One new data share was developed, tested, and implemented. The new share allows families to see validation results for programs so they can better compare programs when looking for care.

[ ] 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?

    [x] CCDF quality funds
    [ ] Non-CCDF funds
    [x] CARES funds
    [ ] 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?

[x] Yes. Describe findings: **In alignment with the goal of ensuring all children have access to high quality early learning experiences, The Caring for MI Future Urgent and High Needs Map was created to illustrate the known child care needs across the state in September 2022, using available data about staff shortage, the number of children competing for an available slot and child poverty rates for each county in Michigan. An additional Child Care Desert Map and Chart have been created by MSU based on the census and LARA databases to show areas with potential ⬛child care desert⬛ issues at the county and zip code level.**

We intend to continue to add additional data to the maps.

[ ] 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?

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

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

[ ] No

11.4 Supply and Demand Initiatives

11.4.1 Supply and Demand Initiatives:

Did the state/territory implement initiatives designed to address supply and demand issues related to child care deserts and/or vulnerable populations (such as infants and toddlers, children with disabilities, English language learners, and children who need child care during non-traditional hours) during October 1, 2022 to September 30, 2023? Check all that apply.

[x] Child care deserts
[x] Infants/toddlers
[ ] Children with disabilities
[ ] English language learners
[ ] Children who need child care during non-traditional hours
[x] Other. Describe: **Caring for MI Future is a $100 million investment to help more Michigan families find quality, affordable child care in their community. Today, according to the Michigan League for Public Policy, nearly half of communities do not have enough child care options to meet demand.**

To respond, the state is investing $100 million to dramatically increase access to child care across the state and open 1,000 new, or expanded, child care programs by the end of 2024. This strategy responds to the most pressing needs facing child care entrepreneurs and creates sustainable systems to support the current and next generation of child care business owners.

Through Caring for Mi Future, entrepreneurs will have access to:

Support identifying and renovating facilities: Child care businesses need access to affordable, licensable spaces to care for kids. There will be $51.1 million in grant funding available to renovate and upgrade facilities to meet licensing and quality standards. Grant applications will be available in late summer 2022.

Startup funding: Cashflow is an ongoing challenge for child care businesses, especially new sites that must incur costs well before they have revenue. The state will award $23 million in grants for programs before they're licensed and immediately after receiving their license.

Support to recruit staff: Entrepreneurs can't open and expand their businesses if they can't hire staff. The state will invest over $11.4 million to continue our statewide effort to recruit, train, and retain talented early educators that live and work in the communities they serve.

Business development tools: Many new businesses benefit from support from the state and their community to assess market demands, identify space, comply with health and safety rules⬛including local zoning, and create a business plan. The state will invest $14.3 million to align these resources and make the startup and licensing process clearer and faster for providers.

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?

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

    [ ] CCDF quality funds
    [ ] Non-CCDF funds
    [ ] CARES funds

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

[ ] No

11.5 Provider Compensation and Benefits

11.5.1 Spending - Provider Compensation and Benefits:

What compensation and benefits improvements did teachers/providers receive between October 1, 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
[ ] Mental Health/Wellness programs
[x] Start up funds **373**
[x] Other. Describe: **Pre-licensure grants**
[ ] 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? $**6434619**

[ ] 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. **CHHIRP (CARES), MDHHS Systems (CRRSA), WLS(ECIC), The Registry (CCDF, GF, PDG)**

11.7 Progress Update

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

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

Measurable indicators of progress the state/territory reported in section 7.10.1 of the 2022-2024 CCDF Plan:
Note: The information displayed is from the most recent approved FFY2022-2024 CCDF Plan. **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: **In an effort to increase child care capacity across the state Michigan offered Pre-Licensure and Start Up Grants to support new providers. These grants were part of the Caring for MI Future project,, a $100 million dollar strategy to open 1,000 new or expanded child care businesses by the end of 2024. The Pre-Licensure and Start Up Grants wereare available to child care entrepreneurs who hadhave not completed the licensure process. The grant funding is availablewas intended to help cover costs such as initial child care facility costs (mortgage, rent, etc.), health and fire inspection fees, child development curriculum, and other necessary items in order to open a child care business. 1,385 _____ Pre-licensure grants were awarded and __373____ Start Up Grants were awarded.**

Through the Caring for MI Future initiative, Our Strong Start (OSS) was also established. OSS, housed within the Child Care Licensing Bureau, has assigned Navigators for each region in Michigan to help interested child care entrepreneurs pursue their goal of opening their own licensed child care home or center. Navigators will guide potential entrepreneurs through the OSS resources and offer trainings, technical assistance (TA), and support. The types of TA offered include technical support, financial/cost, zoning, space, start-up funding, real estate, staff, and county assistance. Additionally, numerous in person and virtual Access Fairs were provided by Child Care Licensing and other partners. Approximately 500 participants had the opportunity to learn from various child care experts and receive guidance related to starting a child care business or expanding one that was already established through the various Access Fairs.

As of October 31, 2023, the initial Caring for MI Future goal of opening 1,000 new or expanded child businesses had been surpassed, with a total of 1,089 new child care homes and centers and 2,159 expanded facilities.

Facility Type

# of Prelicensure Grants Awarded

Total Amount Awarded

Center

725

$7,250,000

Group

178

$890,000

Family

482

$2,410,000

Total

1,385

$10,550,000

Facility Type

Start-Up Grants Awarded

Center

123

Group

70

Family

180

Total

373

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. **Licensed providers (regardless of whether they receive CCDF funding) are required to report any time a child in care experiences a serious injury or death. These reports are reviewed and submitted to their child care licensing consultant who then shares the information with central office for review and tracking. All information reported is then put into an aggregate data report and provided to the general public at MiKidsMatter (https://www.michigan.gov/mikidsmatter). This public display of information defines what a serious injury and death is and displays the information available by provider type. In coordination with child care licensing, MDE works to identify providers who have been placed on disciplinary action by child care licensing due to a health and safety violation or death of a child. These actions include revocation, refusal to renew a license, denial of issuance, or summary suspension. License closure is accomplished through an interface with the Bridges eligibility database. When a provider is closed, they are not available to be assigned to care for a child and any current provider assignments are automatically ended. In the event of a summary suspension, child care licensing notifies the lead agency of the date and time of suspension and the lead agency closes the provider to prevent CCDF payments.**

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. **No changes to the process in FY23.**

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Added Aggregate Data Chart FY23 CCLB Serious Injury and Death Report

Facility Type	Number of Licensed Facilities	Capacity of Children	Deaths In Child Care	Serious Injury - Broken Bones	Serious Injury - Stitches	Serious Injury - Burns	Serious Injury - Other	Substantiated Child Abuse/Neglect
Family (DF) - 1-6 Children	1,944	12,359	0	5	5	1	8	64

1

Group (DG) - 7-12 Children

1,468

19,169

2

5

7

0

10

1

Center (DC)

4,526

352,679

0

130

166

3

149

6

License Exempt

0

0

0

0

0

0

0

0

Total

7,938

384,207

2

140

178

4

167

8

Added Aggregate Data Chart – FY23 CCLB Enforcement Statistics Report

Facility Type	Summary Suspension with NOI	Denial	Refuse to Renew	Modify	Revocation	Totals
Family Home	1	1	1	1	2	6
Group Home	6					

0

2

0

4

12

Center

0

0

2

0

5

7

Totals

7

1

5

1

11

25

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:
[ ] Other (Describe):