Quality Progress Report (QPR)

For

Northern Mariana Islands

FFY 2024

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

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

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

QUALITY PROGRESS REPORT

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

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

Specifically, this report will be used to:

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

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

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

How is the QPR Organized?

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

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

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

When is the QPR Due to ACF?

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

Glossary of Terms

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

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

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

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

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

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

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

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

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

Provider means the entity providing child care services.

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

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

1) Overview

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

1.1   State or Territory Child Care Provider Population

1.1.1   Total Number of Licensed Providers:

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

[x] Licensed center-based programs **32**
      [ ] Unable to provide number. Indicate reason:

Additional clarification: Based on most recent submission of the FY 2024 ACF-800 data there were 18 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 **4**
      [ ] Unable to provide number. Indicate reason:

Additional clarification: Based on most recent submission of the FY 2024 ACF-800 data there were 5 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 stable child care workforce with the competencies and skills to support all domains of child development.*

2.1 Lead Agency Progression of Professional Development

2.1.1 Professional Development Registry:

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

[ ] Yes. If yes, describe:

[x] 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: **CCDF tracks professional development hours of center-based staff through the assistance of its QRIS consultant. The consultant trains a dedicated staff in each center to be responsible for uploading certificates to a Google Drive as evidence of completion and updating completion hours and training data on a center-specific Microsoft Excel sheet. The consultant sends quarterly notices of each provider's progress towards meeting professional development requirements. A notice of completion is issued to new staff upon fully complying with the 90 days health and safety preservice training requirement. In addition, monthly notices are provided to each center to alert them of annual training hour requirements.**

2.1.2 Participation in Professional Development Registry:

Are any teachers/providers required to participate?

[ ] Yes. If yes, describe:

[x] No. If no, describe: **Although the CNMI does not currently have a professional development registry, all center-based providers are required to participate in the tracking system managed by the QRIS consultant. All provider training certificates and their hours must be uploaded to the system monthly and in total by the end of the fiscal year.**

2.1.3 Number of Participants in Professional Development Registry:

Total number of participants in the registry as of September 30, 2024 **301**

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

[ ] No

2.2 Workforce Development

2.2.1 Professional Development and Career Pathways Support:

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

    [x] Scholarships (for formal education institutions) **29**
    [ ] Financial bonus/wage supplements tied to education levels
    [x] Career advisors, mentors, coaches, or consultants **279**
    [x] Reimbursement for training **91**
    [ ] Loans
    [ ] Substitutes, leave (paid or unpaid) for professional development
    [ ] Other. Describe:
    [ ] N/A. Describe:

2.2.2 Spending - Professional Development and Career Pathways Support:

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

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

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

[ ] No

2.3 Child Care Provider Qualifications

2.3.1 Number of Licensed Child Care Programs Qualifications:

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

[x] Child Development Associate (CDA) **0**
[x] Associate's degree in an early childhood education field (e.g. psychology, human development, education) **0**
[x] Bachelor's degree in an early childhood education field (e.g. psychology, human development, education) **6**
[x] State child care credential **0**
[x] State infant/toddler credential **0**
[ ] Unable to report this data. Indicate reason:

2.3.2 Number of Licensed CCDF Child Care Programs Qualifications:

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

[x] Child Development Associate (CDA) **0**
[x] Associate's degree in an early childhood education field (e.g. psychology, human development, education) **0**
[x] Bachelor's degree in an early childhood education field (e.g. psychology, human development, education) **6**
[x] State child care credential **0**
[x] State infant/toddler credential **0**
[ ] 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] Emergency Preparedness Planning
[x] Other. Describe other technical assistance available to providers as part of the professional development system: ● **Activities/interactions/ materials - Leveraging interactions and materials/ activities for children's language, mathematical, cognitive, social-emotional development**
● **Implementation of the Ages and Stages Questionnaire (ASQ)**
● **Required documents to meet QRIS**
● **Applying for CCDF child care provider certification**
● **Introduction to the Environment Rating Scale (ITERS-3 and ECERS-3)**
● **Initial observation with the use of the Environment Rating Scales**
● **Family engagement**
● **Active supervision**
● **Health and safety practices - including allergic reactions, child abuse and neglect**
● **Use of the Program Administration Scale**
● **Use and maintenance of the professional development tracking system**
● **Program structure - including scheduling, lesson planning, transitioning between routines and activities, structuring free play and whole group activities for play and learning**

2.4.2 Spending - Technical Assistance for Professional Development:

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

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

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

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

[ ] No

2.5 Spending – Training and Professional Development

2.5.1 Spending – Training and Professional Development:

What is the total amount spent across all funding sources (i.e., CCDF quality set aside, non-CCDF funds, CARES, CRRSA, ARP Supplemental Discretionary, and ARP Stabilization 10% set-aside) to support the <u>training and professional development</u> of the child care workforce during October 1, 2023 to September 30, 2024? $**1172800**

[ ] 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.
In terms of measurable indicators relevant to professional development and training for providers, the following will be our indicators annually:

1. All (100%) CCDF license providers will meet their 30 annual ongoing training requirements.

2. All (100%) of license exempt providers will meet 15 hours of ongoing training requirments.

3. All (100%) of new employees within 90 days of employment will complete their Pre-

Service Training topics.

The data sources that will support this indicator will be:

1. Data on CCDF provider completion of trainings as maintained by the CCDF Data Specialist.

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: 1. 100 % CCDF license providers met their 30 annual ongoing training requirements.
2. 100% of license exempt providers met 15 hours of ongoing training requirements.
3. 95 % of new employees within 90 days of employment completed their Pre-Service Training topics. Of the 136 new staff hired for Fiscal Year 2024:
● 1% refers to two staff members from a new program who failed to complete the 12 required preservice training topics before their 90-day period ended. Special circumstances were considered, and the non-compliant staff were able to complete the required training topics as recommended.
● 4% (5 staff members) resigned before completing their 90-day employment period.

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, 2023 to September 30, 2024?

[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) on improving upon the development or implementation of early learning and development guidelines? $**38100**

    [ ] Unable to report total amount spent. Indicate reason

Optional: Use this space to tell us any additional information about how funds were spent that is not capture in the item already reported: **Early Learning and Development Guidelines training facilitation for care providers and parents for the three (3) islands (Saipan, Tinian and Rota) and procurement of ELDG books for reference and use of the training.**

[ ] No

3.2 Progress Update

3.2.1 Progress Update - Early Learning and Development Guidelines:

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

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

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

.The CNMI will use data gathered from its Reach Higher, CNMI - Quality Rating and Improvement System or QRIS to evaluate progress in improving the quality of child care programs. The results of the observations as well as the use of the environment rating scales such as the Infant and Toddler Environment Rating Scale-3 rd Ed or ITERS-3, the Early Childhood Environment Rating Scale-3 rd Ed or ECERS-3, the School Age Care Environment Rating Scale-Updated or SACERS-U, as well as the Family Child Care Environment Rating Scale or FCCERS will assist in providing data on improvements in quality.

Annually, all programs must meet star level 1 indicators in the QRIS to qualify for CCDF funding - including indicators in the area of child growth and development. Program with Star 1 will have a maximum of 2 years to stay at that quality level. Programs with Star 2 will have a maximum of 2 years to stay at that quality level. This means programs, at the very least, must score at 3.00 or higher on any of the Environment Rating Scales (ITERS-3, ECERS-3, and SACERS-U) at the end of their second year in star 1 or 2.

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:

At the end of FY 2024, no center-based program was slated to move up a star level to continue meeting eligibility requirements: 13 of 18 or 72% of programs must move up to star 2 or 3 by the end of FY2026; one program may maintain their standing in star 3; one program is new and without an established star level; the remaining 16% are new programs with star 1 standing and must move up by FY2027.

Although a program is not subject to a formal program assessment using the Environment Rating Scales and Program Administration Scale during the interim years, a Quality Care Specialist conducts annual announced and unannounced observations to ensure programs continue to comply with basic health and safety standards.

100 % of programs met star 1 indicators as a requirement for CCDF certification renewal eligibility in FY2024. Overall, individual star standings are as follows:

44.4 % at star 1 only (These programs are currently working to reach a higher quality level towards Star 2)

33.3 % at star 2

5.6 % at star 3

0 % at star 4

0 % at star 5

16.7 % at no star (New center working on meeting star 1 requirements)

In addition, in FY 2024, the expected upward movement in quality for all centers is at:

33.3 % must meet star 2 in 2026

27.8 % must meet star 2 in 2027

27.8 % must meet star 3 or above in 2026

0 % must meet star 3 or above in 2027

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

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

4.1 Quality rating and improvement system status

4.1.1 QRIS or other system of quality improvement status:

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

[x] The lead agency QRIS is operating state- or territory-wide.

- General description of QRIS: **Reach Higher CNMI (Quality Recognition and Improvement System) was fully implemented in FY2024. From its launch in 2016 to FY2023, CCDF ran the system as a pilot. Participation in the QRIS is a requirement for all CCDF providers. However, to give ample time for home based providers' participation in the QRIS, QRIS is currently in "Pilot stage" for all home based providers. Therefore, only licensed centers are in full participation for the QRIS.**

  In their first year of certification, new providers are given one year of coaching and training to fully participate in the system. Upon renewal, they must meet all star 1 indicators.

  Reach Higher CNMI includes six general standard areas: health and safety, staffing and professional development, child development, family strengthening and engagement, children with disabilities, leadership and management. Quality indicators are defined along 5 star levels - with star 1 indicating no quality and building up to the highest quality at star 5:
  1) Star Level 1 ▯ The facility is still Learning About Quality. The program is only meeting the most basic health and safety standards as set by the Child Care Licensing Program (CCLP) and the Child Care and Development Fund (CCDF). Star Level 1 is not considered quality.
  2) Star Level 2 ▯ The facility is Moving Into Quality. That means the staff and management are starting to take steps to prepare their program to become a higher quality program.

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3)   Star Level 3 ⧠ The facility is Committing to Higher Quality. Quality takes a lot of hard work and effort! Programs at Star Level 3 are seriously committing to improving their programs at a higher quality.

4)   Star Level 4 ⧠ The facility is Growing Into Higher Quality. Star Level 4 programs are already doing things above and beyond basic child care. There is still room to grow, but the program is implementing developmentally appropriate practices beyond merely providing babysitting services.

5)   Star Level 5 ⧠ The facility is Thriving in Higher Quality. Programs at Star Level 5 are doing the daily challenging work of providing high quality care for your children. Because they acknowledge that there is no such thing as a perfect program, the staff and management continuously look for ways to improve the services and care they offer.

At star 1, program assessment tools (i.e., Environment Rating Scales and Program Administration Scales) are used for self-assessment and strictly to inform technical assistance and training. Beginning at star 2, independent assessors use the scales to conduct formal observations of programs to determine quality standing.

- 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: **1)   Star Level 1 ⧠ The facility is still Learning About Quality. The program is only meeting the most basic health and safety standards as set by the Child Care Licensing Program (CCLP) and the Child Care and Development Fund (CCDF). Star Level 1 is not considered quality.**

        [ ] High Quality
    - Tier/Level 2: **2)   Star Level 2 ⧠ The facility is Moving Into Quality. That means the staff and management are starting to take steps to prepare their program to become a higher quality program.**
        [ ] High Quality
    - Tier/Level 3: **3)   Star Level 3 ⧠ The facility is Committing to Higher Quality. Quality takes a lot of hard work and effort! Programs at Star Level 3 are seriously committing to improving their programs at a higher quality.**

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        [x] High Quality
- Tier/Level 4: **4)** **Star Level 4 ▢ The facility is Growing Into Higher Quality. Star Level 4 programs are already doing things above and beyond basic child care. There is still room to grow, but the program is implementing developmentally appropriate practices beyond merely providing babysitting services.**
      [x] High Quality
- Tier/Level 5: **5)** **Star Level 5 ▢ The facility is Thriving in Higher Quality. Programs at Star Level 5 are doing the daily challenging work of providing high quality care for your children. Because they acknowledge that there is no such thing as a perfect program, the staff and management continuously look for ways to improve the services and care they offer.**
      [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: **1**
- Total number of licensed family child care homes meeting high quality definition: **0**
- Total number of CCDF providers meeting high quality definition: **1**
- Total number of children served by providers meeting high quality definition: **72**

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

[ ] No

4.2 Quality Rating and Improvement Systems participation

4.2.1 QRIS or other system of quality improvement participation:

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

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

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[ ] Local district-supported Prekindergarten programs

[ ] Programs serving infants and toddlers

[ ] Programs serving school-age children

[ ] Faith-based settings

[ ] Tribally operated programs

[ ] Other. Describe:

4.3 Quality Rating and Improvement Systems Benefits

4.3.1 Quality Rating and Improvement Systems Benefits:

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

[x] One-time grants, awards or bonuses
   o   Licensed child care centers **7**
   o   Licensed family child care homes **0**
[ ]On-going or periodic quality stipends
   o   Licensed child care centers
   o   Licensed family child care homes
[x]Higher CCDF subsidy rates (including tiered rating)
   o   Licensed child care centers **7**
   o   Licensed family child care homes **0**
[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)
[x]Other. Describe **The following are incentives attached to participation to Reach Higher, CNMI QRIS. The types of incentives are the same, but as the provider's Star Level increases, the amount of the incentive also increases.**
Star Level 1: Professional Development/Training Incentive
Star Level 2: Tiered Reimbursement at 7%, Children with Special Needs, Cash/Staff incentives, Program Incentives, and Professional Development/Training Incentive.
Star Level 3: Tiered Reimbursement at 10% and the same incentives as identified in Star 2
Star Level 4: Tiered Reimbursement at 12% and the same incentives as identified in Star 2
Star Level 5: Tiered reimbursement at 15% and the same incentives as identified in Star 2

4.3.2 Spending - Quality Rating and Improvement Systems Benefits:

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

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

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

[ ] No

4.4 Spending – Quality Rating and Improvement Systems

4.4.1 Spending – Quality Rating and Improvement Systems:

What is the total amount spent across all funding sources (i.e., CCDF quality set aside, non-CCDF funds, CARES, CRRSA, ARP Supplemental Discretionary, and ARP Stabilization 10% set-aside) related to **QRIS or other quality rating systems** during October 1, 2023 to September 30, 2024? $**1410006**

[ ] 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.

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. **Annually, all licensed CCDF programs will meet, at a minimum, QRIS star level 1.**

At the end of two years maintaining star 1 or star 2, all licensed CCDF programs will be, at a minimum, QRIS star level 3.

Currently, 50% of CCDF licensed programs are at star 1, 30% at star 2, and 20% are working towards meeting star 1.

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:
44.4 % at star 1 only   (These programs are currently working to reach a higher quality level towards Star 2)
33.3 % at star 2
5.6 % at star 3
0 % at star 4
0 % at star 5
16.7 % at no star (New center working on meeting star 1 requirements)

In addition, in FY 2024, the expected upward movement in quality for all centers is at:
33.3 % must meet star 2 in 2026
27.8 % must meet star 2 in 2027
27.8 % must meet star 3 or above in 2026
0 % must meet star 3 or above in 2027

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

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

5.1 Infant/Toddler Specialists

5.1.1 Infant/Toddler Specialists:

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

[x] Yes
- Number of specialists available to all providers **4**
- Number of specialists available to providers serving children who receive CCDF **4**
- Number of specialists available specifically trained to support family child care providers **2**
- Number of providers served **174**
- Total number of children reached **900**

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

[ ] N/A. Describe:

5.1.2 Infant/Toddler Specialists Supports Provided:

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

[x] Relationship-caregiving practices (or quality caregiving/developmentally appropriate practices)

[x] On-site and virtual coaching

[x] Health and safety practices

[ ] 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

[ ] Mental health of babies, toddlers, and families

[ ] Mental health of providers

[ ] Behavioral Health

23

[ ] Other. Describe

5.1.3 Spending – Infant/Toddler Specialists:

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

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

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

[ ] No

5.2 Staffed Family Child Care Networks

5.2.1 Number and Description of Staffed Family Child Care Networks:

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

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

5.2.2 Spending - Staffed Family Child Care Networks:

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

[ ] Yes, if so which funding source(s) were used?
    [ ] CCDF quality funds
    [ ] Non-CCDF funds
    [ ] CARES funds

[ ] CRRSA Funds

[ ] ARP Supplemental Discretionary

[ ] ARP Stabilization 10% set-aside

[ ] Unable to report. Indicate reason:

[x] No

5.3   Spending - Programs and services for infants and toddlers

5.3.1   Spending - Programs and services for infants and toddlers:

What is the total amount spent across all funding sources (i.e., CCDF quality set aside, non-CCDF funds, CARES, CRRSA, ARP Supplemental Discretionary, and ARP Stabilization 10% set-aside), above and beyond to the 3% infant and toddler set-aside, to improve the supply and quality of child care programs and services for infants and toddlers during October 1, 2023 to September 30, 2024? $**635549**

[ ] 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. **Annually, all licensed CCDF programs that serve infants and toddlers will meet, at a minimum, QRIS star level 1. At the end of two years maintaining star 1 or star 2, all licensed CCDF programs that serve infants and toddlers will be, at a minimum, QRIS star level 3. At star 2, infant and toddler programs should score a minimum 2.00; at star 3, a minimum 3.00; at star 4, a minimum 4.00; and at star 5, a minimum 5.00.**

Currently, 50% of CCDF licensed programs are at star 1, 30% at star 2, and 20% are working towards meeting star 1. In summary, 80% of all CCDF programs are at least at star 1.

ITERS-3 data for infant and toddler programs are as follows:

25

- 6.25% scored a minimum 5.00 (good quality)
- 31.25% scored a minimum 4.00-4.99 (good quality)
- 18.75% scored a minimum 3.00-3.99 (minimal quality)
- 31.25% scored a minimum 2.00-2.99 (minimal quality)
- 12.5% scored a minimum 1.00-1.99 (inadequate quality)

In summary, half of CCDF infant and toddler programs are at minimal quality, while 37.5% are in good quality.

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:
37.5% at star 1 only (These programs are currently working to reach a higher quality level towards Star 2)
37.5 % at star 2
6.25 % at star 3
0% at star 4
0 % at star 5
18.75 % at no star (New center working on meeting star 1 requirements)

For FY2024, no formal program observations to determine stars 2 and above were conducted. ITERS-3 data for infant and toddler programs remain unchanged:
- 6.25% scored a minimum 5.00 (good quality)
- 31.25% scored a minimum 4.00-4.99 (good quality)
- 18.75% scored a minimum 3.00-3.99 (minimal quality)
- 31.25% scored a minimum 2.00-2.99 (minimal quality)
- 12.5% scored a minimum 1.00-1.99 (inadequate quality)
In summary, half of CCDF infant and toddler programs are at minimal quality, while 37.5% are in good quality.

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, 2023 to September 30, 2024?

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

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

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

[ ] 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

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 CNMI will use its QRIS data in evaluating progress related to improving the quality of child care program and services. It will use the standards identified in each of the following areas: Health and Safety, Child Development, Professional Development, Activities, Leadership, and Children with Disabilities. We will also look at the Environment Rating Scale or ERS data related to these standards.**

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 CNMI during FY2022-2024 did not have a child care resource and referral services.**

At the end of FY 2024, no center-based program was slated to move up a star level to continue meeting eligibility requirements: 13 of 18 or 72% of programs must move up to star 2 or 3 by the end of FY2026; one program may maintain their standing in star 3; one program is new and without an established star level; the remaining 16% are new programs with star 1 standing and must move up by FY2027.

Although a program is not subject to a formal program assessment using the Environment Rating Scales and Program Administration Scale during the interim years, a Quality Care Specialist conducts annual announced and unannounced observations to ensure programs continue to comply with basic health and safety standards.

100 % of programs met star 1 indicators as a requirement for CCDF certification renewal eligibility in FY2024. Overall, individual star standings are as follows:

44.4 % at star 1
33.3 % at star 2
5.6 % at star 3
0 % at star 4
0 % at star 5
16.7 % at no star (New center working on meeting star 1 requirements)

In addition, in FY 2024, the expected upward movement in quality for all centers is at:
33.3 % must meet star 2 in 2026
27.8 % must meet star 2 in 2027

27.8 % must meet star 3 or above in 2026
0 % must meet star 3 or above in 2027

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

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

7.1 Complaints about providers

7.1.1 Number of Complaints about providers:

How many complaints were received regarding providers during October 1, 2023 to September 30, 2024? **4**

7.1.2 Spending - Complaints about providers:

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

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

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

[x] No

7.2 Licensing Staff

7.2.1 Number of Licensing Staff:

How many licensing staff positions were there in the state or territory during October 1, 2023 to September 30, 2024? Number of staff **4**

7.2.2 Spending – Licensing Staff:

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

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

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

[ ] No

7.3 Health and Safety Standards Coaching and Technical Assistance

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

How many child care programs received coaching or technical assistance to improve their understanding and adherence to CCDF health and safety standards as a result of an inspection or violation during October 1, 2023 to September 30, 2024? **2**

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?

    [ ] 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

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

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

What is the total amount spent across all funding sources (i.e., CCDF quality set aside, non-CCDF funds, CARES, CRRSA, ARP Supplemental Discretionary, and ARP Stabilization 10% set-aside) on <u>facilitating compliance with lead agency requirements for inspections, monitoring, health and safety standards and training, and lead agency licensing standards</u> during October 1, 2023 to September 30, 2024? $**250000**

[ ] 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.
The following measurable indicators will be used to evaluate progress in addressing health and safety requirements:

1. All (100%) new CCDF providers will complete the Pre-Service Training requirements within 90 days of employment.

2. All (100%) license center based providers will be visited for monitoring purposes at least 2x in a year (1 unannounced and 1 announced) and their corresponding reports posted.

3. All (100%) of CCDF providers will have addressed health and safety indicators in their Quality Improvement Plans (QIP)

Currently license exempt providers are not required to participate in the QRIS but may access training and TA through the System of Support initiative. We are in the process of imbedding in the QRIS indicators specific to license exempt providers which will include Health and Safety, PD

and staff training, Child Growth and Development, Family engagement and family strengthening, Children with Disabilities, Leadership and Management. The assessment tools that will be used. in the assessments will include the Business Administration Scale (BAS) and the Family Child Care Environment Rating Scale (FCCERS)

Indicators of progress will be that 100% of the License exempt providers will participate and that all of them will participate in the training and TA related to the QRIS.

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:
1.95% new CCDF providers completed the preservice training requirements within 90 days of employment in FY2024.
2. 100 % licensed center based providers were visited for health and safety purposes at least twice in a year (1 unannounced and 1 announced) and had their corresponding reports posted on the CCDF website..
3. 94 % of CCDF providers addressed health and safety indicators in their Quality Improvement Plans (QIP).

An exit interview was conducted after every visit. Easily fixable deficiencies were fixed while the Quality Care Specialist remained onsite. A copy of the observation report, including the list of deficiencies and recommendations to address those deficiencies, were given to the providers as reference. Fourteen (14) calendar days were given to address all issues and a follow-up visit was conducted to verify compliance. Most deficiencies were addressed during the follow-up visit. If providers needed more time to address the identified deficiencies (work in progress), additional time was given - depending on the severity of the issue. Another follow-up visit was conducted based on the timeline identified/ given to ensure final compliance with all recommendations and requirements.

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

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

8.1 Evaluation and assessment of center-based programs

8.1.1 Evaluation and assessment of center-based programs:

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

[x] QRIS
[ ] CLASS
[x] ERS
[ ] FCCERS
[x] ITERS
[ ] State evaluation tool. Describe
[ ] Core Knowledge and Competency Framework
[x] Other. Describe **Program Administration Scale**
[ ] Do not evaluate and assess quality and effective practice

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

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

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

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

[ ] No

8.2 Evaluation and assessment of family child care programs

8.2.1 Evaluation and assessment of family child care programs:

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

[ ] QRIS
[ ] CLASS
[ ] ERS
[x] FCCERS
[ ] ITERS
[ ] State evaluation tool. Describe
[ ] Core Knowledge and Competency Framework
[x] Other. Describe **The family child care programs were evaluated and assessed using the Health and Safety Check In Tool for both announced and unannounced visits were conducted. Between March and May of 2024, a pilot group of six family child care providers underwent a QRIS assessment which included FCCERS observation and the Business Administration Scale (BAS).**

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

[ ] No

8.3 Spending - Evaluation and assessment of child care programs

8.3.1 Spending - Evaluation and assessment of child care programs:

What is the total amount spent across all funding sources (i.e., CCDF quality set aside, non-CCDF funds, CARES, CRRSA, ARP Supplemental Discretionary, and ARP Stabilization 10% set-aside) on <u>evaluating and assessing the quality of child care programs, practice, or child development</u> during October 1, 2023 to September 30, 2024? $**1620000**

[ ] 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. **This amount includes a portion of funding that came from a private grant - New Ventures Fund.**

8.4 Progress Update

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

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

Measurable indicators of progress the state/territory reported in section 7.7.2 of the FFY 2022-2024 CCDF Plan:
Note: The information displayed is from the most recent approved FFY2022-2024 CCDF Plan.
The CNMI will use its QRIS data in evaluating progress related to improving the quality of child care program and services. It will use the standards identified in each of the following areas: Health and Safety, Child Development, Professional Development, Activities, Leadership, and Children with Disabilities. We will also look at the Environment Rating Scale or ERS data related to these standards.

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:
At the end of FY 2024, no center-based program was slated to move up a star level to continue meeting eligibility requirements: 13 of 18 or 72% of programs must move up to star 2 or 3 by the end of FY2026; one program may maintain their standing in star 3; one program is new and without an established star level; the remaining 16% are new programs with star 1 standing and must move up by FY2027.

Although a program is not subject to a formal program assessment using the Environment Rating Scales and Program Administration Scale during the interim years, a Quality Care Specialist conducts annual announced and unannounced observations to ensure programs continue to comply with basic health and safety standards.

36

100 % of programs met star 1 indicators as a requirement for CCDF certification renewal eligibility in FY2024. Overall, individual star standings are as follows:

44.4 % at star 1
33.3 % at star 2
5.6 % at star 3
0 % at star 4
0 % at star 5
16.7 % at no star (New center working on meeting star 1 requirements)

In addition, in FY 2024, the expected upward movement in quality for all centers is at:
33.3 % must meet star 2 in 2026
27.8 % must meet star 2 in 2027
27.8 % must meet star 3 or above in 2026
0 % must meet star 3 or above in 2027

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

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

9.1 Accreditation Support

9.1.1 Accreditation Support:

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

[ ] Yes, providers were supported in their pursuit of accreditation
   a. Licensed center-based programs
   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
[ ] No lead agency support given to providers in their pursuit of accreditation.
[x] N/A. Describe: **Currently there is no accreditation process for child care programs in the CNMI**

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, 2023 to September 30, 2024? $

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

Optional: Use this space to tell us any additional information about how funds were spent
[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.
Not Applicable. The CNMI does not have an accreditation process connected with a national accrediting body.

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:
Not applicable. The CNMI does not have an accreditation process connected with a national accrediting body.

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

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

10.1 High-Quality Program Standards

10.1.1 High-Quality Program Standards:

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

[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
    [ ] Mental health of children
    [x] Learning environment and curriculum
    [x] 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
[ ]Core Knowledge and Competencies
[ ] Other. Describe
[ ] N/A – did not help provider develop or adopt high quality program standards

10.1.2 Spending - High-Quality Program Standards:

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

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

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

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

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

[x] Unable to report total amount spent. Indicate reason: **Part of the spending is incorporated in the Quality Rating and Improvement System spending.**

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.
At a minimum, all programs must meet star 1 indicators to receive CCDF funding. After 2 years of receiving a minimum star 1 or 2 standing, a program must receive a star 3 or higher standing. Programs at stars 3 and above may stay at that star level, provided they meet all Star 1 indicators and continue to meet all standards at their star level - verified through unannounced check-in visits.

Environment Rating Scales ⬚ Programs must receive a minimum score of 3.00 after 2 years of CCDF funding.

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: **100 % of programs met star 1 indicators as a requirement for CCDF certification renewal eligibility in FY2024. Overall, individual star standings are as follows:**

44.4 % at star 1 only (These programs are currently working to reach a higher quality level towards Star 2)
33.3 % at star 2
5.6 % at star 3
0 % at star 4
0 % at star 5
16.7 % at no star (New center working on meeting star 1 requirements)

In addition, in FY 2024, the expected upward movement in quality for all centers is at:
33.3 % must meet star 2 in 2026
27.8 % must meet star 2 in 2027
27.8 % must meet star 3 or above in 2026
0 % must meet star 3 or above in 2027

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

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

11.1 Sustainability funding to child care providers

11.1.1 Sustainability funding to child care providers:

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

[ ] Yes. If yes, describe and check which types of providers were eligible and number served.
    [ ] 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, 2023 to September 30, 2024?

[x] Yes. Describe: **CNMI is working on developing a workforce registry.**
[ ] No

11.2.2 Spending - Data Systems Investment:

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

[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

11.3 Supply and Demand Analysis

11.3.1 Supply and Demand Analysis:

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

[ ] Yes. Describe findings:
[x] No

11.3.2 Spending - Supply and Demand Analysis:

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

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

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

[x] No

11.4 Supply and Demand Initiatives

11.4.1 Supply and Demand Initiatives:

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

[x] Child care deserts
[ ] Infants/toddlers
[ ] Children with disabilities
[ ] English language learners
[ ] Children who need child care during non-traditional hours
[x] Other. Describe: **The System of Support for Home Based providers initiated to address child care deserts in the islands of Rota and Tinian. Currently, there are a total of 15 home based providers in Rota and 8 in Tinian.**

CCDF also has offices in Tinian and Rota to directly work with the community in addressing child care needs.

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?

    [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

11.5 Provider Compensation and Benefits

11.5.1 Spending - Provider Compensation and Benefits:

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

[ ] Financial bonuses (not tied to education levels)
[ ] Salary enhancements/wage supplements
[ ] Health insurance coverage
[ ] Dental insurance coverage
[ ] Retirement benefits
[ ] Loan Forgiveness programs
[ ] Mental Health/Wellness programs
[ ] Start up funds
[x] Other. Describe: **Incentives tied with QRIS are the only ones available for FY2024.**

In FY2023, financial bonuses, salary enhancement/wage supplements, health coverage or retirement benefits were offered as a result of ARPA funding. Since ARPA funding is no longer available, these types of bonuses/incentives/benefits are no longer available for FY2024.
[ ] 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?

[ ] 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

11.6 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, 2023 to September 30, 2024? $**6548912**

[ ] 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.

11.7 Progress Update

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

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

Measurable indicators of progress the state/territory reported in section 7.10.1 of the 2022-2024 CCDF Plan:
Note: The information displayed is from the most recent approved FFY2022-2024 CCDF Plan.
The CNMI will support activities related to improving and easily accessible mental health supports for children, families, and providers. Family engagement and strengthening is also a

major strand in the QRIS system and is offered in a robust and systematic way. Families, providers, and the community will have access to these family engagement and strengthening activities. Base line data will be collected in a systematic way related to these activities. Provider physical and mental health will be continuously supported through training, PD, and incentives. Baseline data will also be collected systematically to identify areas of improvement, gaps, and to identify additional support.

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: **Family Engagement and Strengthening activities.**

CNMI Brain Builders Cafe - 140 total participants break down to:
- 97 community members
- 25 public school educators
-11 home-based parents
- 7 home-based providers

CNMI Brain Builders activities (including symposiums and various outreach) - 844 total participants break down to:
- 209 community members
- 25 public school educators
- 599 mixed parents, providers, partners, and community members
- 11 home-based providers

Mind in the Making Training: 50 total participants break down to:
- 2 community members
- 1 public school educator
- 17 partner agency members
- 19 center-based providers
- 11 center-based parents

The Growing Brain Training
- 13 center-based providers

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. **No serious injuries occurred during the fiscal year and fiscal year refers to the timeframe of this report (Oct. 1, 2023 to September 30, 2024).**

Absent serious injuries or death, CCLP takes no action. The following instances is when when CCLP takes action:
o   The death of a child or staff member as a result of an accident, suicide, assault, or any natural cause while at the facility.
o   An injury to a child or staff member that requires emergency medical attention by a health care professional or admission to a hospital et. al.

Insofar, CCLP has not encountered any serious injuries or deaths in any type of care licensed by CCLP. Hypothetically speaking, if these were to happen, muti-agencies would be involved. For example, any death in the facility will be investigated by the Department of Public Safety and perhaps to a certain degree, by Child Protective Services, the cause of death will be determined by CHCC's medical examiner/pathologist, any findings of criminal act with be dealt with by the CNMI Office of the Attorney General. Basically, CCLP will conduct its independent investigation and generate reports consistent with the findings of the other governmental agencies.

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. **The Child Care Licensing Program receives a minuscule amount, if any, serious injuries in all licensed center**

and home-based facilities let alone death in any of the licensed facilities. Be it as it may, CCLP will put in place an annual review and assessment procedures relative to serious injuries and deaths in all licensed facilities within the confines of the CNMI.

No reports of death in any CCLP licensed homes or centers.

No reports of death or serious injuries in any license exempt home based providers.