Child Care Quality Strategic Planning & Expenditures Guide

Texas Workforce Commission | Child Care & Early Learning Division

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Background

The Child Care and Development Block Grant (CCDBG) provides funding to state, territory, and tribal governments to subsidize child care services (CCS) for children in low-income families. CCDBG requires states to use at least 9 percent of their federal block grant for activities that improve the quality of care, thereby promoting children's healthy development and learning by supporting:

- child care licensing;
- quality improvement systems to help programs meet higher standards; and
- training and education for child care workers.

Local Workforce Development Boards (Boards) must be aware that child care funds allocated by the Texas Workforce Commission (TWC) pursuant to its allocation rules (generally, Texas Administrative Code Chapter 800, Subchapter B, Allocation and Funding, and specifically §800.58), including local public transferred funds and local private donated funds, as provided in Part C, to the extent that they are used for nondirect care quality improvement activities, must be expended in accordance with the Child Care Development Fund (CCDF) State Plan.

Boards must be aware that expenditures certified by a public entity, as provided in Part C, may include expenditures for any quality improvement activity described in 45 CFR §98.53.

Rule Reference: §809.16

Texas Government Code §2308.317(c) requires that at least 2 percent of a Board's annual CCDF allocation be dedicated to activities that support quality improvement. On May 28, 2024, TWC's three-member Commission (Commission) approved increasing funds available for quality improvement to provide an additional 4 percent of each Board's required 2 percent annual allocation, beginning with Board Contract Year 2025 (BCY 2025) for a total of 6 percent of funds allocated.

The purpose of this guide is to provide guidance to Boards regarding the use of CCDF dollars allocated or distributed to local workforce development areas (workforce areas) for activities designed to improve the quality of child care and early learning.

Boards must ensure that priority for the quality funds is given to quality child care initiatives that benefit child care facilities that are working toward Texas Rising Star certification or are Texas Rising Star–certified providers working toward a higher star level.

How to Use This Guide

The *Child Care Quality Strategic Planning & Expenditures Guide* is designed to help Boards with their Child Care Quality (CCQ) activities, plans, and reports.

Boards are required to submit to TWC:

- an annual plan describing strategies for quality activities; and
- corresponding quarterly reports detailing expenditures and outcomes related to funded activities.

This guide is a tool to help Boards plan, execute, evaluate, and report on activities that are both allowable and impactful. This guide is not intended to provide an exhaustive list of potential quality improvement activities. Rather, it is intended to provide a framework and support for strategic, data-driven decision-making (DDDM) and program design.

The first section of this guide provides an iterative approach to strategic planning and continuous improvement.

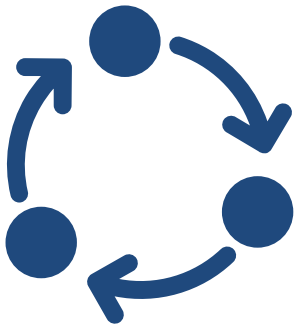
The second section describes the categories of allowable activities, including potential activities and associated outcome measures that Boards may consider.

1. Strategic Planning for Continuous Improvement

1.1 Data-Driven Decision-Making

DDDM is the process of using data to inform decision-making and validate a course of action before committing to it. The Administration for Children and Families (ACF)—the federal division that oversees the CCDF program—published the *Guide to Data-Driven Decision Making*,[1] which describes the requirements of DDDM and the steps for applying DDDM concepts to organizations and service systems. The content in this section has been largely adapted from this public-domain resource.

DDDM can move an organization toward an evidence-based culture that is focused on the future. It promotes decisions based on data, experimentation, and evidence rather than opinions or intuition.



Through the process of DDDM, data is used to assess, test, and improve a program, activity, or strategy. DDDM includes the four iterative stages summarized below. Boards may use these concepts as they make decisions about improving quality.

Formulating Key Questions

The process begins with an organization identifying and clarifying key questions to answer. These questions may address the need to solve a specific problem, learn more about a target population, or improve a program or organizational process.

Collecting and Analyzing Data

Guided by their key questions, organizations identify available data and collect new data as needed. Access to high-quality data is critical.

Communicating Results to Decision-Makers

Results are shared with key decision-makers within and between levels of an organization or broader service system. Dissemination may take place through various communication channels and formats, depending on the information needs of stakeholders.

Refining Processes, Organizations, or Systems

Decision-makers use information gathered during the previous stage to assess gaps in services; strengthen the performance of programs, organizations, or systems; and assess the impact of services on outcomes of interest. As more information is collected, the process continues in an iterative manner, with additional evidence producing new insights and subsequent questions for further data collection and analysis.

[1] James Bell Associates. *Guide to Data-Driven Decision Making: Using Data to Inform Practice and Policy Decisions in Child Welfare Organizations.* Washington, DC: Children's Bureau, Administration for Children and Families, US Department of Health and Human Services, 2018.

1.2 Formulating Key Questions

The first step in DDDM is to formulate specific key questions. What do Boards need to know about their customers, capacities, or resources to determine a course of action? Below are a few examples to consider.

Quantity

- What percentage of child care and early learning programs in a Board's workforce area participated in Board quality initiatives? With which initiatives did the programs engage? Which programs had demand that exceeded the Board's ability to provide services? What percentage of participants was satisfied with or attained positive results due to a Board initiative?
- How many child care and early learning programs are in the workforce area? What proportion is Texas Rising Star–certified? What proportion is Entry Level and actively pursuing Texas Rising Star certification? How many programs received support from their Board? How many of those receiving support attained Texas Rising Star certification or increased their Texas Rising Star level?
- What is the estimated size of the early childhood workforce at CCS programs in the workforce area? At Texas Rising Star–certified programs? How many early childhood educators participate in the Board's professional development activities? In which early learning domains did teachers receive the most and least training? With which initiatives did early childhood educators engage? What percentage showed skill gains or other improvements?
- How many child care programs in the workforce area are engaged in prekindergarten partnerships? Of those engaged in prekindergarten partnerships, how many received support from their Board?

Distribution

- What is the distribution of Texas Rising Star–certified programs across rural versus urban/suburban areas?
- Where are Texas Rising Star–certified programs located in relation to child care deserts? Where are they located in relation to major employers?
- What is the age distribution of subsidized children in Texas Rising Star–certified programs?
- What is the relative distribution of children served in Texas Rising Star–certified programs versus Entry Level programs?

Duration

- How long does it take to onboard new CCS providers into Entry Level?
- How long does it take for new or Entry Level providers to attain Texas Rising Star certification?
- How long does it take for child care and early learning programs to reach Four-Star certification?
- How long do programs remain certified at the Two-Star level or higher?
- When programs lose certification status, how much time does it take for them to become recertified?

Variance

- Which child care and early learning programs quickly achieve Texas Rising Star certification? What are their characteristics?

- What is the difference in Texas Rising Star scores for programs that participate in specific Board quality initiatives and those that do not?
- What are the program and participation characteristics of child care and early learning programs with high levels of satisfaction compared to those with lower levels of satisfaction?

To answer these questions, it is useful to develop conceptual frameworks that explain how a program, service, or organizational activity works and to identify relevant and accurate measures of progress and performance. A theory of change and a logic model (described below) are effective tools for achieving these ends.

A theory of change shows how a proposed service strategy will achieve its long-term goals. The theoretical and logical framework provided by a theory of change is often referred to as the road map behind a project's goals and implementation.

A logic model is a visual tool that operationalizes the goals and activities of a program using the evaluation concepts of inputs, activities, outputs, and outcomes. It is accompanied by the data indicators that will be used to measure and track progress.

1.2.1 Theory of Change

A theory of change describes how a course of action will achieve its goals based on the assumptions of stakeholders, such as policymakers, staff, and managers. It includes the following components:

- Problems and assumptions
- Desired outcomes of strategies to address problems
- Pathways of change between strategies and desired outcomes

Stakeholders should identify assumptions that may require additional evidence to confirm their validity.

To develop a theory of change, stakeholders should work together to understand the problem, how to address it, and how to measure progress. Developing a theory of change requires:

- situation analysis;
- determination of focus and scope; and
- an outcomes chain.[2]

Situation analysis—Situation analysis enables program planners to articulate the nature and extent of the problem, identify causes and contributing factors, and consider the direct and indirect consequences of the problem.

Determination of focus and scope—Stakeholders identify the goals on which the theory of change will focus and the goals that are beyond the theory's focus or scope.

Outcomes chain—An outcomes chain is a tool for articulating the pathways between activities/services and expected outcomes, confirming assumptions, and identifying potential gaps. It lists outcomes using a sequence of "if…then" or "so…that" statements.

[2] Funnell, Sue C., and Patricia J. Rogers. *Purposeful Program Theory: Effective Use of Theories of Change and Logic Models*. San Francisco, CA: Jossey-Bass, 2011.

1.2.2 Logic Model

A logic model translates the theory of change into the language of data collection and evaluation. Logic models may be visualized in linear, cyclical, or other formats and include the following components:

- **Inputs** are the financial, material, and personnel resources needed to implement a program. Common inputs include funding, office space and equipment, information technology (IT), and trained staff.
- **Activities** are the actions that will be implemented in response to the problem or need of the target population. Common participant-level activities include intake assessments, home visits, and family group decision meetings. Common program-level activities include joint case management, trauma-informed service approaches, and parent partnership and/or mentoring. Internal activities (such as staff training) that contribute to the intended outcomes may also be included.
- **Outputs** are the immediate, concrete results of the activities and are typically expressed in quantifiable terms (such as amounts or percentages). Examples include the number of staff trainings and number of customers completing a parenting class.
- **Outcomes** are the changes expected as a result of the activities and may include customer outcomes (such as child and family outcomes) and program and staff outcomes. Customer outcomes are typically categorized in terms of changes in knowledge, skills, and/or behaviors that lead to long-term positive impacts.

1.2.3 Choosing Performance Measures or Indicators

Once a coherent logic model is developed, each output and outcome in the model should be paired with an associated performance indicator or measure. The selection of appropriate measures is one of the most important aspects of DDDM, as the usefulness of data for decision-making largely depends on the validity of the data and the extent to which it accurately reflects the outputs and outcomes it intends to represent. As Coster[3] notes, "The best design and most rigorously executed procedures cannot make up for a poorly chosen measure." Boards may consider the following questions:

- What is the appropriate output or outcome to measure?
- How can the output or outcome be measured?
- Who should or could provide the relevant information?
- When and at what interval should the output or outcome be measured?

When possible, Boards should choose measures that are clear and standardized to enable comparisons across time and within and outside the organization or system. It is important that Boards set realistic performance targets or benchmarks by examining trends in the outcomes of interest or reviewing the relevant research literature; targets may also be set when baseline data becomes available.

[3] Coster, Wendy. J. "Making the Best Match: Selecting Outcome Measure for Clinical Trials and Outcome Studies," *American Journal of Occupational Therapy* 67, no. 2 (2013): 162–170.

1.3 Collecting and Analyzing Data

The theory of change and logic model form the foundation of Boards' data collection and analysis plans. Boards begin by assessing data requirements and considering what data will be meaningful and informative for their organization and stakeholders. Initial questions may include the following:

- What data will illustrate progress?
- What data is most relevant and available?
- What data categories are needed (for example, demographic data, service data, and performance data)?
- What indicators will Boards use to assess progress and change?

1.3.1 Data Quality

The key ingredient to DDDM is high-quality data. The data must be accurate, complete, timely, and actionable.

Accurate—Data collection tools, such as surveys, must provide accurate and reliable measures of changes in knowledge, attitudes, behavior, and other outcomes of interest. When possible, Boards should use tools that are grounded in research and have proven validity and reliability.

Complete—The data must be complete, well-defined, and easily identified.

Timely—The data must be accessible and compatible across data systems so that multiple users may readily view and use it.

Actionable—The data must be actionable so that the desired outcomes may be achieved. It is best Boards establish fidelity metrics to ensure that strategies are implemented as intended and to help identify the need for course corrections to improve implementation.

1.3.2 Data Infrastructure

Boards should assess their data systems and determine whether any improvements are necessary to support DDDM. Boards may consider building a data team or contracting with an entity that works with managers and frontline staff to identify information needs, interpret data, and answer key questions. It is best for Boards to hire or designate staff members or consultants that match their capacity and needs. Small organizations may have only one data analyst, while large organizations may have a team. However, any organization may engage in data collection and analysis with appropriate planning, training, and resources.

A data team may include the following:

- **Data analysts** who collect and enter data, manage databases, complete basic analyses, and conduct monitoring and reporting tasks
- **IT or computer systems specialists** who design, maintain, or modify data systems
- **Evaluators** who are proficient in implementing applied research designs and methodologies, developing logic models and identifying appropriate outputs and outcomes, creating surveys and/or identifying appropriate standardized assessment instruments, preparing data, and conducting quantitative and qualitative data analyses. Evaluators typically have advanced degrees in social sciences, statistics, education, social work, or a related field. Other helpful

experiences include community engagement, development and implementation of programs, and cost analysis.

- **Frontline staff members or supervisors** who provide important background information to interpret data and place it in its appropriate context offer suggestions for making data more understandable and useful and serve as liaisons between the data team and program staff to foster greater buy-in to using data on a regular basis. Although not data analysts or IT specialists, frontline staff members or supervisors are often "super users" of data with a firm grasp of IT, perform basic to intermediate data analysis, and are comfortable with interpreting and discussing data output.

Depending on a Board's structure and resources, other data team members may include:

- a **financial specialist** to determine program and organizational costs and work with an evaluator to implement cost studies; and
- a **data visualization specialist** to create graphs, charts, reports, and other products that are visually appealing, easy to understand, and useful.

1.3.3 Data Collection

Primary Data

Primary data is quantitative or qualitative data that is directly observed or collected from a population, staff, or system. Quantitative data is often collected through surveys, standardized instruments, and assessment forms that have been developed by third parties with specialized clinical training and/or academic experience. These tools can quantify a range of outcomes in child development, program quality, and professional competencies. They can also quantify organizational or system-level outcomes, such as collaboration efforts among stakeholders or effective leadership.

Standardized tools are generally preferred to self-designed tools, as standardized tools have a uniform set of questions and administration procedures, have been "normed" against one or more populations to determine the normal range of responses, and have been evaluated for statistical validity and reliability. The disadvantages of using standardized instruments include their narrow applicability to certain populations or programs, the costs often associated with acquiring them, and the specialized training sometimes needed to administer them.

Examples of Primary Data Sources

Primary data sources may include the following:

- Standardized assessment instruments (for example, Texas Rising Star assessments, child progress monitoring tools, classroom environment measurement tools, kindergarten entry assessments, and child developmental screening tools)
- Surveys (for example, customer satisfaction surveys, provider needs assessments, teacher needs assessments, and surveys of Texas Rising Star staff and other early childhood specialists)
- Focus groups
- Interviews
- Case observations and/or studies
- Meeting notes (for example, information reported at a local early learning coalition or chamber of commerce meeting)

- Child care and early learning program and/or participant data from Board-funded quality initiatives, such as the following:
    - Documented learning gains of participants
    - Participant evaluations of training provided
    - Classroom quality data as measured by Texas Rising Star and/or other evidence-based tools
    - Child care program "iron triangle" metrics
    - Early childhood education (ECE) wage data
    - Rate of teacher turnover and duration of staff tenures in child care
    - Recognized credentials attained
- Child and/or family data from Board-funded quality initiatives, such as the following:
    - Child assessment or progress monitoring data (such as developmental screening or Children's Learning Institute [CLI] CIRCLE Progress Monitoring System results)
    - Rate of continuity of care for children in subsidized care (churn rate)
    - Family income/parent wage data
    - Entered employment rate for parents receiving Initial Job Search Child Care

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Boards should consider building data collection requirements and outcome measures into grants and contracts for quality improvement activities.

Secondary Data

Secondary data is collected by someone other than the user of that data. Secondary data systems are populated and accessed by a range of users—including caseworkers, supervisors, managers, program administrators, researchers, and demographers—and typically include demographic data, case records, participation data, and provider data. Similar kinds of data are available in information systems maintained by other service sectors, such as mental health, child welfare, and education agencies.

Examples of Secondary Data Sources

Secondary data sources may include the following:

- TWC's Child Care by the Numbers (CCBN)
- Texas Child Care Connection (TX3C) reports
- Texas Open Data Portal datasets
- TWC's quarterly CCDF case-level datasets (as reported to ACF on the ACF-801 report)
- Families of children receiving CCS
- Child care facilities
- Child care settings
- Texas Health and Human Services Commission (HHSC) Child Care Regulation (CCR) data, such as licensing, inspection, and compliance data
- CLI Engage data, including information from the following:
    - Texas Rising Star Screening Form/Entry Level Status Dashboard (to identify trends in licensing deficiencies)
    - Texas Rising Star Assessments Dashboard (to identify gaps in performance among certified child care and early learning programs)

    - Individual Continuous Quality Improvement Plans (CQIPs) (to understand program-directed goals)
- The Texas Early Childhood Professional Development System (TECPDS) organizational dashboards for Boards
- The Texas Education Agency (TEA) Texas Public Education Information Resource (TPEIR)
- The Texas Department of Family and Protective Services (DFPS) Day Care Abuse/Neglect Investigations Dashboard
- Demographic data from US Census Bureau available in the American Community Survey and from the Annie E. Casey Foundation KIDS COUNT Data Center
- Data and reports from ACF's Office of Planning, Research, and Evaluation (OPRE)
- Data from local organizations, such as early learning coalition reports and dashboards, economic development reports, and local needs assessments

1.3.4 Soliciting Stakeholder Feedback

Engaging stakeholders is a key step in soliciting data to inform a strategic plan. Boards should engage stakeholders in the planning process and solicit feedback on the impact of funded initiatives to support continuous improvement. The following table lists examples of key stakeholders.

Stakeholder Group	Examples of Stakeholders
Customers	• Local child care and early learning programs (such as Texas Rising Star–certified, Entry Level–designated, or all child care and early learning programs regardless of affiliation with CCS) • Parents (such as parents receiving CCS, parents of children in special populations, such as English-language learners or children with disabilities, or a broader group)
Advocates and community-based organizations	• Local early childhood coalitions (such as Early Matters and Help Me Grow) • Early childhood professional organizations • United Way local chapters • State and local advocacy organizations • Local Family Child Care Networks (FCCNs) • Shared Services Alliances
Education partners	• Colleges and universities • Regional education service centers (ESCs) • Independent school districts (ISDs) and charter schools • Child Care Registered Apprenticeship Programs (RAPs)
Public sector partners	• Regional or local CCR staff • Local government (such as city councils, county judges, and mayors) • Local economic development councils
Private businesses	• Local employers • Employer representatives on the Board • Chambers of commerce

1.4 Data Analysis

1.4.1 Data Cleaning

Data teams must clean data collected at the local level prior to analysis to ensure quality and accuracy. Data cleaning involves the following:

- Identifying and addressing missing and duplicate data, errors, and outliers
- Creating and maintaining a codebook and documenting any changes to the dataset
- Graphing the data
- Running frequency distributions and exploratory descriptive analysis
- Recoding or transforming variables as needed
- Determining whether the data meets the assumptions for planned inferential analyses

Note: Assumptions may include linearity, normality, independence of observations, homogeneity of variance, and so on, depending on analysis type.

Data cleaning may be the most time-consuming part of the data analysis process. Adhering to protocols, training, and monitoring for data entry and collection minimizes the time needed for data cleaning.

1.5 Communicating Results to Decision-Makers

The step in the DDDM process after data analysis is conveying results to key decision-makers. The way data is presented may impact an individual's reactions and the actions taken as a result. Therefore, Boards must convey data in a way that is both understandable and usable.

1.5.1 Identifying the Audience

First, Boards should identify the audience to determine how to interpret, communicate, and present their findings. This includes considering key stakeholders, such as Board members and Board executive staff, who may rely on the information presented to make decisions. Boards may also consider others who might have an interest in the data, assuming that there is permission to share the findings beyond the initial stakeholders. The following is an overview of common audiences in the field, along with their interests, information needs, and presentation preferences:

Board members and executive staff—Board members and executive staff typically want a high-level overview of key findings, with access to in-depth analyses by request. They generally want time to respond to the key points of the results and an opportunity to provide input regarding the content and format of future public presentations. It is recommended that reports for this audience be concise and visually engaging. Boards may begin with an executive summary highlighting the purpose, methods, and results, followed by key recommendations. Reports should include details about the methodology and analyses in an appendix. Oral presentations may highlight key results and include graphics that are easy to interpret.

Middle managers and potential program adopters in other agencies—Individuals in these roles often want more detailed findings to help them manage daily operations or make decisions about program additions or changes. Boards should emphasize results that may have implications on procedures, culture, staff expectations and performance, and customer outcomes. Middle managers and

potential program adopters also want information that may impact program costs with respect to training, supplies, logistics, and personnel.

Supervisors and frontline workers—These stakeholders want to know how the findings may impact their day-to-day casework, workflow, interactions with program participants, and the way they share tasks with their colleagues. Audiences including supervisors and frontline workers will especially benefit from concrete examples and recommendations that may be put into immediate practice.

1.5.2 Communicating Information Frequently

For maximum impact, Boards should present information frequently and in formats that maximize the quality and usability of their findings. Regular progress reports and updates are important, even before final results are ready. It is best to base the format on the information needs, capacity, and availability of the target audience. For example, a 100-page report with detailed program findings may not be helpful to state legislators or department heads, but a one-page summary with infographics highlighting key successes may offer just the right amount of information to inform their decision-making. The following are common formats for communicating information:

Periodic updates and progress reports—Evaluators should actively engage with program staff through the reporting process, whether in recurring meetings or through periodic performance reports. Program data may also be provided in electronic formats, such as weekly or monthly email updates or newsletters.

Data dashboards—It is increasingly common to make data available using dashboards that visually display selected performance and outcome indicators at the aggregate level. Dashboards typically present multiple indicators on a single screen or in a spreadsheet arranged to examine trends over time.

Dashboard content may vary depending on the user and purpose. For example:

- executive dashboards monitor performance indicators;
- analytical dashboards promote data discovery or look for patterns and trends; and
- supervisory dashboards highlight frontline staff members' activities and performance.

1.5.3 Presenting Results

Boards should communicate results as clearly, accurately, and objectively as possible. It is helpful to frame findings in terms of their strength (for example, the rigor of the evidence supporting the claims) and importance (the significance of the claims). Boards should include specific recommendations to maximize a report's usefulness but clearly separate the recommendations from the report's findings and interpretations.

1.5.4 Communicating Unwelcome Findings

Professional ethics require that organizations present findings as fully and accurately as possible, even negative ones that may question a program's effectiveness or show no impact. The following recommendations may be helpful when communicating negative results:

Share the good news first. It is often easier to start a difficult conversation on a positive note, so it is helpful to begin by presenting program strengths or promising outcomes before discussing less desirable results.

Avoid surprises. A best practice is to share potentially negative findings early so stakeholders are not blindsided by a final report or public release of unexpected results.

Talk it through. Many individuals find it easier to accept bad news that is presented verbally. However, sharing negative findings in person or by phone does not mean Boards may leave the findings out of reports and other documents.

Highlight lessons learned. Boards may find it best to remind their audiences that negative or unexpected findings may be as informative as positive ones. It is best to present findings in the context of program development and improvement rather than as final judgment of a program or its staff.

Provide time to process. Finally, it is helpful to allow stakeholders time to digest, explain, and respond to negative findings. Their perspectives may provide different interpretations that may be included in subsequent reporting.

1.5.5 Making Recommendations

Many audiences expect program and policy recommendations based on the results of the DDDM process. Boards should consider the following guidelines when creating recommendations:

- Ensure that recommendations are clearly supported by the data analyses and results.
- Organize recommendations by potential timeline (for example, short-term steps and long-term actions).
- Present multiple options.
- Ask stakeholders to consider the risks and benefits of implementing and not implementing the recommendations.
- Focus on actions that stakeholders have the power and resources to implement.
- Be aware of political and cultural contexts. Some recommendations may not be feasible or acceptable given the political realities in which programs operate or the cultural norms and expectations of individuals who work for or are served by an organization.

1.6 "Rinse and Repeat"

The final step in DDDM is to refine data collection and outcome measures iteratively based on lessons learned and the availability of new information.

DDDM is a cyclical approach. When collecting and analyzing data, Boards should:

- collect data to measure the success of the initiatives previously funded and identify areas for improvement;
- review the goals set forth by each initiative to determine whether the goals were met; and
- analyze data for gaps in services, duplication of services, trends in the workforce area, and opportunities for improvement.

2. Quality Activity & Expenditure Requirements

2.1 Allowable Activities

Each CCQ allowable activity topic applicable to Boards is described in more detail below—including definitions, activity examples, potential measurable outcomes, and other pertinent information—to help Boards identify the quality initiatives that best meet the goals of each Board and the needs of the child care and early learning programs in each Board's workforce area.

2.1.1 Training and Professional Development

Support the training and professional development of the child care workforce.

Early childhood educators who have opportunities to learn new competencies and build their skills are better equipped to understand and help children with language, social–emotional, and cognitive development. Boards may use CCQ funds to provide training and professional development activities on a variety of topics and through a variety of formats, both in person and online.

Boards may provide training and professional development activities (directly, or Boards may partner with an outside organization or individual) that are appropriate and relevant to the age of the children cared for by the child care program, available in Spanish, and at a level sufficient to meet the needs of local child care programs. Training must be delivered by a trainer who meets one of the following Texas Human Resources Code §42.0421(f) qualifications:

- Is registered with the TECPDS Texas Trainer Registry
- Is an instructor who teaches early childhood development or another relevant course at a public or private secondary school or at a public or private institution
- Is a state agency employee with relevant expertise (for example, CCR or state health services)
- Is a physician, psychologist, licensed professional counselor, social worker, or registered nurse
- Holds a generally recognized credential or possesses documented knowledge relevant to the training the individual will provide (for example, an individual with a current child care professional credential, a firefighter who offers training on fire safety, or a county health employee who offers training on immunizations)

Per WD Letter 10-23, Change 1, issued February 15, 2024, and titled "Texas Early Childhood Professional Development System Board Training and Participation—Update," and subsequent issuances, Boards must designate at least one contractor or Board staff member to serve as the Board's TECPDS subject matter expert (SME). The designee should use TECPDS data to help identify local professional development needs. The designee must provide support to both child care programs and Texas Rising Star mentor staff members, including instruction in the use of the TECPDS Workforce Registry and career pathway tools. Additionally, the designee will be charged with oversight of their Board's organizational dashboard. Boards may use CCQ funds to employ their TECPDS SMEs.

Boards may use the following tips to determine which training and professional development activities to fund:

- **Use a DDDM approach.** Boards may leverage data collection and analysis efforts to determine what child care and early learning programs want and need for both the topics covered and the

format in which training is delivered. Building in feedback loops by asking training participants to evaluate the training provided—to support ongoing data collection and continuous improvement—is a best practice. It is helpful to solicit input on needs from teachers as well as program directors and owners.

- **Leverage TECPDS.** A Board may use its TECPDS organizational dashboard to share information on the trainings and trainers available in its workforce area. Dashboards allow Boards to link Board-provided training to the competencies that lead to the attainment of a Child Development Associate (CDA) credential. This helps child care and early learning programs find relevant training while also helping Boards with data collection.
- **Ensure that trainers are qualified.** Boards should ensure trainers meet the requirements of CCR minimum standards as defined in Texas Administrative Code §746.1317(a). Additionally, Boards may require their trainers to be registered in the TECPDS Trainer Registry, which ensures that each trainer has professional experience and skills in child care and early learning topics and has received training on adult learning.
- **Consider complimentary statewide initiatives.** Boards should consider statewide quality improvement activities funded directly by TWC (such as the T.E.A.C.H. scholarships provided through the Texas Association of Education of Young Children to child care educators pursuing bachelor's degrees, associate's degrees, or CDA credentials).
- **Leverage current professional development tools.** Free or reduced-cost online professional development is available to child care and early learning programs through Texas A&M University AgriLife Extension child care online training courses. Boards may consider working with Texas A&M University AgriLife to purchase courses for local child care and early learning program staff or provide reimbursement to programs with staff members who participate in specific courses.
- **Tie activities to career pathways.** Boards should consider professional development and training activities in the context of career pathways to promote and support child care and early learning professionals. For example, when funding CDA credential classes, Boards may require that coursework be provided by an accredited higher education institution to maximize transferability of credits into degree programs.
- **Consider the different needs of some child care programs.** Boards should consider needs that are particular to certain programs or communities, such as teachers who are non-English speakers or programs with very small staffs such as home-based providers. For example, Boards may consider offering small grants to home-based child care programs that compensate caregivers for time spent in professional development.

Example Activity	Example Outcome Measures
Providing Group Training Sessions (See Appendix A for examples of topics.)	• Participant pretests and posttests to assess knowledge and/or skill gains • Training evaluation results (customer satisfaction) • Number/percent of participating child care and early learning programs that show increased scores in relevant Texas Rising Star categories

Example Activity	Example Outcome Measures
Offering Financial Incentives for Staff • Bonuses and/or stipends for completed professional development • Scholarships for credential attainment (CDA, AA/AS, and BA degrees in ECE-related fields) • Reimbursement for training and professional development activities	• Number/percent of child care and early learning programs receiving staff educational assistance that show increased scores in CCQ Category 1 (Director and Staff Qualifications) • Credential attainment rate
Reimbursing Release Time and/or Substitute Coverage • Reimbursement for teacher release time and/or substitute coverage to support child care staff completing training and professional development	• Compliance with CCR ongoing training requirements for child care staff • Number of training hours completed for child care and early learning programs receiving assistance versus those that do not • Number/percent of child care and early learning programs receiving staff educational assistance that show increased scores in CCQ Category 1 (Director and Staff Qualifications) • Credential attainment rate
Providing Financial Incentives for Master Teachers and/or Coaches • Bonuses and/or stipends for lead staff at child care and early learning programs that provide mentorship and/or coaching to teachers in training, such as: ➢ high school students enrolled in ECE Career and Technology Education (CTE); and ➢ apprenticeship program participants.	• Credential attainment rate of individuals receiving coaching • Rate of staff retention and/or turnover at participating child care and early learning programs • Number of students and/or apprentices participating and duration of participation • Participant evaluations for: ➢ master teachers and/or coaches; ➢ students and/or apprentices; and ➢ child care program directors.
Facilitating Peer Learning Communities (PLCs) • Facilitated child care and early learning program PLCs for directors • Facilitated child care and early learning program PLCs for teachers	• Number/percent of child care and early learning programs participating in PLCs that show increased scores in relevant Texas Rising Star categories • Rate of child care and early learning programs attaining and/or maintaining Texas Rising Star certification • Rate of compliance with CCR standards • PLC evaluations (for example, customer satisfaction)

2.1.2 Texas Rising Star

Develop, implement, or enhance a quality rating and improvement system (QRIS) for child care and early learning programs.

A QRIS is a systemic framework to assess, improve, and communicate the level of quality in child care and early learning programs. Texas Rising Star is Texas' QRIS. Boards may use CCQ funds for supports that help child care and early learning programs achieve, maintain, or increase their certification levels.

Boards may use the following tips to determine which Texas Rising Star activities to fund:

- **Leverage CLI Engage data.** Boards should leverage data available through CLI Engage to identify areas of need related to participation in Texas Rising Star. This includes individual child care and early learning programs' CQIPs as well as the Engage Texas Rising Star reports that aggregate Texas Rising Star categorical scoring data and help Boards identify trends.
- **Establish feedback loops.** Boards should seek feedback from child care and early learning programs on the support they receive, including input on the mentoring and coaching provided.
- **Consider parents as a key driver of quality improvement.** Parent outreach and education may help parents be more informed customers. In turn, parents may influence child care and early learning programs to improve the programs' level of quality.

Example Activity	Example Outcome Measures
Supporting Texas Rising Star Staff • Personnel costs (such as salary, benefits, and travel) • Professional development • Membership in professional organizations for staff members who work directly with child care and early learning programs	• Mentor microcredential—badge attainment • Number of child care and early learning programs receiving mentoring assistance that attain, maintain, or increase certification levels • Number of child care and early learning programs receiving mentoring assistance that show increased scores in CCQ Category 2 (Teacher–Child Interactions) • Provider-reported satisfaction with the Texas Rising Star program and services

Example Activity	Example Outcome Measures
Providing Resources and Equipment for Programs • Furniture (such as developmentally appropriate–sized tables, chairs, and shelves; adult-sized chairs; storage bins and closets; and carpets and rugs) • Curriculum or teacher planning resource books • Learning materials (such as books, manipulatives, musical instruments, dramatic play items, science items, math items, puzzles, easels, and technology) • Outdoor equipment (such as playscapes, shade covers, gross motor materials, storage equipment, and infant strollers) • Outreach materials to identify the child care and early learning program as Texas Rising Star–certified (such as printed posters, brochures, banners, yard signs, and window clings) • One-time or periodic stipends directly to child care and early learning programs to incentivize participation in Texas Rising Star and continuous quality improvement	• Number of child care and early learning programs receiving materials and/or equipment that attain, maintain, or increase certification levels • Child care and early learning programs' attainment of specific CQIP goals • Number of child care and early learning programs receiving mentoring assistance that show increased scores in CCQ Category 4 (Indoor/Outdoor Learning Environments) • Provider-reported satisfaction with the Texas Rising Star program and services
Performing Parent Education and Outreach • Parent cafés or other family-focused events • Printed outreach and educational materials (such as brochures, posters, and postcards) • Promotional spots (such as web banner ads, optimized sponsored links, social media, radio, and television) • Enhancements to the Board's child care customer education website (such as search engine optimization, mobile device support, and user-centered design)	• Number of children enrolled in Texas Rising Star–certified programs • Number of child care and early learning programs pursuing Texas Rising Star certification • Parent satisfaction as measured by customer surveys • Web page analytics • Data collected by asking customers how they heard about Texas Rising Star

2.1.3 Infant & Toddler Activities

Improve the supply and quality of child care for infants and toddlers.

Eighty percent of the human brain develops in the first three years of life, making early learning experiences for babies and toddlers among the most influential factors in child outcomes. CCDF

requires states to expend at least 3 percent of the block grant on activities designed to improve child care and early learning for infants and toddlers.

Boards have flexibility to determine how to expend their CCQ set-aside funding (set at 4 percent as of BCY 2023) and are encouraged to consider the specific needs of infants and toddlers in their workforce areas and to plan activities that target improvements for these children.

Per WD Letter 25-23, issued December 4, 2023, and titled "Local Participation in the Texas Infant Toddler Specialist Network," and subsequent issuances, Boards must designate at least one contractor or Board staff member to serve as the Board's Infant Toddler Specialist. Boards must ensure that Infant Toddler Specialists are responsible for mentoring and training child care program staff serving infants and toddlers, particularly classroom teachers, and providing technical assistance and cross-training on infant and toddler-focused topics to local Texas Rising Star mentors who are not certified Infant-Toddler Specialists. The designee must complete the required Infant Toddler Specialist training through the Children's Learning Institute's (CLI) ITSN program, be actively involved in ongoing CLI-facilitated Infant Toddler Specialist professional learning communities and attain and maintain Texas Infant-Toddler Specialist certification. Boards may use CCQ funds to employ their Infant Toddler Specialists.

Boards may use the following tips to determine which infant and toddler activities to fund:

- **Understand the current supply of quality infant and toddler care.** Boards should consider dashboard data from the Texas Child Care Availability Portal to gauge the availability of child care for infants and toddlers in their workforce area. Boards may also leverage local and/or state needs assessments that examine supply and demand for high-quality infant and toddler child care.
- **Partner with other organizations serving infants and toddlers.** Boards may coordinate with Early Childhood Intervention (ECI) providers, local Help Me Grow chapters, Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) offices, and other organizations serving very young children to collaborate on shared needs and activities.

Example Activity	Example Outcome Measures
Hosting Group Training Sessions Specific to Infant/Toddler Early Care and Education (See Appendix A for examples of topics.)	• Participant pretests and posttests to assess knowledge and/or skill gains • Training evaluation results (customer satisfaction) • Number/percent of child care and early learning programs participating in group training that show increased scores in relevant Texas Rising Star categories
Leveraging the Texas Infant-Toddler Specialist Network (ITSN) • Incentives for Texas Rising Star mentors and other ECE professionals in the workforce area to become an Infant Toddler Specialist	• Number/percent of child care and early learning programs with infant/toddler teachers engaged with ITSN that show increased scores in CCQ Category 2 (Teacher–Child Interactions)

Example Activity	Example Outcome Measures
	• Number of training hours received through ITSN coaching • Participant pretests and posttests to assess knowledge and/or skill gains
Providing Developmental Screening Support • Formal screening tools such as Ages & Stages Questionnaires (ASQ) or similar to child care and early learning programs • Training on administering developmental screening tools, interpreting results, communicating results to parents, and identifying appropriate referral resources	• Child developmental screening results (for example, number of children identified as on track or number with potential delays identified for referral and/or additional classroom support)
Providing Peer Learning Communities (PLCs) • Facilitate child care and early learning program PLCs for infant/toddler teachers • Facilitate PLCs specific to home-based child care programs that serve infants and toddlers	• Number/percent of child care and early learning programs participating in PLCs that show increased scores in relevant Texas Rising Star categories • Rate of child care and early learning programs attaining and/or maintaining Texas Rising Star certification • Rate of compliance with CCR standards • PLC evaluations (customer satisfaction)
Supplying Resources and Equipment—Infant/Toddler–Focused • Furniture and equipment (such as cribs, changing tables, child-sized tables and chairs, high chairs, adult rocking chairs, strollers, car seats, and bottle warmers) • Learning materials (such as plush toys, gross motor climbers, push-and-pull toys, manipulatives, puzzles, and books) • Curriculum designed for infants and toddlers	• Number of child care and early learning programs receiving infant/toddler–focused materials and/or equipment that attain, maintain, or increase certification level • Child care and early learning programs' attainment of specific CQIP goals related to infant/toddler classrooms • Number of child care and early learning programs with infant/toddler teachers receiving mentoring assistance that show increased scores in CCQ Category 2 (Teacher–Child Interactions) or CCQ Category 4 (Indoor/Outdoor Learning Environments) • Provider-reported satisfaction with the Texas Rising Star program and its services
Supporting Supply-Building—Infant/Toddler–Focused	• Increased CCS enrollment of infants and toddlers (for example, within the workforce area or within specific counties, ZIP codes, census tracts, and so on)

Example Activity	Example Outcome Measures
• Implementation of contracted slots to increase the availability of infant/toddler care for CCS scholarships • Implementation or support for FCCNs for home-based child care programs that serve infants and toddlers • Incentive payments per additional infant and/or toddler slot created	• Increased availability of parental choice for infant/toddler care (for example, more home-based care options, choices that align with family cultures, and so on)
Providing Consumer Education • Transparent and easy-to-understand consumer information for families about high-quality infant and toddler care	• Increased parent knowledge • Increase in enrollment in quality programs

2.1.4 Health & Safety

Support compliance with state requirements for licensing, inspection, monitoring, training, and health and safety.

Ensuring that child care and early learning programs meet the basic health and safety requirements of CCDF is also an important objective for CCQ funds. Boards have flexibility in using CCQ funds to support an array of child care and early learning program needs designed to support safe, healthy, and developmentally appropriate child care and early learning settings and to help programs meet CCR licensing standards.

Boards may use the following tips to determine which health and safety activities to fund:

- **Use a DDDM approach.** Leverage data collection and analysis efforts to determine what child care and early learning programs want and need. Boards should review data from the Engage Texas Rising Star reports related to Entry Level designation and Texas Rising Star assessment data. Additionally, Boards may leverage HHSC Child Care Licensing (CCL) data from the Texas Open Data Portal to identify trends or patterns in CCR licensing deficiencies cited in their workforce area.
- **Build in feedback loops.** Boards must solicit input on health and safety needs from teachers, child care and early learning program directors and owners, Texas Rising Star staff, and parents. Boards should seek stakeholder feedback on previously funded health and safety expenditures and initiatives.
- **Collaborate with local or regional CCR staff.** Boards may coordinate with local or regional CCR representatives to better understand the frequently cited health and safety deficiencies in the workforce area and what strategies may best be implemented to address them.
- **Leverage state and local resources that address child care health and safety.** Boards should consider what resources are already freely available from the state or locally. For example, Texas A&M AgriLife Extension offers free and low-cost online training for child care and early

learning programs, including the preservice training hours required for child care teachers and caregivers in Texas.

Example Activity	Example Outcome Measures
Training Staff (Specific to Health/Safety Standards and Licensing Topics) • Infant/child first aid and CPR • Requirements related to transporting children • Contagious disease policies and procedures • Safe food handling • Emergency and disaster planning and response • Requirements for handling, storing, and disposing of hazardous materials and biological contaminants	• Compliance with CCR ongoing training requirements for child care program staff • Number of health and safety incidents reported/self-reported to CCR • Number of health and safety–related licensing deficiencies cited by CCR • Number/percent of child care and early learning programs receiving staff educational assistance that show increased scores in CCQ Category 3 (Program Administration) • Participant pretests and posttests to assess knowledge/skill gains • Training evaluation results (customer satisfaction)
Providing Health and Safety Materials and/or Equipment • Child restraint devices/safety equipment for child care program transportation • Building access control systems • Video monitoring equipment • Automated external defibrillators • Personal protective equipment (PPE)	• Number of health and safety incidents reported/self-reported to CCR • Number of health and safety–related licensing deficiencies cited by CCR • Number/percent of child care and early learning programs receiving staff educational assistance that show increased scores in CCQ Category 3 (Program Administration) • Parent and/or provider feedback loops (for example, customer satisfaction surveys)
Offering Support for Child Care Health Consultants (CCHCs) • Support for Board and/or contractor staff to become recognized CCHCs • Reimbursement for fees charged to child care and early learning programs by private CCHCs	• Number/percent of child care and early learning programs receiving staff educational assistance that show increased scores in CCQ Category 3 (Program Administration) • Number of health and safety training hours provided through CCHCs • Number of health and safety incidents reported/self-reported to CCR • Number of health and safety–related licensing deficiencies cited by CCR

2.1.5 Evaluation

Evaluate the quality of child care programs in the state, including how programs positively impact children.

Program-level, classroom-level, and individual child assessments can help measure specific areas of practice and child development to provide information on areas of strength and weakness. Boards should consider evidence-based assessment and evaluation tools that may inform professional development activities, cross-program referral practices, and child care program quality improvement.

Boards may use the following tips to determine which evaluation activities to fund:

- **Consider how evaluation activities can inform strategic planning.** Boards should consider evaluation activities that may provide data on current activities, drive quality improvement, and inform future investments. The results of evaluation activities may be especially informative for the design of future training and professional development initiatives.
- **Select the right tool.** Boards should use tools that are evidence-based. Child assessment tools must be developmentally appropriate. Child care and early learning program or classroom evaluation tools must be appropriate for the environment being assessed (for example, program or classroom age group, center or home-based setting, and primary language or culture of children and program staff).

Example Activity	Example Outcome Measures
Supporting Evidence-Based Child Assessments • Child progress monitoring instruments • Developmental screening tools • Language development assessments	• Child progress measured through a series of point-in-time assessments (for example, beginning of year, midyear, and end of year) • Number/percent of child care and early learning programs with infant/toddler teachers engaged with ITSN that show increased scores in CCQ Category 2 (Teacher–Child Interactions) • Developmental screening results (for example, number of children identified as on track and number with potential delays identified for referral and/or additional classroom support)
Providing Evidenced-Based Early Learning Environment Evaluations • Classroom environment assessment tools • Program-level environment evaluations	• Effective practices as measured through relevant Texas Rising Star scores/measures
Offering Custom Program Evaluations or Studies of Local Quality Activities	• Outcome measures specific to the design of evaluation and activity being evaluated, with a final report submitted to TWC

2.1.6 National Accreditation Support

Support child care and early learning programs in the voluntary pursuit of accreditation.

Boards may support child care and early learning programs and homes in the voluntary pursuit of national accreditation by a national accrediting body that has demonstrated, valid, and reliable program standards of quality.

Texas Rising Star recognizes accreditations from the following nationally accredited organizations:

- National Association for the Education of Young Children (NAEYC)
- National Association for Family Child Care (NAFCC)
- National Early Childhood Program Accreditation (NECPA)
- National Accreditation Commission for Early Child Care and Education Programs (NAC)
- Council on Accreditation (COA)
- Cognia Quality Standards for Early Learning Schools (QELS)
- American Montessori Society (AMS)
- Association Montessori International (AMI/USA)
- Middle States Association (MSA)

Boards may use the following tips to determine which national accreditation support to fund:

- **National accreditation support may be used as a strategy to build the supply of high-quality child care.** Supporting efforts to achieve national accreditation may expand the number of high-quality child care and early learning programs in a Board's workforce area and incentivize high-quality programs to participate in the CCS program.
- **Consider accreditation data from TWC.** TWC provides Boards with various national accrediting bodies' certification lists to use as a reference in identifying potential child care and early learning programs that are not yet in an agreement to participate in CCS and that Boards may outreach and incentivize with reimbursement of reaccreditation fees.
- **Ask child care and early learning programs what help they need related to national accreditation.** Boards may conduct needs assessments of their child care and early learning programs to obtain information about what the programs may need to help obtain or maintain national accreditation. Texas Rising Star mentors may also note trends that they have observed and/or assist in identifying which child care and early learning programs may be good candidates to receive support.

Boards may use the following tips to determine which national accreditation support to fund:

- **National accreditation support may be used as a strategy to build the supply of high-quality child care.** Supporting efforts to achieve national accreditation may expand the number of high-quality child care and early learning programs in a Board's workforce area and incentivize high-quality programs to participate in the CCS program.
- **Consider accreditation data from TWC.** TWC provides Boards with various national accrediting bodies' certification lists to use as a reference in identifying potential child care and early learning programs that are not yet in an agreement to participate in CCS and that Boards may outreach and incentivize with reimbursement of reaccreditation fees.

- **Ask child care and early learning programs what help they need related to national accreditation.** Boards may conduct needs assessments of their child care and early learning programs to obtain information about what the programs may need to help obtain or maintain national accreditation. Texas Rising Star mentors may also note trends that they have observed and/or assist in identifying which child care and early learning programs may be good candidates to receive support.

Example Activity	Example Outcome Measures
Providing Financial Incentives • Reimbursement for accreditation or reaccreditation fees • Stipends for child care and early learning programs pursuing or attaining a national accreditation	• Number/percent of child care and early learning programs that pursue and obtain national accreditation • Number of child care and early learning programs that maintain accreditation and obtain reaccreditation
Offering Technical Assistance to Support Pursuit of National Accreditations • Technical assistance/mentoring support to programs in completing necessary paperwork, portfolios, classroom observations, and other accreditation requirements	• Number/percent of child care and early learning programs that receive technical assistance and that pursue and obtain national accreditation • Number of child care and early learning programs that receive technical assistance and that maintain accreditation and obtain reaccreditation

2.1.7 Other Allowable Activities

Improve the quality of child care services supported by outcome measures that improve child care and early learning program preparedness, child safety, child well-being, and/or kindergarten entry.

Boards may use CCQ funds for a limited list of activities that fall under the "Other" category. Examples of allowable activities are listed in the table below.

Boards must focus activities within the "Other" category on one or more of the following:

- Supporting shared services within the community
- Supporting public–private prekindergarten partnerships
- Supporting supply-building efforts
- Supporting the mental health of staff, children, and families served

Boards may use the following tips to determine which other allowable activities to fund:

- **Leverage prekindergarten partnership presumptive eligibility data from TWC.** Boards may use the list of children who are enrolled in the CCS program and who may qualify for public school prekindergarten based on age, income, and/or home language spoken. TWC sent the initial dataset in September 2022 and provides it on an ongoing basis at least twice a year.

- **Ask child care and early learning programs and school districts what help they need with prekindergarten partnerships.** Consider surveying Texas Rising Star Three- and Four-Star child care and early learning programs as well as school districts and charter schools to determine what needs they have related to prekindergarten partnerships and whether CCQ funds may help them.

Example Activity	Possible Outcome Measures
Supporting Shared Services • Development or support of new alliances in workforce areas without existing hubs • Use of substitute pools • Purchase of child care management software and related hardware (such as Wi-Fi hotspots)	• Improvement of "iron triangle" metrics, measured through child care management software or pre- and post-surveys • Optimization of administrator time, measured through time studies or pre- and post-surveys • Decrease in CCR deficiencies
Supporting Prekindergarten Partnerships • Support and/or incentives for child care and early learning programs that participate in formal partnerships where children are dually enrolled • Support and/or incentives for child care and early learning programs that participate in informal partnerships that support collaboration and shared resources	• Increased partnership between ISDs, charter schools, and local child care and early learning programs • Expansion of prekindergarten partnerships to serve three-year-old children • Increased school readiness
Supporting Supply-Building Efforts • Wage supplementation and recruitment/retention bonuses for child care program staff • Stabilization or expansion funding to support existing child care and early learning programs • Startup funding to support the establishment of new child care and early learning programs	• Increase in licensed capacity in targeted area • Number of classrooms opened or reopened in targeted area • Improved retention of child care and early learning program staff • Increased recruitment of new child care and early learning program staff
Providing Mental Health Support • Infant and early childhood mental health (IECMH) consulting • Staff wellness resources **Note:** If focused on children ages zero to three, IECMH consulting must be reported under Infant/Toddler Activities.	• Increase in number of children identified and referred to ECI/Child Find • Increased wellness reported by child care and early learning program staff • Improved retention of child care and early learning program staff

2.2 Activities That Are Not Allowed

- **Direct child care services**—CCQ funding is explicitly distributed to Boards for quality improvement activities. Activities that provide for direct child care services must adhere to CCDF and TWC Chapter 809 Child Care Services rules eligibility requirements.
- **Construction or major renovation**—CCDBG disallows the use of CCDF funding for construction or major renovation. For more information, refer to 45 CFR §98.56(b).
- **Promotional materials**—Except for outreach and communication resources to educate child care and early learning programs and parents, the purchase of promotional materials with CCQ funds is not allowed. Examples of promotional items that are not allowable include, but are not limited to, the following:
    - Awards, such as trophies and plaques
    - "Swag," such as branded office supplies or tote bags
- **Food and beverages**—Unless reasonable and necessary, CCQ funds may not be expended on food and beverages.

2.3 Tips for Boards' Annual CCQ Plans

TWC will publish each Board's plan and subsequent quarterly reports on the TWC website. Publishing the plans and related reports supports transparency and helps stakeholders understand what investments are being made across the state to improve the quality of child care and early learning.

As required by WD Letter 16-24, issued October 8, 2024, and titled "Child Care Quality Funds Expenditure Plan and Report," and subsequent issuances, Boards must complete the table in the Annual Expenditure Plan tab in the Board Child Care Quality Expenditure & Activity Report Template, which describes each Board's plans for quality activities for the Federal Fiscal Year (FFY), which runs from October 1–September 30. For step-by-step support in completing the CCQ Plan, Boards should refer to the Child Care Quality Expenditure & Activity Report Desk Aid. Boards report all nondirect care quality improvement activities, funded through any TWC funding source.

Boards must consider the following when completing the **Annual Expenditure Plan** tab:

- **Plan Narrative**—Each Board must describe the Board's overall plan and strategies, including:
    - how needs were assessed and activities determined;
    - how the activities align with the Board's Strategic Plan; and
    - how the Board will measure the success of the planned activities.
- **Who implements the expenditures**—Boards must indicate who implements the CCQ child care funding by selecting **Board**, **Child Care Contractor**, or **Both**. A short narrative of how expenditures are coordinated is required if **Both** is selected.
- **Activity Type/Name**—Boards must use a simple title or label that will be easily understood by external readers for the planned activity or activity type.
- **Funding type**—Boards must indicate which type of funding will be used to implement the activity conducted.
- **Planned Expenditures**—Boards must include planned, estimated expenditures for each category for activities planned during the plan period (October 1–September 30), including:
    - Texas Rising Star staff funding;
    - any planned use of Child Care Certified Local Match (CCM) funds for quality activities;

- any funds from the overlapping CCQ BCY that are targeted for expenditure during the new plan period (expenditures that occur in October); and
- any funds from the prior CCQ BCY that TWC approved for use in the new plan period.

Note: When supplemental quality funds are distributed, TWC will issue guidance to Boards regarding planning and reporting requirements. TWC may require Boards to report those funds on the CCQ Quarterly Report or may provide a different mechanism for reporting.

- **Narrative Description of Planned Activities**—Each Board must provide a concise description that will be meaningful to external readers including information such as:
  - the goal of the activity;
  - how the Board will measure success or impact;
  - the targeted type and number of participants/recipients;
  - the partners or collaborators that will support the activity; and
  - how the activity supports or complements other state or local quality improvement efforts.

2.4 Reporting Timelines

Boards must submit the completed expenditure plan and subsequent quarterly report to BCM@twc.texas.gov on the following schedule:

Report	Date Due
Expenditure Plan	October 30
Quarter 1: October 1–December 31	January 30
Quarter 2: January 1–March 31	April 30
Quarter 3: April 1–June 30	July 30
Quarter 4: July 1–September 30	October 30

Appendix A: Examples of Professional Development Topics

CCQ Category 1—Professional Development (General/All Ages)

Educator Topics

- Child development and best practices for supporting early learning domains
- School readiness and the Texas Prekindergarten Guidelines
- Child progress monitoring/assessment
- Developmental screening
- Positive discipline/addressing challenging behaviors
- Family engagement
- Indoor/outdoor environments
- Curriculum and lesson planning
- Classroom and schedule management
- Special needs and inclusive care
- English language/dual-language learners
- Culturally responsive environments

Program Administration and Business Practices

- Child care program administration and business practices
  - The "iron triangle" (enrollment management, fee collection and managing cash flow, and understanding cost per child)
  - Personnel management (staff supervision, recruitment, hiring and retaining talent, and managing difficult employees)
  - Program branding and marketing
  - Program documentation and organizational systems
- Leadership practices
  - Cultivating a positive climate
  - Coaching and mentoring
  - Developing staff leadership
- Family engagement
- Continuous quality improvement
- Understanding implicit bias
- Preventing suspension and expulsion in child care and early learning programs

CCQ Category 2—Infant/Toddler Specific Professional Development

- Child development in the first three years and the Texas Infant, Toddler, and Three-Year-Old Early Learning Guidelines
- Developmental screening (infant-and-toddler–focused)
- Safe sleep practices and sudden infant death syndrome (SIDS)
- Early brain development and shaken baby syndrome
- General professional development topics tailored to infant/toddler teachers, such as:
  - positive discipline/addressing challenging behaviors (for example, biting);

- infant and toddler classroom setup and schedule management; and
- family engagement with parents of infants and toddlers.

CCQ Category 4—Health and Safety Standards Professional Development

- First aid and CPR
- Handling, storing, and disposing of hazardous materials and biological contaminants
- Safe food handling
- Nutrition standards
- Transportation of children
- Contagious disease policies and procedures
- Emergency response and disaster planning

Appendix B: Sample Surveys/Assessment Instruments

- Early Learning Program Needs Assessment—Sample
- Family Needs Assessment—Sample
- Texas Rising Star Staff Needs Assessment—Sample

Early Learning Program Needs Assessment—SAMPLE

[Board name] is seeking input from our early learning programs about potential initiatives, technical assistance, and professional development opportunities. Please complete the needs assessment survey below and return it to your Workforce Solutions Office at **[address/email]** by **[date]**.

All information will be used to improve the work and the initiatives that **[Board name]** implements. Neither participation in this survey nor the answers provided will affect your Child Care Services (CCS) Agreement or Texas Rising Star certification.

Professional Development

Indicate below the professional development topics in which your program is interested or needs support (check all that apply):

- ☐ Teacher–child interactions
- ☐ Guidance and discipline
- ☐ Health and safety
- ☐ Children with special needs
- ☐ Parent/community involvement
- ☐ Curriculum
- ☐ Supervision
- ☐ Child assessments
- ☐ Leadership and management skills
- ☐ Business management skills
- ☐ Other (please describe): _____ _____

Materials

Indicate below which group or groups in your program would benefit from receiving equipment, furniture, and/or learning materials (check all that apply):

- ☐ Infants (0–17 months) and toddlers (18–35 months)
- ☐ Preschool-age children (3–5 years)
- ☐ School-age children (6–12 years)
- ☐ Outdoor learning environments

Other Initiatives

Indicate below the initiatives for which your program would be interested in receiving additional support, resources, or technical assistance (check all that apply):

- ☐ Shared services
- ☐ Public–private prekindergarten partnerships
- ☐ Other (please describe): _____

Thank you for your time and assistance as we work to help our early learning programs receive the support and information they want and deserve.

Family Needs Assessment—SAMPLE

[Board name] is seeking input from our families and community members about potential resources, technical assistance, and other services. Please complete the needs assessment survey below and return it to your Workforce Solutions Office at **[address/email]** by **[date]**.

All information will be used to improve the work and initiatives that **[Board name]** implements. Neither participation in this survey nor the answers provided will affect your Child Care Services (CCS) Agreement.

Services

Indicate below the services in which your family is interested in learning about or for which your family needs additional support and resources (check all that apply):

- ☐ CCS
- ☐ Job search or WorkInTexas.com assistance
- ☐ Food assistance
- ☐ Housing assistance
- ☐ Services for children with special needs
- ☐ Parenting resources
- ☐ Health services (medical, dental, and vision)
- ☐ Mental health services
- ☐ Parent support group
- ☐ Other (please describe): _____

Depending on the services for which you indicated needing more information, **[Board name]** may find it necessary to contact you. Please indicate below whether you would like **[Board name]** to contact you:

- ☐ No, **[Board name]** does not have permission to contact me regarding my answers.
- ☐ Yes, **[Board name]** has permission to contact me regarding my answers to offer further assistance and/or gather more information. My preferred method of contact is:
    - ☐ Phone call (name and phone number): _____
    - ☐ Text message (name and phone number): _____
    - ☐ Email (name and email address): _____
    - ☐ Other: _____

Thank you for your time and assistance as we work to help our families and communities receive the support and information they want and deserve.

Texas Rising Star Staff Needs Assessment—SAMPLE

[Board name] is seeking input from our Texas Rising Star staff about what child care and early learning programs may need to provide high-quality care and education, as well as what staff may need to support them, such as specific materials or equipment, professional development, and other resources. Please complete the needs assessment survey below and return it to your supervisor at **[email]** by **[date]**.

All information will be used to improve the work and initiatives that **[Board name]** implements. Neither participation in this survey nor the answers provided will affect your job performance evaluation.

Professional Development

Indicate below the professional development topics in which the child care and early learning programs you work with would be interested or need support (check all that apply):

- ☐ Teacher–child interactions
- ☐ Guidance and discipline
- ☐ Health and safety
- ☐ Children with special needs
- ☐ Family/community involvement
- ☐ Curriculum/lesson planning
- ☐ Supervision
- ☐ Child assessments
- ☐ Leadership and management skills
- ☐ Business management skills
- ☐ Mental health support
- ☐ Other (please describe): _____

Indicate below the professional development topics in which you would be interested or need support to assist the child care and early learning programs with which you work (check all that apply):

- ☐ Teacher–child interactions
- ☐ Curriculum/lesson planning
- ☐ Child Care Regulation (CCR) minimum standards
- ☐ Inclusive care
- ☐ Family/community involvement
- ☐ Curriculum
- ☐ Supervision
- ☐ Child assessments
- ☐ Leadership and management skills
- ☐ Business management skills
- ☐ Coaching and mentoring
- ☐ Mental health support
- ☐ Other (please describe): _____ _____

Materials/Equipment

Indicate which types of materials and/or equipment are most needed to support the child care and early learning programs you work with in providing high-quality care and education (check all that apply):

- ☐ Gross motor materials (indoor)
- ☐ Gross motor materials (outdoor)
- ☐ Puzzles, manipulatives, games
- ☐ Curriculum
- ☐ Multicultural/non-stereotypical materials
- ☐ Furniture or rugs
- ☐ Playground equipment or shades
- ☐ Books (for children)
- ☐ Resource books (for teachers)
- ☐ Health and safety materials
- ☐ Other (please describe): _____ _____

Resources

Indicate below the resources you and/or the child care and early learning programs with which you work are interested in learning more about or for which additional support and resources are needed (check all that apply):

- ☐ TWC Child Care Services (CCS)
- ☐ TWC Children with Disabilities program

- ☐ Using WorkInTexas.com for job postings and hiring and retaining staff
- ☐ Government assistance (Temporary Assistance for Needy Families [TANF], WIC, Medicaid, Medicare)
- ☐ Children and Adult Care Food Program (CACFP)
- ☐ Child Care Regulation (CCR)
- ☐ Infant and early childhood mental health (IECMH) resources
- ☐ Parenting and family support
- ☐ Early Childhood Intervention (ECI)
- ☐ Shared services within the community
- ☐ Public–private partnerships (three-year-olds and prekindergarten)
- ☐ Child care apprenticeship programs
- ☐ Community resources and events
- ☐ Other (please describe):

Thank you for your time and assistance as we work to help our child care and early learning programs and the staff members who support them receive the support and information they want and deserve.