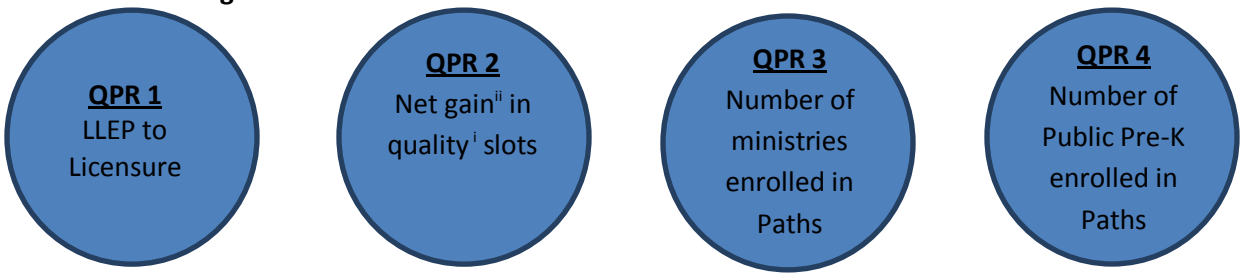
CCR&R Accountability Measures

All CCR&R system activities should lead to increased child outcomes by achieving the following three broad Goals of CCR&R System:

- Increase **availability** of high quality child care and out of school time programs for children and youth
- Increase access to high **quality** child care and out of school time programs for families
- Increase **awareness** of benefits of high quality child care and out of school time care

AVAILABILITY

Goal 1: There is an availability of quality[i] slots in each county to meet the needs of all children who need child and out of school time care from birth to age 13.



Item	Reporting Month	Data Entry Start	Staff Training	Details
QPR 1	October	Ongoing	n/a	The number of LLEP to Licensure in the SDA, contract year to date. OTII attendees should be entered into NACCRRAware if they are caring for children. The OT II attendee's TTAM record should be link to NACCRRAware on the employment pate. Date of LLEP to licensure entered in NACCRRAware Provider General page field = 'LLEP to License Date'.
QPR 2	October	Ongoing	n/a	Quality is defined as licensed, VCP, meeting the additional pathway requirements for PTQ, or enrolled in Paths to QUALITY. Baseline slots are identified in resource document.
QPR 3	October	Ongoing	n/a	
QPR 4	October	October	December	Number of public Pre-Ks enrolled in PTQ to the SDA. (***Documentation of Public Pre-K in NW TBD)*

Table 1	Demand for Care: % of 0-5 children with all parents in labor force (APLF)	Demand for Care: # of children 0-5 with all parents in labor force (APLF)	Current quality slots	Projected quality slots for all types of care
County A				
County B				
County C				
County D				

AVAILABILITY: Goal 1: TABLE 1: Reporting and Data Entry Details				
Item	**Reporting Month**	**Data Entry Start**	**Staff Training**	**Details**
TABLE 1	October	Ongoing	n/a	Demand for care is determined by the percent of children with all families in the labor force. Each county's percentage is different. CCR&R actives outlined designed to support achievement of projected quality slots. *CCR&Rs should use the resource document to complete the table above. CCR&Rs will establish projected quality slots to be added by the end of the contract year.

Table 2	Population 6-13	6-13 # CCDF Children	6-13 # on the CCDF waiting	Current quality slots serving 6-13
County A				
County B				
County C				
County D				

AVAILABILITY: Goal 1: TABLE 2: Reporting and Data Entry Details				
Item	**Reporting Month**	**Data Entry Start**	**Staff Training**	**Details**
TABLE 2	October	Ongoing	n/a	This table is intended to bring awareness to the school age population needs.

Goal 1	Output Item			Month	CYTD	Annual Target
Output 1	# of OT II home attendees					To be established by agency—based on QC goals; recommended target 3 times the net gain[ii] in programs
	Reporting Month	**Data Entry Start**	**Training**	**Details**		
	October	Ongoing	n/a	Count of TTAM Trainee Completions in OTII 'QC - Secondary Contacts' are removed from this count, based on the TTAM Trainee Action Log value.		

Goal 1	Output Item			Month	CYTD	Annual Target
Output 2	# of OT II home attendees receiving TA[iii]			#	#	To be established by agency—recommended 25% of OT II attendees
				%	%	
	Reporting Month	**Data Entry Start**	**Staff Training**	**Details**		
	January	January	December	This is homes only. TA is not the traditional follow up as documented in the past. Agencies should continue to document OTII follow up as have previously. In December, IACCRR will conduct a full day face to face training on TA documentation.		

Goal 1	Output Item			Month	CYTD	Annual Target
Output 3	# of OT II home attendees becoming licensed			#	#	To be established by agency—recommended 5% of those receiving TA (should correlate with the projected net gain in programs)
				%	%	
	Reporting Month	**Data Entry Start**	**Staff Training**	**Details**		
	October	Ongoing	n/a	This is homes only. Out of all the attendees from #1, what number/percentage became licensed?		

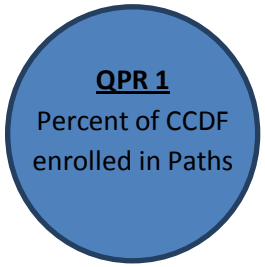
Goal 1	Output Item			Month	CYTD	Annual Target
Output 4	% of those homes enrolled in Paths to QUALITY					85%
	Reporting Month	**Data Entry Start**	**Staff Training**	**Details**		
	October	Ongoing	n/a	This 85% of the homes that became licensed above.		

Goal 1	Output Item			Month	CYTD	Annual Target
Output 5	Provider Updates					20%
	Reporting Month	**Data Entry Start**	**Staff Training**	**Details**		
	October	Ongoing	n/a	This is 20% of all updates completed in the month for the SDA.		

Goal 1	Output			CYTD	Paths to QUALITY	CYTD	%CYTD	Annual Target %
Output 6	# of new VCP certifications				# of new ministries enrolled			85%
	Reporting Month	**Data Entry Start**	**Staff Training**	**Details**				
	October	Ongoing	n/a	New Ministries/Enrolled in PTQ				
Goal 1	Output			CYTD	Paths to QUALITY	CYTD	%CYTD	Annual Target %
Output 7	# of new center licenses				# of new centers enrolled			85%
	Reporting Month	**Data Entry Start**	**Staff Training**	**Details**				
	October	Ongoing	n/a	New Centers/Enrolled in PTQ				
Goal 1	Output			CYTD	Paths to QUALITY	CYTD	%CYTD	Annual Target %
Output 8	# of public pre-k programs meeting additional pathway[iv] requirements				# of public pre-k's enrolled			85%
	Reporting Month	**Data Entry Start**	**Staff Training**	**Details**				
	January	January	December	New Public Pre K Meeting Pathway/Enrolled				

QUALITY

Goal 1: High quality child and out of school time care arrangements are available to meet the demand.



QUALITY: Goal 1: QPR Reporting and Data Entry Details				
Item	**Reporting Month**	**Data Entry Start**	**Staff Training**	**Details**
QPR 1.	October	n/a	n/a	No process changes.
QPR 2.	October	n/a	n/a	No process changes.

Goal 1	Output			Month	CYTD	Annual Target
Output 1	Level 1 advancement			#	#	10% of current Level 1 cadre advances at least one level
				%	%	
	Reporting Month	**Data Entry Start**	**Staff Training**	**Details**		
	October	Ongoing	n/a	No process changes.		

Goal 1	Output			Month	CYTD	Annual Target
Output 2	Level 2 advancement			#	#	10% of current Level 2 cadre advances at least one level
				%	%	
	Reporting Month	**Data Entry Start**	**Staff Training**	**Details**		
	October	Ongoing	n/a	No process changes.		

Goal 1	Output			Month	CYTD	Annual Target
Output 3	Coaching toward quality improvement					30% on site time
	Reporting Month	**Data Entry Start**	**Staff Training**	**Details**		
	October	October	October	Coaching toward quality improvement - this is just Paths to QUALITY coaches. PTQ Meeting on 10/2 will provide all PTQ staff with directions. Implementation is immediate.		

Goal 1	Output			Month	CYTD	Annual Target
Output 4	Programs with professional development plans			#	#	65% of actively progressing Level 1 and 2 programs
				%	%	
	Reporting Month	**Data Entry Start**	**Staff Training**	**Details**		
	November	November	October	This will be introduced at Paths to QUALITY meeting 10/2 and implemented immediately. *If Paths to QUALITY facilities have a professional development plan in place already, we will not require them to use this new form. A new data checkbox will be added to the CCIS LAMP page for tracking and reporting purposes.		

Goal 1	Output			Month	CYTD	Annual Target
Output 5	% of successful ratings			#	#	90% successful ratings
				%	%	
	Reporting Month	**Data Entry Start**	**Staff Training**	**Details**		
	October	Ongoing	n/a			

Goal 1	Output			Month	CYTD	Annual Target
Output 6	Satisfied with coach			#	#	85% of TA recipients rate satisfaction with coach as good or excellent
				%	%	
	Reporting Month	**Data Entry Start**	**Staff Training**	**Details**		
	November	November	October	This process will be introduced in draft form. Paths to QUALITY staff will provide input. Proposed data for implementation is 11/1/14. Actively progressing level 1 and level 2 will be pulled from CCIS and surveyed via survey monkey. The same process will take place 5/1/15. Results will be reported.		

Goal 2: Programs have caregivers who possess specialized knowledge, skills, and abilities to provide community based inclusive child care. These programs will be available to meet the demand of all children with special needs in need of child and out of school time care.

Goal 2	Output			Month	CYTD	Annual Target
Output 1	# of Phase 1 CLIMBS programs					5 (at a minimum)
	Reporting Month	**Data Entry Start**	**Staff Training**	**Details**		
	October	October	October	This will be documented in NW based on current CLIMBS participation.		

Goal 2	Output			Month	CYTD	Annual Target
Output 2	# of Phase 2 CLIMBS programs					To be established by agency
	Reporting Month	**Data Entry Start**	**Staff Training**	**Details**		
	October	October	October	This will be documented in NW based on current CLIMBS participation.		

Goal 2	Output			Month	CYTD	Annual Target
Output 3	# of CLIMBS TA visits					To be established by agency –recommended 120
	Reporting Month	**Data Entry Start**	**Staff Training**	**Details**		
	January	January	December	CLIMBS TA Visits – will be documented in the NDS Technical Assistance Module (TAM) beginning Jan 1 as part of a system-wide, comprehensive Technical Assistance Tracking system.		

Goal 2	Output			Month	CYTD	Annual Target
Output 4	# of CLIMBS hours of PD					To be established by agency –recommended 60
	Reporting Month	**Data Entry Start**	**Staff Training**	**Details**		
	October	October	October	# CLIMBS Hours of PD – This will be pulled from TTAM. A new sub-code / attribute field will be added to the Training page. IACCRR will update records with support from local staff as necessary.		

Goal 2	Output			Month	CYTD	Annual Target
Output 5	# of ASQ-SE or ASQ-3 TA visits					To be established by agency –recommended 20
	Reporting Month	**Data Entry Start**	**Staff Training**	**Details**		
	January	January	December	To be tracked in TAM.		

Goal 2	Output			Month	CYTD	Annual Target
Output 6	# of participants inclusion PD (excluding CLIMBS)					To be established by agency –recommended 240
	Reporting Month	**Data Entry Start**	**Staff Training**	**Details**		
	October	October	October	# Participants inclusion PD (This is the inclusion code minus the CLIMBS attribute)		

Goal 2	Output			Month	CYTD	Annual Target
Output 7	% of programs completing Center Director Inclusion PD					90%
	Reporting Month	**Data Entry Start**	**Staff Training**	**Details**		
	October	October	October			

Goal 2	Output			**PTQ - Monthly**	**PTQ - CYTD**	**Non-PTQ - Monthly**	**Non-PTQ - CYTD**	**Annual Target**
Output 8	# of unique programs receiving TA as a result of Inclusion enhanced referrals							To be established by agency – recommended 10 PTQ and 10 Non-PTQ
	Reporting Month	**Data Entry Start**	**Staff Training**	**Details**				
	January	January	December	To be tracked in TAM beginning in January 2015. *CCR&Rs should continue tracking TA using the same process they have been using to date until further notice.				

Goal 2	Output			**PTQ - Monthly**	**PTQ - CYTD**	**Non-PTQ - Monthly**	**Non-PTQ - CYTD**	**Annual Target**
Output 9	# of unique programs receiving TA (all remaining Inclusion)							To be established by agency – recommended 10 PTQ and 10 Non-PTQ
	Reporting Month	**Data Entry Start**	**Staff Training**	**Details**				
	January	January	December	This is all remaining Inclusion TA (not reported above). To be tracked in TAM.				

Goal 3: High quality care, which is safe, healthy, and promotes early brain development, will be available to meet the demand of infants and toddlers requiring out of home care.

Goal 3	Output			Month	CYTD	Annual Target
Output 1	# of unique programs receiving Breastfeeding friendly TA					To be established by agency –recommended 24
	Reporting Month	**Data Entry Start**	**Staff Training**	**Details**		
	January	January	December	To be tracked in TAM. *CCR&Rs should continue tracking TA using the same process they have been using to date until further notice.		

Goal 3	Output			Month	CYTD	Annual Target
Output 2	# of unique programs receiving Safe Sleep PD					To be established by agency –recommended 48
	Reporting Month	**Data Entry Start**	**Staff Training**	**Details**		
	October	Ongoing	n/a	# of unique programs represented at Safe Sleep trainings – This will be pulled from TTAM Training Code = Safe Sleep. Trainees should be correctly connected to their Employer through the Employment section to be included in count of programs.		

Goal 3	Output			Month	CYTD	Annual Target
Output 3	# of unique participants receiving Safe Sleep PD					To be established by agency –recommended 360
	Reporting Month	**Data Entry Start**	**Staff Training**	**Details**		
	October	Ongoing	n/a	# of unique participants that completed Safe Sleep trainings – This will be pulled from TTAM Training Code = Safe Sleep		

Goal 3	Output			Month	CYTD	Annual Target
Output 4	# of unique programs receiving Inf/Tod PD (excluding Safe Sleep)					To be established by agency –recommended 24
	Reporting Month	**Data Entry Start**	**Staff Training**	**Details**		
	October	Ongoing	n/a	# of unique programs represented at Infant Toddler trainings excluding Safe Sleep – This will be pulled from TTAM Training Code = IT/BBCI.		

Goal 3	Output		**PTQ - Monthly**	**PTQ - CYTD**	**Non-PTQ - Monthly**	**Non-PTQ - CYTD**	**Annual Target**
Output 5	# of unique programs receiving Safe Sleep TA						To be established by agency – recommended 24 for PTQ and 24 for Non-PTQ
Goal 3	Output		**PTQ - Monthly**	**PTQ - CYTD**	**Non-PTQ - Monthly**	**Non-PTQ - CYTD**	**Annual Target**
	Reporting Month	**Data Entry Start**	**Staff Training**	**Details**			
	January	January	December	To be tracked in TAM			
Goal 3	Output		**PTQ - Monthly**	**PTQ - CYTD**	**Non-PTQ - Monthly**	**Non-PTQ - CYTD**	**Annual Target**
Output 6	# of unique programs receiving onsite Inf/Tod PD (excluding Safe Sleep)						To be established by agency for PTQ and Non-PTQ
	Reporting Month	**Data Entry Start**	**Staff Training**	**Details**			
	October	October	October	# of unique programs represented at trainings where Training Code contains I/T-BBCI – with SAFE SLEEP excluded; based on Training Session Completions for Trainees connected to employer through Employment link in TTAM. To determine 'ONSITE' programs: Update existing Training Session TA Request field to be a radio box that is selected to indicate 'Onsite for Program Staff Only'. This value would be selected when a training session has been conducted onsite for a specific child care program only.			
Goal 3	Output		**PTQ - Monthly**	**PTQ - CYTD**	**Non-PTQ - Monthly**	**Non-PTQ - CYTD**	**Annual Target**
Output 7	# of unique programs receiving inf/tod TA (excluding Safe **Sleep**)						To be established by agency – recommended 24 for PTQ and 24 for Non-PTQ
	Reporting Month	**Data Entry Start**	**Staff Training**	**Details**			
	January	January	December	To be tracked in TAM.			

Goal 4: High quality out of school time care and learning environments will be available to meet the demand for out of school time care for children 6-13 years of age.

Goal 4	Output			Month	CYTD	Annual Target
Output 1	# of school age only[v] programs in database					To be established by agency
	Reporting Month	Data Entry Start	Staff Training	Details		
	October	n/a	n/a	# of Type of Care = School Age Program in NACCRRAware		
Goal 4	Output			Month	CYTD	Annual Target
Output 2	# of unique Paths to QUALITY programs providing school age services					To be established by agency
	Reporting Month	Data Entry Start	Staff Training	Details		
	October	n/a	n/a	# of Paths to Quality programs (Provider Status = PTQ Participant) where 'Accepted Age Range' ≥ 6. PTQ programs that care for children who are greater than or equal to 6.		
Goal 4	Output			Month	CYTD	Annual Target
Output 3	# of enrolled Paths to QUALITY school age only programs					To be established by agency –recommended--Forecast from number of Path
	Reporting Month	Data Entry Start	Staff Training	Details		
	October	n/a	n/a	Count of the programs where Type of Care = School Age Program and Provider Status = PTQ Participant and Quality Rating field = Level 1, 2, 3, or 4.		
Goal 4	Output			Month	CYTD	Annual Target
Output 4	# of school age face to face PD opportunities offered					Based on PD plan/or proposed plan
	Reporting Month	Data Entry Start	Staff Training	Details		
	October	n/a	n/a	Training code = SA, based on trainings offered vs. conducted. *Locals without SA specialists will need to update trainings to use the code SA. This needs to happen in October so that we can report in November. SDAs need to give lists to Datahelp@iaccrr.org by Oct 10		

Goal 4	Output			Month	CYTD	Annual Target
Output 5	# of school age face to face PD opportunities held					85% of planned PD
	Reporting Month	Data Entry Start	Staff Training	Details		
	October	n/a	n/a	Training code = SA, based on trainings offered vs. conducted. *Locals without SA specialists will need to update trainings to use the code SA. This needs to happen in October so that we can report in November. SDAs need to give lists to Datahelp@iaccrr.org by Oct 10		
Goal 4	Output			Month	CYTD	Annual Target
Output 6	# of unique programs serving school age children represented at face to face PD					To be established by agency
	Reporting Month	Data Entry Start	Staff Training	Details		
	October	n/a	n/a	# of unique programs serving 6+ children represented at face to face trainings (Training Session Type = Inservice Workshop). *Trainees should be correctly connected to their Employer through the Employment section to be included in count of programs.		
Goal 4	Output			Month	CYTD	Annual Target
Output 7	# of school age only programs represented at face to face PD (unique)					To be established by agency
	Reporting Month	Data Entry Start	Staff Training	Details		
	October	n/a	n/a	# of unique school age only programs (Type of Care = School Age) represented at face to face trainings (Training Session Type = Inservice Workshop). *Trainees should be correctly connected to their Employer through the Employment section to be included in count of programs.		

Goal 4	Output			**PTQ - Monthly**	**PTQ - CYTD**	**Non-PTQ - Monthly**	**Non-PTQ - CYTD**	**Annual Target**	
Output 8	# of unique programs receiving school age specific TA							To be established by agency – recommended 24 for PTQ and Non-PTQ	
	Reporting Month	Data Entry Start	Staff Training	Details					
	January	January	December	It is the expectation that all CCR&Rs engage in SA specific TA. CCR&Rs with SA specialists will be higher than those without a SA Specialist. Tracked in TAM					

Goal 5: Indiana's early childhood and school age workforce will be knowledgeable, skilled, competent, and highly educated.

Goal 5	Output			Month	CYTD	
Output 1	# of face to face PD offered (Excludes SS, OT, Child Abuse, and PTQ)					Based on PD plan
	Reporting Month	**Data Entry Start**	**Staff Training**	**Details**		
	October	n/a	n/a	Counts of trainings scheduled versus held for any Face to face trainings = Session Type equals "Inservice" Will exclude OT, SS, PTQ, and Child Abuse. *A new TTAM code will be developed to track Child Abuse trainings. IACCRR will recode the child abuse trainings and distribute a new code sheet.		
Goal 5	Output			Month	CYTD	Annual Target
Output 2	# of face to face PD held (Excludes SS, OT, Child Abuse, and PTQ)					85% of planned PD
	Reporting Month	**Data Entry Start**	**Staff Training**	**Details**		
	October	n/a	n/a	Counts of trainings scheduled versus held for any Face to face trainings = Session Type equals "Inservice" Will exclude OT, SS, PTQ, and Child Abuse. *A new TTAM code will be developed to track Child Abuse trainings. IACCRR will recode the child abuse trainings and distribute a new code sheet.		
Goal 5	Output			Month	CYTD	Annual Target
Output 3	% of SDA programs represented at face to face PD			#	#	To be established by agency –recommended 25%
				%	%	
	Reporting Month	**Data Entry Start**	**Staff Training**	**Details**		
	October	Ongoing	n/a	Calculated percent of (# of unique programs represented at training sessions where Session Type = Inservice Workshop; with trainee completions / Total number of programs in SDA) *Trainees should be correctly connected to their Employer through the Employment section to be included in count of programs.		

Goal 5	Output			Month	CYTD	Annual Target
Output 4	# of participants attending face to face PD					To be established by agency
	Reporting Month	**Data Entry Start**	**Staff Training**	**Details**		
	October	n/a	n/a	"Participants" means non unique trainees (seats filled); based on Training Session Type = Inservice Workshop.		
Goal 5	Output			Month	CYTD	Annual Target
Output 5	% of participants indicating an increase of skill or knowledge post PD					85%
	Reporting Month	**Data Entry Start**	**Staff Training**	**Details**		
	October	n/a	n/a	% increasing knowledge captured by evaluation data entered in Training Session. No change in process.		
Goal 5	Output			Month	CYTD	Annual Target
Output 6	# of TA sessions provided as a result of PD (excluding CLIMBS programs) **This includes the 'Training/TA Blend' offerings included in the 14/15 PD plans. Other Training/TA Blends referenced in this document are excluded.*					To be established by agency –recommended 48
	Reporting Month	**Data Entry Start**	**Staff Training**	**Details**		
	January	January	December	Continue documenting without change until trained on new process in December.		

Goal 5	Output			Month	CYTD	Annual Target
Output 7	# of unique programs receiving TA as a result of PD (excluding CLIMBS programs) **This includes the 'Training/TA Blend' offerings included in the 14/15 PD plans. Other Training/TA Blends referenced in this document are excluded.*					To be established by agency –recommended 24
	Reporting Month	**Data Entry Start**	**Staff Training**	**Details**		
	January	January	December	Continue documenting without change until trained on new process in December. Education Coordinators need to review list of Training/TA Blends in Professional Development Plan to make sure that this is the most current list. If there have been changes, please submit to Christina by October 10.		
Goal 5	Output			Month	CYTD	Annual Target
Output 8	As a result of PD, % of TA recipients demonstrating at least an 85% increase in skill, knowledge, competence or change in practice on the post assessment . **This includes the 'Training/TA Blend' offerings included in the 14/15 PD plans. Other Training/TA Blends referenced in this document are excluded.*					85%
	Reporting Month	**Data Entry Start**	**Staff Training**	**Details**		
	January	January	December			

AWARENESS

Goal 1: Families, providers, and community stakeholders are aware of, use, and/or collaborate with local CCR&R agencies to ensure all children have access to high quality, affordable child and out of school time care.

Goal 1	Output			Month	CYTD	Annual Target
Output 1	# of unique families receiving on-site referrals					10% increase
	Reporting Month	**Data Entry Start**	**Staff Training**	**Details**		
	October	n/a	n/a			
Goal 1	Output			Month	CYTD	Annual Target
Output 2	# of unique families receiving telephone referrals					10% increase
	Reporting Month	**Data Entry Start**	**Staff Training**	**Details**		
	October	n/a	n/a			
Goal 1	Output			Month	CYTD	Annual Target
Output 3	# of unique families using the online search					10% increase
	Reporting Month	**Data Entry Start**	**Staff Training**	**Details**		
	October	n/a	n/a			
Goal 1	Output			Month	CYTD	Annual Target
Output 4	# of unique families receiving child referrals					10% increase
	Reporting Month	**Data Entry Start**	**Staff Training**	**Details**		
	October	n/a	n/a	Count of total unique families that have any type of referral.		

Goal 1	Output			Month	CYTD	Annual Target
Output 5	# of attendees at presentations on locating and evaluating child care					5% increase of recipients last year
	Reporting Month	**Data Entry Start**	**Staff Training**	**Details**		
	October	October	October	Using existing Outreach and Marketing data entry system, this will be documented in the Community record Action Log using any 'Outreach' action value. Comments section entry example: - Marketing~Presentation~20~0~had 20 individuals attend presentation on identifying high quality child care		
Goal 1	Output			Month	CYTD	Annual Target
Output 6	After receiving consultation from SDA staff, unique families surveyed who report an increased knowledge of child care options in Indiana					85%
	Reporting Month	**Data Entry Start**	**Staff Training**	**Details**		
	October	Ongoing	n/a	Based on Client Follow Up Survey. *Reminder: CCR&Rs must collect family phone numbers and remind customers that we need them to answer Kent State's Call.		
Goal 1	Output			Month	CYTD	Annual Target
Output 7	After receiving consultation from SDA staff, unique families surveyed who report an increased knowledge of how to use the Paths to QUALITY rating during their child care search					85%
	Reporting Month	**Data Entry Start**	**Staff Training**	**Details**		
	October	Ongoing	n/a	Based on Client Follow Up Survey. *Reminder: CCR&Rs must collect family phone numbers and remind customers that we need them to answer Kent State's Call.		

Goal 1	Output			Month	CYTD	Annual Target
Output 8	After receiving consultation from SDA staff, unique families surveyed who report they looked for or intend to look for a child care program participating in Paths to QUALITY					85%
	Reporting Month	**Data Entry Start**	**Staff Training**	**Details**		
	October	Ongoing	n/a	Based on Client Follow Up Survey. *Reminder: CCR&Rs must collect family phone numbers and remind customers that we need them to answer Kent State's Call.		
Goal 1	Output			Month	CYTD	Annual Target
Output 9	# of Infant/Toddler enhanced referrals by SDA					To be established by agency
	Reporting Month	**Data Entry Start**	**Staff Training**	**Details**		
	October	October	n/a	Count of BBCI Enhanced Referrals completed by SDA staff (based on NDS user ID). No change in process. Local CCR&Rs may need to be reminder of current data entry procedures. This includes clients that receive a BBCI Enhanced Referral onsite or at the CCR&R office.		
Goal 1	Output			Month	CYTD	Annual Target
Output 10	Recipients of infant/toddler enhanced referrals report the service assisted them in choosing a provider that meets their needs					85% of recipients choose a provider prepared to meet their child's needs
	Reporting Month	**Data Entry Start**	**Staff Training**	**Details**		
	October	Ongoing	n/a	Based on Client Follow Up Survey – *updated language or new question needed.* This would be reported for families receiving BBCI enhanced referral through CCR&R.		

Goal 1	Output			Month	CYTD	Annual Target
Output 11	# of Inclusion enhanced referrals by SDA					To be established by agency
	Reporting Month	**Data Entry Start**	**Staff Training**	**Details**		
	October	October	n/a	Count of IPICC Enhanced Referrals completed by SDA staff (based on NDS user ID). No change in process.		
Goal 1	Output			Month	CYTD	Annual Target
Output 12	Recipients of inclusion enhanced referrals report the service assisted them in choosing a provider that meets their needs					85% of recipients choose a provider prepared to meet their child's needs
	Reporting Month	**Data Entry Start**	**Staff Training**	**Details**		
	October	Ongoing	n/a	Based on Client Follow Up Survey – updated language or new question needed. This would be reported for families receiving IPICC enhanced referral through CCR&R		

Goal 2: Through awareness, use, and collaboration with the CCR&R, community stakeholders invest and support community based early care and out of school time care systems.

Goal 2, #	Output			Month	CYTD	Annual Target
Output 1	# of Tier I[vi] community stakeholders in database					To be established by agency
	Reporting Month	**Data Entry Start**	**Staff Training**	**Details**		
	October	October	October	Count of Community records in SDA entered as 'Tier 1 Stakeholder'. <u>PROPOSED</u>: Count of Community records where 'Partner Agreement' field = Tier 1 Stakeholder Tier 2 Stakeholder Tier 3 Stakeholder		
Goal 2	Output			Month	CYTD	Annual Target
Output 2	# of Tier I community stakeholders that have had activity[vii]					100% will have some activity in FY 14/15
	Reporting Month	**Data Entry Start**	**Staff Training**	**Details**		
	October	October	October	Where 'Partner Agreement' field = Tier 1 Stakeholder; Count includes activity details to be reported from the Action Log using any 'Outreach' action value.		
Goal 2	Output			Month	CYTD	Annual Target
Output 3	% of Tier I stakeholders aware of CCR&R services					85% of identified Tier I stakeholders surveyed rate their awareness of CCR&R services as a 4 or higher on a 5 point scale
	Reporting Month	**Data Entry Start**	**Staff Training**	**Details**		
	January	n/a	n/a	% Based on Tier 1 contacts and Community survey response.		

Goal 2	Output			Month	CYTD	Annual Target
Output 4	# of Tier II[viii] community stakeholders in database					To be established by agency
	Reporting Month	**Data Entry Start**	**Staff Training**	**Details**		
	October	October	October	Count of Community records in SDA entered as 'Tier 2 Stakeholder'.		
Goal 2	Output			Month	CYTD	Annual Target
Output 5	# of Tier II community stakeholders that have had activity[ix]					100% will have some activity in FY 14/15
	Reporting Month	**Data Entry Start**	**Staff Training**	**Details**		
	October	October	October	Where 'Partner Agreement' field = Tier 2 Stakeholder; Count includes activity details to be reported from the Action Log using any 'Outreach' action value.		
Goal 2	Output			Month	CYTD	Annual Target
Output 6	% of Tier II community stakeholders that have had activity					85% of identified Tier II stakeholders surveyed rate their likelihood of recommending CCR&R services as a 4 or higher on a 5 point scale
	Reporting Month	**Data Entry Start**	**Staff Training**	**Details**		
	October	November	n/a	Where 'Partner Agreement' field = Tier 2 Stakeholder; % of records that have had outreach, reported from the Action Log using any 'Outreach' action value.		
Goal 2	Output			Month	CYTD	Annual Target
Output 7	% of Tier II community stakeholders find CCR&R services useful					85% of identified Tier II stakeholders surveyed rate the usefulness of CCR&R information and reports as a 4 or higher on a 5 point scale
	Reporting Month	**Data Entry Start**	**Staff Training**	**Details**		
	January	n/a	n/a	% Based on Tier 2 contacts and Community survey response.		

Goal 2	Output			Month	CYTD	Annual Target
Output 8	# of Blue Buttons posted					To be established by agency
	Reporting Month	**Data Entry Start**	**Staff Training**	**Details**		
	October	November	October	Blue Buttons posted are tracked in NACCRRAware's Community section. Count of 'Freebutton Posted' Action Logs. ** Updates needed to procedure. Continue to following the procedure for tracking blue button activities in the Community record until notified of new process.		
Goal 2	Output			Month	CYTD	Annual Target
Output 9	# of Tier III[x] community stakeholders in database					To be established by agency
	Reporting Month	**Data Entry Start**	**Staff Training**	**Details**		
	October	October	n/a	Count of Community records in SDA entered as 'Tier 3 Stakeholder'.		
Goal 2	Output			Month	CYTD	Annual Target
Output 10	# of Tier III community stakeholders that have had activity[xi]					100% will have some activity in FY 14/15
	Reporting Month	**Data Entry Start**	**Staff Training**	**Details**		
	October	November	n/a	Where 'Partner Agreement' field = Tier 3 Stakeholder; Count includes activity details to be reported from the Action Log using any 'Outreach' action value.		
Goal 2	Output			Month	CYTD	Annual Target
Output 11	% of Tier III community stakeholders that have made investments in the CCR&R and/or early care and out of school time care support systems					90% of identified Tier III community stakeholders will have made documented investment of time, talent, or resources
	Reporting Month	**Data Entry Start**	**Staff Training**	**Details**		
	October	October	October	Data entry process TBD.		

Goal 2	Output			Month	CYTD	Annual Target
Output 12	# of initiatives reflected in SharePoint					To be established by agency
	Reporting Month	**Data Entry Start**	**Staff Training**	**Details**		
	October	November	n/a	Count of total initiative entered in SharePoint list = Community Based Initiatives. No change in process.		

OPERATIONS **Goal 1: Local CCR&R agencies operate in compliance with all contract requirements.**

Goal 1	Output	Oct	Nov	Dec	Jan	Feb	Mar	April	May	June	July	Aug	Sept
Output 1	x % claim accuracy												
Output 2	Claim timeliness (yes/no)												
Output 3	100% Staffed												
Output 4	100% meeting attendance												
Output 5	Audit (yes/no)												
	Findings (yes/no)												
Output 6	Office of Early Childhood and Out of School Learning Monitoring (yes/no)												
Output 7	Corrective Action in place (yes/no)												
Output 8	Complaints[xii] against CCR&R (yes/no)												

Item	Reporting Month	Data Entry Start	Staff Training	Details
Output 1	October	n/a	n/a	Reported by OECOSL
Output 2	October	n/a	n/a	Reported by OECOSL
Output 3	October	n/a	n/a	Reported by OECOSL
Output 4	October	Ongoing	n/a	Continue registering for trainings in TTAM
Output 5	October	October	October	
Output 6	October	n/a	n/a	Reported by OECOSL
Output 7	October	n/a	n/a	Reported by OECOSL
Output 8	October	October	October	

Definitions

[i]Quality—programs are considered quality if they are licensed/registered and meet VCPs/or are enrolled in Paths to QUALITY

[ii]Net gain—net positive gain in the number of available child care slots

[iii]Technical assistance designed to promote and advance licensure and enrollment into Paths to QUALITY. Technical Assistance includes the provision of written or verbal communication designed to assist programs advancing toward licensure and enrollment; this includes and is not limited to telephone consultation and on-site technical assistance. TA should be substantive in nature and designed for the express purpose of moving programs along the quality continuum.

[iv]Additional pathway for Pre-K programs is still under development by the Office of Early Childhood and Out of School Learning

[v]School age only programs are those programs that care for school age children only, documented in NACCRRAware as Type of Care equal School Age.

[vi]Tier I community stakeholders are those stakeholders identified by the local CCR&R agency who should be aware of CCR&R services.

[vii]Tier I activities include appropriate outreach activities designed to heighten awareness of CCR&R services.

[viii]Tier II community stakeholders are those stakeholders that may have collaborative arrangements for service delivery, MOUs, or in some other manner uses the services of the CCR&R. Ideally, this would be a reciprocal relationship.

[ix]Tier II activities may include the provision of data, client services, staff professional development. CCR&R staff are actively engaged with Tier II community stakeholders.

[x]Tier III community stakeholders are those entities that actively invest time, resources, or dollars either directly into the CCR&R or into the early childhood and out of school care systems in the community.

[xi]Tier III activities would include active engagement with these stakeholders; for instance, hosting an Early Childhood Education Economic summit.

[xii]Complaints against CCR&R are those issues that are found to be in contradiction to either the CCR&R statement of work or best practice standards for CCR&R service delivery.