

District of Columbia
Preschool Development Grant Birth to Five (PDG B-5) Application

Project Title: Making Data Count: Thrive by Five DC

Applicant Name: Office of the State Superintendent of Education (OSSE)

Address: 1050 First St. NE, Sixth Floor, Washington, DC 20002

Contact Phone Numbers: Voice (202) 727-2814; Fax (202) 724-7656

Email Address: Elizabeth.Groginsky@dc.gov; **Website:** <https://osse.dc.gov>

Project Summary

The District of Columbia (“The District”) has implemented several innovative investments in early learning and has shown an increasing commitment to building a high-quality mixed delivery system for children birth to age five (B-5) and their families, with a targeted focus on children experiencing homelessness, children with special needs, children in foster care and/or children in families with very low incomes who are especially vulnerable. Still, inequities in child outcomes, awareness and program participation persist. Although the District has a robust universal pre-K program for children 3 and 4 years of age there are barriers for families in maximizing choice. Specifically, parents report lack of information and communication, poor coordination between their child’s early care and education program and the receiving local educational agency (LEA). The District will strategically use the PDG to create a more efficient, responsive and coordinated B-5 mixed delivery system that particularly meets the needs of vulnerable children and families. Specifically, the District will more effectively coordinate and collaborate across District agencies in several ways. First, the District will increase parents’ knowledge of programs and services by enhancing data use, integration and visualization tools to inform policy and system efficiencies, coordination and collaboration. Second, the District will maximize parental choice and involvement in their children’s education by improving messaging and communication to parents by using plain language, word-of-mouth campaigns through the expansion of peer support networks and multi-media dissemination efforts. Third, the District will improve families’ access to quality early care and education programs by increasing the use of data driven decision-making to improve communication among district agencies, to enhance coordination and collaboration for more effective service delivery. Fourth, the District will promote opportunities for sharing best practices among early care and education professionals by providing comprehensive and systemic professional development that emphasizes equity, inclusiveness as well as cultural and linguistic responsiveness. Collectively, these efforts will improve the quality of early learning environments by strengthening and aligning evidence-based practices used within the B-5 cross-sector early childhood mixed delivery system, so that the early care and education workforce can be supported in implementing best practices and trauma-informed approaches through systemic professional development. With this grant, the District will make strategic investments that will strengthen our existing infrastructure of programs and enable continued investments to be made over time. The District will focus the work that is supported by PDG to leverage the existing collaborative bodies and the data being gathered (e.g., via needs assessments, feasibility studies) to strengthen the District’s B-5 early learning system. The PDG B-5 funding directly aligns with the District’s existing Thrive by Five DC initiative, a holistic approach to healthy childhood development that aims to empower and support families with young children through a citywide collaboration of early childhood service and resources across and among communities and organizations.

Table of Contents

B-5 MIXED DELIVERY SYSTEM DESCRIPTION AND VISION STATEMENT 3
 Table 1. District B-5 Programs and Services..... 5
 Table 2. Early Learning Settings 6
ACTIVITY ONE: B-5 STATEWIDE NEEDS ASSESSMENT PLAN13
 Table 3. Activity One Work Plan: Actions and Timeline.....14
ACTIVITY TWO: B-5 STATEWIDE STRATEGIC PLAN.....22
 Table 4. Activity Two Actions and Timeline25
ACTIVITY THREE: MAXIMIZING PARENTAL CHOICE AND KNOWLEDGE25
 Table 5. Activity Three Actions and Timeline29
ACTIVITY FOUR: SHARING BEST PRACTICES34
 Table 6. Activity Four Actions and Timeline35
ACTIVITY FIVE: IMPROVING QUALITY37
 Table 7. Activity Five Actions and Timeline37
ORGANIZATIONAL CAPACITY AND MANAGEMENT.....38
PROJECT TIMELINE42
EVALUATION PLAN47
LOGIC MODEL55
SUSTAINABILITY PLAN56
DISSEMINATION PLAN57
BUDGET JUSTIFICATION58

B-5 MIXED DELIVERY SYSTEM DESCRIPTION AND VISION STATEMENT

The District of Columbia (the District) has made diverse and robust investments across the birth to five (B-5) mixed delivery system and built strong partnerships, but still has deep inequities in outcomes and uneven awareness of specific programs and challenges for families when navigating this complex early childhood system. The District has a population of more than 700,000 residents. Young children remain the fastest-growing population in the District, with over 45,000 children under five. There are 28,203 children ages birth to three and approximately 16,832 3- and 4-year-old children (July 2017 Census).

Overall, the District has the highest rates of parental employment among families with young children and has made investments to support the families. In 2016, 76 percent of all children under six have all parents in the labor force, more than any other state with rates of parental employment that reached above 70 percent for all families in which both parents worked. Of the 31,500 children living in poverty in the District, over 11,000 are children five years of age or younger, which is about 25 percent of the total population of children five and under. 72 percent of children living below the poverty line are children of color.

Vision: The District's vision for B-5 mixed delivery system is that all children will have equitable access to high-quality opportunities to maximize their full potential for a successful quality of life in their communities. This vision is supported by a strong foundation of policies, systems and supports for the B-5 mixed delivery system and the District of Columbia's Early Childhood System Approach to Child Health, Development, Education and Well-being (See Attachment B) that was approved by the State Advisory Council in April 2018. The District's vision for its early childhood system will increase quality, coordination, alignment and efficiency by building cross-sector (e.g., health, education) agreement and shared purposes (e.g., enhanced

communication and messaging); identifying shared metrics and measures for learning and improvement (e.g., enhanced integrated data system); coordinate and align policy and financial efforts with a focus on racial and social equity (e.g., comprehensive early learning hubs) and spread and scale best practices and evidence-based programs (e.g., trauma-informed practices).

Key partners and stakeholders: The State Early Childhood Development Coordinating Council (SECDCC) in its role as the State Advisory Council, will be leveraged to support the needs assessment and strategic plan and continue to provide oversight and direction on the early childhood system. The SECDCC includes leaders from OSSE, DC Health, Department of Behavioral Health (DBH), Department of Human Services (DHS), Child and Family Services Agency (CFSA), the District's child welfare agency and the Department of Health Care Finance (DHCF), the District's Medicaid agency. Additionally, the District will create a PDG Core Team to include B-5 program leaders from the child and family serving agencies. Additionally, the Core Team representatives from the two private-sector partners contributing to this PDG application: the Bainum Family Foundation (see Appendix C letter of commitment) and Early Childhood Innovation Network (ECIN) (see Appendix D). The PDG Core Team will be co-led by the Assistant Superintendent of Early Learning and the Senior Deputy Director, Community Health Administration, to ensure the success of the activities outlined in the grant application. The PDG Core Team will solicit input from parents, providers and policymakers on an ongoing and regular basis (see Appendix E). The PDG Core Team will meet monthly to review progress, discuss challenges and hurdles and identify solutions to improve the quality of early learning environments, strengthen partnership and communication with parents and improve the diversity and equity of outcomes in programs and services. Recommendations will be presented to the SECDCC for consideration.

Current Landscape, Policies. The District has a rich array of B-5 programs and services including Early Head Start (EHS), Head Start (HS), the Quality Improvement Network (QIN), universal pre-K for 3- and 4-year-olds, subsidized child care, home visiting, Individuals with Disabilities Education Act (IDEA) Part C and Part B (preschool), Capital Quality - DC’s redesigned Quality Rating and Improvement System (QRIS), Child and Adult Care Food Program (CACFP) and the DC Healthy Tots Act of 2014, effective Feb. 26, 2015 (D.C. Law 20-155: D.C. Official Code §§ 38-281 *et seq.*) (HTA) mandating subsidized child care providers’ participation in CACFP and the Healthy Futures/Primary Project. See table below for each program’s budget, overview and children served.

Table 1. District B-5 Programs and Services

Program, Budget	Overview	Children Served
Early Head Start/Head Start \$31,039,253	The District has three HS grantees, including the DC Public Schools (DCPS) Head Start Schoolwide Model.	5,477 ¹
	The District has five EHS grantees that provide both center and home-based program options.	1,224
Quality Improvement Network (QIN) \$3,000,000	The Office of the State Superintendent of Education (OSSE) administers a district-wide effort to build capacity, increase access and enhance the quality of infant and toddler care. This initiative is supported through a state-level Early Head Start-Child Care Partnerships (EHS-CCP) grant.	600
Universal Pre-K \$226,000,000	Pre-K is available to all families in the District for children 3- and 4-years of age. The program is delivered through DCPS, public charter schools and community-based organizations (CBOs) with a high-quality designation.	13,166
	DCPS	5,829
	Public Charter Schools	6,700
	CBOs	637
Subsidized Child Care \$73,970,992.64	OSSE administers subsidized child care in 233 licensed child development facilities. This represents nearly 50 percent of all licensed facilities in the District.	9,400
Home Visiting \$1,736,658	DC Health administers the home visiting program, which is a two-generation strategy that supports expectant parents and the families of young children before childbirth to age five. Home visiting models include Nurturing Parenting Programs	557

¹ This includes the DCPS Head Start Schoolwide Model. The non-DCPS Head Start students represent 228 children.

Program, Budget	Overview	Children Served
	curriculum; Healthy Start; Healthy Families America; Father-Child Attachment Program; Parents as Teachers.	
Strong Start, IDEA Part C \$16,000,000	OSSE administers Strong Start, the District's Part C early intervention program.	1,600
Early Stages, IDEA Part B (Preschool) \$7,700,000	DCPS administers Part B Child find and evaluation services through Early Stages. The 41 local educational agencies (LEAs) are responsible for implementing the Individualized Education Plans (IEPs).	1,675
Capital Quality \$1,339,321	OSSE administers the District's redesigned QRIS for all licensed child development facilities.	7,978
CACFP/ HTA \$15,000,000	CACFP provides nutritious foods that contribute to the wellness, healthy growth and development of young children. DC HTA supports participating centers and homes increase the quality of meals and enhance the health and wellbeing of children through grants.	37,000
Healthy Futures/Primary Project \$1,500,000	Department of Behavioral Health (DBH) administers early childhood evidence-based mental health consultation which includes providing prevention, early intervention and treatment services for children birth to age eight.	387

The District delivers the aforementioned programs through a diverse array of public and private early learning settings, which maximizes parent choices.

Table 2. Early Learning Settings

Program/Setting	Birth - Age 3 Capacity	Ages 3 - 5 Capacity	Total Capacity
Licensed Facilities (private, for-profit, non-profit, CBOs and faith-based)	9,449	11,513	20,962
DC Public Schools	N/A	5,864	5,864
Public Charter Schools	N/A	6,820	6,820
Home Visiting	830	N/A	830
Total	10,279	24,197	34,476

The District ensures families have access to high-quality *infant and toddler* early learning programs and services through enhanced child development facility licensing regulations, subsidized child care and QIN/EHS-CCP and home visiting. Over 450 licensed child development facilities provide either full-time care between six and 11 hours per day, year-round

or part-time care less than six hours per day, year-round in center or family child care home settings to meet families' needs.

In 2014, the Early Learning Quality Improvement Network Amendment Act of 2015, emergency version initially effective Dec. 18, 2014 and permanently effective Feb. 26, 2016 (D.C. Law 21-66: D.C. Code § 4-415) (QIN Act), aligned a child's subsidy eligibility determination with EHS eligibility and established neighborhood-based hubs to provide comprehensive, continuous and intensive technical assistance (TA), professional development (PD) and comprehensive services. Currently, the QIN hubs support 17 child development centers and 19 child development homes. Additionally, five EHS grantees provide comprehensive services and supports for pregnant women and EHS-eligible infants and toddlers. A recently released report from the Center for American Progress suggests there are nearly three infants and toddlers residing in the District for each infant and toddler child care slot in licensed facilities – indicating the District could serve a maximum estimate of 33 percent of its children birth to age three.

The District's universal *pre-K program* was established through the Pre-K Enhancement and Expansion Amendment Act of 2008, effective July 18, 2008 (D.C. Law 17-292: D.C. official Code §§ 38-271) (Pre-K Act). In 2017, the District provided pre-K education services to 5,968 3-year-olds (69 percent) and 7,186 4-year-olds (89 percent) through a mixed delivery model that operates 6.5 hours a day, 180 days a year across DCPS, public charter schools and CBOs. DCPS established a Head Start Schoolwide Model (HSSWM) in 2010 that provides all children enrolled in Title I schools with comprehensive health, nutrition, mental health and family supports.

On Oct. 1, 2018, the District transitioned to *Capital Quality, DC's redesigned QRIS*. The District's QRIS has four designations: Developing, Progressing, Quality and High-Quality, which are based on results of research-based metrics that capture the quality of early care and education programs as measured by the Environment Rating Scales (ERS) and the Classroom Assessment Scoring System (CLASS). The QRIS system is comprised of a continuous quality improvement plan (CQIP) driven by 10 quality standards that inform targeted PD and TA. Using the Child Care and Development Block Grant (CCDBG) and PDG funding, the District will develop a Capital Quality profile on My Child Care DC, the District's consumer education website.

To help facilitate and sustain quality improvement, the District has *tiered reimbursement* associated with the QRIS. The District completed a cost estimation model in 2018 to determine the average cost of care for children in all settings, by age and by Capital Quality designation. The results were used to inform the Fiscal Year (FY) 19 new tiered reimbursement rates effective Oct. 1, 2018, as authorized by the Day Care Policy Act of 1979, effective Sept. 19, 1979 (D.C. Law 3-16; D.C. Code §§ 4-401 *et seq.*). This significant rate increase is supported through the increase in CCDBG discretionary funds and a \$10 million investment by DC Mayor Bowser.

The District also operates a robust *child care subsidy program*. Families who earn at or below 250 percent of the federal poverty level are eligible for subsidized services. We estimate that 16,618 children B-5 living in the District are eligible for subsidy. Families at or below 100 percent of federal poverty have no copayment. For families between 101 and 250 percent of poverty, copayments range from 2 and 7 percent based on annual income and family size. While the District does not have a waitlist for families to receive a subsidized child care voucher,

parents and providers report extensive waitlists at some centers. Once enrolled, families remain eligible for subsidies up to 85 percent of the State Median Income (SMI), enabling the District to serve a large proportion of vulnerable families, though significant gaps in services remain.

IDEA Part C for infants and toddlers and Part B (preschool) are administered through OSSE. Part C is administered through the Division of Early Learning (DEL) and IDEA Part B (preschool) is administered through OSSE's Division of K-12 Systems and Supports in collaboration with DEL. The Enhanced Special Education Services Amendment Act of 2014, effective March 10, 2015 (D.C. Law 20-195: D.C. Code §§ 38-2561.02(a)(2)(B) and 38-2614) recently shortened the initial evaluation timeline used to determine eligibility for special education services from 120 days from the date of referral to 60 days from the date the parent provides consent for evaluation and expanded established new eligibility for services to children who demonstrate a delay of 25 percent or more, in at least one of developmental areas. Part C Early Intervention (EI) services are delivered using the evidence-based Natural Learning Environment Practices (NLEP) framework. The Part C and Part B Child Find teams visit child development facilities, share information about the referral process and provide training and supports regarding screenings to identify children with developmental delays. To maximize parent choice, the District implemented the Extended Option for Part C in 2014. Once a child is found eligible for Part B, the family has a choice to remain in Part C up to the first day of school following their child's fourth birthday. The family can choose to exercise their right to a free appropriate public education at any time. DCPS manages the Early Stages assessment program for children between the ages of 2 years and 8 months and 5 years and 10 months.

The District has a state-wide comprehensive coordinated system for the *early detection and referral of children who are at risk for developmental delays and/or behavioral problems*.

Notably, the District provides health insurance for its children (with a 98 percent coverage rate). The District has implemented Help Me Grow which provides linkages to developmental and behavioral services for children and their families with four key components: 1) a centralized telephone access point for services and care coordination, 2) a community and family outreach specialist to promote program use and provide networking opportunities among families and service providers, 3) a child health provider to support early detection and early intervention, and 4) data collection and analysis, including the identification of gaps and barriers. In FY18, Help Me Grow had 228 referrals, 52 inquiries for information and 176 families enrolled.

As a component of the District's Every Student Succeeds Act (ESSA) state plan, OSSE launched a *Parent, Family and Community Engagement (PFCE) Framework* for effective community and parent engagement, including feedback from parents in underserved communities. The framework engages citywide parent advisory councils, shares information with families, connects with community partners and provides training and TA to parents to navigate the educational system to support their children. The DC Public Library (DCPL) has a widespread public campaign to support early literacy development with targeted outreach to parents, families and caregivers of young children. The Sing, Talk and Read (STAR) program aims to increase the early literacy levels of children. The District, through a public-private partnership, implements the Strengthening Families Parent Cafes through HS programs.

The District implements several programs that focus on *trauma-informed practices*, including using trauma-informed treatment to serve children in the District's child welfare system and implementing Trauma Systems Therapy model, an evidence-based approach that focuses on the child's emotional needs and relationships. The District continues to expand the highly effective Early Childhood Mental Health Consulting model developed by the ECIN and

Georgetown University Center for Child and Human Development (GUCCHD), which shows strong positive effects across children, classrooms and programs, dramatically reducing the number of expulsions and teacher turnover and promoting children's well-being.

The District has a strong commitment to *parent choice* as evidenced through My Child Care DC and My School DC. The My Child Care DC is an online resource for families to access meaningful information about child care options. The My School DC common lottery is a single, random lottery that determines placement for new students at all participating DCPS and public charter schools. Student-school matches are based on the number of available spaces at each school; sibling, proximity, and other lottery preferences; how each student ranked his or her school choices; and each student's random lottery number.

To support effective *transitions* from an early education and care setting to a school setting, OSSE coordinated with the District's LEAs, Head Start Agencies (HSAs) and other early childhood programs, to help LEAs meet the new Title I ESSA coordination requirements. A district-wide Memorandum of Agreement (MOA) was developed that includes sharing child level enrollment data, when practical and in accordance with applicable federal and District privacy laws; providing joint PD on transitions and developmental and curricular topics such as the District of Columbia Common Core Early Learning Standards (DC CCELS) and trauma-informed practices; and sharing key contacts between LEAs and HSAs to facilitate transitions.

OSSE's *Statewide Longitudinal Education Data System (SLED)* is a comprehensive repository of student and education related data (pre-K to 12) for DCPS and public charter school students. SLED provides extensive educational data to schools and the District. SLED assigns unique student identifiers (USI) for every public school student in DC. The USI connects student records across all areas, such as enrollment, discipline and assessments.

Progress, Successes, Hurdles and Challenges: Over the past 10 years, the District has focused on building the programmatic aspects of a strong and diverse B-5 mixed delivery system across different District agencies. The District has made great progress through growing federal and local investments, allowing for successful leveraging of multiple funding streams to provide quality, full day, full year Pre-K and other early childhood programs; the establishment of public-private partnerships; a redesigned QRIS; increased tiered reimbursements to incentivize and sustain quality; enhanced parent choice and preferences through common applications and increased consumer-friendly information, which have all strengthened the B-5 system.

Despite the District's strong mixed delivery system, inequities persist due to lack of integrated data and coordination of services. Additionally, the District's most vulnerable families have to complete multiple and oftentimes duplicative enrollment forms for child care, eligibility for subsidized child care, pre-K, home visiting, Head Start, Temporary Assistance for Needy Families (TANF), Supplemental Nutrition Assistance Program (SNAP) and Women, Infants and Children (WIC). These programs have different enrollment and eligibility requirements with different required documentation. Based on the results of a survey of 21 B-5 programs administered across 10 District agencies, the most frequently reported challenges to families is lack of adequate outreach; lack access to health, developmental and social services; lack of access to child care; and lack of coordination. A key contributing factor to these challenges is the lack of available, disaggregated and coordinated data that is accessible to programs across the mixed delivery system. Lack of clear information about all the programs and services, along with duplicative enrollment processes and applications, severely impacts the ability of a family to effectively choose programs and services for their child. The PDG funding will allow the District to better understand program participation rates of eligible families across multiple programs

through integrated data, improved coordination of services across District agencies and deepen communication and targeted outreach to families (e.g., families experiencing homelessness, culturally and linguistically families). Through focus groups with families, OSSE found that many parents lack awareness of the District's programs and services and have difficulties finding information about these programs and services. Other participants described transition challenges for children from community-based preschool to the LEA. A survey of District parents conducted in preparation for this grant application revealed that access, availability and quality were the top three barriers for families in accessing B-5 programs, indicating that parents do not think they are fully able to actualize their choices.

ACTIVITY ONE: B-5 STATEWIDE NEEDS ASSESSMENT PLAN

The District will build on significant data and previous needs assessments of specific program areas to develop a comprehensive needs assessment that helps better understand the issues facing vulnerable and culturally and linguistically diverse (CLD) families in accessing the full range of early learning programs discussed in the District's B-5 mixed delivery system.

Throughout the implementation of the needs assessment process, the District's work plan will be continually informed by existing federal and local needs assessments, current state plans, including the CCDBG State Plan, Family First Preservation Services Act strategic plan and the ESSA state plan.

Needs Assessment Data Approach: The SECDCC, with support from the Bainum Family Foundation needs assessment consultant, will implement the District's thorough process to conduct an assessment of the District's B-5 mixed delivery system. The scope of the needs assessment includes a mixed-methods approach to capturing data across a range of domains, including health, social-emotional and early academic outcomes of vulnerable children

throughout the District. The quantitative portion of the assessment will involve: 1) accessing a wide range of secondary data from a variety of sources (described below) and 2) implementing surveys to be incorporated into an integrated data system to streamline data sharing and service coordination. The table below describes the work plan, including specific actions and timeline for this needs assessment:

Table 3. Activity One Work Plan: Actions and Timeline

Month	Action
1-2	Convene the Data, Needs Assessment and Insights Committee of the SECDCC.
1-2	The Needs Assessment Consultant will review all current federal and state needs assessment and provide a synthesis of data related to access, barriers, availability and quality of programs and services.
1-2	Analyze existing administrative data for pre-K, child care, Head Start, home visiting, TANF, Medicaid and WIC participation to understand the level of program participation, demographics, utilization, etc.
1-2	Conduct listening sessions with 100 families through DCPL, HS and EHS parent committees and TANF partners to understand their lived experience in accessing programs and services and transitioning their child from an early care and education setting to an LEA.
1-2	Conduct 10 focus groups with early childhood professionals across the mixed delivery system to understand their needs and challenges.
1-2	Conduct 10 key informant interviews with Department leaders on opportunities and challenges for realizing cost efficiencies and streamlining of programs and services.
1-2	Inventory all “pilot” and “demonstration” projects that have been conducted in the B-5 mixed delivery system for evidence, impact and scalability.
2-3	Summarize the data/information collected and analyze the findings in the stakeholder meetings. Identify trends, visualize summary, create a final needs assessment reports, use the report to inform the strategic planning process with key stakeholders and develop a plan to update the needs assessment regularly.

Existing needs assessments: The following state and federal needs assessments will be leveraged to inform the B-5 needs assessment for PDG:

- *Early Learning Supply and Demand in the District of Columbia:* Commissioned by the Bainum Family Foundation in 2018, this assessment examines the supply and demand of high-quality early care and education slots for infants, toddlers and preschool age children.

- *DC Child Care Connections*: The District's the Child Care Resource and Referral (CCR&R) has completed two needs assessments within the past year about non-traditional child care and an analysis of the TA needs among early childhood care and education program providers.
- *Maternal, Infant and Early Childhood Home Visiting (MIECHV) Program Phase I Needs Assessment, Sept. 2016*: Informs ongoing planning efforts for the delivery of home visiting services in the District.
- *Child and Family Services Needs Assessment and Resource Development Plan*: The Child and Family Services Agency (CFSA) completed a comprehensive needs assessment to assist in developing resources and services essential to improving the safety, permanency and well-being of children in the District's child welfare system.
- *Infants and Toddlers in the District of Columbia: A Statistical Look at Needs and Disparities (2015)*. This Bainum Family Foundation report, in collaboration with Child Trends, details the status of children 0-3.
- *Modeling the Cost of Child Care in the District of Columbia 2018*: This OSSE report explains the development of the cost estimation models, shares the findings of the cost model, and explains how the results of the cost models informed the FY19 reimbursement rate increase for subsidized child care.

Key Terms: The District defines “quality” early care and education programs as those that meet children’s basic health and safety standards and where there is good evidence that the program provides a nurturing environment with supportive interaction (e.g., scheduling that meets children’s needs, warm and positive interactions) that promotes children’s cognitive,

physical and social-emotional development. High-quality programs make up the top two tiers of the District's redesigned QRIS-Capital Quality.

The District defines "availability" of early care and education programs as the number of slots within based on licensed facility capacity for children birth through age three. For children ages 3 through 5, availability is the combined capacity of licensed facilities, DCPS and public charter schools. For home visiting, the District defines "availability" in two ways: 1) the number of slots to serve families and 2) the number of full-time employees to carry the caseloads.

For the purpose of this grant, the District defines "vulnerable children" as children that have identified special needs, children in foster care, experiencing homelessness and/or are in families with low incomes (i.e., 250 percent of federal poverty SNAP/TANF).

The District defines "underserved" as children living in high-poverty communities with disparate access to quality early childhood care and education programs.

The District does not have any rural areas.

Vulnerable children: According to the definition above, there are 16,618 vulnerable children under five from low-income families. Of those, 12,887 are receiving SNAP/TANF; 3,275 have identified developmental delays or disabilities; 2,281 living in families that are experiencing homelessness; and 249 in foster care (30 percent of all children in foster care).

These data are not disaggregated by age.

Quality and availability: The licensed capacity in the District for B-5 was 20,007 in FY17. Capital Quality, the District's QRIS, is mandatory for licensed subsidy providers and is voluntary for licensed non-subsidy providers. Capital Quality designations, based on observational metrics, will be assigned in May 2019; current quality designations are the previous QRIS which was based on national accreditation. Currently, 65 percent of infant,

toddler and preschool-age children receiving subsidy are in quality facilities; only 30 percent of children receiving subsidy are in facilities at the lowest tier (Developing). Based solely on income eligibility requirements, there are 16,618 children B-5 eligible for subsidies and in FY17, 9,400 children B-5 were served.

OSSE assigns a USI to all children that receive publicly funded early care and education services (e.g., subsidized child care, pre-K). As a result, OSSE has the ability to identify unduplicated children served through these programs. However, OSSE does not currently obtain Head Start, home visiting or WIC data.

Gaps in data: The District does not currently have the ability to collect and disaggregate B-5 data based on age or program participation. The District does not have data on PD and TA offered across B-5 system or comprehensive data on the early childhood workforce. The District also has limited data from families on the barriers and challenges they experience in accessing B-5 programs and services. However, anecdotal information has indicated that families have differential access to information about services and options. While the District is able to provide vacancy and waitlist data for LEAs, the District is unable to provide data on vacancies and waitlists in the CBO sector. As noted earlier, there are considerable inequities of child care supply for infants and toddlers. More data is needed to better understand the gaps as it relates to families' needs and preferences. Capital Quality enables us to report on the quality of programs participating in the child care subsidy program. However, we are not be able to report on licensed non-subsidy providers that are not participating nor do we know the number of vulnerable children being served in licensed exempt care².

² In the District, statutorily licensed exempt care includes care provided on a regular basis by an individual who is related to the child, in a child's home by a caregiver paid for the a child's family and care operated by the federal government on federal government property.

Plan to fill gaps in data: The District will consistently survey and capture families' needs and will take concrete steps toward the development of the Early Childhood Integrated Data System (ECIDS). The District will analyze existing administrative data to determine, where possible, which families are being served. With PDG funding, the development of the ECIDS will help address these data gaps and streamline eligibility requirements for these programs/services for eligible families. In doing so, more families will be able to better utilize programs and services in the mixed delivery system. The ECIDS will support increased coordination of services (e.g., early intervention, home visiting) by increasing parental choice of service type and location through improved coordination of enrollment and waitlist information, improved universal intake and application system and improved data sharing systems. With this streamlined eligibility through greater coordination and collaboration of District programs and data systems, transitions can be enhanced and parent choice will be maximized in several ways. By November 2019, OSSE will be able to identify the unduplicated number of B-5 children being served in existing early childhood care and education program via assignment of the unique child identifier (UCI), which may then be cross-referenced with the USI assigned by SLED upon enrollment in DCPS or public charter schools. Upon completion of ECIDS, the SLED will have data available across the life course and be used to more effectively improve social and educational outcomes from B-5 throughout adulthood.

The District has a robust universal pre-K program for children 3- and 4-years of age which is offered through DCPS, public charter schools and in CBOs that have a high-quality designation, yet there are barriers for families in maximizing choice. Specifically, when a child enrolled in a high-quality CBO is determined eligible for Part B IDEA services, the family must transition the child to an LEA (i.e., DCPS) to receive Part B special education services even though a family

might prefer to continue early care and education services in the CBOs. Thus, families that have children with an identified special need have fewer choices in the early care and education programs for their child, than parents who do not have a child with an identified special need. The parents must forgo Part B special education services at that time in order to remain in the early care and education program of their choice if that choice is a CBO. To address this challenge, we aim to implement a feasibility study to examine how DC could potentially build from our existing Strong Start and Early Stages early intervention programs, CCR&R and QIN hubs to provide special education services to children enrolled in the District's CBO Pre-K program. Additionally, we will enhance the outreach and coordination of IDEA Part C and Part B 619 Child Find to ensure we reach all families and identify children with developmental delays or disabilities as early as possible.

Plan for tracking measurable indicators: Progress on the District's investments in these areas will be tracked by monitoring progress with regard to 1) the percentage of families with vulnerable children that are receiving multiple income-eligible services (e.g., TANF, Head Start, WIC, Medicaid) and 2) the percentage of children enrolled in an B-5 programs/services that received fewer duplicative health screenings (e.g., developmental screenings, well-child visits). Each of these will be captured by a district-created survey that will be systematically implemented via district agency partners at regular intervals to identify trends over time. Progress related to the District's investments in improved communication will be tracked by monitoring progress with regard to 1) tracking the percentage of families with children in an early childhood education (ECE) program/service that report receiving clear messages and greater awareness of existing programs/services via District created survey, 2) the percentage of families with children in an ECE program/service that report receiving consistent messages

across programs/services via District created survey, 3) the percentage of apps, text alerts/features and website pages that are accessible in commonly spoken languages in the District (i.e., Amharic, Chinese, French, Korean, Spanish and Vietnamese) as captured via District created surveys. With enhanced technology, the District can empower parents with improved knowledge and choice utilization for a range of mixed delivery services by improving parents' access (e.g., method, language) to information.

Plan for addressing facilities concerns: As noted above, the most significant concern is ensuring there are enough available slots. In FY18, Mayor Bowser invested \$9M in the Access to Quality Child Care Fund which provides sub-grants to child development facilities in three distinct ways: pre-planning, pre-development grants, repair and renovation grants or new build grants. The sub-grants will create 1,000 new infant and toddler slots in the District over the course of three years. The District also has a strong public-private partnership with the Bainum Family Foundation focused on improving access to affordable quality child care through capacity building and sustainability planning. Through this partnership, a rigorous study of child care supply and demand across the District has been conducted, with a particular focus on the availability of quality care and education. In support of this work, the Bainum Family Foundation established the Early Learning Quality Fund (ELQF) to improve the quality of licensed child development facilities in Wards 7 and 8. The fund aims to add 625 high-quality early learning seats in Wards 7 and 8 by 2020.

Analysis of barriers to funding and opportunities for more efficient use of resources:

The District has made significant financial investment in directly providing and ensuring access to early childhood care and education services across various programs. In addition, the District has conducted two specific analyses looking at barriers to funding. First, in 2018, the

District completed a study of the availability of care during nontraditional hours and identified several areas of need: (1) subsidy income-eligible families in Ward 7 and 8; (2) weekend and early morning hour care prior to typical operating hours of child development facilities; (3) children of families working in the health care, retail, hospitality and food service industries and (4) commuters crossing state boundaries. These findings suggest gaps in the supply of child care, particularly in light of the high rate of working families in the District. Second, in 2018, OSSE developed and conducted a cost estimation model methodology to further understand the actual cost of care at different levels of quality for different ages of children in child development facilities which informed the FY19 tier reimbursement rate. The District will use the cost models to further inform policy decisions that will support child care providers in maintaining financial sustainability and continue to ensure all District children have equal access to quality child care. While the analysis has been helpful, what is also reaffirmed was that the District's concentrated, and necessary, focus on creating funding mechanisms and providing direct services to District families has also created new barriers to the streamlined coordination and collaboration across District programs that is necessary for the provision of high-quality early childhood care and education services.

Transition supports and gaps: A focus group of District LEA administrators ($N=10$) revealed that the biggest barriers for families to access pre-K programs were lack of parent information and communication (15 percent), poor coordination between the ECE program and the LEA (11 percent) and insufficient access to before/after care (11 percent). These administrators reported a need for improved coordination among District agencies; improved data systems; more support for parents to enroll in the lottery and support with completion of

enrollment forms; and greater communication to parents about the importance of attendance in pre-K; and increased access to affordable, available and high-quality before/after care.

ACTIVITY TWO: B-5 STATEWIDE STRATEGIC PLAN

The District, through the SECDCC and in partnership will engage existing stakeholder groups in the development of the strategic plan. The strategic plan will facilitate the District's efforts to: 1) build cross-sector agreement and shared purpose across the mixed delivery system, 2) identify shared measures and metrics for learning and improvement, 3) coordinate and align policy and financing efforts with a focus on equity and 4) spread and scale best practices and evidence-based programs. Key stakeholders include the PDG Core Team, the SECDCC and its six committees, parents, provider and advocacy organizations; Head Start State Collaboration Office (HSSCO), HS and EHS programs; CCR&R and representatives from business and philanthropy. Additional key stakeholders include CFSA, which focuses on child abuse prevention and awareness; Bainum Family Foundation; QIN Interagency Steering Committee, which focuses on coordinating services to children and families and the Interagency Coordinating Council (ICC) of parents informing intervention services.

By developing the plan in partnership, stakeholders will contribute ideas at the beginning and end of the process with active development of the strategic plan, needs assessments and other key decision points as the data is analyzed and the strategic plan is revised to align accordingly.

Partnership, collaboration, coordination and quality improvement activities: As described in previous section, LEAs, HSAs and OSSE have signed the district-wide MOA on coordination activities and transition to elementary schools, as required by ESSA and the Head Start Act. The District also has ongoing collaboration meetings with the IDEA Part C and Part B programs to ensure effective, coordinated and smooth transition of children who have

developmental delays and disabilities. The District's strategic planning efforts will be supported by the Bainum Family Foundation and its focus on improving quality and access to create more equitable outcomes for children birth to three living in underserved communities.

The District's Department of Human Services (DHS) TANF program recently adopted a Two Generation (2-Gen) approach to support the needs of the family and well-being of the child through supplemental cash support. The data and lessons learned from these initiatives will be part of the District's B-5 statewide strategic plan.

The District submits a State Systemic Improvement Plan (SSIP) which is a 5-year plan to the Office of the Special Education Programs (OSEP). The SSIP includes an analysis of infrastructure, leadership, professional development and evaluation.

Incorporation of new or updated statutory requirements: The District implements many federal and local statutory requirements that support improved coordination, program quality and service delivery. However, PDG will allow the District to implement and incorporate the Birth-to-Three for All DC Amendment Act of 2018, effective Oct. 30, 2018 (D.C. Law 22-179; D.C. Code § 4-401 *et seq.*) (B-3 for All Act), the District's most recent statutory requirements and create better alignment across the system. The provisions of B-3 for All demonstrate the District's commitment to leading the nation in making high-quality early care and education available to all children and their families in the District through optimal utilization of federal and local funding streams. Successfully implementing the B-3 for All Act requires coordination across an array of programs including the eligibility and funding aspects of the subsidized child care and EHS, and enrollment in licensed child development facilities. However, because the District does not have an ECIDS, lack of participation data across District programs remains the most significant barrier to the various levels of collaboration and coordination. PDG will help

build local capacity and sustainability to support an ECIDS that will provide longitudinal data and support families as they enter into District systems and navigate transitions throughout their children's early years and grades. By streamlining eligibility and enrollment processes, enhancing a secure ECIDS, emphasizing greater alignment and collaboration across agencies, and deepening communication and targeted outreach, PDG will allow District agencies to provide families with quality programs that best fit their preferences.

State Advisory Council (SAC) role: The SECDCC, the District's state advisory council, will play a vital role in the development of the strategic plan. Quarterly meetings will serve as structured opportunities to solicit feedback on the development and implementation of the strategic plan. The SECDCC has six committees that meet regularly and have focused and structured conversations on trends and issues affecting early childhood: (1) Program Quality: workforce development, (2) Data, Needs Assessment and Insights: planning and development of the ECIDS, (3) Early Intervention and Family Support: supporting families in accessing services with a focus on children who have developmental delays or disabilities and their families, (4) Finance and Policy: maximize resources and alignment of policies, (5) Health and Well-being: initiatives catered to ensuring stronger connections between early education and health and a focus on the well-being of our children and their families, and (6) Public-Private Partnerships: leveraging philanthropic investments and engaging the business community to enhance awareness and improve ECE programming. The committees will help develop, implement and track the progress made in the strategic plan.

Process to develop strategic plan: OSSE has a contractor with extensive background in the District who will lead the strategic planning process with the PDG Core Team, which will be completed by June. The strategic planning contractor will facilitate hands-on, facilitated strategic

planning workshops. These workshops will bring together leaders to develop strategic priorities and define goals with a shared strategy to advance the B-5 vision.

Table 4. Activity Two Actions and Timeline

Month	Action
4	Strategic plan kick-off meeting: Present results of needs assessment, provide general overview of strategic plan purpose, discuss critical roles of key stakeholders, present the milestones and timeline and solicit feedback on the strategic plan process.
3	Consultant present stakeholder engagement plan to PDG Core Team (e.g., stakeholder meetings, focus groups and key informant interviews); refine as needed.
3-4	Implement stakeholder engagement plan.
4-5	Draft strategic plans shared for review and refinement at least three times.
6	Submit plan for Administration for Children and Families (ACF) approval; adjust as needed.
8	Disseminate strategic plan to all stakeholders who participated and publish it in various websites (e.g., OSSE website, CCR&R, Mayor’s Thrive by Five).

Partnership opportunities: The District will work closely with the PDG Core Team, early childhood providers and parents/families in the development and implementation of the strategic plan. The District will also solicit feedback from the LEAs, public private philanthropies, pediatricians and other stakeholders on the development of the strategic plan.

Stakeholder engagement: The consultant, as described above, will develop and present a stakeholder engagement plan to PDG Core Team, that will include, but not be limited to stakeholder meetings, focus groups and key informant interviews. The consultant will ensure that there will be diverse representations in the stakeholder meetings (e.g., parents, providers, LEAs).

ACTIVITY THREE: MAXIMIZING PARENTAL CHOICE AND KNOWLEDGE

Stakeholder engagement and collaboration: Interagency committees including the SECDCC, QIN Interagency Steering Committee and Strong Start ICC, facilitate collaboration among programs, services and supports across the mixed delivery system to better serve children from B-5. Each of the aforementioned committees includes parents in their membership, empower families and ensure that parents have a voice in the decision-making process.

With PDG, special attention will be allocated to ensure families are more fully aware of the range of programs and services in the mixed-delivery system (e.g., Help Me Grow; MIECHV and Title V; Medicaid, WIC). By engaging with key partners who will comprise the PDG Core Team, data will be reviewed routinely to discuss progress and strategize next steps to ensure the needs of the stakeholders, and the needs assessment, are being met.

Early Intervention Services: Strong Start, the District's Early Intervention program, works closely with child development facilities to increase participation of teachers and caregivers in the implementation of Individual Family Service Plans (IFSP). Strong Start offers a variety of monthly trainings/workshops related to developmental screenings, services, referrals and other inclusion-based EI topics to increase child development providers' knowledge about EI. Strong Start has partnered with DCPL and restructured their community playgroup partnerships throughout the District. Included in the community playgroup program are Child Find Specialists who provide developmental screenings, capacity-building coaching strategies and Strong Start referral information on a monthly basis.

Strong Start has also increased collaboration with community partners (e.g., Special Olympics DC Young Athletes Program, Help Me Grow, Homeless Children's Playtime Project) to include PD activities, collaboration workgroups, joint parent workshops, program outreach partnerships, screening events and program resources.

Collaboration with key partners: On behalf of the District, OSSE administers the CCDBG, which includes distribution of funds to support early childhood quality initiatives, enhance consumer education and linkages to other District agency services and supports through CCR&R. OSSE also sets policy for the subsidized child care program and administers payments to providers on a monthly basis. OSSE houses the HSSCO, who works closely with all the HS

grantees in the District to minimize and remove barriers that low income families experience when accessing services. OSSE is also one of eight state-level EHS-CCP that supports our QIN of 17 centers and 19 homes serving more than 600 children.

The professionals who oversee each of these initiatives within OSSE work closely together through the DC Head Start Association (DCHSA), as well as the interagency steering committee, which brings together key stakeholders (e.g., DBH, DHS, advocacy organizations). Such efforts ensure these leaders are key partners in district-wide coordination efforts.

Transitions: The PDG will help support improvements to the transition process as families move from child care or other early childhood settings into school (at pre-K 3, pre-K 4 or kindergarten) through better integrated and unduplicated data. One key step in this process is helping families navigate My School DC, DC's common lottery system for DCPS and public charter schools. The outreach toolkit for My School DC and expanded awareness and communication about EdFest, described in the timeline, will help families with the transition from the early childhood program to an LEA. Additionally, developing the universal application and the Early Childhood Data Portal, described below, will support better transitions by providing families with the ability to easily access the early care and education programs and/or LEA of their choice and move between programs as needed, or desired, to best meet their child's and family's needs. In addition, the District will focus on attendance in pre-K programs in order to support a stronger transition to kindergarten.

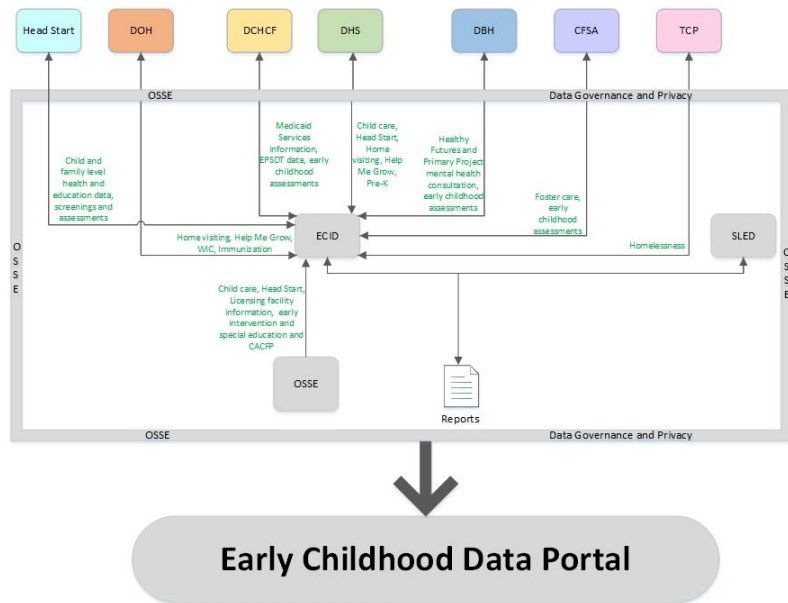
Plan with strategies and activities: District families routinely qualify for multiple services in the mixed-delivery system, yet there are many barriers to accessing these services seamlessly. The District already has some programs that offer a universal application (i.e., Medicaid, TANF, SNAP). In an effort to expand the District's capability to better identify the range of services for

which vulnerable families may qualify, ECIDS will be used to streamline eligibility by offering 1) initial web-based application for services (though interviews may be required to complete enrollment) and 2) an all-in-one application, such that when a family is deemed eligible for one program due to a “vulnerable” classification (e.g., TANF, SNAP, child care subsidy), that family’s application will automatically be “scanned” for other programs/services for which they may qualify. This will enable families to simultaneously enroll in programs at once (if applicable/if of interest to the family).

Expanding upon the current immunization registries that exist in the District, this system would expand the data that is accessible (e.g., developmental screenings, well-child visits, hearing and vision screenings) and by whom (e.g., pediatricians, child development facilities). Such a portal can promote smooth and effective transitions between ECE programs/services in many ways. First, it helps those accessing these files to see the child holistically, which can yield better service delivery. Second, it helps to streamline services for the child, especially with fewer duplication of services. Third, it can reduce the trauma experienced by children by reducing the number of duplicative screenings by different programs. Taken together, this portal enables families to maximize parental choice as they can easily transfer to the program of their choice without having to obtain additional screenings, records, etc.

To meet these needs of vulnerable families, the District will conduct a feasibility study to determine the ability of the District to align eligibility, streamline enrollment and create a web-based access point for parents to apply for various programs and services. The District will also expand Parent Cafes in child development facilities and LEAs, enhance the Thrive by Five DC website and enhance marketing strategies (e.g., print materials in multiple languages and digital materials available with translation). The development of more user-friendly web-based

applications and a universal application for eligibility and enrollment will support families. This will reduce the trauma to families, as they do not continuously need to retell their “stories”. In addition, it ensures that families are better aware of all programs/services in the mixed delivery system, which empowers them to make informed decisions that will enhance their children’s health and well-being. The figure below is a representation of the ECIDS and the Early Childhood Data Portal.



Parent choice will be maximized to ensure variety, quality, accessibility and affordability of early care and education programs. These strategies will help ensure families are provided timely, accurate information in a culturally and linguistically sensitive manner. Materials and information will be translated into the six most common non-English languages spoken by District residents: Amharic, Chinese, French, Korean, Spanish and Vietnamese. Language access line will also be available to families.

Table 5. Activity Three Actions and Timeline

Month	Action
1-6	Market Capital Quality designation on the My Child Care DC website to help families find quality early learning programs that meet their needs.
1-6	Develop an outreach toolkit for My School DC.

Month	Action
1-6	Conduct a feasibility study to determine the ability of the District to align eligibility, streamline enrollment, and the creation of a web-based access point for parents to apply for Medicaid, TANF, SNAP, child care and WIC and create a universal application to include WIC and child care.
3-12	Develop and implement a marketing and communications strategy to help families navigate the services offered in the District (e.g., Help Me Grow, CCR&R, My Child Care DC, My School DC) <ul style="list-style-type: none"> • Create enhanced print and digital materials available with translation as required by District law. • In collaboration with CCR&R, develop materials, such as bookmarks, Twitter campaign, emails, flyers and community sessions aimed at providing the community with information about available programs and services. • Engage families through the Task Force created to provide feedback on the websites, as well as parent committee and policy council meetings are held at child development facilities and through EHS and HS programs.
3-12	Expand Strong Start playgroups to serve approximately 80 families per month and provide a family-centered, child-interest-driven environment for children to interact with their same-age peers, while families receive information about EI related topics (e.g., child’s development, early childhood developmental screenings, early intervention process and community resources).
3-12	Early Childhood Data Portal Feasibility Study: Expand the current immunization registries that exist in the District by expanding the data accessible and by whom.
1-12	Expand Peer Support Networks including Parent Cafes in underserved communities in Wards 5, 7 and 8.
1-12	Create and implement clear and strategic messaging to families across programs.
2-6	Implement a feasibility study to examine how DC could build from existing Strong Start and Early Stages early intervention program, CCR&R and QIN hubs to expand service delivery of EI in community-based sites to maximize parental choice.
7	Summarize the results of the feasibility study on the expansion of EI services and share with Strong Start, Early Stages, CCR&R and QIN hubs. Discuss short-term and long-term recommendations to expand services to increase parental choice.
1-12	Contract with six business analysts for OSSE (2), DHS (1), DHCF (1), DC Health (2), to support the development of the system by conducting requirements gathering, system analysis, quality assurance testing and cross-sector collaboration.
1-12	Contract two software developers at OSSE to support the business analysts with the development of the applications to support data integration and visualization (e.g., Head Start, WIC, TANF, homelessness).
1-12	Contract two data analysts for OSSE and two data analysts for DC Health responsible for cleaning and analyzing the data, forecasting and creating required reports based on data received for program evaluation.
1-12	Contract a data architect at OSSE to design the infrastructure of the data systems and applications.
1-12	Contract with one business analyst for OSSE to support the development of the system and integration of Healthy Tots and CACFP data into the ECIDS system.
1-12	Contract with two developers for OSSE to support the business analyst in integrating

Month	Action
	Healthy Tots and CACFP data into the ECIDS system.
6-12	Enhance the Thrive by Five DC website to ensure families have easy access to information about all programs and services in the early childhood system by creating a Task Force of families to help redesign the website.
6-12	When the feasibility study is complete to align eligibility, streamline enrollment and create a web-based access point for parents to complete an initial application for Medicaid, TANF, SNAP, child care and WIC, begin process of developing goals and action steps around the development of universal application, with the engagement of families involved in the design and development.
7-12	Develop more interactive, user-friendly, web-based applications within key websites to provide families with personalized information that may be used to make choices among these programs, services and supports: <ul style="list-style-type: none"> • Develop a “family profile” on <i>My Child Care DC</i> that families can use to save searches and comparisons of licensed facilities, including an alert function when a saved or “liked/hearted” facility changes its enrollment status to “vacancy”. • Create search function on <i>Thrive by Five</i> that asks families questions related to the age of the child, services they need, child care, health insurance, etc. and return results with links to the appropriate resources. • Create a feature on <i>Help Me Grow</i> that adapts developmental milestones chart to an interactive app in which families can view image and video clips of developmental milestones.
9-12	Expand DCPS Family book club to other community locations based on the results of the needs assessment and strategic plan
9-12	Enhance the My Child Care DC website to include waitlist and vacancy information by contracting with one web developer
10-12	Expand parent awareness of EdFest by sharing information with B-5 partners and peer support network.

Strategic messaging will be implemented through these activities to ensure families are aware of these resources and are able to actively access them. The District will strengthen communication to account for the different populations (e.g., different literacy levels, people with disabilities, CLD) and different preferences for the modality in which content is received. Further, the vulnerable populations of interest often have limited data plans and internet access, so it’s important to have alternative methods of communication. Building on this work, the District will implement:

- *Consistent and Clear Messaging:* In addition to technological resources, the District also seeks to improve messaging by reducing the number of acronyms and sector-specific

language (e.g., use of “professional” jargon with families without sufficient or any explanation) that can, too often, be confusing for families and may reduce utilization of programs/services. The District also aims to make more intentional efforts to use consistent messaging across programs/services (i.e., using the same word when intending to describe the same program, service, etc.). In addition, the District is aware, as with many ECE programs, that different programs have similar names, which can be confusing to families who seek to access services. The District aims to better “package” programs that offer similar services so that, combined with better messaging, selection can be leveraged by families.

- *Technological Redesigns and Enhancements:* ECIN is beta-testing a mobile app to: (1) facilitate social networking and interconnectivity, (2) support families with accessing community-based resources, expand knowledge and (3) promote skill building. The District aims to design more comprehensive and accessible (e.g., multiple languages) apps and alerts/features. The District also aims to improve our website design, adopting features like a “3 click rule” (i.e., users should be able to find resources they are seeking within “3 clicks” on a website).
- *Peer Support Network:* This comprises of the TANF ambassadors, ECIN peer support and DBH peer support workers that support families. Peer support workers will encourage parents to enroll in the app so they can be connected with supports and resources. Peer support network will be part of the Train the Trainer Parent Cafes.
- *Improving Information Networks:* The District has already realized the impact of word-of-mouth messaging through its TANF ambassadors. Within the Department of Human Services (DHS), parents serve as ambassadors within their own communities, so information is

perceived to come from a more trusted source. Seeking to expand upon this type of social network that increases parent knowledge, the District intends to create similar opportunities.

Increase Parent Involvement and Engagement: The District will build upon the HS Parent, Family and Community Engagement (PFCE) networks to strengthen parent and family partnerships and relationships at both the system and program levels. The PDG Core Team will develop feedback loops with existing parent advisory groups (e.g., DCPS Head Start Policy Council, the QIN Policy Council) to provide feedback on an ongoing basis. At the state level, the District will continue to build engagement with parents and families across the District through surveys and focus groups to provide meaningful opportunities for feedback.

In preparation for developing the PDG application, OSSE conducted four focus groups and disseminated a survey through District agency partners and through social media, asking families to identify barriers to accessing programs. Of the 116 survey responses received, the most common barrier cited was a lack of awareness and communication about the programs available. As the District continues to build trust and confidence with parents and families, the goal is to see an increase in awareness and access to programs.

Expansion of Parent Cafes across the District: In partnership with the QIN, the Bainum Family Foundation, a philanthropic organization, spearheads Parent Cafes, a nationally-recognized model for parent engagement and empowerment. Parent Cafes are culturally and linguistically responsive, enabling parents to: 1) gain knowledge and build capacity for supporting their children's development, 2) engage them in using data (e.g., EDI) to help inform action, and 3) build social connections. With PDG funding, the District will expand the Parent Cafes to serve more ECE facilities, with a particular focus on those serving vulnerable children and families.

ACTIVITY FOUR: SHARING BEST PRACTICES

Opportunities for collaboration, coordination and sharing best practices: OSSE works to coordinate and collaborate with internal OSSE divisions, District agencies, federal TA providers, local programs and public-private partners. There are ongoing efforts to collaborate among system leaders to reduce duplication of effort, leverage financial and other resources, increase quality and efficiency, improve transitions into the early grades through ongoing and purposeful quarterly meetings with agency leads, a review of financial activities and supports, and engagement with families around barriers, feedback and preferred programmatic activities.

Additionally, OSSE partners provide training offered through the Professional Development Information System (PDIS). Regular meetings between partners (e.g., OSSE grantees) are held to review and assess the needs of the provider community and establish plans for addressing those needs through intentional PD and TA.

In addition to the extensive agency partners, OSSE provides quality facilitators to support subsidy providers and licensed non-subsidy providers that participate in Capital Quality. The quality facilitators work one-on-one with providers to support the development of a CQIP and provide ongoing support based on the providers' identified needs. The quality facilitators also work closely with CCR&R, QIN coaches and family engagement specialists and DBH Healthy Futures coaches.

OSSE and partners provide extensive PD, both in person and online, for early childhood staff (e.g., center directors, teachers, assistant teachers, home caregivers and associate home caregivers) at licensed child development facilities. OSSE has also started to hold joint PD sessions for teachers from licensed child development facilities and LEAs on topics related to CLASS and incorporating Science, Technology, Engineering and Math (STEM) activities in the

early childhood setting. With the PDG funding, the District also plans to expand the online Quorum training platform to an additional 4,000 early childhood professionals in the mixed-delivery system, including DCPS, public charter schools, early interventionists and home visitors.

Plan to Share Best Practices: The District has comprehensive training, PD and TA supports to promote use of best practices among the early childhood workforce; however, these efforts are often undertaken in silos by programs, services and supports with discrete funding sources. Strategies to reduce duplication of effort and leverage these resources toward promoting program quality are needed.

With PDG funds, the District will strategically expand trauma-informed practices via coaching and mental health consultation and build the capacity of the early care and education workforce via an expanded coaching cadre to improve the overall quality of early care and education programs and, ultimately, better promote the developmental outcomes of vulnerable children. Through coordination and collaboration of the PDG Core Team and District agencies, OSSE will expand the use of best practices (e.g., evidenced-based programs, systemic PD, trauma-informed practices) across the District to enhance communication and messaging (via more consistent and clear messaging, technological redesigns and enhancements and improving information networks among parents/families), reduce duplication of effort and streamline services (via an enhanced and integrated data system) and improve early identification and intervention services (via a collaborative early learning service delivery model). Specific activities for expanding the B-5 services are outlined below.

Table 6. Activity Four Actions and Timeline

Month	Action
4-7	Expanding Quorum training platform to an additional 4,000 early childhood

Month	Action
	professionals in the mixed-delivery system , including DCPS, public charter schools, early interventionists and home visitors.
4-7	Update the My Child Care DC website to include more information about quality programming , creating My Child Care DC as a one-stop resource for families and the early childhood workforce across the mixed delivery system to access best practices.
4-12	Create practice networks with QIN, Capital Quality and LEA coaches, Healthy Futures, Primary Project and LEA mental health consultants to provide PD and TA on trauma-informed approaches .
4-12	Expand Healthy Futures to provide mental health consultation services to 40 early childhood providers and local education agencies
4-12	Provide ongoing professional development and coaching for early childhood educators in CBOs and LEAs on trauma-informed approaches .
4-12	Expand Parent Cafes capacity across the District through expanding the number of those that can train and creating Parent Cafe hubs that families can access across the District on a monthly basis, serving an estimated 150 new families.
8-10	Toward further coordination and integration, OSSE will hold a Fall Institute for early childhood staff across the mixed delivery system, including a kick-off of the strategic plan, keynote speakers and cross-sector workforce.

Systematic TA to local communities and CBOs: Healthy Futures, implemented by DBH and funded by Child Care and Development Fund (CCDF), provides infant and toddler centers with mental health program consultation and child-specific consultation, using evidence-based programmatic consultation and practices to support the families of young children to reduce problematic behaviors. Healthy Futures includes assessment and intervention with parents and caregivers, linkage with community resources, and frequent evaluation for effective and appropriate techniques to promote sustainable change. This program will be expanded to 40 more licensed facilities and LEAs via consultation and systematic PD to support effective behavior management and access to mental health resources.

The Bainum Family Foundation has funded training and community of practice sessions for the system-level workforce, including coaches and quality facilitators, center directors, teachers and home providers on the Infant/Toddler Environment Rating Scale-Revised (ITERS-R) and Family Child Care Environment Rating Scale-Revised (FCCERS-R). The facilitation of

systematic training of this type, through community of practice sessions, promotes self-reflective practice that leads to adoption of best practices. With PDG funding, the reach of these trainings will be expanded to include more professionals, as well as expand family engagement opportunities through Parent Cafes. In collaboration with the Bainum Family Foundation, Parent Cafes will be expanded across the District (e.g., increasing the number of trainers, offering more regular Parent Cafes).

ACTIVITY FIVE: IMPROVING QUALITY

The District will submit the needs assessment and strategic plan by June 2019. The final five months will include the following investments in quality improvement on the overall quality of early childhood care and education programs and providers within the State using evidence-based practices:

- Implementing trauma-informed practice.
- Providing grants (requiring a financial match) to programs to purchase furniture, books, rugs and equipment for classrooms that are identified through ITERS-R of FCCERS-R as areas requiring attention.
- Purchasing research-based assessments, curricula and training infant/toddler teachers at licensed facilities participating in the District’s QRIS.

OSSE and other agencies and partners provide quality investments. Through feedback from key stakeholders, OSSE plans to enhance programs related to workforce. For example, additional PD will be conducted related to trauma-informed practices for early childhood care and education professionals.

Table 7. Activity Five Actions and Timeline

Month	Action
8-12	Implement trauma-informed approaches in five licensed child development facilities and five schools that serve 60 percent or more of the target population.

8-12	Purchase furniture, books, rugs and equipment for classrooms that are identified through ITERS-R of FCCERS-R as areas requiring attention.
8-12	Purchase research-based assessments, curricula and training for 1,200 infant/toddler classrooms at licensed facilities participating in the District's QRIS.

ORGANIZATIONAL CAPACITY AND MANAGEMENT

Roles: OSSE is the lead agency for this grant and will lead the coordination and collaboration for all District agency partners and private sector stakeholders. The work will be supported by the SECDCC, the PDG Core Team with regular engagement with provider and parent advisory and association groups.

Staff experience and expertise: Key individuals include:

- **Elizabeth Groginsky, Assistant Superintendent of Early Learning:** *Role on PDG:* Leads the coordination and implementation of the District's PDG B-5 application. *Expertise:* 20 years of experience leading and developing multi-sector collaborations at the national, state and local levels to develop innovative solutions that shape and transform early childhood systems. She has particular expertise and background in developing and communicating about early childhood services and linking them to improved outcomes for young children.
- **Bonnie Mackintosh, Director of Policy Planning and Research, Early Learning:** *Role on PDG:* Monitors and documents program performance. *Expertise:* 20 years experience in the field of ECE with culturally and linguistically diverse children and low-income families with over five years of experience in design and implementation of research studies, specifically with expertise in quantitative methodology, educational measurement and survey design.
- **Kathryn Kigera:** *Role on PDG:* Helps implement TA efforts and support efforts around trauma-informed practices outlined in the PDG. *Expertise:* Has a doctorate in education, focused on cultural and linguistic diversity and disability studies. She has over 10 years' experience in research and program management aimed towards vulnerable populations.

- **Thomas Fontenot:** *Role on PDG:* Oversees the technical aspects of PDG implementation, including data systems and applications. *Expertise:* Has led the Office of the Chief Information Officer (CIO) since 2009; he coordinates collaborative agency-wide technology strategic and tactical planning to ensure delivery of high-quality technologies, data systems, voice communications, infrastructure and networking services.
- **William Henderson:** *Role on PDG:* Oversees data governance, privacy, design and implementation of ECIDS. *Expertise:* Project director for implementing and integrating the FY12 Statewide Longitudinal Data System (SLDS) postsecondary and workforce modules in SLED, which is used for program evaluation and improving educational outcomes of many of our District residents. Instrumental in executing many of the data sharing agreements between the District's education and social services sectors.
- **Teja Adusumalli (contractor):** *Role on PDG:* Leads the cross-sector engagement for the development of the ECIDS. *Expertise:* Business analyst and product owner with over 10 years of information systems and business analysis experience ranging from business analysis and requirements, project management and client relationship management to strategic planning. Has in-depth experience with systems integration.
- **Baron Rodriguez (TA consultant):** *Role on PDG:* Consults on data governance and privacy across the B-5 systems. *Expertise:* Director of Privacy and Data Security for WestEd. Responsibilities include information security and privacy best practices. Prior to joining WestEd, he was the Director of the U.S. Department of Education's Privacy Technical Assistance Center and the National Center for Education Statistics' State Longitudinal Data Systems technical assistance center.

Expertise in FOA Program Activities: The District's team brings deep expertise in federally funded Head Start, MIECHV, EHS-CCP grant and state funded pre-K and child care.

Fiscal, Administrative and Performance Management: OSSE has the capacity to administer funding, maintain the security and privacy of any data related to the development of grant activities and coordinate multiple stakeholders in the early education sphere. OSSE manages and passes through over \$80 million in grant funding each year.

OSSE has the organizational capacity to administer funding through grants, contracts and intra-government MOUs. OSSE has established grant and sub-grant policies and systems and adheres to the Uniform Administrative Requirements, Cost Principles and Audit Requirements for federal grants in the management of sub-grants issued with federal funding. OSSE follows District Government requirements for transparent and fair management of competitive grant competitions as dictated in the Citywide Grants Manual and Sourcebook. OSSE has implemented the Enterprise Grants Management System (EGMS) for the fiscal management of grants. The system was designed to improve the management and administration of federal and local grants managed by OSSE.

Once awarded, OSSE will use a risk-based system for monitoring and providing targeted TA. OSSE's grants management and program staff review monthly reimbursement requests in EGMS to determine that all expenses are aligned with the grantees' scope of work and approved budget. Each program maintains records on file for a minimum period of three years. These records must be accessible at all times for review upon request by officials from the District of Columbia Government or the Federal Government. OSSE requires all sub-recipients to participate in ongoing trainings and meetings, particularly for first-time sub-recipients. Onsite visits support efforts to maintain quality and ensure compliance with OSSE grant and contractual agreements,

inclusive of OSSE's internal policies and procedures, and relevant District and Federal regulations. Each sub-grantee is required to submit at least a quarterly progress report that allows OSSE to provide TA in areas of need. Finally, sub-grantees must complete an annual continuation application and budget.

Finally, OSSE manages intra-district transfers through MOUs, in which both parties agree to a formal scope of work in exchange for a clear and transparent fee schedule. Examples of MOUs with other agencies include an MOU with DHS, which is also the District's TANF agency, which outlines the roles and responsibilities of DHS in determining child care eligibility, and an MOU with DBH to provide a research based mental health consultation model in centers and homes.

OSSE requires all employees, contractors and other personnel to maintain the security and privacy of any and all data, documents and information acquired by and accessed through OSSE. Staff are required to sign a non-disclosure agreement asserting compliance with these policies. OSSE also has an in-house Data, Assessment and Research Team, which supports OSSE as it removes barriers and creates pathways for the District's K-12 students to receive an excellent education and to prepare them for success. Support is provided through the design and administration of the assessments.

PROJECT TIMELINE

Project Deliverables	Person/Entity Responsible	1	2	3	4	5	6	7	8	9	10	11	12
<i>NEEDS ASSESSMENT</i>													
Convene the Data Needs Assessment and Insights Committee of the SECDCC.	Bainum Consultant (BC)												
Conduct a review of all current federal and state needs assessments and available data in the District.	BC												
Analyze existing administrative data for pre-K, child care, Head Start, home visiting, TANF, Medicaid and WIC participation to understand the level of program participation and demographics.	OSSE Data Analyst Contractor												
Conduct listening sessions with 100 families through DCPL, HS and EHS parent committees and TANF partners.	BC												
Conduct 10 focus groups with early childhood professionals across the mixed delivery system.	BC, OSSE Health and Wellness Specialist												
Conduct 10 key informant interviews with Department leaders.	BC												
Inventory all “pilot” and “demonstration” projects that have been conducted in the B-5 mixed delivery system for evidence, impact and scalability.	BC, Core Team												
Summarize the data/information collected, analyze findings and develop a report and a PPT.	BC, OSSE Contractor, Data Analyst												
<i>STRATEGIC PLAN</i>													
Kick-off meeting with SECDCC and PDG Core Team.	OSSE Contractor												
Present results of needs assessment to SECDCC committees.	OSSE Contractor												
Establish a project work plan (stakeholder engagement plan) with deliverables and timelines.	OSSE Contractor												

Project Deliverables	Person/Entity Responsible	1	2	3	4	5	6	7	8	9	10	11	12
Implement the stakeholder engagement plan; convene the SECDCC at least three times during the development of the plan.	OSSE, SECDCC, Contractor			■	■	■							
Develop a five year strategic plan among existing programs in State and LEAs.	SECDCC, Contractor				■	■							
Submit plan for ACF approval; adjust as needed.	Contractor, Core Team						■						
Implement a dissemination plan.	OSSE Contractor								■				
<i>MAXIMIZING PARENTAL CHOICE</i>													
Market Capital Quality designation on the My Child Care DC.	OSSE Contractor	■	■	■	■	■	■						
Develop an outreach toolkit for My School DC.	OSSE Contractor	■	■	■	■	■	■						
Conduct a feasibility study to determine the ability of the District to align eligibility, streamline enrollment, and the creation of a web-based access point for parents.	OSSE Contractor	■	■	■	■	■	■						
Develop and implement a marketing and communications strategy to help families navigate the services offered in the District.	OSSE Contractor			■	■	■	■	■	■	■	■	■	■
Expand Strong Start playgroups to serve approximately 80 families per month.	OSSE			■	■	■	■	■	■	■	■	■	■
Early Childhood Data Portal: Expand the current immunization registries that exist in the District by expanding the data accessible and by whom.	OSSE, DC Health, DHS Contractors	■	■	■	■	■	■	■	■	■	■	■	■
Expand peer support networks including Parent Cafes in underserved communities in Wards 5, 7 and 8.	DHS, DBH, ECIN	■	■	■	■	■	■	■	■	■	■	■	■
Create and implement clear and strategic messaging to families across programs.	Core Team, Communication Contractor	■	■	■	■	■	■	■	■	■	■	■	■

Project Deliverables	Person/Entity Responsible	1	2	3	4	5	6	7	8	9	10	11	12
Implement a feasibility study to examine how DC could build from existing Strong Start and Early Stages early intervention program, CCR&R and QIN hubs to expand service delivery of EI in community-based sites to maximize parental choice.	Contractor, Core Team												
Summarize the results of the feasibility study on the expansion of EI services and share with Strong Start, Early Stages, CCR&R and QIN hubs. Discuss short-term and long-term recommendations to expand services to increase parental choice.	OSSE Contractor												
Contract with six business analysts for OSSE (2), DHS (1), DHCF (1), DC Health (2), to support the development of the system by conducting requirements gathering, system analysis, quality assurance testing and cross-sector collaboration.	OSSE, DHS, DHCF, DC Health												
Contract two software developers at OSSE to support the business analysts with the development of the applications to support data integration and visualization (e.g., Head Start, WIC, TANF, homelessness).	OSSE CIO												
Contract two data analysts for OSSE and two data analysts for DC Health responsible for cleaning and analyzing the data, forecasting and creating required reports based on data received for program evaluation.	OSSE, DC Health												
Contract a data architect at OSSE to design the infrastructure of the data systems and applications.	OSSE CIO												
Contract with one business analyst for OSSE to support the development of the system and integration of Healthy Tots and CACFP data into the ECIDS system.	OSSE CIO												
Contract with two developers for OSSE to support the business analyst in integrating Healthy Tots and CACFP data into the ECIDS system.	OSSE CIO												

Project Deliverables	Person/Entity Responsible	1	2	3	4	5	6	7	8	9	10	11	12
Enhance the Thrive by Five DC website to ensure families have easy access to information about all programs and services in the early childhood system by creating a Task Force of families to help redesign the website.	OSSE/Web Developers												
When the feasibility study to align eligibility, streamline enrollment and create a web-based access point for parents to complete an initial application for Medicaid, TANF, SNAP, child care, and WIC is complete (above), begin process of developing goals and action steps around the development of universal application, with the engagement of families involved in the design and development.	OSSE, DHS, DC Health/ Business Analyst												
Develop more interactive, user-friendly, web-based applications within key websites to provide families with personalized information that may be used to make choices.	OSSE												
Expand DCPS Family book club to other community locations based on the results of the needs assessment and strategic plan	Core Team, OSSE												
Enhance the My Child Care DC website to include waitlist and vacancy information	OSSE CIO												
Expand parent awareness of EdFest by sharing information with B-5 partners and peer support network.	OSSE DEL												
<i>SHARING BEST PRACTICES</i>													
Establish a fall institute for 6,000 early childhood staff across the mixed delivery system.	OSSE, Contractor												
Expand Quorum, a web-based professional development learning platform to an additional 4,000 early childhood professionals.	OSSE, Contractor												
Create practice networks with QIN, Capital Quality and LEA coaches, Healthy Futures, Primary Project and LEA mental health consultants to provide PD and TA on trauma-informed approaches.	OSSE, Contractor, GUCCHD												
Expand Parent Cafes across the District to effectively engage families and build protective factors.	OSSE, Contractor												

Project Deliverables	Person/Entity Responsible	1	2	3	4	5	6	7	8	9	10	11	12
Expand DBH's Healthy Futures expansion -- mental health consultation services.	DBH, Contractor				■	■	■	■	■	■	■	■	■
Provide ongoing professional development and coaching for early childhood educators in CBOs and local educational agencies on trauma-informed approaches.	OSSE, Contractor				■	■	■	■	■	■	■	■	■
Update the My Child Care DC website to include more information about quality programming.	OSSE, Contractor				■	■	■						
<i>QUALITY IMPROVEMENT</i>													
Implement trauma-informed approaches in five child development centers and five schools that have 60 percent or more of the target population enrolled.	OSSE, Contractor							■	■	■	■	■	■
Purchase furniture, books, rugs, equipment for child development facilities are identified in ITERS-R or FCCERS-R as areas requiring attention.	OSSE, Contractor							■	■	■	■	■	■
Purchase research-based assessments, curricula and training for 1,200 infant/toddler classrooms at licensed facilities.	OSSE							■	■	■	■	■	■
<i>OVERALL GRANT MANAGEMENT</i>													
Hire three temporary FTEs to support grants and program management of the PDG B-5 grant.	OSSE	■	■	■									
Implement performance evaluation for PDG activities.	OSSE, Contractor	■	■	■	■	■	■	■	■	■	■	■	■
Create a final performance report.	OSSE, Contractor											■	■
Participate in three-day national grantee meeting.	OSSE	To be determined											

EVALUATION PLAN

Logic Model. The multi-method evaluation of the PDG grant will involve collecting both formative and summative data. The formative and summative portion of the evaluation consists of an ongoing process to track major activities, outputs and outcomes described in detail in the attached logic model. Ensuring alignment with the District's vision that all children will have equitable access to high-quality opportunities so they can maximize their full potential, the evaluation will include process indicators related to trauma-informed practices, an enhanced and integrated data system, enhanced communication and messaging and comprehensive early learning hubs. The logic model includes the short (1 year), intermediate (2-3 years) and long-term (3-5 years) outcomes. Based on the theory of change underlying the logic model, the short-term outcomes are expected to be: increased percentage of ECE providers that know and implement high-quality ECE practices (including trauma-informed practices), higher-quality ECE care and education programs, improved child social-emotional competence, reductions in disruptive behavior, increased percentage of schools and resource and referral programs that have information necessary to facilitate smooth transitions from ECE programs into LEAs, particularly for vulnerable families. Likewise, intermediate outcomes are expected to be: increased percentage of parents that can identify and have access to high-quality ECE programs, increased percentage of children (with EI services during 0-5 years) served in general education environments with typically developing peers upon transition into the LEA. Long-term outcomes are expected to be: increased percentage of children with social-emotional well-being and school readiness, increased percentage of children receiving trauma-informed developmentally appropriate practices in all early childhood care and education programs serving children birth

through age five and decreased percentage of children who are “developmentally vulnerable” as indexed by EDI.

Existing data infrastructure, systems and data elements. The evaluation team will work with the OSSE technology director to develop an implementation tracking dashboard that will be designed to monitor the implementation of the core PDG grant activities. Outputs will be assessed by conducting a series of surveys with parents and providers in multiple roles within the mixed delivery system. The proposal includes metrics already collected in the District (e.g., CLASS) as well as incorporating new metrics to address gaps in processes such as school/facility quality (e.g., Faculty/Trust survey) and interactions between children and parents (e.g., DECA) to more fully understand the systems-level impact of these interactions between children, parents, teachers, and other staff upon expanding implementation of trauma-informed practices.

Methodological approach

The evaluation of the PDG grant will be co-led by two Georgetown researchers, Dr. Deborah Perry, Director of Research and Evaluation in the Georgetown University Center for Child and Human Development (GUCCHD) and a faculty member in the Department of Pediatrics and Dr. Celene Domitrovich, Director of Research and Innovation for the Early Childhood Innovation Network (ECIN) and a faculty member in the Department of Psychiatry. Both Drs. Perry and Domitrovich have over 20 years of experience conducting community-based participatory research; they will be assisted by an evaluation coordinator and a research assistant.

The multi-method evaluation of the PDG grant will involve collecting both formative and summative data from all key stakeholders involved in the key project activities. The team will draw from existing data sources when possible and administer new measures when appropriate metrics do not exist. The formative portion of the evaluation consists of an on-going process to

track major activities and outputs described in the logic model. These tracking and monitoring strategies will ensure that activities are accomplished in an efficient, timely, and high quality manner. The summative portion of the evaluation involve specific, targeted methods to assess the impact of the project's activities and products on teachers, families, and other key stakeholders and to monitor whether short-term outcomes are achieved.

Metrics

Activity 1: Assessment during this phase will focus on quality assurance of the needs assessment. Specifically, the evaluation team will ensure there is diversity in the participation of the needs assessment (e.g., selection of participants is representative) and ensuring quality assurance protocols of data collection and coding.

Activity 2: To assess the effectiveness of the strategic planning process, the evaluation team will collect meeting minutes from the PDG core team meetings, track attendance at the strategic planning meetings, and track the key activities included in the Stakeholder Engagement Plan (see dashboard description below). In addition, online surveys will be administered to attendees at roadshow meetings conducted with stakeholder groups to gather feedback regarding

Activity 3: The primary method for assessing parent choice and knowledge is to conduct online and phone surveys. With consultation from the Medstar Health Research Institute, a sampling strategy will be developed that identifies families from across the mixed delivery system who are demographically representative of the District population. Incentives are included to promote high levels of engagement. Several surveys will be conducted. The first will be designed to assess the effectiveness of the marketing and communication campaign (related to health, care and education services) and the technological redesigns and enhancements to District websites, two key implementation activities in the logic model. These questions will be

embedded into the District websites (i.e., My Child Care DC, My School DC, Thrive by Five) and the ECIN mobile app in order to collect information directly from users. In addition, a Parent Transition Survey (PTS) will be conducted in September 2019 online and by phone with families whose children recently transitioned into preschool (community-based and LEA's) and Kindergarten. Parents will be asked whether they were impacted by the communication and marketing campaign and whether this information facilitated their knowledge and choice at these key time points. The survey will include items to assess how parents' accessed information used to make choices, the extent to which families report receiving clear and consistent messages, their level of awareness of existing programs/services, whether they felt knowledgeable enough to be an informed decision, and their level of satisfaction with the information that was available to them. Items from the PTS will also include questions regarding the efficient transition of paperwork that should be enhanced with the integrated data system. Parents will also be asked if their child received early intervention services and whether the family had the ability to remain in their non-LEA delivery site and still receive services. The responses to the PTS will be used to calculate overall levels of knowledge and satisfaction and the percent of families who report high levels will be reported by delivery system sector.

In order to determine the effectiveness of the strategies to improve the District's information network that support families, which includes providing training to informal and natural supports who have contact with families, additional surveys will be administered to caregivers who participate in Parent Cafes, play groups, and who have contact with members of the Peer Support Network. Items will parallel the items on the PTS but also assess whether information was provided specifically through the Parent Café or the Peer Support worker and parents' level of satisfaction with receiving information in these specific settings. Data regarding the extent to

which members of the peer support network have contact with families and facilitate their knowledge regarding health, child care, and education programs will be collected through the implementation dashboard. The effectiveness of the training and technical assistance provided to peer support workers (e.g., TANF, DBH, DC Health) will be evaluated by collecting surveys with these individuals prior to and after they receive training to assess their knowledge and confidence in supporting parents' choice.

Parent surveys will also be used to assess the core strategies related to building a more enhanced and integrated data system. Parents who are part of the feasibility study around the development of a universal application for income-eligible services (e.g., SNAP, TANF, WIC, child care subsidy) will be recruited to complete a survey that will assess their satisfaction with the process. An analysis of administrative data will be conducted to determine whether the rates of vulnerable families receiving multiple income-eligible services increased over the budget period by comparing rates in the final months of the grant to rates at the same time point last year prior to the grant award. In addition the PTS will include a question about whether families used the universal application and ask them to rate their satisfaction with the process.

Activity 4: Training and technical assistance contractors (i.e., trauma-informed practices, coach trainers, certified Parent Cafes trainers) will be given access to the implementation dashboard to track workshop dates and attendance. As practice networks are formed among coaching and consultation teams and peer support workers, a designated representative will provide information regarding session frequency and attendance. Coaches (i.e., QIN, Head Start, Capital Quality) and consultants (Healthy Futures, expansion sites) across the mixed delivery system will be given access to the dashboard and asked to track the sites where they provide services and the amounts of time spent in those settings. In order to explore the relationship

between coaching and short-term improvements in quality, an overall measure of coaching intensity will be calculated for each entity within the mixed delivery system and variation on this indicator will be examined in relation to variations in the average quality rating for the site. The effectiveness of the training and technical assistance provided to coaches and consultants will be evaluated by collecting surveys with these individuals prior to and after they receive training.

Implementation dashboard access will be provided to directors of licensed child development facilities providing child care subsidies, centers within the Quality Improvement Network (QIN) and directors of community-based organizations that administer home visiting programming, and supervisors of early intervention specialists. A Provider Survey (PS) will be administered to a representative sample of all entities within the mixed delivery system.

In addition to expanding trauma-informed service by implementing ITI-ECMHC, the PDG grant funds will be used to fund materials (e.g., supplies, assessments, curricula) and professional development that promotes high-quality care and education in classrooms serving children birth to 5. In order to determine the extent to which providers take advantage of these resources, an online provider survey will be administered to licensed child development facilities, early learning centers and family child care providers, LEA's and community-based organizations that deliver home visiting services. Members of the leadership in these settings will be asked to respond to items that assess the professional development activities of their staff and the extent to which resources were expanded. This survey also provides an opportunity to assess the effectiveness of the Early Learning Hubs. Items will assess the extent to which early intervention supports were delivered to children onsite.

Incorporation of findings into strategic plan. The findings from this first year's evaluation plan will be incorporated into the strategic plan in several ways. Specifically, the evaluation will

ensure that early care and education programs serving the District's most vulnerable children are not only engaging in evidence-based best practices, but will also ensure that the same measures are used for assessing children's outcomes and system level changes (e.g., school/facility climate). Upon finding evidence that these programs can be effectively scaled up with the District's children and families, policies can be enacted to more fully expand implementation.

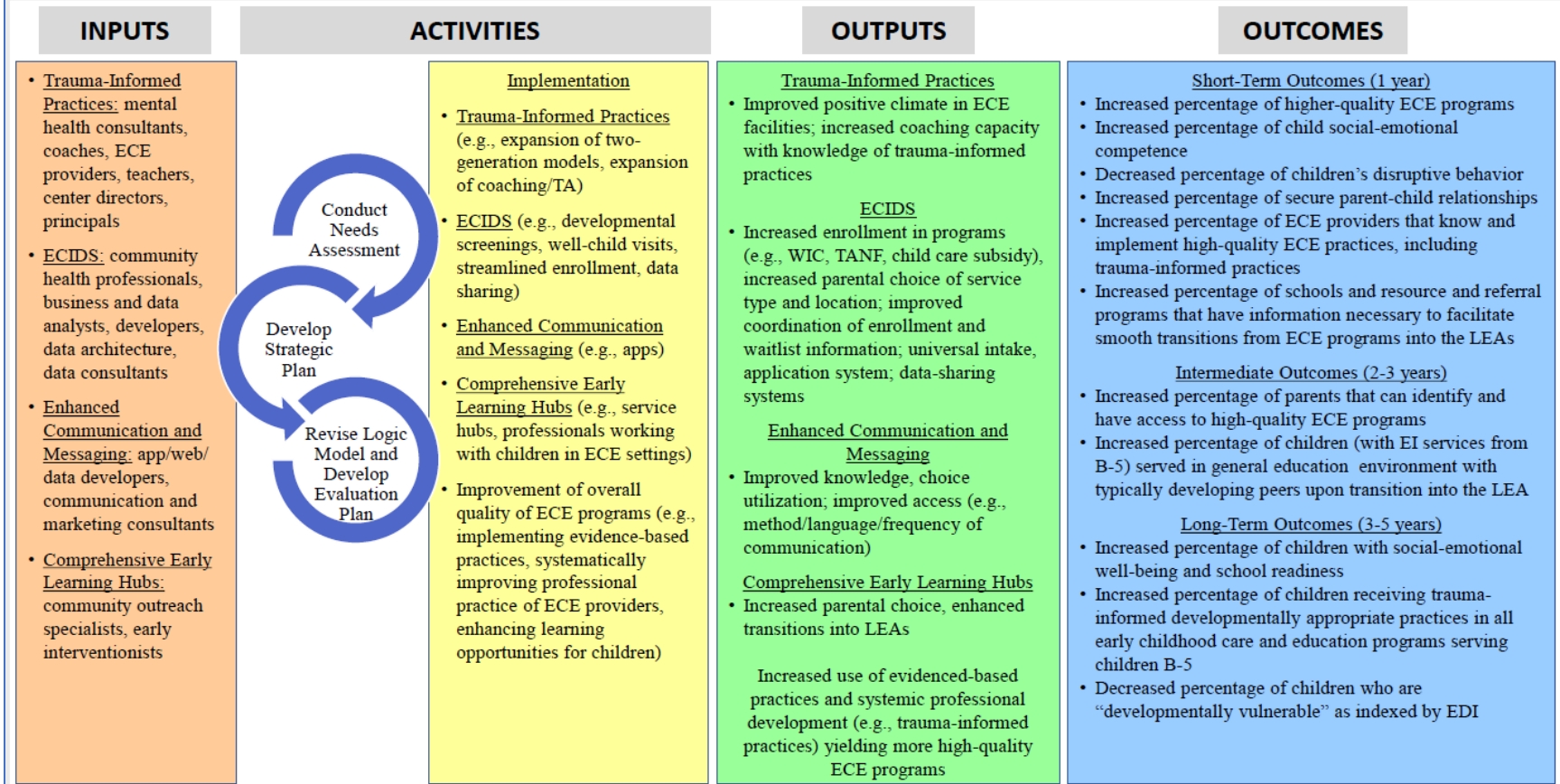
Activity 5: The evaluation team will employ several strategies to determine whether the expansion activities designed to improve program quality had their intended effect. The first strategy is to conduct a multi-method study of the 10 expansion sites that will be implementing the Integrated, Trauma-Informed model of Early Childhood Mental Health Consultation (ITI-ECMHC). When the grant is first awarded, OSSE will identify a set of 20 sites that are eligible to participate in this grant component (i.e., enrollment of at least 60% vulnerable population). A whole school survey adapted from two existing measures that capture school climate, organizational factors associated with early childhood education effectiveness, and the use of evidence-based programming will be administered in all 20 sites. A subset of sites from within this group will be selected to receive support from a MH consultant and the teachers and administration will participate in training and technical assistance provided by the GUCCHD. Teacher ratings of efficacy, burnout and mindfulness will be collected before and after the training. Teachers will be asked to complete the Strengths and Difficulties Questionnaire and the Devereux Early Childhood Assessment (DECA) at the beginning and end of the grant period to assess the level of classroom problem behavior and individual students' functioning. Observations of program quality that are collected as part of the District's QRIS system (e.g., CLASS, ITERS-R) will be accessed. The same staff survey will be repeated at the end of the grant period. Analyses comparing the overall quality in the 10 expansion sites to the 10 sites that

were eligible but not included will be compared to determine if the short-term outcome of improving quality was achieved.

LOGIC MODEL

Goal: Strengthen the District of Columbia’s B-5 system of early childhood care and education to be more coordinated and comprehensive in its approach to improve outcomes for young children and their families

Target Populations: Children experiencing homelessness, children with special needs, children in foster care, children in families with very low incomes



SUSTAINABILITY PLAN

Through the PDG Core Team we will continue to identify resources and maximize existing efforts to improve outcomes for young children, B-5. The results of the PDG needs assessment, the District's five-year strategic plan, the data governance, privacy and integration work and the internal and external communication tools (e.g. enhanced websites, consistent and coordinated messaging, the PDG Core Team) and our strong public-private partnership will position the District well to continue this work.

As part of the strategic planning process, we will look for opportunities to leverage local funding and funding through the Child Care and Development Block Grant, Title V, Medicaid and the Family First Preservation Services Act to identify shared measures and metrics for learning and improvement and spread and scale best practice and evidence-based programs. This will enable the District to sustain expansion of key programs initiated with the PDG.

Further, the professionals working in and supporting the B-5 mixed delivery system will deepen their knowledge, skills and competencies in trauma-informed approaches, communication and messaging and how to effectively use data to improve program participation and outcomes for children. This will have a lasting effect on them as professionals and the children they serve.

The District will use the PDG grant to obtain and build the sustainable comprehensive data system that aligns data across multiple existing data collections. OSSE already maintains SLED and has the expertise to understand required resources necessary to ensure the sustainability of this data system. Furthermore, the District recognizes we are not the first state to attempt to align these systems and therefore will work with national partners to ensure best practices and avoid

waste. Additionally, as evidenced by the significant investment in B-5, the District has demonstrated its commitment to ensuring our youngest residents are prepared for school.

DISSEMINATION PLAN

OSSE's dissemination *goals and objectives* are to reach a broad set of stakeholders, constituents and customers to create sustainable engagement opportunities. The District will release Mayor Bowser's Five-Year Early Childhood System Strategic Plan at the District's inaugural B-5 Early Learning Conference. We will have over 6,000 early care and education professionals representing Head Start, child care, and pre-K in CBOs and LEAs, family advocacy organizations and health and family support organizations in attendance. The needs assessment and strategic plan will be hosted on the OSSE website and the Thrive by Five DC website. All plans, reports and findings will be disseminated through the Division of Early Learning's monthly newsletter (reaching over 2,000 stakeholders) the LEA Look Forward, which is distributed monthly to LEAs, and through the Public Charter School Board's Wednesday newsletter. Through our Parent Cafés we will connect regularly with 200 parents. Additionally, we will disseminate information using scheduled and unscheduled meetings with key target audiences, including, but not limited to: regular provider meetings (e.g., pre-K, community of practice, directors' exchange, etc.); QIN meetings; SECDCC meetings; parent engagement meetings; OSSE-led trainings – online and in-person; OSSE-led focus groups with parents – online and in-person; Shared Services meetings; public community forums; Read Across DC, DC's signature yearly literary event to commemorate Month of the Young Child; and OSSE-led summits (e.g., parent summits) that gather key target audiences.

To disseminate reports, products, and/or grant project outputs, OSSE plans to provide project information to *target audiences* such as: SECDCC; parents; school leaders; CBO leaders (faith-

based, for-profit, non-profit) – directors and owners; teachers/early childhood workforce; home visiting programs; early intervention professionals (Strong Start/Early Stages); representatives from WIC/Early and Periodic Screening, Diagnostic and Treatment (E.P.S.D.T)/pediatricians; policymakers; business community; philanthropic community; and private sector entities. OSSE will use tools such as a newsletters, social media, webinars, conferences and meetings to each audience in terms of message, format, frequency and content.

OSSE will allocate .5 FTE of the community outreach specialist time and contract with a communication firm to create one-pagers, FAQs, webinars and meeting presentations to disseminate reports, products, and/or grant project outputs across all OSSE platforms that reach key target audiences. We will use digital engagement tools, such as Mailchimp, to identify and engage target audiences via newsletter campaigns. Using online analytics, we will **evaluate the extent to which targeted audiences have received project information and used it as intended.**

BUDGET JUSTIFICATION

OSSE is requesting \$15,000,000 in federal funds to support the Preschool Development Grant proposal for year one. The federal funds will support personnel, fringe, and contractual costs in all five grant activities. The federal and non-federal share budget by PDG grant activity is as follows:

Category	Federal Share (Total PDG Funding)	Federal Share (PDG Funding): TA	Non-Federal Share (Match)
Activity 1: Needs Assessment	\$291,000	\$0	\$348,141
Activity 2: Strategic Plan	\$291,000	\$0	\$109,521
Activity 3: Maximizing Parental Choice and Knowledge	\$7,336,910	\$0	\$562,764
Activity 4: Sharing Best Practices	\$2,863,440	\$590,000	\$937,866
Activity 5: Improving Quality	\$2,037,000	\$900,000	\$4,744,714
Overall Grant Management	\$698,515	\$0	\$54,764
Conducting Program Performance Evaluation Plan	\$1,482,135	\$759,885	\$0
TOTAL	\$15,000,000	\$2,249,885	\$6,757,770

The line item budget by object class categories for the federal and non-federal share of the funds is as follows:

Object Class Categories	Federal Share (PDG Funding)	Non-Federal Share (Match)	TOTAL
Personnel	\$403,259	\$330,723	\$733,982
Fringe	\$92,750	\$68,706	\$161,456
Travel	N/A	N/A	N/A
Equipment	N/A	N/A	N/A
Supplies	N/A	N/A	N/A
Contractual	\$12,390,589	\$5,406,215	\$17,796,804
Other	N/A	N/A	N/A
Sub-total Direct Costs	\$12,886,598	\$5,805,644	\$18,692,242
Indirect Costs	\$2,113,402	\$952,126	\$3,065,528
TOTAL	\$15,000,000	\$6,757,770	\$21,757,770

Personnel: \$403,259

- **Description:** OSSE will hire five new staff members, three at an annual salary of \$85,149 and two at an annual salary of \$73,906. The first staff member (\$85,149) will support the Health & Wellness teams. The second staff member (\$85,149) will support the Early Learning team. The third staff member (\$85,149) will assist with the communications and marketing strategy and manage the contract. The fourth staff member (\$73,906) will support the work of the grant with the SECDCC and the fifth staff member (\$73,906) will support the work of the grant with the SECDCC committees.
- **Justification:** The title of first staff member (salary at \$85,149) will be Early Childhood Health and Wellness Specialist. The title of the second staff member (salary at \$85,149) will be Research Associate in DEL. The title of the third staff member (salary at \$85,149) will be Community Outreach Specialist in DEL. The title of the fourth staff member (salary at \$73,906) is Policy Analyst and the title of the fifth staff member (salary at \$73,906) is Management Analyst. They will commit 100% of their time in Year 1 to the management of the Preschool Development Grant.

Fringe Benefits: \$92,750

- **Description:** OSSE will provide fringe benefits for the five newly hired staff member sat a rate of 23% of the annual salary (described in Personnel above), for a total of \$92,750.
- **Justification:** OSSE uses a fringe benefit rate established by District’s Office of Chief Financial Officer. This rate encompasses mandatory benefits such as Medicare, Social Security, medical, dental and vision.

Travel: No travel costs are anticipated for this grant as only in-state travel will be required of OSSE employees attending the annual meeting in Washington, DC.

Equipment: No equipment costs are anticipated for this grant.

Supplies: No supplies costs are anticipated for this grant.

Contractual: \$12,390,589

- **Description:** OSSE will undertake a number of contractual agreements to implement Year 1 of this grant. These are broken down by Activity in the Justification below.
- **Justification:** OSSE has yet to select the majority of contractors at this time and as such, a detailed budget is not yet available at the time of application. All contractors not yet selected

will be chosen through the District's procurement processes, detailed in the Organizational Capacity and Management section.

- *Activity 1:* OSSE will contract with a third party vendor to conduct the needs assessment. This vendor will review and synthesize current and federal needs assessments, analyze existing data, inventory pilot and demonstration projects that have been conducted, summarize the data information collected and analyze the findings in the stakeholder meetings. Costs will include the following activities: research, conducting listening sessions with 100 families, conducting 10 focus groups with early childhood professionals, 10 key informant interviews with Department leaders, summarizing and analyzing findings. The total cost is estimated at \$250,000, based on similar contracts managed by OSSE.
- *Activity 2:* Contract with third-party vendor to provide assistance with writing the 5 year strategic plan for early childhood system. Costs will include the following activities: drafting of strategic plans and submission for approval, implementation of stakeholder engagement plan and dissemination of plan. The total cost is estimated at \$250,000, based on similar contracts managed by OSSE.
- *Activity 3:* OSSE will expand play-groups through purchasing equipment and staff under a contractual arrangement. The total cost of \$100,000 will cover the expansion of the playgroups to 5 new sites and will fund materials, toys, sanitary items (\$3,000 per each of the 5 sites, total of \$15,000) and contracted staff time (\$85,000).
 - OSSE will expand DCPS family book clubs to other organizations, which will reach at least 20 families. Costs are estimated at \$8,454.
 - OSSE will also contract with third-party vendor to develop and implement marketing and communications strategy. This contract will help families connect with and navigate services offered in the District (e.g., Help Me Grow, DC Child Care Connections, My Child Care DC, My School DC). This vendor will engage with the parent task force. Specific costs may include on-the-ground canvassing efforts and disseminate information, print and radio advertisements, social media and online campaigns, newspaper ads, radio and bus ads, etc. Total cost is estimated at \$600,000 based on bids received from potential vendors.
 - OSSE and partner agencies will hire a number of contracted staff positions to support this grant. Costs are based on similar contracted positions and staffing loads have been designed based on similar system-creation programs.
 - In support of the ECIDS system, PDG funds will be used to support a total of thirteen contracted staff, broken down as follows: 2 OSSE Business Analysts will support the development of the early childhood integrated data system by conducting requirements gathering, system analysis and quality assurance testing, \$500,000 will provide funding for 2 analysts; 4 additional Business Analysts will be hired at (1) DHS, (2) DC Health Care Finance and (1) DC Health (\$250,000 each, \$1,000,000 total) to collaborate and coordinate with the OSSE Business Analysts to ensure all early childhood data systems are connected and sharing information; 2 OSSE Software Developers (\$250,000 each, \$500,000 total) will support the Business Analysts with the development of the applications to meet the requirements stated above; 4 Data Analysts, two at DHS and two at OSSE, are responsible for cleaning and analyzing the data, forecasting, and creating required reports based on the data received for program evaluation (\$250,000 each for a total of \$1,000,000); and a Data Architect will design the infrastructure of the system (\$250,000 total).

- In support of integrating the Healthy Tots and CACFP into the ECIDS system, OSSE will hire two developers (\$250,000 each for a total of \$500,000) and one business analyst (\$250,000).
 - An OSSE Web Developer (\$200,000) will enhance My Child Care DC to include waitlist and vacancy information.
- OSSE will contract with a third party vendor to establish a task force of families to ensure families have easy access to information about all programs and services in the early childhood system by creating a Task Force of families to help redesign the website. This contractor will enhance the Thrive by Five DC website and communications to facilities to ensure families' access to information about all programs and services in the early childhood system and provide incentives and travel reimbursement for participating families. Costs are estimated at \$500,000 based on similar initiatives.
- OSSE will develop a family outreach toolkit for My School DC, the common lottery for pre-K-12 education, at an estimated rate of \$300,000, based on similar ongoing work.
- OSSE will also expand awareness of EdFest, the District's annual citywide public school fair through the B-5 system partners, at a rate of \$15,000, based on information received by the contractor managing EdFest.
- OSSE will expand peer support networks, including parent cafes, in underserved communities in Wards 5, 7, and 8. Parents will participate in small group discussions about early childhood and families to learn about the role they play in their child's development. The amount of \$100,000 is based on the cost of previously held parent cafes.
- Finally, OSSE will hire three contractors to conduct feasibility study on the Early Childhood Data Portal over six months (six months of three contractors at \$250,000 annually). This amount covers a project manager, a business analyst and a data architect at a total rate of \$375,000. This estimate is based on similar contracted positions managed by OSSE for similar projects.
- *Activity 4:* OSSE will hold a fall institute for 6,000 ECE staff across the mixed delivery system to kick off the strategic plan at a rate of \$600,000. This rate is based on previously held similar events and will include venue, box lunch and service charge, breakout rooms, internet access, and event planning assistance. \$100,000 of this cost will be in the form of technical assistance.
 - OSSE will expand its Quorum training platform for an additional 4,000 early childhood professionals in the mixed delivery system at a quoted rate of \$500,000 from the current contractor, Kaplan. The expansion will include on-line training for all early childhood professionals in the mixed-delivery system: DC Public Schools, Public Charter Schools, early interventionists, home visitors, etc.
 - OSSE will expand parent café capacity across the District through expanding the number of those that can train using train the trainers workshops. This activity is estimated at \$15,000 based on costs of previously held workshops. This activity will have partial support of the Bainum Foundation (detailed in Commitment of Non-Federal Resources below). This cost will all be in the form of technical assistance.
 - OSSE will expand our ongoing Memorandum of Understanding with the Department of Behavioral Health, to provide mental health consultation services to early childhood providers and local education agencies at a rate of \$470,000. This amount has been quoted from DBH as necessary to expand early childhood mental health consultation

- services. This will build on existing commitments made by OSSE (See Commitment of Non-Federal Resources below).
- OSSE will also contract with a third party vendor to expand practice-based coaching to ECE providers and LEAs on trauma-informed approaches, at a quoted rate of \$300,000, based on similar ongoing work in the Quality Improvement Network. This cost will all be in the form of technical assistance.
 - OSSE will also contract with a third party vendor to create practice networks with QIN, Capital Quality and LEA coaches, Healthy Futures, Primary Project and LEA mental health consultants to provide PD and TA on trauma-informed approaches at a quoted rate of \$175,000, based on similar ongoing work that has been carried out by the Bainum Family Foundation. This cost will all be in the form of technical assistance.
 - Finally, OSSE will hire two contracted web developers to update My Child Care DC on quality results, at a rate of \$200,000 each for a total of \$400,000, based on similar contracted positions.
- *Activity 5:* OSSE will purchase research-based assessments, curricula and training for 1,200 infant and toddler classrooms at licensed facilities participating in Capital Quality, at a quoted rate of \$300,000. This amount is based on current curriculum contracts at OSSE. All of these costs will be in the form of technical assistance. This amount is based on an existing contract for a smaller group of providers participating in quality initiatives.
 - OSSE will implement trauma informed care trainings in five licensed child development facilities and five LEAs that serve 60 percent or more of the target population. This activity is estimated at a rate of \$1,000,000, with matching provided by ongoing work in the QIN (See Commitment of Non-Federal Resources below). The cost of these trainings is based on similar work conducted by the QIN hubs. About half of this amount (\$500,000) will be in the form of technical assistance.
 - OSSE will provide an enhancement to the Capital Quality grant awarded to Hurley & Associates through providing additional incentives to fund gaps identified in the ITTERS, FCCERS or CLASS assessments, specifically in the areas of furniture, books, rugs, equipment, and supplies. Hurley & Associates has been consulted and provided \$250,000 as a suitable amount in addition to currently budgeted incentives (See Commitment of Non-Federal Resources below).
 - OSSE will provide an enhancement to the Access to Quality Child Care Expansion grant, issued to the Low Income Investment Fund, to build on their work to increase the number of licensed infant and toddler slots in the District by also contributing to quality-specific enhancements. The grantee has quoted \$200,000 as sufficient to provide 10 quality grants ranging in amount (\$4,000 - \$10,000, for a total of \$40,000 - \$100,000 in grants) as well as dedicated staff time. \$100,000 of this line item will be in the form of technical assistance provided by staff to applicants.
 - *Other Grant Required Activities:*
 - OSSE will contract with Medstar Health Research Institute, to conduct the evaluation of the first year of the grant. They will survey families from across the mixed delivery system who are demographically representative of the District population. Medstar will provide incentives to promote high levels of engagement. Several surveys will be conducted, as detailed in the Project Description. Costs are estimated at \$1,357,135. Costs include: personnel, sub-contracts for adaptation of the app and development of

online modules, evaluation services, participant incentives, space rental and indirect cost. \$759,885 of this cost will be in the form of technical assistance.

- An OSSE software developer will spend 50% of their time creating a monitoring online platform to track implementation of grant Activities (\$125,000).

Other: No other costs are anticipated for this grant.

Indirect Charges: \$2,113,402

- **Description:** OSSE will request \$2,113,402 in indirect costs. This amount represents 16.4% of the modified total direct costs (MTDC), per the indirect cost rate agreement approved by the U.S. Department of Education. A copy of the indirect cost rate agreement is enclosed (see Appendix F).

Commitment of Non-Federal Resources: \$6,757,770

- **Justification:** OSSE has demonstrated commitment in the amount of 45% of the amount of the grant (ACF Federal Share). The source of the non-federal funding is both private foundation funds (\$3,480,000, see letter from the Bainum Family Foundation) and local District funding (\$3,277,770).