

District of Columbia Office of the State Superintendent of Education

EARLY HEAD START-CHILD CARE PARTNERSHIP (EHS-CCP) ANNUAL REPORT

Fiscal Year 2021-2022

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Introduction

The Office of the State Superintendent of Education (OSSE) for the District of Columbia ("the District") is responsible for making a report available to the public, at least once each fiscal year, as required by the Head Start Act (section 644(a)(2)) and as an Early Head Start-Child Care Partnership (EHS-CCP) grantee. This annual report covers fiscal year Oct. 1, 2021-Sept. 30, 2022 (FY22), for EHS-CCP baseline grant number 03HP000352 and Oct. 1, 2020-Sept. 30, 2021 (FY21) for the expansion grant number 03HP000186. The annual report data are presented in this way due to the difference in grant award periods between the baseline and expansion grants. For purposes of the budget at OSSE, funds are loaded and available at the beginning of the fiscal year while the federal funds for the grants cross two fiscal years.

In 2015, OSSE was awarded the EHS-CCP grant to bring together Early Head Start (EHS) and child care through layered funding to provide comprehensive and continuous services to low-income infants and toddlers and their families. The EHS-CCP grant was used to develop what is now known as the Quality Improvement Network (QIN). OSSE's mission for the QIN is to increase the number of infants, toddlers and families benefitting from early, intensive, comprehensive child development and family services. Using funding that includes the EHS-CCP and a local match, the program invests in a hub model that supports child development centers, also referred to as child care partners (CCPs), to implement EHS and meet the Head Start Program Performance Standards (HSPPS). OSSE partners with one community-based organization, the United Planning Organization (UPO), to support the implementation of EHS in wards 1, 4, 5, 6, 7 and 8 as the QIN hub. UPO provided CCPs with coaching and technical assistance, as well as supports for children and families with services in the areas of child development, education, health, mental health, nutrition, oral

health, disabilities services and social services. During FY21 and FY22, UPO supported a network of 14 federally funded child development centers; 10 of these centers were supported by the original EHS-CCP grant 03HP000352 and four were supported by the EHS-CCP expansion grant 03HP000186. OSSE maximized the impact of the QIN by leveraging local and federal funding to increase the number of children birth to age 3 served in EHS settings. The QIN is supported by an interagency steering committee comprising representatives of District agencies that serve young children and families.

OSSE's program model continues to promote the continuity of care approach. All 14 of the federally funded EHS-CCP child development centers offer a full-day (no fewer than 10 hours) and full-year (no fewer than 48 weeks) service model. Classroom materials and furniture are adjusted to meet the developmental needs of children in the classroom. As children exit the program, EHS slots are filled with newly enrolled children. The QIN has the capacity to impact more than 600 children and families across the District. Table 1 provides a list of the CCPs participating in the federally funded program under the EHS-CCP baseline grant number 03HP000352 at the end of FY22.

ССР	EHS-CCP Slots	Days of Operation	Hours of Operation
1. Bell Teen Parent and Child Development Center	20	Monday-Friday	6:30 a.m4:30 p.m.
2. Big Mama's Children Center	12	Monday-Friday	6:30 a.m4:30 p.m.
3. Board of Child Care	12	Monday-Friday	8 a.m6 p.m.
4. Community Educational Research Group	8	Monday-Friday	6:30 a.m6 p.m.
5. Community Educational Research Group (Site 2) ¹	16	Monday-Friday	6:30 a.m6 p.m.

Table 1: FY22 Baseline Participating CCPs

¹ Community Educational Research Group (Site 2) signed their agreement during the FY22 but did not begin serving as a partner until FY23.

ССР	EHS-CCP Slots	Days of Operation	Hours of Operation
6. Jubilee Jumpstart	12	Monday-Friday	7:30 a.m6 p.m.
7. Kennedy Child Development Center	8	Monday-Friday	7 a.m6 p.m.
8. Love and Care Child Development Center	12	Monday-Friday	7 a.m6 p.m.
9. Love First Child Development Center ²	16	Monday-Friday	7 a.m6 p.m.
10. Loving Care Day Nursery, Inc.	40	Monday-Friday	6 a.m7 p.m.
11. Sunshine Early Learning Center	44	Monday-Friday	6 a.m6 p.m.
Total	200		

Table 2 provides a list of the CCPs participating in the federally funded program under the

EHS-CCP expansion grant number 03HP000186 in FY21.

Table 2: FY21 Expansion Participating CCPs

ССР	EHS-CCP Slots	Days of Operation	Hours of Operation
12. House of Ruth Kidspace Child and Family Development Center	24	Monday-Friday	7 a.m6 p.m.
13. Kids Are People Too V	48	Monday-Friday	5:30 a.m11:59 p.m.
14. Kids Are Us Learning Center	24	Monday-Friday	6:30 a.m12 a.m.
15. National Children's Center	70	Monday-Friday	7 a.m6 p.m.
Total	166		

² Formerly known as Christian Tabernacle Child Development Center effective October 2022.

Section I: FY22 Baseline Grant Budget

Sub-Section A: Total Amount of Funds and Sources

OSSE was in the third budget period (Sept. 1, 2021-Aug. 31, 2022) for baseline grant number 03HP000352 of the five-year baseline grant. The total federal funds received for the baseline grant award was \$1,103,146, which included \$1,080,448 for program operations and \$22,698 for training and technical assistance (TTA), of which \$958,932 was awarded to the UPO hub. In addition to the federal funds received, the District provided a local match in the amount of \$1,580,000 for the baseline grant, all of which were awarded to the UPO hub. Section I, subsection B, provides an explanation of budgetary expenditures and the budget for FY22 baseline grant.

Sub-Section B: Explanation of Budgetary Expenditures and Proposed Budget

Federal baseline funds for OSSE operations were budgeted for salaries and fringe benefits. Remaining federal baseline funds were budgeted as contractual costs issued to UPO. The UPO budget for the baseline grant, budgeted funds as salaries and fringe benefits, professional services (e.g., Teaching Strategies GOLD [TS GOLD] consultant, ChildPlus), supplies and materials (e.g., diapers), other costs (e.g., teacher stipends), contractual costs for TTA and indirect costs for operations. The UPO budget for the local baseline funds, budgeted funds as salaries, supplies and materials (e.g., diapers, meeting materials etc.), fixed property costs (e.g., rent) and other objects (e.g., travel expenses and personnel fees). Table 3 outlines the budget for FY22 baseline grant.

Entity	Baseline Federal Share Operations	Baseline Federal Share TTA	Baseline Federal Share Total	Baseline Local Match	Non- Federal Share	Total Budget with Non- Federal Share
Description	Salary (personnel + fringe + COLA), contractual, stipends and indirect cost	Ongoing training in curriculum and assessments for teachers and coaches	Operations + TTA	Salary (personnel + fringe), contractual, stipends and indirect cost	20% of the grant amount	Total Federal Share + Non- Federal Share
OSSE	\$144,214	\$0	\$144,214	\$0	\$0	\$144,214
UPO	\$936,234	\$22,698	\$958,932	\$1,580,000	\$275,787	\$2,814,719
Total	\$1,080,448	\$22,698	\$1,103,146	\$1,580,000	\$275,787	\$2,958,933

Table 3: FY22 Baseline Grant Budget

As of Nov. 1, 2022, baseline federal grant budgetary expenditures for FY22 totaled \$907,842.04 and local match expenditures totaled \$1,507,632.80 and were spent in the approved categories. Table 4 outlines spending at the end of FY22, for OSSE's baseline grant, for which the budget period ended on Aug. 31, 2022 and OSSE's local grant period, which ended Sept. 30, 2022.

Table 4: FY22 Expenditures for Baseline Grant

Type of Expenditure	FY22 Federal Baseline Funds	FY22 Local Funds	Total Funds
Budgeted	\$958,932	\$1,580,000.00	\$2,538,932
Expenditure	\$948,382.44	\$1,507,632.80	\$2,456,015.24
Balance	\$10,549.56	\$72,367.20	\$82,916.76

Section II: FY21 Expansion Grant Budget

Sub-section A: Total Amount of Funds and Sources

OSSE was in the third budget period (March 1, 2021-Feb. 28, 2022) of the five-year expansion grant for expansion grant number 03HP000186. The total federal funds received for expansion grant number 03HP000186, was \$1,408,521, which included \$1,360,082 for program operations funding, \$31,846 for TTA, \$16,593 for cost of-living adjustment (COLA) of which \$1,004,221 was awarded to the UPO hub. Section I, sub-section B provides an explanation of budgetary expenditures and the budget for FY21.

Sub-Section B: Explanation of Budgetary Expenditures and Proposed Budget

Federal expansion funds for OSSE were budgeted for salaries and fringe benefits, as well as contractual funds to the Department of Behavioral Health (DBH), Healthy Futures mental health consultation program. Remaining federal expansion funds were budgeted as contractual costs issued to UPO. The UPO budget for the expansion grant, budgeted funds as salaries and fringe benefits, professional services (e.g., shared services hub), supplies and materials (e.g., diapers), contractual costs for TTA, other objects (e.g., teachers stipends) and indirect costs. Table 5 outlines the budget for FY21 expansion grant.

Entity	Expansion Federal Share Operations	Expansion Federal Share TTA	Expansion Federal Share Total	Non- Federal Share	Total Budget with Non- Federal Share
Description	Salary (personnel + fringe + COLA), contractual, stipends and indirect cost	Ongoing training in curriculum and assessments for teachers and coaches	Operations + TTA	20% of the grant amount	Total Federal Share + Non- Federal Share
OSSE	\$194,300	\$0	\$194,300	\$0	\$194,300
DBH	\$210,000	\$0	\$210,000	\$0	\$210,000
UPO	\$972,375	\$31,846	\$1,004,221	\$352,130	\$1,371,801
Total	\$1,376,675	\$31,846	\$1,408,521	\$352,130	\$1,760,651

Table 5: FY21 Expansion Grant Budget

Budgetary expenditures for FY21 expansion grant totaled \$986,934.60 and were spent in the approved categories. Table 6 outlines spending at the end of FY21, for OSSE's expansion grant, for which the budget period ended on Feb. 28, 2021.

Table 6: FY21 Expenditures for Expansion Grant

Type of Expenditure	FY22 Federal Funds
Budgeted	\$1,004,221
Expenditure	\$986,934.60
Balance	\$17,286.40

Section III: FY21 Supplemental Funding

Sub-Section A: Total Amount of Funds and Sources

In addition to baseline and expansion funding, OSSE received federal supplemental funding

for grant number 03HE000057 with a budget period of April 1, 2021-March 31, 2023. The total

federal funds received was \$437,919 in American Rescue Plan funding and \$110,155 in Coronavirus Response and Relief Supplemental Appropriations (CRSSA) funds, of which all funds were awarded to the UPO hub for both the baseline and expansion grants. These funds were awarded in FY21; however, spending began in FY22. Section I, sub-section B provides an explanation of budgetary expenditures and the budget for FY22.

Sub-Section B: Explanation of Budgetary Expenditures and Proposed Budget

The UPO budget for supplemental funds, budgeted funds as equipment and supplies for programs, staff and families; equipment and supplies for appropriate preventative health measures; educational supplies, TTA, personnel and fringe benefits and other costs for both the baseline and expansion grants.

Table 7 outlines spending at the end of FY22, for OSSE's expansion grant, for which the budget period ends on March 31, 2023.

Type of Expenditure	FY21 Federal Funds
Budgeted	\$548,074
Expenditure	\$47,151.78
Balance	\$500,922.22

Section IV: Most Recent Financial Audit

As required, the most recent financial audit for DC federally funded programs is included in

Appendix A (as a link) and was completed in FY21.

Section V: QIN Participation

Sub-Section A: Children and Families Served

The FY22 baseline funds and FY21 expansion funds supported programmatic activities for the 2021-22 program year. As such, all programmatic activities related to these funding sources will be referred to as the 2021-22 program year from this section forward. OSSE supported 200 EHS slots under the baseline grant and 166 EHS slots under the expansion grant. The cumulative enrollment for children served during the 2021-22 program year for the baseline grant was 167 and for the expansion grant was 105. The total number of families served during the 2021-22 program year for the baseline grant was 155 and for the expansion grant was 98. The average enrollment of children per month, as a percentage of total funded enrollment for the 2021-22 program year for the baseline grant was 60 percent and was 50 percent for the expansion. During the 2021-22 program year, the QIN did not meet funded enrollment for the federal EHS-CCP grant due to staffing shortages exacerbated by coronavirus (COVID-19). Due to COVID-19, the Office of Head Start paused the evaluation of enrollment for the purposes of determining compliance with full enrollment but continued to track enrollment in the Head Start Enterprise System (HSES).³ In response to attendance challenges related to COVID-19, OSSE updated the subsidy attendance policy to allow excused absences for COVID-19.⁴ Figure 1 contains information on the number of children enrolled

³ Office of Head Start Expectations for Head Start Programs in Program Year 2021-2022 https://eclkc.ohs.acf.hhs.gov/policy/pi/acf-pi-hs-21-04

⁴ Frequently Asked Questions Supporting Subsidized Child Care Provider Attendance and Payment Guidance Related to Coronavirus (COVID-19)

https://osse.dc.gov/sites/default/files/dc/sites/osse/page_content/attachments/Supporting%20Subsidized%20Child% 20Care%20Provider%20Attendance%20and%20Payment%20Updated%20February%202022.pdf

by eligibility type for the EHS-CPP baseline and expansion grants. Some of the reported values for

Figure 1 were less than 10 and were therefore suppressed.

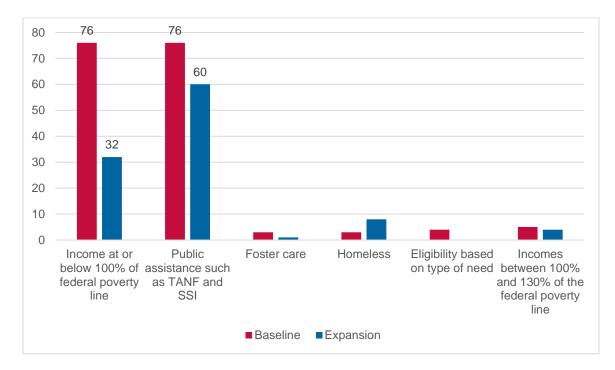
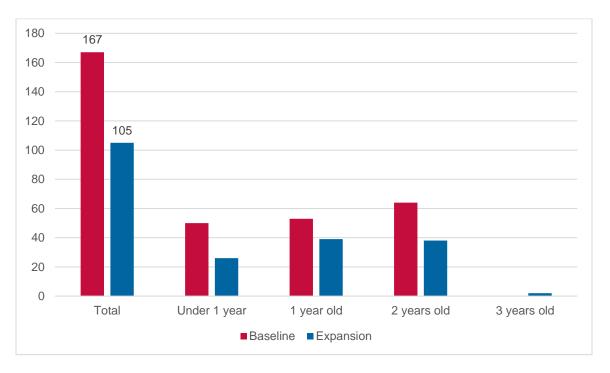


Figure 1: Cumulative Enrollment by Eligibility Type for Baseline Grant

Figure 2 includes information on the cumulative enrollment by age at enrollment for both

the baseline and expansion grants. Some of the reported values for Figure 2 were less than 10 and were therefore suppressed.





The majority of children served came from single-parent homes at the time of enrollment. Figure 3 shows the number of families served in both the baseline and expansion grants by type of family at the time of enrollment. Of the single-parent homes, most of the parents/guardians described themselves as mothers. Some of the values reported in Figure 3 were less than 10 and were therefore suppressed.

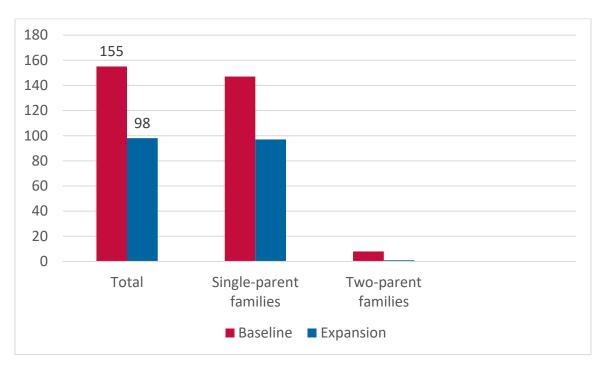


Figure 3: Number of Families Served by Type of Family at Enrollment

Figure 4 shows the number of families by parent/guardian description. Some of the

values reported in Figure 4 were less than 10 and were therefore suppressed.

Figure 4: Number of Families by Parent/Guardian Description

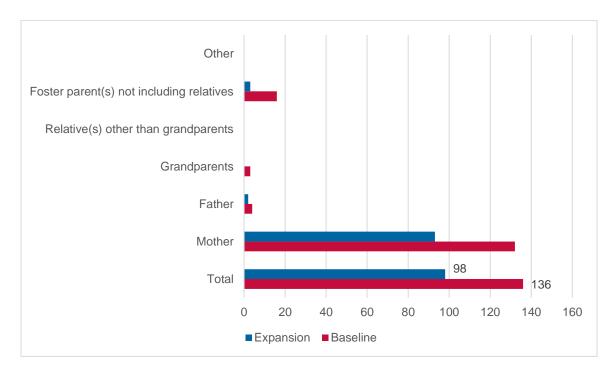


Figure 5 provides a 2021-22 program year of employment, job training and school data for families at the beginning and end of enrollment for both the baseline and expansion grants.

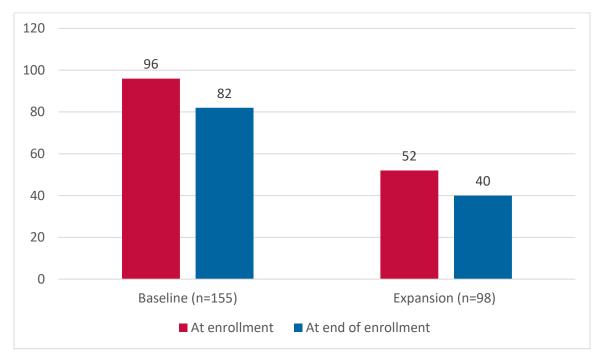


Figure 5: Number of Families Employed in a Job Training or in School

Ensuring that children's physical, nutritional, mental and oral health needs are met continues to be a priority for the QIN. During the 2021-22 program year, the QIN experienced a change in the number of families receiving assistance through programs such as Temporary Assistance for Needy Families (TANF); Women, Infants and Children (WIC); Supplemental Nutrition Assistance Program (SNAP); and Supplemental Security Income (SSI). Figure 6 shows the values reported for families receiving federal assistance.

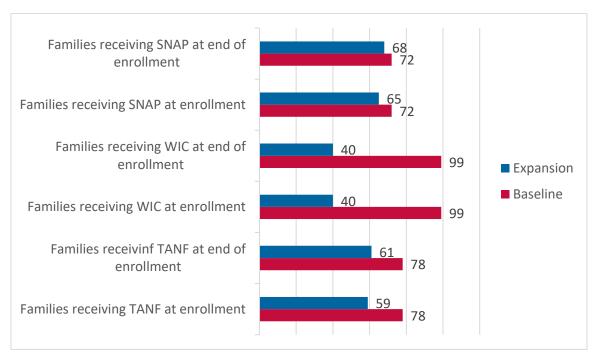


Figure 6: Number of Families Receiving Federal Assistance

Figure 7 provides a breakdown of QIN children enrolled by health insurance type. Some of

the values reported in Figure 7 were less than 10 and were therefore suppressed.

Figure 7: Number of Children Enrolled with Health Insurance by Type

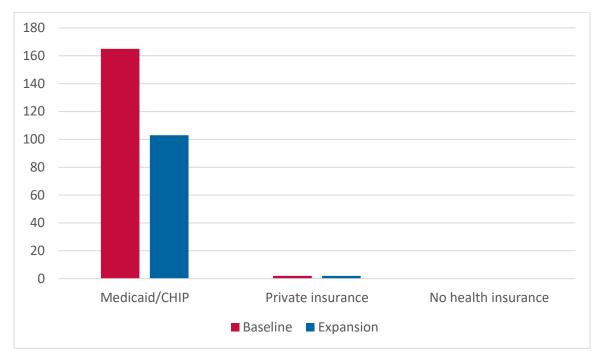
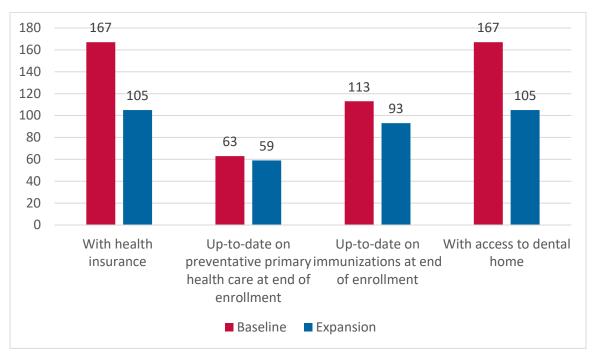


Figure 8 shows a breakdown of children enrolled by type of health services received.





Sub-Section B: Child Health

As mentioned, the physical, nutritional, mental and oral health needs of children are priorities. Listed below are the ongoing activities that UPO implemented to ensure the needs of children are met.

- Assessing the current methods of services delivery at CCPs to identity gaps in delivery of comprehensive services.
- Monitoring and analyzing health data to identity trends and training needs for staff and families.
- Monitoring to ensure that children receive all needed services, including vision services, hearing services, developmental screenings and dental care.
 - Children's health screenings are a required for enrollment in any licensed DC child care facility. In an effort to support all families, family engagement specialists (FESs) and health staff monitor and review children's health

certificates and other health information to identify potential health issues. FESs and health staff support parents in obtaining appropriate referrals and followup care to include timely well-child visits; developmental, sensory and behavioral screenings; and immunizations.

- Coordinating with the Department of Behavioral Health (DBH) to provide mental health resources to every CCP.
 - DBH provides mental health consultations to every CCP to ensure the implementation of activities around mental health related prevention, identification, referral and treatment. DBH also consults onsite with staff and parents to address behavioral concerns and provide targeted help with individual children and families. If the mental health consultants determine that families or children may need ongoing mental health care, they are referred to community-based mental health agencies and the FES monitors to ensure the services are received in a timely and appropriate manner.
 - Providing comprehensive multidisciplinary developmental evaluations through a partnership with Strong Start, the DC Early Intervention Program (DC EIP).
 - OSSE strengthens the relationship between QIN and Strong Start through its Ages and Stages Questionnaire (ASQ) online initiative. This initiative provides teachers and administrators with the tools, training and technical assistance needed to move the completion of the ASQs from a paper-based system to an online system. This initiative is funded by DC Health. The goal of this initiative is to produce a universal process for completing ASQs, submitting referrals and

rescreening. Through this process, teachers have more immediate data available to them to individualize instruction and support children to attain their identified developmental goals. In addition, OSSE has access to the data to facilitate the transition of families from EHS to pre-K with the necessary resources and supports they need. The HSPPS and DC's subsidized child care policy require that all children receive a developmental screening within 45 days of enrollment in a CCP. Developmental screenings are the responsibility of the CCP. The teacher and the parent/guardian jointly administer the ASQ as a best practice and DBH's Healthy Futures program completes the ASQ: Social-Emotional, Second Edition (ASQ:SE-2). CCPs obtain consent from parents to refer, or re-screen as needed, and referrals and re-screenings are monitored and tracked by staff designated by the hubs. Once eligibility is determined and the family gives consent to participate in Strong Start, the early learning specialist (ELS) who is also responsible for families in need of disability identification supports the teacher in meeting the developmental goals in the child's individualized family service plan (IFSP).

- Ensuring that children are referred to Strong Start, DC EIP in a timely matter.
 - The hubs' infant and toddler ELS performing the duties of the disability liaison works with Strong Start to ensure that children are referred in a timely manner and support communications with families as needed. Infants and toddlers who score in the "at-risk" category on either the ASQ or ASQ: SE-2 are referred to Strong Start for a comprehensive multidisciplinary developmental evaluation.

The coaches and the ELS responsible for disabilities track referrals to early intervention, special education, early childhood mental health and other therapeutic services. For children not found eligible for Individuals with Disabilities Act (IDEA) Part C and for families who decline to participate in Part C services, the hubs offer wrap-around supports, linkages and referrals to other community programs that support child development (e.g., home visiting programs, playgroups, etc.).

- Coordinating services with relevant DC agencies to support families' needs.
 - Through the interagency steering committee, OSSE engages and collaborates with DC agencies—such as the Department of Human Services (DHS), DBH, the Department of Health Care Finance (DHCF), Child and Families Services Agency and DC Health—that can support families with employment opportunities, economic assistance, supportive services, mental health, insurance, health and wellness and child welfare. The QIN works with these agencies to ensure effective service coordination and support for children and families enrolled in the QIN.
- Ensuring that children and families have access to medical and dental services.
 - The following information is a breakdown of the medical and dental participation for the 2021-22 program year, as found in Figure 8.
 - At the beginning and end of enrollment, 100 percent of children served under the baseline and expansion grants had health insurance.

- 2. At the beginning of enrollment, 12 percent of children enrolled under the baseline grant were up to date on a schedule of age-appropriate preventative health and primary health care and 38 percent were up to date at the end of enrollment. At the beginning of enrollment, 12 percent of children enrolled under the expansion grant were up to date on a schedule of age-appropriate preventative health and primary health care and 56 percent were up to date at the end of enrollment.
- At the beginning and end of enrollment, 100 percent of children had access to a dental home for program year 2021-22.

Sub-Section C: Information Related to Parent Involvement Activities

UPO assigned FESs to work with each family with enrolled children in developing a family partnership agreement, which includes a family action plan. The family partnership agreement identifies goals and aspirations for the family and the child related to the classroom, home and community environments. The identified goals are achieved through an information-sharing, goal-oriented relationship, using community supports and resources. The FES serves as the primary point of contact for families and monitors and reports on progress toward the families' goals. If a family identifies a need for mental health support, the FES refers the family to the Healthy Futures mental health consultant providing support at the relevant CCP. The mental health consultant works with the family to determine the appropriate mental health supports and, if needed, refers the family to a community-based mental health program. The FES monitors to ensure the services are received in a timely and appropriate manner. The FES and health staff monitor children's health certificates and other health information to identify potential health issues. The FES

supports families in obtaining appropriate referrals and follow-up care to include timely well-child visits, immunizations and developmental, sensory and behavioral screenings. The hub manager monitors the collection of all health data. All health service activities, including efforts to procure medical care, are entered into ChildPlus, a secure data management system that is utilized by hubs and monitored by OSSE staff. Hub managers meet with FESs monthly to analyze data that is used to identify trends and training needs for families.

Other ways in which the FES supports families include providing opportunities for children and families to participate in program activities, such as family literacy services that enhance stafffamily relationships, coordinating comprehensive services and supporting families in accessing other community resources. During the 2021-22 program year, all families served under the baseline and expansion grants who expressed interest in additional supports received them, regardless of identified need, if the programs did not have additional eligibility requirements (see Figure 9). Some of the values reported in Figure 9 were less than 10 and were therefore suppressed.

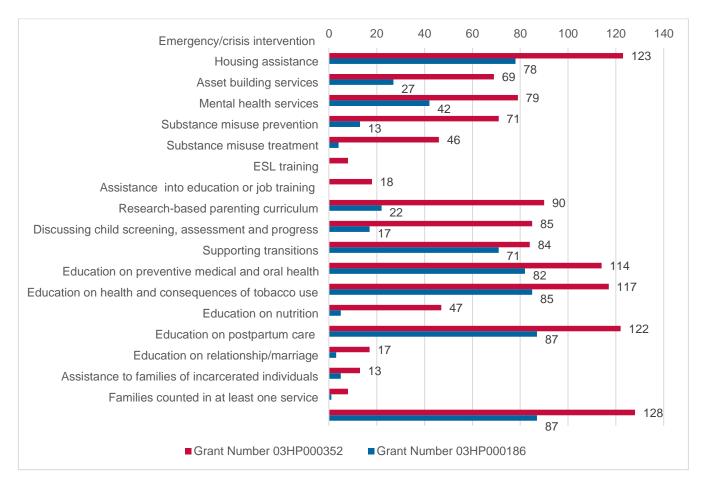


Figure 9: Number of Families by Services Received

Across both grants, fathers attended a variety of family engagement activities offered, which included child development experiences, program governance, parent education workshops, goal setting and family assessments. Additionally, Figure 10 shows the family engagement activities that fathers participated in directly under the baseline and expansion grants. Some of the values reported in Figure 10 were less than 10 and were therefore suppressed.

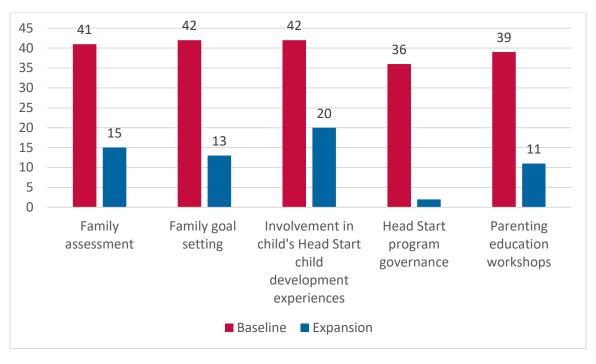


Figure 10 Number of Fathers/Father Figures Engaged

Sub-Section D: The Agency's Effort to Prepare Children for Kindergarten

Seamless birth to 3 transitions are an important part of EHS, and OSSE places an emphasis on the development and implementation of strong service plans for pre-K 3 to pre-K 4 and pre-K 4 to kindergarten transitions. The District utilizes a mixed-delivery system for publicly funded universal pre-K, offering pre-K services in District of Columbia Public Schools, public charter schools and community-based organizations (CBOs) that have been designated as high-quality through the Pre-K Enhancement and Expansion Program (PKEEP). Five QIN CCPs participate in DC's PKEEP, funded by OSSE with local funds, making it possible for EHS children served under QIN in these CCPs to transition to pre-K classrooms within the same centers if the parent/guardian chose to stay at the center until the child enters kindergarten. Some CBOs, which can include CCPs not participating in PKEEP, provide child care and education services to 3- and 4-year-old children who are not part of the District's universal pre-K program but may receive funding through the District's Subsidized Child Care Program. PKEEP grantees combine child care subsidies with the locally funded PKEEP grant to support an extended day (including before and after care) of services for subsidy eligible children.

OSSE funds TS GOLD, the assessment system used by QIN to observe and document child growth and development. TS GOLD data is collected four times a year and teachers use the data to inform lesson planning, individualize instruction to improve child outcomes and support children as they achieve school readiness and support transitions.

For children receiving Part C services through IDEA, Strong Start and service providers develop individualized transition plans and conduct a transition meeting for all children transitioning to Part B. These meetings are held based on the needs of individual children and with parent/guardian permission. Additionally, leadership supporting Part C and Part B services meet on a monthly basis to analyze data and ensure that children have timely and smooth transitions between the two programs.

Section VI: Closing Remarks

During the 2021-22 program year, the QIN program successfully supported children, families and CCPs as they recover from the public health emergency.

Continuing the successful trauma-informed approach of the 2020-21 program year, the QIN continued to lead all learning interactions with CCPs, children and families using a trauma-informed approach. DBH's Healthy Futures program continues to be a critical partner in providing mental health services to CCPs, children, families and teachers by providing trainings, referrals, consultations and supporting staff wellness activities. The QIN continued to encourage families to advocate for their children by guiding and supporting families in developing family partnership goals and motivating families to pursue their health and well-being. Through the EHS-CCP, teachers build

their skills to support children and families as they pursue their goals. One parent shared her child's progress with speech development. The child's teacher incorporated the skills and training received to support the child with improving speech and meeting developmental milestones. The parent noted that her child now uses three-word sentences and that she is elated with the supports received from the QIN teachers and the program. In another instance, one family developed a family partnership goal for their child to improve their communication with the children and teachers in their class. Through the supports offered, the child improved their interactions with other children and became very close to their teacher.

The QIN fosters an environment of continued learning for families. Families are using the supports and services available to them to educate themselves on early childhood development. One parent developed a family partnership goal on understanding child development. Specifically, they wanted to understand her child's behavior and develop a positive approach to parenting. Through the training received, the parent became more involved in her child's education and related activities.

Families have shared their experiences of being offered encouragement and support when pursuing employment opportunities, earning a general education development (GED) credential or pursuing higher education goals. Several families have opened businesses, achieved new employment opportunities, earned certifications and pursued degrees. During policy council, one parent shared that she received her realtor's license; another shared that she had completed her child development associate (CDA) and was excited to complete her verification visit with the professional development specialist at her child's center. Another parent was able to complete a cleaning and sanitation program, which has allowed her to open her own business. Most notably,

our own policy council chairperson was hired by the UPO hub to serve as an administrative assistant supporting the organization's fiscal department.

While many families have been able to thrive, others are merely surviving. Despite their circumstances, they are able to flourish with the help of the supports and services offered by the QIN. Several families this year experienced challenges with rent, utilities and financial security. UPO was able to leverage their own direct Coronavirus, Aid, Relief and Economic Security Act (CARES Act) funding to offer rental and utility assistance, financial stipends for the purchase of diapers, clothing, transportation, etc. A few families were facing eviction this year and found relief through UPO's CARES program, which not only paid their back rent but kept them in their homes and prevented them from becoming homeless. These experiences serve to renew our commitment to providing the best EHS-CCP program that serves as a support system to families most in need.

This year we have seen families achieve great success through empowering initiatives and receipt of resources, which offer opportunities for personal growth and stability. We are proud to know that families consider our program a part of their success story and we hope to continue to be a part of many more. Through feedback received from policy council, QIN families, stakeholders, the self-assessment and the data analysis found in this report, OSSE will continue to expand and leverage federal and local funding to provide high-quality early childhood education to the District's most vulnerable and youngest learners and their families.

Appendix A: FY21 Financial Audit

The most recent financial audit, which is from fiscal year ending Sept. 30, 2021, may be accessed at the following link:

<u>cfo.dc.gov/sites/default/files/dc/sites/ocfo/publication/attachments/FY%202021%20DC%20ACFR</u> <u>Compressed.pdf</u>