

NOTICE TO ALL APPLICANTS: EQUITY FOR STUDENTS, EDUCATORS, AND OTHER PROGRAM BENEFICIARIES

Section 427 of the General Education Provisions Act (GEPA) ([20 U.S.C. 1228a](#)) applies to applicants for grant awards under this program.

ALL APPLICANTS FOR NEW GRANT AWARDS MUST INCLUDE THE FOLLOWING INFORMATION IN THEIR APPLICATIONS TO ADDRESS THIS PROVISION IN ORDER TO RECEIVE FUNDING UNDER THIS PROGRAM.

Please respond to the following requests for information:

1. Describe how your entity's existing mission, policies, or commitments ensure equitable access to, and equitable participation in, the proposed project or activity.

The District of Columbia's Early Intervention Program (DC EIP) is housed at the Office of the State Superintendent of Education (OSSE). The mission of OSSE as DC's state education agency is to set high standards, build educator and system capacity to meet those standards, expand educational opportunities for all learners with a focus on those underserved, and hold everyone accountable for results.

Early intervention services in the District are provided following the Natural Learning Environment Practices (NLEP) framework, which includes delivering services in the child's natural environment where he/she spends most of their time and where they feel most comfortable.

DC EIP has implemented practices and policies that address barriers to access by language, income, and geography in order to ensure equitable access for all eligible DC residents DC EIP either provides early interventionists that speak the language of the family or interpreters that facilitate the communication with the families. Program documents are available in all seven languages required by the [District's Language Access Act](#) and child specific documents, such as the Individualized Family Service Plan (ISFP), are translated upon parent request.

Part C early intervention services are provided at no charge to families. Other than local and federal funding, the only additional funding source that DC has incorporated into its Part C system is public insurance (Medicaid), which covers 56% of DC children. DC does not access private insurance or implement family fees. DC EIP policies have eliminated any financial barriers in order to allow all families in the District to participate in the program.

Lastly, DC EIP has incorporated in all agreements for service provision requirements that each Contractor provide services proportionally in all Wards of the District and be in-network with all Medicaid Managed Care Organizations (MCO). This ensures that families have access to all providers that deliver early intervention services regardless of where they live or what MCO coverage they have.

To ensure that these policies and practices are resulting in equitable participation, DC EIP regularly reviews data on referrals, evaluations completed, program participation and other key indicators by child/family race, Ward, and Medicaid participation status, and uses this data to inform strategies to enhance outreach or address potential barriers to participation by populations that may be underrepresented.

2. Based on your proposed project or activity, what barriers may impede equitable access and participation of students, educators, or other beneficiaries?

Economic disadvantage, housing insecurity and geography are barriers that impede equitable access in the District. Historically, families who reside in Wards 5,7 and 8 of the District have the lowest engagement rates for eligibility determination and participation in services compare to the other Wards. This is due to families experiencing housing instability in these wards, lack of trust in public programs and perceived stigma in receiving special education services among other factors.

3. Based on the barriers identified, what steps will you take to address such barriers to equitable access and participation in the proposed project or activity?

Strong Start is the District of Columbia's Early Intervention Program, which provides support and services to families with children, from birth through three, with developmental delays and disabilities. Strong Start continues working through a variety of strategies to increase evaluation completion rates for children in Wards 5, 7 and 8. Strong Start main office is located in Ward 7 having a presence in the community and initial family interviews and evaluations can be conducted at the Pennsylvania Avenue location upon request, reducing barriers for families who do not want to conduct evaluations in a home context due to housing insecurity or lack of trust in public programs.

In FY23, Strong Start started parent workshops and playgroups. These activities allow the program to engage with the community in Wards 7 and 8 to build public awareness, familiarity and trust in these communities to increase the rate that evaluations are completed in these Wards.

In FY23, Strong Start implemented quarterly meetings with select child care centers in Wards 7 and 8 and DC Managed Care Organizations (MCOs) to review the status of referrals and cases in danger of closure. These meetings helped identify ways to support families in reengaging in the eligibility process through continuing attempts at family contact or initiating subsequent referrals after a case was previously closed.

Strong Start also partnered with CFSA to facilitate training for social workers and service coordinators on ways to engage and support families linked with CFSA and DC Early Intervention. This cross-agency relationship and the policies established to track and monitor dual-served families have helped us remain connected with families who may have otherwise left the program.

In January 2023, Strong Start resumed monthly in-person Community Playgroups at two local libraries. Across 18 playgroup sessions, 190 families attended with an average of 10.5 families per playgroup. One of the playgroups was conducted in Spanish to provide services to Spanish-speaking families looking for inclusive peer engagement opportunities in the District. In addition, a third playgroup location began in December 2023 to continue expanding the geographical accessibility of the playgroups for families.

OSSE and DC Health renewed their Memorandum of Understanding (MOU) to support the early identification and Part C eligibility determination of infants and toddlers and implement a District-wide system of coordinated developmental screening for children from two (2) to sixty (60) months of age. In addition to continuing with the expansion of the online Ages and Stages

Questionnaire (ASQ), two program analysts, positions funded in FY24, will contact families when cases are closed by a service coordinator prior to conducting an eligibility evaluation. This process will allow OSSE to learn why families decline to participate in the program, which will help us better target communication and messaging for new families, as well as gain potential ideas for parent workshops that may be attractive to families.

OSSE's DC EIP Child Find team created a training document outlining eight professional development training offerings that are accessible to community programs and families. Overviews and individual curriculum objectives are outlined in the document to help guide interested providers/families to topics that best meet their individual needs.

4. What is your timeline, including targeted milestones, for addressing these identified barriers?
Expansion of ASQ online to 30 Early Head Start centers and recruit additional 50 child development centers that participate in the subsidy program – by Dec. 2024
Implement new process to contact families who decide not to engage with Strong Start to conduct the eligibility evaluation – by Dec. 2024
Conduct joint professional development workshops with DC Health's Help Me Grow program – by July 2025
Expansion of community playgroups at DCPL locations – by July 2025

Notes:

1. Applicants are not required to have mission statements or policies that align with equity in order to submit an application.
2. Applicants may identify any barriers that may impede equitable access and participation in the proposed project or activity, including, but not limited to, barriers based on economic disadvantage, gender, race, ethnicity, color, national origin, disability, age, language, migrant status, rural status, homeless status or housing insecurity, pregnancy, parenting, or caregiving status, and sexual orientation.
3. Applicants may have already included some or all of this required information in the narrative sections of their applications or their State Plans. In responding to this requirement, for each question, applicants may provide a cross-reference to the section(s) and page number(s) in their applications or State Plans that includes the information responsive to that question on this form or may restate that information on this form.

Paperwork Burden Statement

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless such collection displays a valid OMB control number. The valid OMB control number for this information collection is 1894-0005. Public reporting burden for this collection of information is estimated to average 3 hours per response, including time for reviewing instructions, searching existing data sources, gathering, and maintaining the data needed, and completing and reviewing the collection of information. The obligation to respond to this collection is required to obtain or retain a benefit. If you have any comments concerning the accuracy of the time estimate or suggestions for improving this individual collection, send your comments to ICDocketMgr@ed.gov and reference OMB Control Number 1894-0005. All other comments or concerns regarding the status of your individual form may be addressed to either (a) the person listed in the FOR FURTHER INFORMATION CONTACT section in the competition Notice Inviting Applications, or (b) your assigned program officer.