



Meeting:	State Early Childhood Development Coordinating Council	
Date/ Time:	Thursday, July 18, 2019 2-3:30 p.m.	
Location:	Office of the State Superintendent of Education (OSSE) 1050 First Street, NE— First Floor, Eleanor Holmes Norton Room 109/110	
Agenda Items		
I.	Welcome and Introductions	Elizabeth Groginsky Assistant Superintendent of Early Learning OSSE
II.	Preschool Development Grant, Birth to Five (PDG B-5) Needs Assessment Findings Update <ul style="list-style-type: none">- Review of State and Federal Needs Assessments- Family Listening Sessions- Primary Findings- Family Survey	Dr. Lynnell Johnson Program Manager Barrow Coaching & Consulting Services Dr. John Whalen Lead, Psychological Insights & Innovation Brilliant Experience <i>PDG B-5 Consultants</i>
III.	PDG B-5 Strategic Planning Kickoff <ul style="list-style-type: none">- Refining the Strategic Vision Statement	Drs. Lynnell Johnson and John Whalen
IV.	Announcements	All
V.	Public Comment	Open
VI.	Wrap-Up/Next Steps/Adjourn	Elizabeth Groginsky



State Early Childhood Development Coordinating Council (SECDCC)

July 18, 2019

Agenda

- I. Welcome and Introductions
- II. Preschool Development Grant, Birth to Five (PDG B-5) Needs Assessment Findings Update
 - Review of State and Federal Needs Assessments
 - Family Listening Sessions
 - Primary Findings
 - Family Survey
- III. PDG B-5 Strategic Planning Kickoff
 - Refining the Strategic Vision Statement
- IV. Announcements
- V. Public Comment

Today's Objectives

- Present an update on the findings from the PDG B-5 needs assessment work
- Introduce the PDG B-5 strategic planning process
- Receive input from the SECDCC regarding the PDG B-5 strategic planning



PDG B-5 Needs Assessment Findings Update

PDG B-5 Needs Assessment Status

	Research Area	Status
1	Review of existing state and federal needs assessment	Completed
2	Family listening sessions	Completed
3	Conduct focus groups with early childhood professionals across the mixed delivery system	Completed
4	Analyze existing administrative data	Ongoing Due: September 2019
5	Targeted interviews with key informants	Ongoing Due: August 2019
6	Collect and inventory all “pilot” programs that have been done in the B-5 system	Ongoing Due: July 2019
7	Administer a family survey in six languages	Ongoing Due: August 2019



Review of State and Federal Needs Assessments

Needs Assessment Review

- Analysis of 20 reports/studies conducted between 2016-2019
- The reports/studies included the following domains of the birth to five mixed delivery system:
 - Early care and education (which includes pre-kindergarten, Head Start and child care);
 - Home visiting;
 - Child welfare;
 - Disabilities support;
 - Behavioral health;
 - Maternal and child health; and
 - Parental needs (including health, income, employment and other support such as transportation, housing and food security).

Findings from Needs Assessment Review

Identified Service Needs

- High-quality early care and education
- Access to nontraditional-hour child care
- Increased access to out of school time child care
- Improved prenatal and perinatal care

Data Sharing and Alignment

- Improve data collection, sharing and use
- Need for standardization of data points and systems
- Negative impacts related to the lack of data sharing, including silos and duplication of services

Racial and Geographic Disparities

- Considerably worse perinatal outcomes for black mothers and babies
- Racial and geographic disparity and unequal opportunities and experiences of city residents
- Need to better target programs and initiatives to geographic areas
- Address consumer attitudes, preferences, and needs when designing programs to assure their participation and positive outcomes

Findings from Needs Assessment Review

Data Gaps

- Limited understanding of sub-populations within the B-5 mixed delivery system including:
 - Families who receive Temporary Assistance for Needy Families (TANF)
 - Children in foster care
 - Families experiencing homelessness

Lack of Consensus of Target Geographies and Sub-Populations

- No consistent use of descriptors or definitions of at-risk sub-populations
- There is little consensus across the reports for priority groups and geography
- Need a shared set of metrics or definitions for how specific neighborhoods and wards are identified for prioritization

Inconsistent Communication to Consumers and Stakeholders

- Consumers report a lack of knowledge of programs and program attributes
- Participant engagement, communication and marketing are priorities to address
- Low health literacy impacted by overall literacy and English language proficiency may prevent families from understanding and accessing potential benefits



Family Listening Sessions

Family Listening Sessions

31

**Listening
sessions**

115

**Families
participated**

Participants included:

- Large families
- Non-English speakers
- Teen parents
- Dads
- Grandparents
- Single moms
- Working parents
- Families who have been in shelter homes
- Foster parents

Topics covered:

- Child care/education (selection, hours, etc.)
- Transportation
- Healthcare
- Housing
- Jobs/education
- Finances and financial support
- Special needs

Locations:

- Child care centers
- Schools
- Libraries
- Shelter homes
- Family support organizations

Childhood Professional Focus Groups

18

**Focus
groups**

71

**Early childhood
professionals**

Participants included:

- Directors/administrators
- Teachers
- Principals/early childhood directors
- Women, Infants and Children (WIC) staff
- Home visitors
- Capital Quality facilitators
- Quality Improvement Network (QIN) coaches
- Family engagement specialists
- Mental health consultants
- Librarians
- Division of Early Learning staff

Topics covered:

- Child care/education (selection, hours, etc.)
- Healthcare
- Housing
- Jobs/education
- Finances and financial support
- Special needs

Locations:

- Child care centers
- Schools
- Libraries
- OSSE



Primary Findings

Accessing Systems and Support

- Families *find out about services* through (in order of frequency):
 - Word of mouth (friends, families, neighbors, child care parents)
 - Center directors and/or community outreach specialists at child care centers/schools
 - Online search (e.g., Google “free diapers”)
 - Hospitals, doctors, clinics
 - Social services (Health and Human Services): If the agent/case worker informs them of their eligibility
- There were always services that not everyone was aware of

Accessing Systems and Support

- Families *want to learn about services* in different ways:
 - Child care centers, school directors, etc.
 - A comprehensive website (integrated across all different areas: school, child care, health, financial assistance)
 - Human services
 - Flyers and banners in libraries, on the buses, in social services, etc.
 - Physical locations (e.g., library) acting as “information centers”

“If I am going there for food stamps, then why not learn about other services?”

Unique Family Segments and Needs

1. Lived in shelter homes, sometimes in the streets in their cars; often no source of income, single moms. Use all services and are very thankful.
2. Work off-and-on; some receive help from the fathers; have more than two children and use service. Struggling to get income to support market-rate housing.
3. Families who work, have a car and pay market-rate for housing. They don't qualify for TANF and Supplemental Nutrition Assistance Program (SNAP), but at times need some assistance to be able to meet their needs.

*“I have to steel myself to go and get benefits,
but I do it for my kids.”*

Child Development Facility Selection

- Families seek facilities based on proximity and word of mouth.
- Sometimes, families go from one facilities to another until they found one that was safe, educational and close.
- Most child development facilities processed the vouchers for them, which was helpful.

“Why do you make it so much harder to get a voucher if I work [and am not on TANF]?”

Child Care and Education

- Almost all early childhood (EC) professionals felt there is a major shortage of child development facilities in the District.
- Approximately half of EC professionals noted that the child development facilities are not necessarily “schools” and they don’t see their role as educators.

“We have major concerns about training and qualification of child care center teachers.”

Transitions Beyond Child Care

- Approximately 50 percent of families with vouchers wanted their children to stay in a child development facility as long as possible.
- Approximately 50 percent wanted to move their children to school-based pre-K (e.g., who had other children in public schools).
 - They would visit a few schools (including charter schools).
 - The most engaged parents knew ratings, test scores and listened to word of mouth in selecting the school.
 - Some would drive/metro a long distance for a good school – a problem for working parents.
- All those enrolled in Head Start were very satisfied and felt like the program helped their child.

“Why don’t we hear earlier about which school we got into. We have to coordinate this with work.”

Economic Assistance

- Economic assistance and housing caused the most dissatisfaction and stress for families.
- In every family session, families suggested improving the enrollment process for TANF/SNAP:
 - Customer service quality
 - Waiting times
 - Availability of online/remote service
- WIC program is a well-used and liked benefit.

*“We go from getting a lot of help, to almost none.
Can’t you help me as I get started with work?”*

- Housing services felt inconsistent:
 - Long housing voucher wait times were stressful when temporary housing at one location was running out without the next being approved.
 - Those with acute needs appreciated shelter homes, but all parents wanted to live independently outside of shelter homes.
 - Some parents were seemingly able to use services such as Section 8 housing or other housing assistance type services much more easily than others (who were waiting for years for assistance).

“If I don’t get my voucher soon, I don’t know what I’ll do. When will it come? Nobody knows!”

- Approximately 80 percent of participants were happy with the type of support DC Employment offices offer in terms of training and job placement.
- All families were very happy with the stipend they receive for looking for employment.
- Parents noted a lack of high-quality child care centers close to their work or house that fit the hours they need.

“Because I’m getting support, I can learn a skill [medical record technician training] and not just get any job.”

- Nearly all participants used Medicaid and a clinic/hospital in the neighborhood.
- Parents were satisfied with their Medicaid coverage, and physical and psychological care of their child
 - Strong Start was effective for families with children with developmental delays and disabilities.
 - Example: Parents appreciated that speech therapists come to the child development center and worked with their child.
- Home visitors are an important source of information about all aspects of child care, especially for immigrant families.

“They come right to wherever my child is and really know her. It’s great!”

Families with Children with Special Needs

- Parents and EC professionals voiced that there is a need for child care centers to have sufficient resources, equipment and trained staff to serve children with physical and behavioral challenges.
- More specialized training on serving children with special needs is needed for child care centers' staff
- Parents felt more options are needed to better serve preschool aged children with disabilities.

*“Once they get these kinds of problems,
where else are they going to go?”*

Non-English Speakers/Immigrant Families

- Immigrant families typically discussed:
 - Information not always being available in their native language.
 - Not enough case workers in social services fluent in their language.
 - Feeling discriminated against, and being scared about deportation.
- Spanish-speaking families benefited greatly from Hispanic home visitors. They use home visitors as a source of information for all services.
- Most immigrant families are hesitant about applying for services.

*“They let me apply for what I asked for,
but they don’t tell me about any other services.”*

Top Barriers to Accessing Support

- **Awareness**

- Participants do not know all the types of financial or housing assistance or vouchers.
- Many learned from other families in the sessions about the available services.

- **Customer service**

- Families decided not to go back to human services for follow-ups because they did not want to be insulted or treated poorly by the employees.
- Housing assistance delays were terrifying as the days for temporary assistance ticked down without a next step.

- **Pride**

- Do not want to be a burden.

“If I can work and can come up with a solution, then I am not going to look for assistance.”



Family Survey

Family Survey

- **Purpose of the family survey:** To better understand the extent to which parents and guardians of children age 5 and younger are aware of and access District programs and services that are available to help families make decisions about their child's health, early care and education.
- **About the survey:**
 - The survey takes about 10-15 minutes to complete.
 - If parents/guardians complete the survey, they can enter into a random drawing to win a \$100 gift card.
 - Families can also access the survey directly through the QR code on the flyer or enter the link directly.
- **We need your help:**
 - Please share the flyer and the survey with your networks and encourage parents/guardians to complete this survey online at bit.ly/dcb-5 by **Aug. 5, 2019**.



Q & A



PDG B-5 Strategic Planning Kickoff

July 18, 2019 | John Whalen, Andy Hessabi, Lynnell Johnson,
Carrie-Ann Barrow

Strategic Planning Kickoff

- The next major component to the PDG B-5 grant is to create a state-wide strategic plan based on the findings from the needs assessment.
- The federal grant seeks for the strategic plan to include:
 - Vision and mission;
 - Goals and measurable objectives; and
 - Strategies and actions to address each goal.
- Our approach recommends significant engagement of the following:
 - SECDCC and its committees
 - PDG core team
 - Families, cross sector early childhood professionals, local education agencies (LEAs) and private sector partners (e.g., philanthropy, business)

Overall Plan

Step	Group	Timeframe
Kick-off meeting: Vision recommendations and input	SECDCC	July 18
Objectives, strategies and actions refinement workshop	SECDCC committees	July – September
Vision, mission, goals workshop	PDG core team	End of July
Vision, mission, goals workshop	Public forum	Mid-August
Objectives, strategies and actions workshop	PDG core team	Mid-August
Objectives, strategies and actions input workshop	Public forum	Mid-September
Write up and revisions	PDG core team	Beginning of October
Review and approval	SECDCC	October



Refining the Strategic Vision Statement

Refining the Strategic Vision Statement

Activity	Collaboratively refine the PDG B-5 vision statement to be suitable for all DC residents.
Steps	<ol style="list-style-type: none"> 1. Divide into small groups. 2. Using the handout, use 15 minutes to collaboratively update the existing vision statement such that it is: <ol style="list-style-type: none"> a) Challenging: Describes a bold target outcome for the entire B-5 system including who will be impacted and how. b) Memorable: It helps to paint the same picture in DC residents' minds. c) Engaging and inclusive: Motivates families, service providers and residents alike. 3. Complete the handouts and submit to the PDG core team designated representative. 4. Share your vision statement update.
Discussion	<ul style="list-style-type: none"> • Why did you choose the target outcome you did? • What do you feel would most motivate all DC residents to support this effort?

Current Vision Statement

From DC's PDG B-5 application:

“All children will have equitable access to high-quality opportunities to maximize their full potential for a successful quality of life in their communities.

...The 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);
- Coordinating and aligning policy and financial efforts with a focus on racial and social equity (e.g., comprehensive early learning hubs); and
- Spreading and scaling best practices and evidence-based programs (e.g., trauma-informed practices).”

Updating the Vision Statement

Update the existing vision statement such that it is:

- a. **Challenging:** Describes a bold target outcome for the entire B-5 system including who will be impacted and how.
- b. **Memorable:** It helps to paint the same picture in DC residents' minds.
- c. **Engaging and inclusive:** Motivates families, service providers and residents alike.



Thank you!



Announcements



Public Comment



Thank You!