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Project Summary/Abstract

Building on Progress: Connecticut's Preschool Development System Grant Application

Applicant: Connecticut Office of Early Childhood

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Project Summary Abstract

The Office of Early Childhood ("OEC") requests funds to carry out key systems building activities to build on a completed needs assessment and strategic plan to maximize parent choice and knowledge of the early care and education system, foster a community of learning in Connecticut to share best practices, and improve the overall quality of early care and education system.

Approach: The OEC will work with a dedicated group of established partners to implement activities that will:

increase parents knowledge and access to trusted, licensed care through an improve
website and updated materials that are culturally and linguistically diverse;
support smooth transitions for children in the B-5 state system by supporting community
collaborations and connecting IDEA part C and B;
incentivize coordination and collaboration within B-5 programs through outcome based
contracting to achieve positive outcomes for children and families;
provide and align quality activities with the CT Quality Rating Information System
pilot innovative app-based technology to increase developmental screening,
developmental surveillance and parents knowledge of child development;
develop and integrate data systems that will serve as the foundation for long term
evaluation of performance metrics and outcomes.

Through this grant award OEC expects to:

successfully publish a Needs Assessment of the Early Care and Education systems
update the OEC's 2020 Strategic Plan to include B-5 system programs;
develop a performance and evaluation plan that will provide a roadmap for future
progress for achieving positive outcomes for children and families;
build and sustain community partnerships.

OEC will use its experienced staff, creative partners and Federal support staff to assist and troubleshoots obstacles and challenges that might arise during the grant period.

Organizational Capacity and Management

The Office of Early Childhood (OEC) will be responsible for the administration and management of the Preschool Development Grant Birth through Five (PDG/B-5).

In 2014, Public Act 14-39 formally established the OEC as a separate cabinet-level agency that has full statutory and budgetary authority of early childhood programs formally residing in the State Department of Education (SDE), Departments of Social Services (DSS), Public Health (DPH) and the Board of Regents. OEC currently administers the state's Maternal, Infant and Early Childhood Home Visiting program (MIECHV), Child Abuse and Treatment Act (CAPTA) Title II grant, the Child Care Development Fund (CCDF), Head Start and Early Head Start collaborative office, and the State Advisory Council on Early Childhood and Care authorized by the Head Start Act. The OEC also manages the state's Individuals with Disabilities Act (IDEA) Part C, school readiness preschool program and childcare licensing.

OEC is structured with the appropriate programs, legislation, management, stakeholder support, partnerships, data systems, funding, fiscal controls, and culture to effectively support quality programs. The OEC advances a family-centered, multi-generational approach to support both parents and children. Through this integrated approach and through collaborations with other state agencies, OEC works to advance better coordinated, more cost-effective services that yield measurable results for Connecticut's children and families. When achieved, this system becomes a catalyst for growth and positive life outcomes for both children and families.

Alignment of grant activities with existing initiatives and systems

The PDG/B-5 grant activities align with and will support several initiatives underway at OEC. Examples of these include the Quality Rating Improvement System (QRIS), public health

campaigns, Child Care Development Fund (CCDF) focus on infant and toddlers, app-based technology pilot, Rate Card pilot and the Applicant Background Check Management System (ABCMS), MIECHV needs assessment and many more.

Quality Rating Information System:	QRIS empowers families with the information and access necessary to choose early care and education settings that both meet their needs and provide a high quality environment in which their children can thrive. Access to high quality early care and education will be increased by engaging all types of settings in a process of continuous quality improvement. Through Activity 5, OEC will provide opportunities for early care and education providers to show achievement in the Learning and Environment and the Family Engagement Pillar and data systems development to track critical indicators and performance will support refinement of the QRIS over time.
CCDF Plan Focus on Infant and Toddlers:	OEC has a multi-faceted approach to addressing the unmet need for Infant and Toddlers in the mixed delivery system which includes implementing a "infant incentive package", replenishing the physical infrastructure fund, and funding multi-year start-up contracts for infant/toddler (I/T) care where dedicated contracts are needed to expand or open new spaces. Through this grant award, OEC will develop an Infant Toddler toolkit for providers interested in expanding their current capacity or new providers interested in serving I/T with data system improvements,
Maternal Infant Early Childhood Home Visiting (MIECHV):	In January 2018, Connecticut MIECHV launched the world's first outcomes rate card in Early Childhood. The home visiting rate card incorporates outcomes and payments to providers for the achievement of outcomes important for families, providers and communities – healthy birth outcomes, reduction of involvement with the child welfare system and increased family stability through education and employment. Including rate card in OEC contracts begins to shift practice toward a performance orientation. Through technical assistance support from Third Sector Capital Partners, Inc., OEC will expand performance based contracting to early care and education and B-3 contracts. Beginning January 2019, OEC will be conducting a comprehensive needs assessment following the guidance provided by the Health Resources Services Administration for the home visiting. This needs assessment will inform future system development and collaboration between early care and education system and home visiting.

Key staff: roles, responsibilities and experience

A team of OEC staff including the Division Director of Early Childhood Education, the Information Technology Manager, the Strategic Planner, QRIS staff, the Home Visiting Manager, the Birth to Three Manager, as well as Commissioners office staff will support the implementation of this award.

Harriet Feldlaufer has served as the Director of the Division of Early Care and Education at the Connecticut OEC since 2014. Ms. Feldlaufer oversees state and federal grants, contracts and subsidies totaling over \$260 million. These funds support more than 300 early care and education programs and serve approximately 40,000 children. Ms. Feldlaufer also serves as the State Administrator for the federal Child Care and Development Fund, which oversees the Care4Kids Subsidy Program. She will be providing grant support related to ECE grant activities.

Mary Farnsworth has served as the Director of Strategic Planning since 2015. She holds a masters in Public Administration with a focus on strategic planning and will be providing grant support for Program Performance and Evaluation activities.

Michael Zimet, has over 25 years of experience in of experience in high energy consulting and management roles. As OEC's Information Technology Manager Mike provides architectural and standards adherence, oversight and technology signoff for all IT applications. Mike will be providing grant support for IT activities.

Alice Ridgway manages the Connecticut Birth to Three System as the IDEA Part C
Coordinator. Alice will be providing grant support for IDEA activities. Alice also represents the
OEC on the State Interagency Coordinating Council.

Aileen McKenna manages the state and federally funded home visiting programs for the OEC with an annual budget of \$20,000,000. Aileen has over thirty years of experience in home

visiting and she and her team work with OEC home visiting programs throughout the state ensuring the workforce is prepared and supported to address the complex needs of families on their caseload. Aileen will be supporting grant activities related to home visiting.

In addition to OEC staff, we will expand partnerships with existing third party technical assistance providers and University of Connecticut School of Social Work (UConn SSW) to achieve implementation success. These partnerships will allow OEC to quickly resource and build capacity to complete the grant activities in the twelve month project period. These partnerships include:

Social Finance: Social Finance, Inc. is a non-profit organization dedicated to mobilizing capital to drive social progress. They're committed to using Pay for Success to tackle complex social challenges, facilitate greater access to services for vulnerable populations, and direct capital to evidence-based social programs — all with the goal of measurably improving the lives of people most in need. Social Finance partnered with OEC to develop the first ever Rate Card pilot for home visiting.

Third Sector Capital Partners, Inc. is a leader in outcomes orientation for social services with the goal of enhancing the achievement of positive life outcomes and shifting incentive structures from cost-reimbursement towards outcomes-oriented models. Third Sector Capital Partners, Inc. has recently supported OEC in key legislation that improves OEC's ability to enroll children experiencing homelessness in early care and education programs and prioritizing infants and toddlers on the child care subsidy waitlist.

Skylight is a digital consultancy whose mission is to make government work in a digital world using design, technology and procurement. Skylight has been partnering with OEC on high-

priority technology initiatives such as the OEC website design, Care4 Kids eligibility system and the B-3 system.

In the summer of 2018, OEC entered into a partnership with the University Of Connecticut School Of Social Work (UConn SSW). This partnership supports the ongoing research and evaluation needs of our agency and positions OEC with the ability to review the effectiveness of its programs and make data-informed policy decisions. In this grant, UConn will provide a durational project manager and the capacity to build and test demonstration projects.

OEC will utilize Connecticut Department of Administrative Services master agreement contracts to continue our work with O'Donnell Company for public health campaigns and communications.

Over the past ten months, OEC has partnered with O'Donnell on public health campaigns that have helped parents find safe, licensed, child care providers and discover the importance of safe sleep in infants and young children, as well as develop ways to improve access and usability for Connecticut's Care 4 Kids and Birth to Three programs.

Eastern Connecticut State University (ESCU) is currently contracted with OEC to implement the MIECHV Innovation Award and is partnering in the development of online training videos for home visitors. As an existing partner to OEC, we will expand their contract to provide similar services of online module development for the IDEA programs.

Organizational Capacity to administer funding and manage the development and sustainability of the grant activities

The OEC has both the programmatic and fiscal infrastructure to administer funding, manage the development of Preschool Development Grant Birth to Five and ensure sustainability of core grant activities.

Currently the OEC oversees an annual budget of close to \$330 million which includes state and federal grants, contracts and subsidies in early care and education totaling over \$260 million, IDEA Part C services of \$27,000,000; Maternal, Infant and Early Childhood Home Visiting services of \$9,700,000; and state funded evidence based home visiting of \$10,200,000.

OEC is provided grants and contracting support through the Central Contracts Unit (CCU) at the Connecticut Department of Mental Health and Addiction Services (DMHAS). A team at CCU works with OEC fiscal and programmatic staff to develop State of Connecticut Personal Service Agreements (PSA) and State of Connecticut Purchase of Services (POS) contracts. These contracts outline the requirements for sub recipients that include: description of contracted services, client-based outcomes and measures, programmatic and financial reporting, program administration, budget and payment provisions. Included in these contracts is a Universal Chart of Accounts (UCOA) that details the approved budget and tracks quarterly expenditures. Program and fiscal staff review quarterly program and fiscal reports and provide feedback and technical assistance to the sub-recipient if needed.

The OEC fiscal office has 5FTE positions including a Fiscal Administrative Manager, Fiscal Administrative Supervisor, Associate Accountant, Fiscal Administrative Officer and an Associate Fiscal Officer.

The OEC follows a standard, formal process for grant management of federal funds.

State B-5 Mixed Delivery Systems Description and Vision Statement

Describe progress and successes, hurdles and challenges shaping development and implementation of a robust mixed delivery and state early childhood care and education system

Our vision for Connecticut's birth through age five mixed delivery system for early care and education is that it further develops into a system that seeks and reflects parent voice, values community and stakeholder partnerships, provides high quality, integrated services to families when they need them most, prioritizes our most vulnerable families, is outcome oriented and data driven, and undeniably supports the positive growth and development of Connecticut children.

In bringing most of the state's early childhood programs under the newly formed OEC in 2014, Connecticut was afforded the unique opportunity to focus on our youngest children and build a better trajectory for their lifelong success. OEC was called on to be data-driven, outcomesfocused, and to continually monitor and improve the early care and education and family support systems. The OEC was further mandated to integrate early childhood services so they more efficiently and effectively serve families.

At its creation, however, the agency inherited multiple early care and education programs and funding streams, each with their own rules, eligibility, geographies served, and the OEC had limited authority or path forward to integrate. In the past four years, OEC has succeeded in overcoming many of the barriers to creating a more robust mixed delivery early care and education for the state. This grant opportunity enables OEC to accelerate the implementation of

key improvements with the purpose of driving efficiencies, savings, and achieving our vision for the Connecticut's mixed delivery system for early care and education.

Some of the ways in which OEC is well positioned to overcome hurdles it will face in making progress towards a vision are the following:

The OEC benefits from strong support from the Connecticut state legislature. The legislature created OEC (P.A. 18-184 (HB 5449) – An Act Concerning the Administration of Certain Early Childhood Programs and the Provision of Early Childhood Services by the OEC), protected its Early Childhood budget (OEC's budget was apportioned the smallest cut of any agency in the state budget last year), and increased spending on childcare in the last biennial budget.

Over the past 20 years, Connecticut has invested in its preschool system. Its preschool system is now one of the well-funded, broadly accessible in the country.

The OEC has successfully developed a birth through age five strategic plan, conducted a comprehensive unmet needs study, and identified strategies and next steps improve the early care and education mixed delivery system. The OEC has already begun to address those identified the gaps in the mixed delivery system by weaving strategies throughout appropriate federal grants (CCDF, CBCAP, MIECHV) and into new legislation. The OEC has also started cultivating the key partnerships with sister state agencies to work together to leverage resources towards shared goals (Medicaid, SNAP, Housing dollars, etc.).

OEC has developed the backbone of the data system infrastructure for administering a statewide mixed delivery system such as data systems. For example, the OEC partnered with our Medicaid agency to leverage leveraged 90% of the cost of modernizing our CCDF voucher program eligibility data system in the past 12 months. It also successfully competed for several

opportunities for support from AISP for data integration, outcomes based procurement technical assistance grants, a USDA grant for SNAP E&T and early care and education system integration, a Department of Education Pregnant and Parenting Teen grant coauthored with State Department of Education in the past year.

Describe the existing birth to five mixed delivery system for early care and education

Connecticut's early care and education system is made up of a healthy blend of public school settings, licensed family childcare, community and faith based child care centers and, of course, the support from relatives (much of which is unpaid and unregulated)¹. Connecticut has the country's highest rates of NAEYC accreditation, one of the strongest licensing requirements of ratios in the county, and a strong full-day state funded preschool system that produces among the highest rates of preschool participation nationally.

Capacity of early care and education System

Of the 199,355 children under six in Connecticut there are 103,235 infants and toddlers (ages zero, one, and two) and of these, 71% require child care, or 74,600 infants and toddlers. There are only 23,585 legal, regulated child care spaces available statewide for infants and toddlers. There are 96,120 preschool aged children (ages three, four and five) and child care is needed for 69,410 preschoolers at minimum (71% of the total). There are 71,425 legal, regulated child care

¹ Most child care in Connecticut is offered in privately-run child care centers. 64% of child care spaces for preschoolers and 73% of child care spaces for infants and toddlers are offered in privately run child care centers that are not part of public schools.

Licensed family child care provides less than 15% of total child care capacity. Licensed family child care settings provide 14% of infant /toddler care and 10% of preschool aged child care available.

One quarter of child care for preschoolers is offered by public schools. However, less than 1% of child care for infants and toddlers is offered in public schools.

The majority of the capacity of child care in Connecticut (72%) is offered in a licensed setting. There are 16% more child care spaces in license-exempt settings for preschoolers than toddlers due to the high number of seats offered through license-exempt public schools.

spaces available statewide for preschoolers. However, the location, schedule, quality, or price of the existing child care capacity does not provide sufficient access for many families.

Policies and Programs that Support the Early Care and Education, Mixed Delivery System

There are currently more than 10 separate funding streams for child care in Connecticut to help offset the cost of child care. Almost all funds to support infants and toddler care are provided at the state or federal level (in Connecticut, this age group is primarily funded by the CCDF and state funded voucher program, Care4Kids). These funding streams, combined, serve approximately one quarter of the children in families needing financial assistance.

There are over seven preschool funding programs. OEC provides coordinated oversight over the majority of these funding streams. These preschool funding streams are sufficient in number to serve all preschoolers in need in the state, but are not 100% allocated by need.

The table below describes each major program that makes up the funding system for the Early Care and education mixed delivery system.

Financial Support Available to Families with Young Children in Connecticut

Name of Funding Source	# Infants and Toddlers Served ²	# of Preschoolers Served	Type of Financial Support	Rules for Prices to Parents	Available statewide?
Preschool Development Grant (previous)	0	192	Slot funding for preschoolers under 200% of Federal Poverty Level	Parents pay no fee.	No
School Readiness	0	7,080	Slot funding for preschoolers of any income (a preference for families below 75% SMI)	Parents to pay on a sliding fee scale with no additional prices to parents allowed.	No
Care4Kids (CCDF Voucher Program)	8,465	7,403	Subsidy to offset the price of child care for TANF recipients in a JobsFirst approved education or training activity and low-income working parents	Parents pay for a portion of price of care on a sliding fee scale plus remainder of price if advertised price is above Care4Kids rate.	Yes
Child Day Care Contracts	880	1,372	Slot funding for infants and toddlers as well as preschoolers of any income (with a preference for families below 200% FPL)	Parents to pay on a sliding fee scale with no additional prices to parents allowed.	No
Multiple Sources of Funding Combined to Serve 1 Child	437	8,096			
Head Start	643	2,672	Federal Funding for families below 100% Federal Poverty Level	Parent pay no fee.	No
Public, Smart Start Magnet, Chart School State, and Municipal Funds	216	13,130	Funding to cover or deeply subsidize care for any income resident in a public school setting	Parents pay no fee or a deeply reduced fee	Growing, not yet.
IDEA Preschool Special Education Funds	Home Visiting Services	Included above	Funding to cover or deeply subsidize care for children with special education needs	Parents pay no fee or a deeply reduced fee.	Yes

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² These are the children served using this funding stream alone. For children who are accessing care with help from multiple sources, those children are counted under "multiple sources".

There is strong statewide infrastructure that supports the early care and education field in Connecticut including:

A tech-savvy Child Care Resource and Referral Agency (CCR&R) that is administered statewide by United Way of CT and not only offers critical information to families about child care, but also provides technical assistance, professional development, and training statewide, available to every provider in the state and aligned with licensing and CCDF requirements

Family Childcare Networks providing technical assistance, training, and shared services and strong support systems for family child care providers like All Our Kin

Strong local councils and collaborative bodies in select communities to coordinate services, administer grant funds, and support policy making at the local level

Annual licensing inspections for providers statewide with strong background checks

Partnerships with funders such as the Early Childhood Funder's Collaborative of CT, the

Populations of children targeted and intended short term and long term outcomes for these populations

Melville Charitable trust, and others

Our top priority is improving access to care for infants and toddlers. It is the population for which there is the greatest unmet need and the most important time of life for provision of safe, stable, quality care. We know that 80% of a child's brain architecture is formed in the first three years of life, and that the conditions in which that occurs has life-long impacts. High-quality early care and education is a critical factor in a young child's healthy social emotional development.

The early months and years are a time when working parents are most in need of support and are least likely to get it. Without access to safe, licensed care, parents find themselves forced to choose unregulated, unlicensed and sometimes unsafe alternatives or the choice of not working at all, or at a reduced level. In the past fifteen months, four children have died in child care in Connecticut, all of them in unlicensed care, all of them infants or toddlers. These tragic results can be prevented.

The current landscape of infant toddler care does not meet family need as there are more working families of all incomes with infants and toddlers than there is licensed child care capacity to care for them and does not meet the financial need of families - seventy-five percent of working families with infants and toddlers need assistance but there is too little financial assistance for families in need of subsidy.

The long-term goals of the infant/toddler initiative is to increase the number of infants and toddlers in trusted, licensed care thereby reducing the incidences of infant deaths in unlicensed care settings, child maltreatment, and injury. Reduce the experiences of ACES in all young children. Support the healthy development of infants and toddlers and identify delays and connect to resources.

Connecticut's vision to increase the quality, coordination, alignment, and efficiency of programs and services,

"All young children in Connecticut are safe, healthy, learning and thriving. Each child is surrounded by a strong network of nurturing adults who deeply value the importance of the first years of a child's life and have the skills, knowledge, support and passion to meet the unique needs of every child."

Crafted at the launch of the OEC, the vision statement above continues to guide how the agency approached systems development.

The vision for the early care and education system in Connecticut is that OEC is a new kind of government agency - one that truly listens and responds to the people they serve, that builds trust in government, and has a genuine feedback culture. It has developed its vision of how to create a more robust mixed delivery system of early care and education for Connecticut in this spirit.

That home visiting, early childhood special education and Part C, Medicaid funded services supporting families with young children and early childhood providers are working together seamlessly towards shared goals and common outcomes. That child care deserts no longer exist and that families with infants and toddlers, along with preschoolers, are able to afford high quality care. That there are smooth transitions, no wasted duplicative effort or families falling through the gaps. That systems are not only family driven, but supported and informed by data and evaluation. That the people caring for young children enjoy a living wage and are excellent at what they do, and have the support they need.

The OEC is working towards a vision of a mixed delivery early care and education system that has the capacity to serve more infants and toddlers, balances investments between preschool and infants and toddlers, and increases parent knowledge and choice in the early care and education system. Connecticut's system will continue to rely on multiple provider types to provide care to families and reflect parent choice. However, the OEC hopes that it will evolve:

Community	Will continue to operate as a core component of the mixed delivery system
based child	for preschoolers and infants and toddlers, with capacity for infants and
care centers	toddlers growing most rapidly and expanding service models to include more
	non-traditional care hours and expanding in underserved geographies while
	continuing to increase in quality.

Public schools	will increase their contribution to the preschool system as municipalities offer preschool in increasing numbers, quality, and duration and with
	increased coordination with community providers for preschool special
	education
Licensed	Will remain a valued choice for parents statewide, growing to serve more
Family Child	infants and toddlers and continuing to fill the niche of non-standard hour
Care Providers	care while increasing in quality.
Relative care	A choice for high income families, will continue to remain a choice for low
	income working families as well through the CCDF voucher program.

Known gaps in coordination, alignment, and delivery of high quality services and proposed strategies to address each

The OEC has already developed a set of strategies that align with gaps in coordination, alignment, and delivery in a document called the Early Childhood Action Plan.

This year, the OEC partnered with the Early Childhood Funder's Collaborative of Connecticut to embark on a more inclusive and transparent operational plan development process ("Action Sessions") for the early care and education mixed delivery system which recently won a national award of recognition at the Feedback Labs National Conference. First, the OEC cataloged current pressing "pain points" gathered from feedback to the agency from stakeholders (licensing inspectors are inconsistent, the regulations on summer care are unfair for family child care providers, rates are too low, etc.), recent events (e.g. infant deaths in unlicensed care), unmet needs study data, and catalogs of comments at multiple public forums. The agency then developed proposed 12-18 month solutions with concrete action steps to take to respond to these pain points which ranged from legislative proposals needed to culture change within the licensing division. OEC then held a series of community forums to present the pain points and the proposed action steps, working with a national facilitator from CLASP and a thought partners and consulting team, Third Sector. It also administered surveys and webinars throughout to

facilitate additional participation. After incorporating feedback OEC presented to the Early Childhood Cabinet (which also serves as the State Advisory Council) is a central point of coordination and communication regarding program and services including Title I of ESEA, Part C and Section 619 Part B of IDEA, subtitle VII-B of the McKinney-Vento Act, the Head Start Act, and the Child Care Development Block Grant., the Action Plan was adopted and progress has been presented to the SAC quarterly, ongoing. The OEC wrote these proposed actions into its CCDF plan and budgeted for their implementation using CCDF dollars, state general fund 2-gen, and even home visiting and IDEA dollars where appropriate. The OEC also recruited a LEE Educational Fellow whose sole responsibility it to track and communicate progress, develop and maintain indicator data, and inform any need for revisions as well as identify any barriers to success. This model of engagement, collaboration and feedback and strategy setting received global recognition by Feedback Labs and OEC was the recipient of the 2018 Future of Feedback Award.

One example from the Early Care and Education Action Plan is included below to give an example of the thoughtfulness, detail, and achievability of the strategies the OEC is pursuing. The full set of strategies than span the early care and education system in the action plan will be happily furnished if requested.

To increase child safety, OEC plans to improve the implementation of the licensing program. Several infants have died in unlicensed care in Connecticut. Additionally, OEC licensing regulations were determined to be out-of-date and providers gave feedback that licensing specialists do not consistently provide compliance feedback in a manner in which providers feel supported or supports compliance. The strategies identified include: revising licensing regulations and statutes to improve clarity and support high quality practice; improving licensing

practices with a focus on enhancing support to providers to achieve compliance; and reduce use of unsafe care for infants. The agency has already had early successes in this area. It enacted a "no more blankets" policy to reduce unsafe sleeping practices and begun distributing sleep sacks, developed and launched public health campaigns for Safe Sleep and Trusted License Care (TLC) for infants, produced online training for licensing information, launched a new policy to offer Initial Technical Assistance Visits to newly licensed child care programs and new Directors, and began the process of rewriting licensing regulations. This grant will allow for the development of critical metrics from within our data systems for licensing, child fatality data, and licensed capacity for infants, for example, to facilitate and monitor these improvements.

Key partners and stakeholders, including families and caregivers, leveraged to achieve the described vision and the identified activities of this grant

The OEC is committed to continuing on the path of transparency, partnership, and respect for the families and communities we serve and support. The OEC will continue to dialog with these critical stakeholders and partners to achieve the vision described. Specifically, the OEC intends to extend and replicate feedback loops for any major proposed action throughout the grant. This will involve taking a pause, asking questions and truly listening to what our diverse group partners have to tell us to guide is in our implementation from data system development, to outcomes to track, to website improvements, to communities of practice and contracting standard. This is the OEC's vision of how to be a good steward of public money and effectively meeting the needs of residents with respect.

Key partners, listed in Organizational Capacity, will be used to accelerate the OEC's progress towards this vision by developing the data systems, communication pathways and resources,

community level infrastructure, spending and policy vehicles. Their roles and responsibilities are detailed throughout the grant. Equally important are the state agency partners and philanthropic supporters to help to identify ways to leverage the early childhood resources in the state. National advisors, such as AISP (Actionable Intelligence for Social Policy) who has guided the OEC towards the development of our Integrated Data System, will also continue to play a role in our success as we rely on them through other grants, contracts, and engagements.

B-5 Statewide Needs Assessment

The OEC will publish its completed statewide, birth through age five needs assessment of the availability and quality of existing programs in the state within the first month of the grant period. This ambitious project was funded with state of Connecticut general fund dollars. A team of local and national partners worked together to produce the state's first comprehensive unmet needs study for Connecticut's families with young children. The plan is currently being made ready for publishing by the final edit and design team before printing. For PDG, this document will be update slightly with the state's current plans for addressing gaps before printing. The OEC will only need funds to publish the unmet needs report more broadly than originally planned for to share with local collaborative to facilitate discussion of increase family choice and access.

Needs Assessment Development Process:

The OEC engaged critical partners to conduct a comprehensive unmet needs study for early care and education to help the state plan for policy and funding changes needed to fill gaps, particularly for vulnerable and underserved families. This report defines key terms, describes

the populations of children who are vulnerable or underserved, identifies current quality and availability of early childhood education, including for underserved, identifies the unduplicated number of children awaiting access to safe, affordable care, and identifies the gaps in the data, particularly for working families. It also describes the states' plan to fill those gaps in research and data, tracking indicators of progress, addressing early care and education facilities, analysis of barriers to funding and provision of early care and education, and support for transitions.

To create this report, the OEC engaged research partners to catalog the capacity for children birth to five in the state's mixed delivery system to get an unduplicated count of capacity and demand for childcare as well as an unduplicated count of funded children and demand for funding. To accomplish this, the OEC followed this process:

Step 1: Assembled Team: To conduct this unmet needs study, the OEC engaged some of the most respected leaders locally and nationally in data analysis for early childhood including CERC, Azavea, and Child Trends. The OEC also assembled a national advisory group to assist with the project and provided expertise as requested. Including: Ajay Chaudry, Senior Fellow, the Robert F. Wagner School of Public Service, New York University and Former Deputy Assistant Secretary for Human Services Policy, US Department of Health and Human Services, A. Rupa Datta, Senior Fellow and Vice President, NORC at the University of Chicago, Katherine Kaufmann, Partner, The Bridgespan Group, Anne Mitchell, President, Early Childhood Policy Research, David Murphey, Senior Research Scientist, Child Trends, Christina Weiland, Assistant Professor, University of Michigan School of Education, and Marina Winkler, Regional Program Manager, Office of Head Start Region 1, Administration for Children and Families. OEC also assembled a Connecticut advisory group made up of early childhood research experts was also

engaged to assist with the project as needed. These experts have extensive knowledge of the relevant data and policy context in the state.

Step 2: Defined terms: The OEC worked with national partners to define all critical terms including, most critically, the definition of "access." OEC used the Using the national definition of access developed by the early care and education research consortium, INQUIRE. "Access to early care and education means that parents, with reasonable effort and affordability, can enroll their child in an arrangement that supports the child's development and meets the parents' needs." - OEC operationalized this for analysis to set scope at examining the factors that impact families' access: Does not require unreasonable effort on their part to find and use (location and capacity), is affordable within their family budget, Is offered at the times that the parents need child care, and is able to effectively support the child's development (quality, inclusion).

Additionally, OEC used multiple risk factor analysis for health, educational outcomes, child welfare outcomes, and ACES to help define vulnerable populations, and came to agreement on the critical definition of vulnerable children and families.

Deep Poverty	Children whose families have adjusted gross incomes below the federal poverty level (FPL) or receiving Temporary Assistance for Needy Families (TANF).
Unstable	Children whose families are homeless or situated in unstable housing.
Housing	
Violence,	Children in families that experience domestic violence or are in the state
Abuse or	Child Protective Services system (i.e., foster care, at-risk of losing child
Neglect	custody or in substantiated or high risk of abuse or neglect situations).
Developmental	Children with significant developmental delays or diagnosed medical
Delays	conditions with high probabilities of significant delay, such as children
	enrolled in the Birth to Three program or with an Individual Family Service
	Plan (IFSP) or an Individualized Education Program (IEP) or a diagnosed
	medical condition typically leading to a developmental delay.
Parental	Children of parents who are teens, incarcerated, migrant laborers, refugees
Circumstances	or substance abusers.

Low Income	Children in families with incomes that place them at or close to the federal poverty level or significantly below the state's median income.
Communities	Children whose families live in areas substantially consisting of low income
of	individuals.
Concentrated	
Poverty	
Child	Children who do not qualify for services under the Individuals with
Conditions	Disabilities Education Act (IDEA) but nevertheless have disabling
	conditions such as special medical needs, mental health or behavioral
	challenges or mild developmental delays.
Parent	Children who have one or both parents with vulnerabilities such as:
Circumstances	depression or other mental health challenge, a history of substance abuse,
	cognitive limitations, are isolated, did not receive a high school degree, were
	neglected or abused as children, do not speak English, are a single parent or
	active military, have a large number of children, did not receive adequate
	prenatal care or have a transient, or with a non-biological caregiver in the
	home.

Step 3: Assembled the datasets. OEC compiled comprehensive datasets on supply and demand to prepare for analysis. US Census population data, administrative data from several state agencies and organizations, and a statewide Connecticut Family Survey administered to a representative sample of families with young children inform the analysis of the demand for early care and education. Administrative data about early care and education providers and funding sources³ and a survey of child care providers inform, and provider interviews inform the analysis of the existing supply of care. The demand for services is analyzed by determining how many children, ages 0 to 5, live in Connecticut; the location and demographics of the families

³ The supply of early care and education providers is analyzed using data from Connecticut's 211 Child Care resource and referral service, administered by the United Way of Connecticut, the Care 4 Kids (CCDF-funded) program, a provider survey and provider interviews conducted by CERC, OEC licensing and accreditation information, public, independent and religious-affiliated preschool program information, and national survey results, particularly with respect to unpaid care and informal, paid arrangements, administrative data on funding streams, public school data from EdSight at the State Department of Education

and their children; how many are estimated to need child care; and how much and what types of child care those families require or desire. Throughout the report, details and disaggregated analysis are included for different income bands, defined race/ethnic groups, age groups of children, and geographies.

Datasets Assembled

Supply of early care and education	OEC compiled a databased of early care and education by creating an unduplicated list of providers based on the CCR&R information for program characteristics (such as their hours, costs, quality designations, ages served, etc.), license exempt programs, and advertised capacity, the Department of Education's State Longitudinal Data System for public school preschool, the licensing database of childcare providers, and by calling every municipality in the state to capture missing or new public school programs, particularly for special education. The OEC also conducted a survey administered to a representative sample of child care providers from the mixed delivery system on barriers to serving vulnerable children.
Demand for child care	The OEC purchased a special census dataset for Connecticut which gave the OEC town and state level data on families with children 5 and under with details on age of child, income, race, employment, etc. The OEC complemented this data with a statewide survey of families based on the national Survey for Child Care that was distributed to a sample of families with young children that was a representative sample of families by age of child, race, and income. This was complemented with programmatic and federal data from other needs assessments for other programs to round out the picture for vulnerable families.
Funding Available	Connecticut has several funding streams including slot-based program grants and contracts and a family voucher program. Families can access multiple funding streams for the same child, and in the absence of a data system which could report on unduplicated numbers of children, the OEC used hand matching from administrative records and spreadsheets to reach an unduplicated number of children served and the overlap in funding streams.

Step 4: Conducted Analysis: The OEC, along with project partners, conducted analysis based on the national definition of access to answer the following questions for three main groups: infants and toddlers, preschoolers, and vulnerable families, which are also headings of chapters in the report:

- a. Is there enough child care available in Connecticut?
 - i. Is there child care available where families need it?
 - ii. Do families have access to information about child care?
- b. Is child care affordable in Connecticut?
 - i. Is financial assistance available for childcare where it is needed?
- c. Is child care offered at the times parents need?
 - i. Night and weekend?
 - ii. Full time vs. part time?
 - iii. Weekend vs. weekend (daytime)
 - iv. Evening or overnight?
 - v. Flexible schedules?
- d. Does available child care support the development of all children well?
 - i. Children in families facing significant stressors
 - ii. Accreditation and Licensing

Geospatial analysis was used to complement more traditional analysis where needed.

Step 5: Finalization and Printing: The OEC is currently working with graphic designers/copy editors to finalize the report for printing and distribution.

While not yet published, OEC has already begun to make use of the data and findings to support legislative proposals and policy planning, particularly for the CCDF plan. For example, one of the most underserved groups in Connecticut are infants and toddlers. There is a major gap in the capacity of licensed care and there is also an imbalance in the funding directed towards infants and toddlers vs. preschoolers, limiting access and parental choice. Other key areas of needs to allow for parent choice are availability of high quality evening and weekend care. Key geographies of critical need areas have been identified and target amounts for increased licensed capacity or funding.

B-5 Statewide Strategic Plan

Develop/update strategic plan that recommends collaboration, coordination, and quality improvement activities (incl. transition) among existing programs in state and local education agencies.

The OEC has already developed a strategic plan for the early childhood B-5 system in Connecticut and plans to update it during this grant period. The strategic plan focuses on increasing collaboration and coordination among existing programs in the state, recommends partnership opportunities to improve the birth the 5 system in the state, including program quality, delivery of services, and leveraging other resources. It focuses on responding to family voice as the central, unifying philosophy of the grant and has the most specific recommendations for the early care and education, home visiting, and IDEA part C programs in the state, as well as the systems that coordinate between them.

The OEC strategic plan, create between 2015 and 2016, is intended to guide the agency through 2020. Its development process was iterative, collaborative, and built on previous plans. When the OEC was created, there had been years of planning and advocacy for early childhood, and dozens and dozens of local and statewide plans. The first step the OEC took to create the plan was to find and review all of the existing early childhood plans in the state, plus an additional 20 national plans, and then catalog all of the recommendations, synthesizing them into a "Strategic Planning Framework" and then wove in federal and state requirements or mandates. This draft strategic plan was then presented to early childhood local councils throughout the state at 10 well attended community meetings and 4 webinars. They were held on nights, weekends, and weekdays, with translators, and childcare and dinner served, they had local hosts recruiting participants, and were held in every county in the state. The feedback from the forums, as well

as an online survey tool, was incorporated into a new draft, presented to the SAC and taken back out to communities in a second set of community meetings to present the final plan. The plan includes a commitment to equity, a defined list of vulnerable families warranting additional focus, and target child-level outcomes. The four major goals (and sections) of the plan are: 1) Place Families and Children at the Center, 2) Increase Access to High Quality Programs, 3) Develop a Skilled Early Childhood Workforce, 4) Strengthen Partnerships, and 5) Increase Organizational Effectiveness.

Each year, the OEC has created a 1-year "operational strategic plan" to identify the concrete actions the agency will take to further its progress on the plan. For example, the strategic plan identifies the need to cultivate partnership with local, state, and federal as well as philanthropic partners in specific ways. As a brief example, the agency has pursued development of partnerships to leverage cross system early childhood resources with many partners:

- the state's Medicaid agency to leverage Medicaid dollars and is planning on partnering to develop cross system early childhood care coordinators,
- the state's housing agency and statewide homeless nonprofit to coordinate funding to address family homelessness and coordinate early childhood services for identified families
- the states' P20WIN interagency data sharing body for education and the Medicaid and child welfare agencies to engage with OEC in developing a cross-sector Integrated Data System with the support of AISP to leverage the use of administrative data across systems

- and within OEC, to leverage the development of policies, procedures, and funding vehicles to create incentives, requirements, and infrastructure for collaboration between home visiting, special education, and early care and education
 - the state's education agency to develop tools to support families with children entering kindergarten such as assessment tools (the Kindergarten Entry Assessment) and toolkits for planning for transition, and a shared actionable definition of family engagement that is being lauded nationally for its focus on partnership with families and identifying high impact vs. low impact ways to support that those partnerships

For this grant the OEC proposes replicating the Action Session and Action Plan model described in section B-5 Mixed delivery system to focus on the home visiting system (state and MIECHV funded) and the special education system (IDEA part B and C as well as screening, referral and linkage systems). One of the main purposes of these action sessions will be to uncover the most practical, well received ways to increase coordination and collaboration between the home visiting, special education, Medicaid, child welfare, and early care and education systems to better support families, and facilitate their participation in the early care and education system. Another main purpose of these action sessions will be update the strategic plan to align with this grants' vision statement and logic model by having a transparent conversation about the plans proposed in this document.

To accomplish this, the OEC will engage the services of partners already embedded in our home visiting and special education systems to conduct action sessions and develop and action plan under the direction of the agency's strategic planner.

Social	will support the development of the action plan by helping to conduct the review
Finance	and compilation of existing plans, crafting surveys for the field, participating in
	focus groups, and synthesizing into "pain points"; supporting OEC staff in

	identifying actionable steps to take within a 12-18 month time period to mitigate	
	those pain points with close focus on achievability and value to the field and to	
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	families. Third Sector will help to facilitate the community forums to present	
	the draft action plan to a broad range of stakeholders and incorporate feedback.	
Skylight	Will deploy a team of user experience researchers to facilitate listening sessions	
Digital	and focus groups to help identify pain points. The full Skylight team, in	
Partners	partnership with OEC digital staff, will support the development of	
	enhancements to the digital systems, creating dashboard for progress tracking, or	
	outcomes assessment as needed	
O'Donnell	the agency's partner for graphic design, public health messaging, and	
Company	communications will coordinate the logistics and materials for the community	
company	meetings and other public input opportunities to ensure a wide range of	
	stakeholders are able to participate, including early care and education providers	
	and advocates, legislators, pediatricians, home visiting and special education	
	providers, and of course, parents. The OEC will carefully plan engagement	
	opportunities with O'Donnell: translating, selecting hosts, times, and locations,	
	and using community outreach teams and social media to invite partnership and	
	participation. Based on existing needs assessment for home visiting, special	
	education, and early care and education, OEC will ensure the design of	
	participation opportunities is for the families, communities, and providers most	
	likely to be impacted	
Existing	Will focus on inter-agency partnerships, such as those being developed to	
OEC staff	leverage Medicaid dollars for home visiting and coordinating with our child	
	welfare agency around the new Child First Opportunity. As with the current	
	action plan, a LEE Educational Fellow (not included in the budget) will be	
	tasked with monitoring implementation, developing and maintaining indicator	
	data to assess progress and support quarterly updating to the SAC on progress.	
	and to assess progress and support quarterly aparting to the Site on progress.	

Maximizing Parental Choice and Knowledge (\$3,383,892)

In the past year, OEC has partnered with the ODonnell Company to launch public health campaigns to provide parents with accurate and timely information, to develop a method for reaching hard to access audiences, and to increase awareness of OEC's programs and services through social media engagement. |In this grant award, OEC will build on the work that is underway and expand beyond the existing scope and fiscal availability.

OEC, in partnership with O'Donnell Company, has developed a methodology for reaching hard to access audiences throughout the state, to ensure they are engaged and able to access important programs. The O'Donnell team has built relationships with a network of organizations and

even in urgent situations where messages need to be conveyed quickly. As OEC implements this grant award, this foundational work will be critical to reach hard to access families in high risk, low income communities.

Social Media Engagement Strategy

Social media channels are critical to building positive relationships with OEC audiences, so when important health and safety information needs to be shared, the audience is accessible and open to listening. Using Facebook, Twitter, and YouTube, the OEC has built audience following and increased engagements through a coordinated strategy to share information that supports children's development, safety information, and best practices for parents, provider info, and supportive messages for those who care for children, and more. This engagement and outreach strategy will continue to unfold and respond to audience needs going forward. Results so far are highly encouraging—Facebook audience has grown from 511 to over 3500; and engagement is up over 200%.

Through this grant opportunity OEC plans to build on the communications foundation described above and accelerate progress to ensure Connecticut families have timely, accurate information, in a culturally and linguistically appropriate manner.

Strategies for providing families with timely, accurate information in a culturally and linguistically appropriate manner include:

Translation of OEC Print Materials and Regulations pertaining to OEC (Cost: \$67,000)

Twenty-two percent of Connecticut's population speak a language aside from English, with eleven percent Spanish speaking. OEC's materials will be translated to Spanish, printed, and

distributed in print and digital versions to parents, families, providers, and community organizations.

Improvements to OEC Website Including Information in English and Spanish (Cost: \$1,197,892: Skylight: \$1,125,892, ODonnell \$72,000)

OEC in partnership with Skylight will take an agile approach towards development of the website technology, content and services. For each section of the website, we will begin by conducting workshops and interviews with subject matter experts, and end users. We'll then work together as a team on a visual design, the content, and the software development to build prototypes that will be tested with a representative sample of end users and subject matter experts. Once feedback has been incorporated, we'll develop and release that section of the website, working in an iterative fashion.

Activities for website re-design include: auditing existing content to archive unnecessary pages; interviewing subject matter experts and end users; drafting re-designed content in plain language; re-designing services offered on the OEC website; re-designing the website information architecture to make it easier for families to find the help they need; building and testing prototypes with end users and subject matter experts. As a result of these activities OEC will have: prototypes for testing with end users; reports from content and links audit; new user-friendly website sections; and guidance with content management processes moving forward, and a content management system.

OEC Public Health Campaign about Mixed Delivery Early Care & Education System: (Cost: \$774,000)

The O'Donnell Company will work closely with OEC to develop a campaign to educate Connecticut families, stakeholders, and partner organizations about the range of products and services available to support young children. The OEC offers a diverse set of programs that have significant benefits for families in Connecticut; including Birth to Three, Care 4 Kids, Home Visiting, and much more. While these individual programs are sometimes promoted through standard channels, the educational campaign will work to integrate all the services into a package that allows families to see all the opportunities that support the development, care, safety, health, and education of the state's youngest children—so that they are prepared to enter school and for the years beyond. By taking this more holistic approach, early intervention and more robust access can be provided to audiences that most need support—leveraging existing programs more completely and ensuring services are accessible to even those audiences who are difficult to reach. Parents can then identify the services that apply to their family and choose a range of programs to support their child's development, education, and safety—while they work to improve the future for their family. The Public Health Campaign will be statewide, using media and engagement methods that are proven to support high levels of awareness, engagement, and behavior change.

The campaign will be developed with input from families and providers, the Early Child Cabinet, Head Start Collaborative office and Head Start Directors Association to ensure all communications are accessible and understandable. Traditional and digital media will be utilized, with high levels of digital interaction, including social media strategies. Additionally, outreach to priority groups, press, and key influencers will complement the media plan. Campaign components will be translated as needed.

OEC plans to increase parental choice for families with infants and toddlers by developing a toolkit and roadmap for either existing or new Early Care and Education providers interested in serving infants and toddlers—Third Sector (Cost \$200,000)

OEC will work with Third Sector to develop a toolkit for providers interested in serving infants and toddlers through a multi-step process that spans development through implementation. This toolkit will complement other initiatives within the CCDF plan to meet the needs of parents with infants and toddlers. Steps taken by third sector include:

Review Existing Needs Assessment and Landscape Analysis for existing providers and programs; review qualitative and quantitative information on historical performance; understand gaps in the system in regards to setting types, hours of care, geographies, infrastructure, professional development, etc.; review how many preschool spaces are currently underutilized and the geographic distribution; and determine existing training/support designed to increase providers comfort with serving infants and toddlers.

Provider Focus Groups that include: selecting diverse set of providers (across center- based and family child care providers serving infant/toddler and preschool care) that is representative of the target settings and geographies most in need of additional infant/toddler care; interviews to uncover real and perceived fears of providing infant/toddler care; determining requirements to create new spaces (e.g., infrastructure, training, funding, applicants, etc.); determining the biggest real and perceived barriers to expanding care to serve infants and toddlers (or additional infants and toddlers); soliciting ideas about the most effective methods to recruit new providers and what materials, knowledge, or services would be effective at expanding infant/toddler provider capacity in addition to the planned monetary incentives.

Develop final package of incentives and inducements to complement the already planned strategies of an infrastructure development fund, monetary incentive bonus, and support from licensing inspectors, new grants and contracts for start-up or ongoing costs, and increase infant/toddler voucher rates. Additional inducements may include support in advertising or business planning technical assistance, toys, books, furniture, materials, or other ideas surfaced through provider focus groups.

Development of communications strategy to reach potential infant/toddler providers or expanding providers for infants/toddlers, presentations to describe the package of incentives, supports, and opportunities OEC is offering to support infant/toddler space development and how and when to access, and business planning support materials.

Implementation of round 1 of recruitment and incentives deployment and planned cycle of studying and improving the package and toolkit.

OEC plans to increase parent's choice and knowledge of the IDEA system and support smooth transitions for children in IDEA services (Cost: \$450,000 - ECSU 300,000 and 3rd Sector 150,000)

Families and children utilizing IDEA services face challenges transitioning from Part C to Part B that may negatively affect their child's continued growth and development. There are inherent differences in Part C and Part B federal law that pose challenges for states in implementing a smooth transition for families. One transition challenge is the lack of understanding about the differences between both Part C and Part B law. Part C and B staff do not fully understand the transition requirements and responsibilities of transition meetings, and thus transition information may be interpreted differently. Another challenge to successful transition is having

sufficient staff time to locally connect and coordinate both Part C & B to form collaborating relationships. One of the most difficult transition challenges is getting families comfortable with the next setting. Part C prepares families by physically visiting the Part B location in advance of the transition meeting to observe the setting and gain familiarity. However not all Part B towns offer families the opportunity to observe and visit.

OEC's strategy to increase success of smooth transitions for families and children in IDEA will be to provide support to local IDEA programs with focused attention on local collaboration and provide assistance with transitions through the development of online training modules for IDEA professionals and a video for families.

The first phase of the project will be to host five regional technical assistance meetings facilitated by Third Sector to make local connections, address local challenges, and identify solutions to transition barriers. After the regional discovery phase, Third Sector will synthesize the conversations and identify universal challenges and strategies with transitions within IDEA. The next phase will build on the existing relationship with Eastern Connecticut State University (ESCU), currently working with OEC in the implementation of the MIECHV Innovation Award. Through this MIECHV Innovation Award, ESCU in partnership with programs and OEC has developed ten online training modules for home visitors that address, inform and provide strategies for topics that are challenging for home visitors. With the PDG B-5 award, two online modules will be developed to increase providers' understanding of Part B and Part C and to support the smooth transition of families and children in IDEA. The first module will focus on the requirements of transition from Part C to Part B for IDEA staff. The second module will be specific to Part C staff working with families transitioning to community services. In addition to the online modules, ECSU will develop a video for IDEA families transitioning from Part C to

Part B services. The video when completed would be available in English and Spanish and hosted on the OEC website.

OEC plans to promote and increase parents and family member's involvement (low-income and disadvantaged) in the development of their children and the transition of these children to kindergarten. (Cost \$895,000)

In the fall of 2018, OEC in partnership with Connecticut Help Me Grow, Connecticut Child Health and Development Institute and Sparkler began a two-city pilot to test the effectiveness of app-based technology to builds bridges between families and the Early Care and Education settings. Continuing our focus on infants and toddlers this pilot is looking to increase the number of children zero to three screened for developmental delays and referred for services. Through this grant opportunity, OEC and partners will expand this pilot to ten additional communities.

Sparkler helps organizations partner with parents to get young children ready for learning and life. Its mobile platform and services leverage the untapped power of parents and the diverse systems supporting families to serve young children better in the foundational early years. By utilizing Sparkler, Connecticut embraces tools for powering partnerships between parents, providers, and pediatricians to benefit young children by: Measuring child development using parent observations & ASQ® (Sparkler is the first approved mobile and integrated implementation of ASQ); Presenting off-screen activities and other content that promote healthy development and make the science on child development ready for real-life; Engaging parents in promoting healthy development through virtual coaching from early childhood professionals and strengthening the relationships that families already have around their children.

Sparkler's mobile platform and service creates focus on child development, delivers content to families to support it, and connects caregivers and organizations to promote healthy development. Through mobile delivery of the ASQ, Sparkler increases screening rates and promotes follow-up, particularly for the children who are not flagged for more intensive services but for whom strong promotion of healthy development by parents and caregivers remains the crucial factor in preparing for Kindergarten. Sparkler makes it easier to support healthy early brain and child development by creating a common measurement and focus around which the many adults and organizations supporting a family can align their work to benefit the child.

Sharing Best Practices among State Early Childhood Care and Education Providers (\$2,724,000)

Sharing best practice though community level infrastructure building (\$2,000,000)

OEC will issue a Request for Proposal (RFP) and fund and provide technical assistance to up to fifteen communities and/or Indian tribes through a Community of Practice (CoP) designed to build community collaboration and coordination, test Continuous Quality Improvement (CQI) tools and methods, and identify and share opportunities for efficiencies. This CoP will bring together communities who share a focus and passion on improving the Early Care and Education mixed delivery system and learn how to do it better as they interact regularly.

Communities will select from one of the following areas:

- Increase Access for Families in the B-5 System
- Shared Services for Early Care and Education Programs
- Transitions within systems from infancy to kindergarten

A requirement for community funding and participation in the Community of Practice will be participation in monthly webinars. Building on the success of the MIECHV CQI Practicum used with all MIECHV home visiting programs, the CoP will incorporate four monthly webinars using the materials from the MIECHV practicum. These webinars are structured to provide both networking and learning opportunities and cover the following CQI topics and tools:

SMART Aims: SMART is an acronym for Specific, Measurable, Attainable, Relevant, and Time-bound. This acronym helps to set goals for CQI projects.

PDSA cycles: The Plan-Do-Study-Act cycle is a hallmark of nearly all CQI models. Plan-Do-Study-Act is a cycle of activities used to achieve process or system improvement.

Process System Mapping: Process maps are used to examine existing system processes, identify deviations in processes from what was intended, and determine where and how change strategies can be tested to improve those processes.

Root Cause Analysis: Although there are many root cause analysis tools, all rely on a systematic approach to understanding what factors contribute to an outcome. When programs understand what exactly is causing a problem, they are more like to identify change strategies that help them to be successful in reaching their goal.

Key Driver Diagrams: Key Driver Diagrams provide a visual representation of a theory of change, connecting change strategies to drivers to aims.

A pre- and post-survey will be completed by community teams to determine their knowledge of CQI tools and methods before and after the practicum and the effectiveness of the approach. The last CoP session will be an in-person meeting where each community will showcase their

projects, their lessons learned and next steps for the project. Lessons learned from these point of proof projects will be used by OEC in years 2, 3, 4 of PDG funding.

Using data to drive performance, efficiency and identify strategies for success (\$320,000)

The OEC provides grant and contract administration to programs and services in the Early Care and Education, HV and IDEA Part C system through program liaisons, grants and contract specialists and education consultants. Each of these administrators bring individual skill sets and tools to contract administration. In this grant award, OEC through its collaboration with the UConn SSW will fund, two fellows from the Harvard Kennedy School (HKS), Government Performance Lab to train OEC grants and contract administrators in Active Contract Management (ACM). Fellows from HKS will provide training and technical assistance to OEC staff in the concepts of ACM: using real time data to identify performance issues, course correct and facilitate ongoing improvements in outcomes as part of continuous quality improvement. Through this technical assistance and training OEC will develop a workforce focused on data driven outcomes for programs and families and lay the foundation for Outcome Based Contracting.

Outcome Based Contracting – (\$164,000) OEC will partner with Third Sector to develop outcome based contracting within Early Care and Education contracts that incentivize outcomes that are important to communities, providers, families and children.

To develop outcome based contracts, Third Sector will: articulate long-term child and family outcomes that align with progress towards self-sufficiency; assess outcomes using a prioritization framework based on the goals of early care and education stakeholders; map the outcomes to data metrics that can be tracked through existing or new data systems in order to

measure progress made on the achievement of outcomes over time; construct a continuous improvement strategy and incentive structure design; articulate the goals of the Request for Proposal (RFP) process for each of its contracts and translate those goals into the design of the RFP.

Demonstration Project through UConn School of Social Work: \$200,000

Understanding and Promoting Family Stability and Self Sufficiency: As Connecticut continues to explore how adult and child systems can work together to improve whole family outcomes, it is important that policymakers also understand the types of economic decisions families make that affect their overall well-being. Every day, families are forced to navigate the complex public benefits system and make trade-offs between earning more income and losing public supports, sometimes leaving families worse off and with fewer resources. Our goal is to create a tool that will illustrate how a family's decision to earn more income may impact their ability to provide for their basic needs and where the cliffs exist in the most common public supports. By identifying which programs make it difficult for families to take steps toward self-sufficiency and how they may increase the chasm between public assistance and self-sufficiency,

Connecticut can better design policies to work together to help families confidently advance their education and income without fearing a severe reduction or loss in benefits before they are stable.

Improving Overall Quality of Early Childhood Care and Education Programs/Providers/Services (\$151, 200)

The OEC will use months six through twelve of the PDG B-5 grant award to improve quality of early childcare and Early Care and Education programs and services. OEC's quality initiatives

are linked to the OEC Quality Rating Information System and will advance Early Care and Education programs and providers in the QRIS pillars of Communicating with Families and Learning and Environment.

OEC's first strategy is to increase quality is to engage WIDA and their Early Years program focused specifically on the language development of multilingual children – or dual language learners (DLLs) – in early care and education settings. This support will ensure that the local delivery system meets the needs of the culturally and linguistically diverse families in their community. This will serve to increase family access to high quality early care and education by building the capacity of local providers to serve culturally and linguistically diverse children and families and by building the capacity of culturally and linguistically diverse early care and education providers to access professional supports.

Activities include:

Two *Partnership Kick-Off Events* that will help the OEC collect input and feedback from key stakeholders in the early care and education community that serve multilingual children and families. Participants will explore WIDA Early Years resources and discuss ideas for local dissemination and implementation. Stakeholder feedback is collected and shared with the state leadership team.

One *Cohort of Local Trainers* (max of 30 trainers) that will participate in an intensive, long-term professional learning opportunity that spans several months. Trainers must complete the following sequence of workshops: (1) Introduction to WIDA Early Years (1-day workshop); (2) Essential Actions: Institute I (2-day workshop); (3) Essential Actions: Institute II (2-day workshop); and (4) Training-of-Trainers (Blended learning model that spans 4-5 months).

Promising Practices Implementation Kits for state leaders and local trainer cohort participants.

This resource provides (a) guidelines for supporting dual language development; (b) practical suggestions and examples from the field; (c) opportunities for practitioners to reflect on their practices; (d) individual pathways for self-study; and (e) support for data-informed decision-making. The Promising Practices Implementation Kit includes family needs assessments available in English, Spanish, Arabic, and Chinese.

Two half-day *Promising Practices Implementation Kit Roll-Out Events* that provide a facilitated exploration of the *Promising Practices Implementation Kit*. Participants will receive a Kit and have collaborative opportunities to explore the materials and share ideas for local implementation.

OEC's second strategy for quality is to increase knowledge and understanding of infant mental health. Infant Mental Health concerns the relationships that infants and young children develop with their primary attachment figure, which may be a parent or other primary caregiver. Infant Mental Health, sometimes referred to as Infant Brain Health, has been defined as the developing capacity of the child from birth through age five to: experience, regulate, and express emotions; form close, secure interpersonal relationships; and explore his/her environment and learn—all within the context of family, community, and cultural expectations (Zero to Three Infant Mental Health Task Force Steering Committee, 2001).

Through the Connecticut Association for Infant Mental Health, OEC will offer two 6 day infant mental health trainings for childcare providers. Topics for this training will be introduced in the context of QRIS and include an Introduction to Infant Mental Health (IMH), Attachment, Brain

Development, Infant/Toddler Development and Behavior, Sensory Integration, Temperament, Partnering with Families, Reflective Practice, and Introduction to IMH Endorsement.

Program Performance Evaluation Plan (\$4,765,650.66)

The OEC has assembled a formidable team of partners over the past year as the agency has worked to develop the infrastructure to increase performance evaluation, data driven decision making, administrative data sharing across agencies, and a laser focus on child and family outcomes. This team is ready to conduct the process/performance/implementation evaluation of this grant as well as pave the way for the longer term family/system outcomes evaluations to measure progress towards goals identified in the strategic plan, action plans, and needs assessment- family outcomes by investing in design process combined with digital systems modifications over the 12 month period of this grant. These activities, set the stage for years of routine, transparent assessments of outcomes and performance.

Short-Term Implementation Process and Performance Evaluation-(Cost UConn \$770,108)

The Innovation and Evaluation Lab of UCONN will conduct the implementation process and performance evaluation for the grant that will contribute to the continuous quality improvement of implementation by OEC. One Principal Investigator and 4 key support and data analytic staff will work to monitor the ongoing processes and progress towards the grants goals and objectives with key focus on providing the key metrics necessary to report on the process of implementation of grant activities, the costs of implementation, and important program implementation data.

Phase 1- Performance Evaluation Plan Finalization: The UCONN evaluation team will refine the logic model proposed here to ensure it has the final implementation indicators for all key activities, working the designation federal TA providers, assessing the availability of data needed to report on metrics, finalizing the methods for data collection, and deciding on the final vehicle for housing the data and metrics and for providing accurate and timely reporting. The proposed system for creating these performance dashboards is Tableau, a system used by UCONN for other projects. (2 months)

Phase 2- Implementation: The UCONN evaluation team will collect data required for routine reporting on implementation performance, determine the most appropriate methodologies for analysis and data collection to support continuous learning and implementation improvements. The UCONN evaluation team will use a variety of methods to acquire the data such as: OEC's digital or fiscals team provide access to administrative data in existing OEC data systems from existing data infrastructure, systems, and data elements; UCONN evaluation team members, through a racial equity lens, will conduct qualitative process data gathering through observation, focus groups, interviews, and document review to understand successes, challenges and surface opportunities to overcome obstacles; UCONN conduct online, paper, or telephone surveys of providers, families, or other stakeholders conducted with representative sample sizes for a high degree of confidence or for qualitative purposes; Requesting data through existing or new OEC data sharing MOU's from other state agencies or implementation partners such as DCF for child welfare data, DSS for Medicaid data, and

SDE for education data; UCONN identify knowledge gaps in developing a data driven process.

If UCONN evaluators are unable to obtain key data for metrics, UCONN and OEC staff from the OEC Outcomes Division will partner to develop a data development plan to address gaps in data and identify potential sources to mitigate those gaps, leveraging existing resources as much as possible and minimizing provider reporting burden.

The UCONN evaluators will provide routine access to performance evaluation dashboards, aligned where possible with federal reporting periods and will facilitate data driven implementation quality improvement discussions quarterly with the OEC and partner implementation team quarterly.

Long-Term Family, Child, and System Outcomes Evaluation Development (Skylight + OEC Master Agreement \$2,532,771.33)

The OEC has assessed the current state of the early care and education mixed delivery system and summarized in the unmet needs report and has also developed an understanding of the larger B-5 state system. OEC has a vision for the future to better serve families with young children which was developed through the state's early childhood strategic planning process and concrete set of proposals for actions to take next towards that vision through the Early Care and Education Action Plan and the soon-to-be-completed complementary Action Plan for home visiting and special education. Through this grant, the OEC plans to build on these plans and assessments and develop a blueprint and infrastructure for creating a performance management system to evaluate progress. Specifically, the OEC will: work with stakeholders, researchers, and partners to finalize the child, family, and system outcomes that should be monitored over time; develop

the dashboard models, key metrics, indicators, and research agendas to inform stakeholders of progress; further develop the OEC data systems and interagency data sharing partnerships to supply the data needed for these key metrics and equity indicators – one example SDE/kindergarten readiness.

The Director of Research in the Outcomes Division of the OEC will be responsible for coordinating all project partners and guiding the development of this new evaluation system.

Step 1: Identify the short and long term child, family, program, community, and system outcomes. (Months 1-2)

The OEC's Outcomes Division, with support as needed from UCONN, Third Sector, Social Finance, AISP, and Skylight ("the outcomes team"), will build on existing work that identifies critical outcomes and identify the top 5-10 outcomes to achieve. For example, this work will build on the work of Social Finance in refining the home visiting and MIECHV child and family outcomes for rate cards, Third Sector's work in identifying Early Childhood Action plan, strategic plan, and CCDF plan outcomes, and legislatively mandated outcomes such as the OEC's "Accountability Report" and the "Children's Report Card", two legislatively mandated reports to the legislature.

Outcomes Division staff will partner with Skylight to work with families, providers, and stakeholders to verify this list and ensure these are the outcomes of greatest importance to the broader stakeholder community, with particular focus on the families most likely to be impacted by the selection of these outcomes. Examples include:

Family and	Achieving these goals and objectives will have measurable results on
Child	the lives of families with young children with <i>concrete</i> improvements
Outcomes	in outcomes such as family economic stability and parental
	employment for parents, improving development and learning

	outcomes for children, improving kindergarten readiness, reducing infant deaths, and improving health and child welfare engagement
	outcomes.
Systems	Achieving these goals should also have systems level outcomes,
Level	through an racial equity lens, such as increased coordination and
Outcome	collaboration between systems and programs to better serve the needs
S	of families, improving equity in access to early care and education,
	improving the quality of early care and education settings.

Step 2: Identify indicators and metrics to measure the progress towards achieving these outcomes. (Months 1-2)

The OEC's outcomes division with support from the UCONN team will identify metrics that help measure progress toward the outcomes identified in step 1, with careful assessment of if the metrics will motivate desirable behavior and are meaningful to stakeholders. These will range from process indicators that support improving access to early care and education such as waitlist sizes, application processing time, or duplication of services for a single family to metrics on family outcomes such as \$ of subsidized families achieving stable, living wage employment or # of children injured in early care and education settings.

Step 3: Identify the data systems and data elements available (and gaps identified) to track indicators and metrics, with a special focus on the technology systems involved and interagency partnerships. (Months 2-3)

OEC will have challenges measuring many of the metrics identified in Step 2 above. The OEC Outcomes Division along with Skylight will examine the existing data infrastructure, systems, and data elements to identify any gaps or development needs. The correct data might not be collected, existing system reports aren't adequate, or data from

multiple systems will need to be combined. For example, the OEC plans to modify its data systems to be able to report on the unduplicated number of children served on a monthly basis during this grant period. OEC's data systems available to supply data for indicators and metrics within the agency itself include licensing systems, workforce registry databases, eligibility and enrollment systems, background check systems, data warehouses for early childhood data, CCR&R data systems on providers, etc.

Step 4: Plan and prioritize changes to procedures, programs, and data systems to start measuring any missing indicators and metrics for enabling consistent, data-driven improvements to identified outcomes. (Month 3+)

The OEC Outcomes Division along with the "outcomes team" will take a lean and agile approach to prioritize changes needed in available data in order to make meaningful progress in the short duration of the grant. The team's goal will be to identify a critical, achievable set of changes to information technology systems, program reporting requirements and/or contracts, and data sharing agreements with other state agencies in order to supply meaningful indicators and metrics to evaluators, OEC, and stakeholders.

Step 5: Implement changes to processes, data sharing agreements, and technology systems to better integrate data systems and foster smarter use of OEC services.

The OEC Outcomes Division with the support of the outcomes team will take an agile approach to implementing changes to the technology systems (Skylight), seek enhancements to data sharing agreements, if necessary (AISP), and implement changes to program administration or policy (Third Sector/Social Finance) where needed to deliver key indicator and metric data.

The OEC Outcomes division will achieve interagency data linkage from a shared inquiry perspective with state agencies SDE, DCF, DPH and DSS.

Step 6: The OEC will define a regular cadence for publishing metrics, statistics, and improvements in a format accessible and available to community collaboratives, stakeholders, and policy makers and aligned with other federal and state requirements. (Month 11-12)

The OEC's Outcomes division, with the support of UCONN, will create for future years a transparent, publishing schedule of outward facing outcomes and metrics for use by state legislators, families, providers, and other stakeholders. This information will be used to implement strategies to improve outcomes and implementation of plans. Over time, the OEC's Outcomes Division will continually improve metrics, systems, and programs with feedback from parents, children, and the community at large.

Bonus Point Justification – (Cost: Skylight \$1,462,771,33)

Plan for measuring the unduplicated counts of children: The OEC plans to engage Skylight to ensure that Connecticut has the ability to count each child served only statewide (i) across the children being served in existing programs. The goals of this engagement are to, by month 12 of the grant: 1. Be able to access the unduplicated count of children served statewide across all programs at any point in time; 2. Be able to access demographic information on child for racial equity discovery; 3. Generate monthly, quarterly, and annual reports on the unduplicated count of children; 4. Be able to know when multiple programs are concurrently serving the same child; 5. Be able to track a child over time from birth to age five as they enroll in various programs.

Approach: Skylight will take a lean and agile approach towards development starting with a Discovery stage.

Discovery Phase: In this phase we understand the opportunities and challenges with determining unduplicated child counts

Discovery	Workshops and/or interviews with program leaders and administrators across
Activities	the OEC; Technical assessment of each system that stores program participant
	data. We want to understand the data each system stores, and how it counts
	children. In addition, we want to understand any PII and privacy issues.
	To understand the scope of the problem, we will extract a representative child
	dataset from each system. We will use techniques from data analysis and data
	science, to generate an unduplicated count. This will help us understand the
	scope of the problem and any challenges we face. Note that we do not intend to
	create a usable unduplicated count at this point. We will: identify the systems
	that can most easily yield an unduplicated count; identify any changes programs
	need to make in data collection at the time of enrollment to ease identification
	of duplicates; develop data driven accountability standards for programs;
	synthesize findings from workshops, interviews and develop a prioritized list
	(backlog) of user stories.
Discovery	workshop agenda; key insights from workshop; Child Report Cards; Discovery
Deliverables	report including an assessment of systems and identification of any gaps in the
	areas of communications, service design, design, engineering, product
	management, and project management; Prioritized list (backlog) of user stories.

Implementation Phase

Skylight will take an iterative approach to making the necessary changes (examples include collecting data from children differently, or changing an existing system to a use a different identifier for a child) to get an unduplicated count. The team will work in sprints, delivering working software each sprint, taking an api-first, open source, approach to the extent practicable.

Implementation	Develop software to build new services as determined by our Discovery
Activities	phase. For example, we might need to build a microservice that checks if a
	child is already in the system, or assigns a new identifier if not that each
	system can use; Changes to existing systems, wrap data in existing systems
	with APIs to allow for improved communication between systems For

	example, we might need to change existing systems from using their own child identifiers to use a centrally generated one.
Deliverables	regularly maintained backlog of bugs, features, and other changes; product roadmap of features and changes; regular updates on implementation status; system design, software code, code reviews; continued user feedback for improvements

Project Management Approach

We will employ agile-based project management practices. Our project management delivery approach features the following elements: 1) A work backlog that represents the work to be completed. The work backlog is broken down into individual work items, 2) Two-week sprint cycles that start with a Sprint Planning session, 3) A visual board that allows all stakeholders to view the Work Backlog, current Sprint Backlog, and the status and flow of work at any time. The Visual Board is continually updated, providing real-time transparency into how the project is progressing.

Sustainability Plan

OEC is committed to sustaining efforts of the PDG B-5 grant that have produced improved outcomes for children and families. OEC is enthusiastic about this opportunity for significant funding which will allow OEC to accelerate progress on projects that are important to creating a collaborative and coordinated B-5 state system, encouraging partnerships with stakeholders and building parental choice and knowledge in a culturally and linguistically appropriate way.

The projects and/or activities that will be completed within the twelve month funding period are:

Needs Assessment completed, published and disseminated

Strategic Plan updated to include Action Plan for cross system integration of B-3 and HV
in a B-5 state system
Landscape analysis of existing OEC data systems; analysis of data collection, quality and
unique identifier; develop software to build new services to achieve unduplicated child
count, changes to existing data systems to improve communications between systems
OEC website will be redesigned to reflect the needs and wants of all families across the
State of Connecticut in a culturally and linguistically appropriate manner
OEC print materials will be translated for Spanish speaking families
Public Health Campaign around ECE mixed delivery system will be designed and
launched
Toolkit and Roadmap for increasing capacity in Infant/Toddler slots will be developed
and available
Online training modules for IDEA providers will developed, produced and available
Transition video for families will be developed, produced and hosted on the OEC website
Sparkler Pilot will be launched in ten communities
Community of Practice will be completed with 15 local communities and promising
approaches will have been identified
Outcome Based contracts will be designed within B-3 and ECE contracts that incentivize
integration of B-5 services among HV, IDEA Part C and B, and ECE
ECE Programs will participate in WIDA training, technical assistance and ToT training
that is linked to QRIS pillars
ECE program staff will participate in CT Association of Infant Mental Health training
that is linked to ORIS pillars

Projects and activities that will be ongoing after 12/31/19:

Continued work around outcomes through cross system collaboration and integration: OEC through our Outcomes Division will continue in an iterative process of testing and measuring performance metrics and outcomes from the PDG-B-5 grant award.

Parental Choice and Knowledge: OEC will maintain an ongoing relationship with Odonnell and Skylight funded by a modest budget designed to make small changes and modifications to projects, campaigns and activities developed through this PDG-B-5 award.

Quality dollars from CCDF will be used to support ongoing activities such as the Sparkler Pilot, WIDA training, and CT AIMH training if these projects have shown progress toward the outcomes.

Timeline

Office of Early Childhood PDG B-5 Timeline Key: Not yet started: In process: Completed:												
Activity/Month	1	2	3	4	5	6	7	8	9	10	11	12
Activity 1: Needs Assessment (Cost:(\$91,000)												
1. Publish Needs Assessment												
1. a. Submit Needs Assessment for Review and Approval												
Activity 2: Strategic Plan (Cost:\$250,000)												
1. Update Strategic Plan by conducting action sessions with HV and B-3												
systems												
1. a. Synthesize takeaways, pain points, and goals for OEC												
1. b. Submit Updated Strategic Plan for Review and approval												
1.c. Broad scan of agency policy/practice to identify areas for												
improvement												
1.d.Implement up to 3 strategic initiatives to improve cross-program												
alignment												
1. e. Wrap-up activities: review of work completed and areas for continued												
growth for OEC												
Activity 3: Parental Capacity and Knowledge (Cost:\$3,383,892)												
1. Translation of OEC materials												
2. Improvements to OEC website: Audit existing content to archive												
unnecessary pages												
2. a. Interview subject matter experts and end users												
2. b. Draft re-designed content in plain language												
2. c. Re-design services offered on the OEC website												
2. d. Re-design the website information architecture to make it easier for												
families to find the help they need												
2. e. Build and test prototypes with end users and subject matter experts												

2 Decearch for Dublic Health Compaign about ECE						
3. Research for Public Health Campaign about ECE	\vdash					
3. a. Focus groups for Public Health Campaign	-					
3. b. Planning and development of communication system and campaign	\vdash					
3. c. Production of campaign						
3. d. Launch of media, engagement and street teams			-			
3. e. Measurement, reporting and optimization of campaign						
4. Develop toolkit and roadmap for I/T expansion- Landscape Analysis						
4. a. Facilitate Provider Focus Groups						
4. b. Facilitate Family Focus Groups						
4.c. Design and release Best Practices/Roadmap						
5. Smooth Transitions: Host regional TA meetings for smooth transitions within IDEA						
5. a. Synthesize feedback from IDEA TA meetings						
5. b. Interview provider and families for online learning modules content						
5. c. Produce online learning modules for IDEA transitions						
5. d. Produce video for families re: transitions within IDEA						
6 Technology pilot: Identify 10 high need communities for ECE recruitment for app-based pilot						
6. a. Expand Project Management through CT HMG and Sparkler						
6. b. Recruit Head Start and ECE providers within identified communities						
6. c. Provide training and implementation support to ECE and Head Start						
6. d. Purchase materials, incentives for families and programs						
6. e. Enroll families, measure enrollment, ASQ completion, # of coaching sessions, # of learn activities completed by parents, # of subsequent ASQ-3 completions						
Activity 4 Sharing Best Practices (Cost: \$2,724,000)						
1. Develop and release RFP for CoP with 15 local communities						
1.a. Review and Reward 15 contracts to communities						
1. b. Kick-off meeting for communities						
1. c. Community of Practice – incorporating MIECHV CQI						
1. d. Community Showcase – sharing best practices and next steps						
1.a. Review and Reward 15 contracts to communities 1. b. Kick-off meeting for communities 1. c. Community of Practice – incorporating MIECHV CQI						

2. Using Data to Drive Outcomes and Efficiencies – contract with ACM							
fellows		-					
2. a. Provide training and technical assistance to OEC staff around ACM							
3. Developing Outcome Based Contracting to achieve outcomes for							
families – Convene stakeholders and facilitate internal visioning work							
3. a. Conduct needs assessment across the state to identify priority groups							
or geographic regions that are disproportionately having difficulties							
accessing high quality care							
3. b. Articulate long-term child and family outcomes							
3. c. Assess outcomes using a prioritization framework							
3.d. Map the outcomes to data metrics that can be tracked through existing							
or new data systems							
3.e. Construct a continuous improvement strategy and incentive structure							
design	-						
3.f. Articulate the goals of the Request for Proposal (RFP) and translate							
those goals into the design of the RFP							
Activity 5 – Improving Quality in ECE (Cost: \$151,200)	4						
1. Supporting multilingual providers, families, and children – workshop							
series through WIDA	 			+			
1. a. Introduction to WIDA Early Years	-						
1. b. Essential Actions: WIDA Institute I	$\sqcup \sqcup$						
1. c. Essential Actions: WIDA Institute II							
1. d. WIDA Training-of-Trainers (ToT)							
1.e. Promising Practices Implementation Kits & roll-out event							
2. Increasing Social and Emotional Competency of ECE providers through							
Infant Mental Health Training – 2 trainings 6 sessions each							
Performance and Evaluation Plan (\$3,333,539.33)							
Short-Term implementation Process and Performance Evaluation							
1. a. Performance Evaluation Plan Finalized by UCONN team							
1. b. Implementation: Access to OEC administrative data in OEC systems							
1. c. Implementation: UCONN conduct qualitative process data gathering							

1. d. Implementation: UConn conduct surveys with families Long-Term Family, Child, and System Outcomes Evaluation Development				
1 71 46 4 1 4 11 4 1116 7				
1. a. Identify the short and long term child, family, program, community,				
and system outcomes.				
1. b. Identify indicators and metrics to measure the progress towards				
achieving these outcomes.				
1. c. Identify the data systems and data elements available (and gaps				
identified) to track indicators and metrics, with a special focus on the				
technology systems involved and interagency partnerships.				
1. d. Plan and prioritize changes to procedures, programs, and data systems				
to start measuring any missing indicators and metrics for enabling				
consistent, data-driven improvements to identified outcomes.				
1. e. Implement changes to processes, data sharing agreements, and				
technology systems to better integrate data systems and foster smarter use				
of OEC services.				
1. f. The OEC will define a regular cadence for publishing metrics,				
statistics, and improvements				
Plan for measuring the unduplicated counts of children				
(\$1,462,771.33)				
1. Discovery Phase: Understanding the opportunities and challenges with				
determining unduplicated child counts				
1. a. Implementation Phase				

Budget

Detailed Budget and Budget Narrative Justification

Activity 1: \$91,000

Activity 2: \$250,000

Activity 3: \$3,383,892

Activity 4: \$2,724,000

Activity 5: \$151,200

Program Performance and Evaluation: \$4,796,310.66

BUDGET SUMMARY Year 1

Total Budget: \$12,100,123

- 1. Personnel (salary and fringe) 86,000 Salary + Fringe 68,800 (80%) = 154,800
- 2. Travel: \$4,460.00
- 3. Equipment 45,000.00
- 4. Supplies- 0
- 5. Contractual (includes indirect to contractor): \$11,871,863
- 6. Other Software 24,000.00
- 7. Indirect \$0

BUDGET NARRATIVE – Year 1 Total: \$12,100,123

1.Personnel: In-Kind

Salaries Justification: \$86,000

Position Title/Name	Percent Time	Annual Salary
TBH, Research Analyst Supervisor	.5FTE	89,000
TBH, Associate Research Analyst	.5FTE	83,000

Fringe Benefits: \$68,800

2.Travel Total: \$4,460

In-State Travel Expenses

Justification: Travel to PDG Annual Conference: Airfare \$300 round trip x 4 – total \$1,200; Lodging \$200/day x 3 days \$600 x 4 – total \$2,400; Meals per Diem \$50/day x 3 days x 4 - \$600; Transportation ground \$40 x 4 - \$160

3.Equipment: \$45,000 Equipment for IT staff 6 workstations @ 7500.00

4.Supplies: 0

5.**Contractual** \$11,871,863

The contractual expenditures will support the goals and objectives of the grant award.

A. Social Finance: \$250,000

Justification: Managing Director @ 104 hrs. X \$137.02 = \$14,250.00; Vice President @ 104 hrs. X \$100.96 = \$10,500.00; Director @ 416 hrs. X \$79.33/hr. = \$33,000.00; Associate Director @ 728hrs x \$64.90 = \$47,250.00; Associate @ 832 hrs. X \$46.88/hr. = \$39,000.00; Fringe @ 25% = \$36,000; Travel costs – estimate = \$9,537.53; Indirect Cost Rate = \$60,462.47

Project Support for Strategic Plan Actions sessions, synthesize feedback, implementation of 3 strategic initiatives to improve cross-program alignment, develop 'rate card for collaboration' or other incentives for program collaboration; wrap-up activities: review of work completed and areas for continued growth for OEC.

B. Third Sector: \$514,800

Justification: Director @ 208 hours X \$350/hr. =\$72,800; Manager @ 1040 hours @\$250/hr. =\$260,000; Associate @ 1040 X \$175hr =\$182,000 Total: \$514,800

C. Odonnell: \$1,054,000

Justification: OEC Public Health Campaign about Mixed Delivery Early Care & Education

System: Statewide Research & Focus Groups: \$55,000; Develop Public Education Materials and
Tools: \$35,000; Event Participation and Outreach with Connecticut Families: \$115,000; Earned

Media Placement of Public Education: \$17,000; Public Education Campaign: \$435,000; Digital

Interaction with Connecticut families through social media, email, phone, and text: \$117,000;

Cost: \$774,000 Translation of OEC Print Materials and Regulations pertaining to OEC - \$67,000

Improvements to OEC Website Including Information in English and Spanish- \$72,000

Develop and Publish the OEC Unmet Needs Report: \$91,000; Odonnell Company will support the completion, printing, and distribution, and awareness of the Unmet Needs Report;

Components include the Unmet Needs Report, The Demographic Analysis, Executive Summary Report, Data Briefs, and town by town Fact Sheets for all 169 Connecticut Towns. The report will be distributed in print and digital versions, and placed on the OEC website for easy access.

Digital media and outreach will be provided to support awareness and access. Subcontract with

Feedback Labs 50,000

D. University of Connecticut, School of Social Work: \$1,524,108

Project Support Activities 3, 4, 5: \$754,000

Justification: \$160,000 x 2FTE = 320,000 Harvard Kennedy School fellows for Active Contract

Management technical assistance support; \$150,000 1FTE Durational Project Manager to

support grant activities and work with local communities + 56% Federal Negotiated Indirect

Rate = \$234,000; \$200,000 Demonstration Projects: Benefits Cliff

Performance and Evaluation Plan: \$770,108

Justification: .2FTE Director 130,000 = 26,000 +, 56% Federal Negotiated Indirect Rate

=\$40,560; 2FTE Data Analysts \$75,000 +56% Federal Negotiated Indirect Rate = \$117,000 x 2

= \$234,000; 1FTE Researcher \$90,000 + 56% Federal Negotiated Indirect Rate = \$140,400;

.2FTE Implementation Specialist @93,000 = \$18,600 + 56% Federal Negotiated Indirect Rate =

\$29,016, .5FTE Project support staff \$52,000 = 26,000+56\% Federal Negotiated Indirect Rate =

\$40,560; Estimated Fringe: @62% = \$285,572

E. Skylight: \$4,112,755.18

Program Performance and Evaluation: \$2,925,542.66

Senior project manager, @ \$165.04/hr. x 2FTE = \$620,565.26; Senior UX research and designer

@ \$165.04/hr. x @FTE = 620,565.26; Senior software engineer @ \$165.04 x @FTE =

620,565.26; Mid software engineer @ \$141.47 x 4FTE = \$1,063,846.88

Skylight Website Design: \$1,125,892.52

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Senior UX researcher and designer @\$165.04/hr. x 1FTE = \$310,282.63; Junior content designer@ \$127.32/hr. x 1FTE = \$239,365.55; Mid software engineer @ \$141.47x 1FTE = \$265,961.72; Senior project manager @ \$165.04 x 1FTE = \$310,282.63.

Travel: \$61,320 = 5 monthly trips (2 days 1 night for per person) Air \$500, Hotel \$200, Per Diem X 2days \$122.00; Transportation \$100x2 trips \$200.00 = total \$1022 per person/per trip

F. Master Agreement State for Data System Development: \$1,070,000

Justification: Support the development of data systems and functionality for measuring long term performance measures and outcomes. 2 FTE SQL Developers @ 180k each = 360,000.00; 2FTE Net Developers @ 180k each = 360,000.00; 1 FTE Technical Lead/Architect @ 200k = 200,000.00; 1 Tester @ 150k each = 150,000.00

G. Eastern CT State University: \$300,000

Justification: Project Director at \$99,501 for .1 FTE = \$9,950, Project Manager at \$63,986 for .50 FTE = \$32,000, Project Developer at \$61,200 x .50 FTE = \$30,600. Videographer at \$46,585 for .75 FTE = \$34,939, Faculty content expert for (6) faculty load credits (270 hours non-academic year) x \$2,075 = \$12,450. Translation services: Approximately 12,000 words/module x (2) modules x \$.17/word = \$4,080. Animation for videos: \$50/hour x 100 hours = \$5,000. Voiceover artist for videos: \$250/half-day x 4 half-days = \$1000. Expert interviews: \$100/hour x 100 hours = \$10,000. Content development: \$100/hour (estimate) x 164 hours/module x (2) modules = \$32,800. Incentives for programs: \$127,000

H. App-based Technology - Sparkler/CT HMG - \$895,000

Justification: Project Management through CT HMG and Sparkler: \$300,000 (1FTE Project

Manager and implementation support from Sparkler); Marketing \$15,000; Mobile Platform for

10,000 children \$2.00 X 4 ASQ-3 completions - \$80,000; Coaching Support through Sparkler

\$300,000; Materials and play packs for ECE settings - \$100,000 (\$10,000 per community

divided by # ECE programs); Incentives for families - \$100,000 (\$10,000 per community

divided by # ECE programs)

I. Community of Practice – Local Community Partnerships - \$2,000,000

Method of Selection: OEC will issue a Request for Proposal (RFP) and fund and provide

technical assistance to up to fifteen communities and/or Indian tribes through a Community of

Practice designed to build community collaboration and coordination, test Continuous Quality

Improvement (CQI) tools and methods, and identify and share opportunities for efficiencies.

Range in awards: \$100,000-\$150,000

J. WIDA: \$105,000

WIDA Early Years Partnership Kick

Justification: Kick-off Meeting \$18,000 (2 @ 9,000) Introduction to WIDA Early Years \$9,000;

Essential Actions: Institute I \$14,000; Essential Actions: Institute II \$14,000; Training-of-

Trainers (ToT) \$36,000; Promising Practices Implementation Kit 5,500; Promising Practices

Implementation Kit Roll-Out Event - \$9,000

K. CT AIMH: \$46,200.00

Justification: Presenters: 4 days and 1 follow-up day (\$500/half day X 5) = \$2,500; Site Fee:

\$500/day X 5 days = \$2,500; Coordination: Registration, site facilitation, certificates,

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coordination, food (\$100/hour X 8 hours X 5 days) = \$4,000; Executive Director: (\$50/hour X 8 hours X 5 days) = \$2,000; Materials: (\$300/day for copies, plus binders X 5 days) = \$1,500; Evaluation: 25 pretests and posttests (UCONN) = \$1,500; children's books for 25 participants = \$587; Food: (25 people X \$20/person X 5 days) = \$2,500; Stipends: for substitutes (approx. \$120 X 5 teachers X 5 days) = \$3,000 Subtotal: \$20,087 +15% Admin:\$3,013; Total: \$23,100 x 2 trainings = \$46,200.00

<u>6.</u> Other: Additional Software \$24,000.00

7. Indirect: 0

Cost Sharing Plan: The OEC will meet the required 30% match using non-Federal matching funds, cash, or in-kind services to support PDG B-5 by 12/31/19. The match will be equal or greater than \$3,660,000 and will be achieved through state funded staff salaries that are providing in-kind support as related to grant activities, as well as state funded school readiness funds, childcare development funds and state quality dollars. All of these unmatched funds will support the activities of the PDG B-5 grant award.

Logic Model

OEC Logic Model

OEC Goal: Families and children have access to and knowledge of quality B-5 state services that meet both the child and family's needs.

OUTCOMES OUTPUTS INPUTS ACTIVITIES Grant funds, OEC Needs Assessment: Complete and Publish Data available to communities and Short term outcomes: staff, Odonnell stakeholders. Increase use of OEC website by families; 60 Action plan updated to include next Strategic Plan: Replicate Action Sessions in Grant funds, OEC % increase in the steps, and identified metrics and 8-10 communities with B-3 and HV, survey staff, Social Finance number of children performance measures for collaboration families and providers, conduct lit review screened for within B-5 programs. and program analysis, identify pain points, developmental delays in Grant funds, OEC Improved OEC website; materials and pilot cities; 20% Parent Choice & Knowledge: Build out staff, Third Sector, regulations for dual language families; increased capacity for OEC website, translate OEC materials and O'Donnell, Skylight ECE campaign that includes social media, infants and toddlers; regulations for dual language families, print, media; Infant Toddler toolkit for 75% of OEC contracts launch public campaign on ECE choice and providers; parents and children have will have incentive availability, build out ECE action plan to materials and guidance for smooth based outcomes related increase I/T slots, develop modules and transitions: children screened for to cross system parent video for Part C/B and kindergarten developmental delays and parents integration for B-5 transition, Sparkler pilot. knowledgeable about child's development. programs. **Long Term Outcomes:** Grant funds, OEC **Sharing Best Practices:** Provide Active Rate card contracts in B-3, CC and HV More parents will be staff. Uconn. Contract Management and COI training to knowledgeable about ECE incentivizes coordination and smooth Social Finance OEC program staff; fund local communities to transitions for children and families; options and have access to and Third Sector coordinate systems, identify challenges, and high quality, trusted and staff will use data and cgi for develop and test strategies to increase access licensed care. Children will performance roadmaps, communities will and smooth transitions. develop tools and share best practices be ready for kindergarten. Families will have services through CoP. Grant funds, that support their needs. Quality: WIDA consultation and training for OEC staff, TA **ECE providers** will have the skills to ECE providers. CT Association of Infant **Interim Outcome:** work with dual language learners. staff Mental trainings for ECE providers. Program goals and ECE providers will be knowledgeable activities will be adjusted about infant mental health and be based on the performance screening for social and emotional evaluation process. competence.