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## Project Summary

**Project Title:** VA Ready

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Under the direction of the Virginia (VA) State Advisory Council, Impact Workgroup, and Chief School Readiness Officer, and in collaboration with the Depts. of Education (VDOE), Social Services (VDSS), Early Childhood Foundation (VECF), University of VA (UVA), and hundreds of organizations, providers, and parents, VA is building, expanding and sustaining a statewide B-5 mixed delivery system that prepares all VA children for success. With the initial Preschool Development Grant B-5 (PDG), VA comprehensively assessed its early childhood systems with a focus on the most vulnerable families and children, established an ambitious vision and goals in partnership with stakeholders, built the foundation for a network of dynamic, locally-coordinated mixed delivery systems (Pilots), launched new tools to support data integration and continuous improvement, and recognized early educators in a unique incentive program. In one year, VA has strengthened relationships in nearly 30 communities, involved nearly 600 sites, observed over a thousand classrooms and supported more than 2,000 educators while engaging broad and diverse state and local stakeholders. Building on this success, VA is well-poised to implement *VA Ready*, its Strategic Plan for fundamentally changing the way VA designs and funds B-5 programming through a highly localized, data-driven approach that improves coordination, increases access, enhances program quality, and engages families.

With the Preschool Development Grant B-5 Renewal (PDG-R), VA will operationalize the five goals of *VA Ready*: increasing equitable access, engaging families, strengthening workforce quality, increasing accountability and empowering local innovation, thus addressing the Needs Assessment results with a focus on the most vulnerable children – children who are economically disadvantaged, in rural areas, homeless, with special needs, English Language Learners (ELLs) and in tribal communities. Through its unique Pilots, VA will empower innovative local leaders to build relationships across care and education, health, human services and other sectors, coordinate enrollment and access, support educators to share best practices and strengthen quality, and engage families as their children’s first teachers and as decision makers. Within PDG-R, VA will achieve statewide scale, enabling VA to comprehensively evaluate and improve access, quality and engagement and link multiple B-5 data sources to VA’s longitudinal data system to measure short- and long-term outcomes. PDG-R will also enable VA to respond to the deep and pressing needs of its early childhood workforce through the continuation and rigorous evaluation of its educator incentive program designed to increase quality and retention in Head Start, child care, and family child care, which serve the most vulnerable young Virginians.

In partnership with UVA, VA will evaluate every aspect of VA’s grant performance, specifically tracking impact on practitioners, parents and children, and, with VDOE, VDSS and VECF, use the results to increase capacity at the state and local level to use data to inform policy and practice. VA leaders will use the results to realign and more effectively invest federal and state funds to sustain the dramatic reforms enabled by PDG-R after the grant ends. Through PDG-R, VA will make great strides in achieving its vision of all children thriving with the support of accessible, quality, and affordable programs and work to increase school readiness for all of VA children, especially the most vulnerable populations.

## **Project Description**

### **Expected Outcomes**

Virginia's (VA's) expected outcomes from the Preschool Development Grant Birth-5 Renewal Grant (PDG-R) include full statewide scaling of its locally driven pilots (Pilots) to form a cohesive, equitable, and empowered network of diverse early childhood care and education (ECCE) programs across the mixed delivery system. The transformation of VA's early learning system started with the initial Preschool Development Grant Birth-5 (PDG), which provided essential resources to instigate system changes that will be accelerated and solidified with PDG-R. With PDG-R, VA will refocus its ECCE system on a unified vision for quality; create a uniform continuous quality improvement (QI) infrastructure; and realign CCDBG, IDEA, state preK, and other funding to sustain a more responsive, high quality ECCE system after PDG-R ends. As a result of PDG-R, local pilots (Pilots) will maximize family choice and information, strengthen the early childhood workforce, improve program quality, and foster rich cross-disciplinary partnership, including health, mental health and social services, to support the complex needs of young children and their families. Through its Program Performance Evaluation Plan (PPEP), VA will demonstrate and broadly disseminate evidence of impact, including building a compelling case for VA's unique PDG-R educator incentive to drive significant future investment in the workforce. Through PDG-R and informed by the Pilots, VA will reallocate and streamline existing public investments; sustain accessible, affordable, quality ECCE; and increase school readiness for VA children, especially those most vulnerable.

### **Approach**

VA is the only state in the country that limits its governor to one four-year term, making locally driven, public-private leadership essential to building and sustaining an efficient, equitable, and high-quality ECCE system. VA's strategy for PDG addressed this unique context

by leveraging partnerships at the local and regional level. The PDG grant funded 10 Pilots to partner with the state to implement local early childhood mixed delivery models. The implementation of the Pilots and other PDG activities: contributed to VA's knowledge of statewide gaps, needs, and priorities for families of children B-5; provided critical insights to effectively strengthen and expand the Pilots to support a cohesive network of local B-5 mixed delivery systems; and will leverage the results from ongoing needs assessment and the Pilots to maximize other public investments by the end of PDG-R. Through PDG-R, VA will continue to drive change and innovation at the local level by working to *build, expand, and sustain* cohorts of mixed delivery efforts to: (1) convene publicly funded service partners to design and sustain more effective B-5 systems that integrate ECCE and comprehensive services, (2) increase equitable access to quality ECCE and B-5 services, (3) improve classroom/family child care home (FCCH) and educator quality among all ECCE program types, (4) engage families as consumers of ECCE, their children's first and most influential teachers, and decision makers in systems design, and (5) ensure accountability and equity of VA's ECCE system.

### **Activity One: PDG B-5 Statewide Needs Assessment**

*1. Status of and findings from needs assessment.* VA was determined to design and utilize the needs assessment (NA) to drive a coordinated series of activities to create a more cohesive B-5 system. **VA published its statewide PDG NA in July 2019 and received ACF approval in October 2019. The NA was developed, reviewed, and finalized through working closely with key partners, including the State Advisory Council (SAC) and a SAC-designated Impact Workgroup consisting of educators across the ECCE mixed delivery system, experts in data and policy and finance, leaders of community and social service agencies, family advocates, and families, representing the broad array of geographic, cultural, and linguistic communities**

(Appendix p.A4); and extensive input and feedback from families, Pilot leaders, and other stakeholders. At the outset, the NA partners reached consensus on the **definition of key terms** (quality ECCE, availability, vulnerable or underserved, children in rural areas), clarified NA priorities, and agreed on the methodology and stakeholder engagement to achieve a more nuanced understanding of VA’s children and their families. **Key findings** are presented below.

<p><b>Relevant Populations of Children</b></p> <ul style="list-style-type: none"> <li>• Of VA’s roughly half million children B-5: 12% live in rural areas; 36% live in low-income households; 67% have all parents employed; 7% identified as needing/receiving support for delays/disabilities; 25% live in immigrant families.</li> <li>• 40% of kindergarteners (and 48% of economically disadvantaged children) enter school unprepared on at least one dimension of school readiness.</li> </ul>
<p><b>Equitable Access and Availability</b></p> <ul style="list-style-type: none"> <li>• Publicly funded programs serve 30% of eligible B-5 children in VA.</li> <li>• Pressing ECCE <b>service gaps</b> exist for families living in “child care deserts” (impacting 47% of Virginians) and rural areas, families who need ECCE services during non-traditional work hours/assistance transporting children, homeless children, children with disabilities, and infants/toddlers (I/T) (for every I/T served in public ECCE, there is one on a wait list).</li> <li>• Other <b>barriers to access</b>: limited supports for families slightly over eligibility for publicly funded programs, availability of licensed early childhood special education teachers, and supports for children with behavioral issues.</li> <li>• <b>Gaps in data</b>: although VA’s effort to provide an <i>unduplicated count of children served in VA’s publicly funded programs</i> succeeded in providing a glimpse at these data, it also revealed data/technical gaps in VA Longitudinal Data System (VLDS).</li> </ul>
<p><b>Quality</b></p> <ul style="list-style-type: none"> <li>• <b>Quality ratings</b> within VA’s five-level Quality Rating Improvement System (QRIS) show most programs (45%) are Level 3 due to “fast track” option offered to Head Start and schools.</li> <li>• State preK programs show <b>positive effects on child outcomes</b>.</li> <li>• <b>Gaps in data</b>: <i>Enrollment in the QRIS</i> includes 25% of eligible ECCE programs (majority being publicly funded programs serving economically at-risk children), and information on teacher–child interactions is available for only 5% of programs. VA lacks a systemic framework and common data source for <i>transition supports</i>, especially prior to kindergarten. Licensing violations were assessed but other information on <i>child care facilities</i> is limited.</li> </ul>
<p><b>Coordination</b></p> <ul style="list-style-type: none"> <li>• Publicly funded ECCE programs are housed across eight agencies, which leads to <b>inefficiencies in ECCE administration, financing, data, governance, and regulation</b>.</li> <li>• Families must visit numerous websites to make <b>informed choices about ECCE</b>; duplicative paperwork and inconsistent eligibility criteria further complicate their decision-making.</li> <li>• Differences in <b>safety standards, quality expectations, and workforce supports</b> across program funding streams mean gross inequities in the quality of children’s daily experiences.</li> </ul>
<p><b>Transitions</b></p> <ul style="list-style-type: none"> <li>• Only Head Start requires transition planning; <b>no requirement</b> for other VA ECCE programs.</li> </ul>

- VA's K-12 Every Student Succeeds Act plan does not include a comprehensive statewide effort to facilitate or engage families in transitions; focuses only on **homelessness and ELLs**.

With PDG, VA built new data systems capacity including the data portal (LinkB5) (Activity 6) that will be complete by December 2019, and a data Dashboard, a succinct overview of measurable indicators that align with VA's vision and desired outcomes. VA will use this tool to monitor progress on the strategic plan (SP) proposed goals and strategies (Activities 2 and 6).

With PDG-R, VA will fill **key data gaps** through: 1) strengthening LinkB5's ability to collect, track, integrate, and utilize data across ECCE, health, mental health, nutrition, social services, and early intervention through development of an early childhood integrated data system (ECIDS) and data governance structure, per recent report recommendations (outlined in Activity 6) to SAC and SAC Impact Workgroup; 2) integrating several **related NA** initiatives that will yield insights into needs related to maternal health, I/T in vulnerable families or with special needs, early childhood mental health, and a survey of teachers and leaders to better understand gaps in supports for school transitions and entry, especially for most vulnerable children; and 3) implementing proposed PDG-R Pilot activities (e.g., establishing a uniform, statewide classroom quality measure, outlined in Activity 5, which will provide quality data statewide). The SAC will be updated twice a year on progress to guide implementation.

VA will **update the NA every three years**. VA will use PDG-R funding to: 1) gather new data from families and stakeholders with each annual round of Pilot expansion until statewide impact is achieved; 2) conduct surveys, interviews, and focus groups with diverse representation in year 3; 3) more fully engage families who are priority vulnerable populations (e.g., rural communities, families of English-language learners (ELLs), homeless families, and children with special needs or a history of trauma); and 4) complete robust analysis of data collected through PDG-R by 2022.

**2. NA process.** The NA research was led by a VA-based consultant with a goal to understand challenges with access, affordability, and quality of ECCE and other B-5 services from a variety of perspectives, including families, educators, community leaders, and a broad set of diverse ECCE stakeholders. The process of developing the NA took seven months and included:

<b>Method</b>	<b>NA Process Activity</b>
<i>Analysis and Synthesis</i>	Review of 15 recent state and national reports on ECCE; while numerous reports shed light on specific aspects of ECCE, no cumulative synthesis had been developed to inform comprehensive and strategic ECCE systems reform
<i>Leverage Federal and State Databases</i>	Exploration of data shed light on research questions regarding demographics and characteristics of young children and families in VA households, accessibility and quality of statewide public offerings for ECCE, and additional support services and resources that improve healthy child development
<i>Primary Research</i>	Interviews and focus groups were completed in coordination with local Smart Beginnings' (VA's network of locally driven partnerships of families and public and private sector leaders) close ties and connections to relevant representatives with valued perspectives. The research team conducted primary research in urban and rural locations across the state with families, including ELL, those who are low income, have infants, toddlers, preschoolers and/or children with special needs, are working and have specific ECCE service needs and preferences.

In addition to highlighting these nuanced barriers and inadequacies, the NA identified specific opportunities to address these gaps through more efficient use of state and federal resources. Fifteen concrete recommendations were provided, including establishing a more coordinated ECCE interagency governance structure, more efficiently using the \$11M currently expended in federal and state quality investments, providing technical assistance (TA) at the local level to support braiding and integrating diverse funding streams, and engaging the private sector to scale innovative efforts. These recommendations directly informed the development of the SP and mobilized leaders' and stakeholders' commitment to action.

**3. Collaborative process to complete the NA.** VA provided an eight-page summary of the intensive collaborative process used to produce its NA which was lauded by ACF. The NA research team used the diverse perspectives of the Impact Workgroup during three half-day

meetings over four months to review data and information collected, explore findings, and advise on any gaps requiring additional due diligence. The researchers and Impact Workgroup designed and conducted a full day retreat with the SAC to take a comprehensive look at the data and insights from the NA and begin to develop VA’s SP to address NA-identified gaps. Key partners and full list of stakeholders engaged in NA/SP activities can be found in the Appendix (p.A4)

The PDG-R timeline and proposed activities and outcomes are:

<b>Months</b>	<b>Activity One: Proposed Activities and Milestones</b>	<b>Responsibility</b>
1–6	Update Impact Workgroup/SAC on findings from Pilots (e.g., LinkB5 data), Dashboard	VDOE, VECF, UVA
7–12	Update Impact Workgroup/SAC on progress toward recommendations for VA ECIDS; findings from Pilots, Dashboard	VDOE, VECF, UVA
13–24	Twice annually, update Impact Workgroup/SAC on ECIDS, findings, progress, Dashboard indicators (outcomes), impact of activities	VDOE, VECF, UVA
25-36	Conduct interviews, focus groups, feedback processes to update NA; assess changes from strategy implementation; deeply engage Impact Workgroup; conduct retreat with SAC; seek online feedback; produce updated NA	VDOE, VECF, UVA

### **Activity Two: PDG B-5 Statewide Strategic Plan**

**1. Strategic plan development and progress.** VA completed a full draft of its PDG VA Ready Strategic Plan (SP) and **will continue to refine it through a robust stakeholder engagement process that will culminate in formal approval by the SAC and ACF in December 2019.**

VA’s SAC called for a bold vision to unify and coordinate the work of state and local agencies to better serve vulnerable children and families. In June 2019, the SAC and Impact Workgroup participated in a retreat to revise the SP vision, set guiding principles, and discuss goals and strategies to address NA gaps. VA then **engaged a broad set of stakeholders impacted by B-5 systems** including families through in-person forums in diverse regions across the state, presentations at state and local convenings, ongoing feedback through monthly stakeholder calls, and a lively public input process (Appendix p.A4). The SP contains goals and activities that will



fundamentally change the way VA designs, funds, and delivers ECCE through a localized, data-driven approach to improve coordination, increase access, enhance quality, and engage families.

VA’s NA highlighted significant gaps in data, program capacity, accessibility, and quality; need for aligned comprehensive support services for children and families; and need for stronger system coordination/collaboration. The SP is organized around five goals and associated action steps creating a framework for a comprehensive, coordinated B-5 mixed delivery system.

<b>Goal</b>	<b>Strategic Priorities</b>
<p>1) <b>EQUITABLE ACCESS:</b> Preserve and expand accessibility of quality public and private ECCE to reach vulnerable children and better prepare Virginia’s future workforce.</p>	<p>1.1 Increase access to information on available publicly-funded opportunities and seats for children age 0-5 to families and policy makers.            1.2 Provide financial and operational support to underserved communities to increase high quality, accessible ECCE options.            1.3 Adopt state financing regulations and policies that support coordination of funding and innovative financing mechanisms that cover real costs of care and maximize funds.            1.4 Preserve and increase the number and availability of affordable, flexible, quality public and private ECCE opportunities, particularly for children B-3 that meet the diverse needs of working parents.            1.5 Set annual funding goals for increased investments in ECCE.</p>
<p>2) <b>FAMILY ENGAGEMENT:</b> Increase the capacity of communities to engage and support families to foster children’s healthy development, learning, and well-being.</p>	<p>2.1 Better coordinate local recruitment, enrollment, and eligibility processes to make it easier and more affordable for families in need to enroll in public ECCE, receive subsidies, and access support services.            2.2 Target resources to support parents as children’s first teachers in advancing their learning, social-emotional development, and readiness for school, and understanding the value of developmentally-appropriate quality ECCE.            2.3 Increase the engagement of families in guiding ECCE policies and developing welcoming, culturally responsive, language sensitive, and relevant practices at the program, community, and state levels.            2.4 Support the capacity of programs that serve families and their children to connect families to comprehensive community resources.            2.5 Increase timely identification, enrollment, and retention of children with disabilities who would benefit from early assistance.</p>
<p>3) <b>WORKFORCE QUALITY:</b> Finance and develop unified, accessible career pathways and working conditions that retain and reward a talented ECCE</p>	<p>3.1 Adopt and articulate statewide developmentally-appropriate indicators that measure multiple dimensions of children’s development from 0-5 in ECCE settings.            3.2 Implement and bring to scale a uniform, statewide classroom quality measurement and improvement system for all programs receiving public funding.</p>

workforce that is continuously improving.	<p>3.3 Maximize pathways of support that align and strengthen recruitment, competency-based educator preparation, classroom tools, and professional development opportunities to support improvement toward statewide measures.</p> <p>3.4 Employ performance-based contracts and incentives to centers and homes that support sustainable operations, reward quality care, and ensure adequate compensation, benefits and working conditions.</p>
4) ACCOUNTABILITY: Align and unify responsibility for establishing standards, coordinating services, maximizing resources, and improving outcomes for 0-5 children.	<p>4.1 Unify and align oversight, eligibility, and funding for agencies administering ECCE.</p> <p>4.2 Align and streamline health, safety, and quality expectations to reduce barriers and increase effectiveness of public ECCE funds.</p> <p>4.3 Drive transparency of public programs and expend ECCE funds.</p> <p>4.4 Assess and track longitudinal progress of Virginia’s children receiving services across agencies to better understand impact of early childhood programs and services through an integrated data system.</p>
5) LOCAL CAPACITY AND INNOVATION: Engage local and regional public and private stakeholders in designing, piloting, informing, and scaling a more accessible and high quality system.	<p>5.1 Provide resources for communities to build the infrastructure needed to ensure ECCE programs meet statewide quality standards and improve family access to quality ECCE.</p> <p>5.2 Design, pilot, and scale innovative public and private partnerships at the local level to maximize state, federal, and local resources and improve impact.</p> <p>5.3 Increase the number of families making a successful transition from home to ECCE to elementary school.</p> <p>5.4 Support interagency governance and shared services at the local and regional levels to align with the state strategic plan to improve kindergarten readiness.</p>

VA will continue to engage stakeholders across all public and private agencies serving children and families, levels of administration, locales, and family representatives throughout 2019 to finalize SP goals/strategies, roles/responsibilities, identify potential funding sources, and confirm leadership and accountability mechanisms. With stakeholders, the SAC and Impact Workgroup will **assess current local, state, and federal statutory requirements** to identify and address barriers to SP efforts. VA will launch its Dashboard with measurable indicators for the goals and strategies when the SAC approves the SP in December, offering a dynamic mechanism to monitor and assess progress across key desired outcomes, inform cost and resource efficiency, support continuous improvement, and guide decisions to improve VA’s B-5 system.

VA’s plan for updating the SP is to 1) **conduct focus groups, interviews, and stakeholder surveys** to ensure it is informed by end-users and families; 2) **incorporate new data and insights** from LinkB5 portal and Dashboard; and 3) **engage the SAC and Impact Workgroup** to review fidelity to PDG-R activities, assess how needs have changed via implementation of PDG-R activities and updated NA, and update the SP by the end of the grant period.

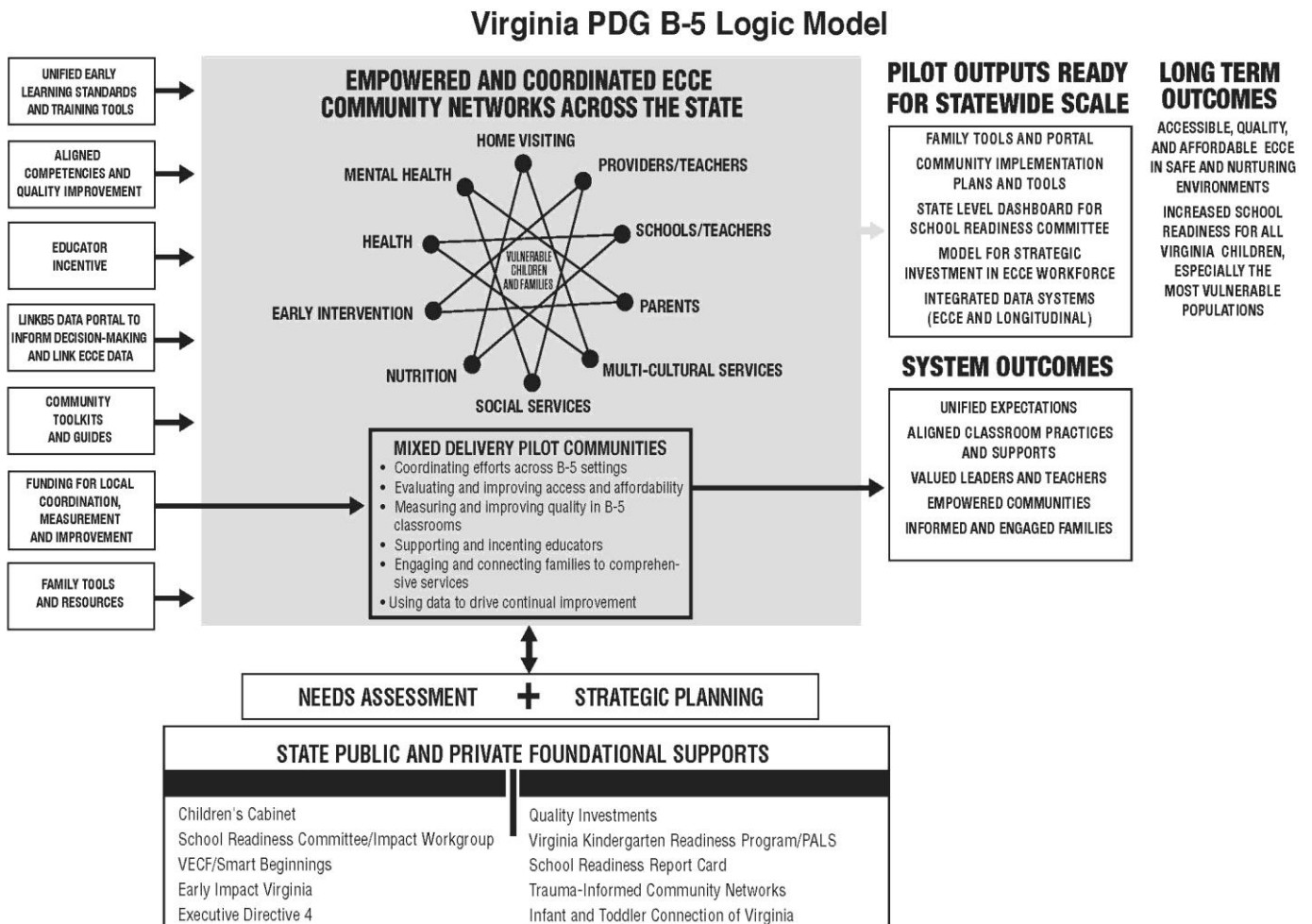
**2. Status of initial PDG B-5 grant activities and implications for renewal grant activities.** A

key lesson learned from VA’s PDG is the effectiveness of building capacity at the community level for scaling up practices; VA will continue to *build, expand, and sustain PDG Pilots* at full statewide scale by the end of PDG-R to ensure an accessible, high quality mixed delivery B-5 ECCE system that meets the needs of communities, families, and children.

<b>Milestones Accomplished</b>	<b>Challenges</b>	<b>Responsive Strategies</b>
Supported 10 Pilots covering 27 (20% of VA’s) jurisdictions to convene partners, increase access, improve quality across all publicly funded ECCE programs	n/a	All eligible communities opted to participate; other communities have expressed desire to join
Engaged families in NA/SP as children’s first teachers, decision makers and as ECCE consumers	Difficult to effectively reach and engage vulnerable families in process and systems design	Piloted family engagement model within coordinated enrollment process; plan to launch Family Council
Surveyed ECCE workforce (75% response rate) on characteristics, needs, assets	n/a	n/a
Provided financial incentives to ECCE sites, leaders, and teachers to support quality and improve retention	Greater demand than expected	Limited funds to sites, teachers; created random-controlled study (p.21)
Built LinkB5 data portal to capture access, quality data at classroom level for I/T and preschool classrooms in Pilot communities	Data literacy of certain ECCE providers is low	Created new resources such as hotline, online chat, in-person staff
Commissioned assessment of VA’s data system landscape and recommendations to ensure an ECIDS and linkages to VLDS; conducted unduplicated count of children in VA’s ECCE programs	Report found gaps in data and capacity to link data in VLDS, which limited scope of distinct count	Secured commitment of VDOE to lead charge to establish ECIDS connected to VLDS
Worked to align comprehensive support services (health, mental health, nutrition,	Not all Pilots are fully coordinating	Plan to provide innovation funds for

social services, early intervention, etc.) through Pilot activities	enrollment across support services	Pilots to test models as exemplars for replication
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*Progress on vision, logic model, governance structure* VA’s **vision for its B-5 mixed delivery system**, as refined by Impact Workgroup and SAC based on PDG activities is that *all children in the Commonwealth of VA will thrive with the support of accessible, quality, and affordable ECCE delivered in safe and nurturing environments*. Empowered and coordinated ECCE community networks are at the center of VA’s **revised logic model**, transforming PDG-R inputs (funding, toolkits, LinkB5) into system outcomes (common expectations for children, aligned practices, valued teachers/leaders, informed /engaged families) through discrete local activities such as coordinating efforts, improving enrollment, and supporting educators. While



this year’s work has validated the logic model connections, VA has slightly modified the model to align with NA, SP, and lessons learned. See updated model and chart with key changes below.

<b>Key Changes to VA’s Logic Model</b>
Revised inputs and state public and private foundation supports to reflect assets needed by Pilots and broader set of health, mental health, social services, and early intervention supports
Broadened “star” model for Pilots including home visiting, early intervention, and multi-cultural services based on NA; placed vulnerable families and children at the center
Added data literacy to Pilot activities and integrated data system to Pilot outputs to indicate goal of and support for building data capacity and structures
Incorporated new SP vision and prioritized equity (i.e., most vulnerable populations)

**3. Incorporation of comprehensive support services.** The NA highlighted VA’s need to better align comprehensive support services for children and families, leading to SP Strategy 2.4 (p.9). VA has made progress in coordinating early childhood services across agencies and systems (e.g., inter-agency collaborations to expand CACFP enrollment in ECCE, provide training to providers to reduce preschool expulsions, and streamline screening/referral for families concerned about their child’s development).

SP strategies to connect families to physical and mental health, nutrition, early intervention, and social services include deepening family engagement through Pilots’ coordinated enrollment processes (Activity 3; Bonus), providing innovation funds to align comprehensive support services (Activity 5), and unifying and aligning ECCE programs for greater coordination and efficiency at the state level (pp.42-46). VA’s revised collaborative governance structure (pp.50-53) will ensure the SP integrates other statewide planning efforts (e.g., home visiting, CCDBG).

**4. Funding alignment, efficiencies, leverage.** In response to the NA, SP, and lessons learned, VA has adjusted funding in both PDG and PDG-R budgets, sought opportunities to maximize state funding and position the work for sustainability. Detail is provided below.

<b>Key \$\$ Changes</b>	<b>SP</b>	<b>Explanation</b>
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Pursue new state funding to increase access	1.1 1.2 1.3 1.4 1.5	<ul style="list-style-type: none"> <li>• VA is leveraging Executive Directive 4 to recommend to Legislature that new state funds are needed to increase access for vulnerable children and should be delivered via a coordinated, mixed delivery approach.</li> <li>• PDG-R will help ensure these slots are high quality and responsive to families</li> </ul>
Better leverage state resources for school readiness	2.2	<ul style="list-style-type: none"> <li>• VA has successfully implemented its kindergarten readiness assessment statewide and will maximize state investments going forward, reducing need for any PDG funds.</li> </ul>
Increase funding for coordination and family engagement	2.2 2.3 2.4 5.1 5.3	<ul style="list-style-type: none"> <li>• To better support Pilot leads in regularly connecting with all partners; dedicating time to coordinating efforts; and engaging a broader set of health, mental health, social services and other partners, VA will increase funding for local staffing in PDG-R.</li> <li>• This funding, along with new expectations and supports in PDG-R, will also help ensure that Pilots are deeply engaging families.</li> </ul>
Extend standards work	3.1	<ul style="list-style-type: none"> <li>• Progress has been made in unifying early learning and development standards, but stakeholders indicate more time is needed to complete standards and produce tools for the field.</li> <li>• VA will add funds for this work in PDG-R.</li> </ul>
Better leverage existing funding for quality improvement	3.3 4.2	<ul style="list-style-type: none"> <li>• Pilots were encouraged to conduct fiscal mapping and leverage different funds for QI; results were limited due to time constraints.</li> <li>• In PDG-R, VA will work more closely with Pilots to align, connect, and better leverage existing funding sources such as CCDBG, IDEA, Title I, and state funds.</li> </ul>
Adapt educator incentive	3.4	<ul style="list-style-type: none"> <li>• To better support educators, VA restructured incentives to provide three payments over time rather than once at year's end to address immediate financial needs so educators can stay in their job.</li> <li>• In PDG-R, VA will focus incentives on FCCCH- and center-based educators in response to stark disparities revealed by PDG survey; VA will measure impact of stipends over a longer period of time.</li> </ul>
Support personnel and create tools to build data literacy and capacity	4.4	<ul style="list-style-type: none"> <li>• VA has increased supports to provide more intensive in-person, telephone, and online support to help site leaders/educators enter access and quality data into LinkB5, ensuring comprehensive snapshot of ECCE and linking ECCE data to other systems.</li> </ul>
Promote local innovation	5.2	<ul style="list-style-type: none"> <li>• VA completed required NA/SP activities at lower cost and repurposed funds to support SP Goal 5 related to local innovation.</li> <li>• In PDG-R, VA will provide funding to support local innovation.</li> </ul>

The PDG-R timeline and proposed activities and outcomes are:

<b>Months</b>	<b>Activity Two: Proposed Activities and Milestones</b>	<b>Responsibility</b>
11-12 (2019)	Continue to refine SP through robust stakeholder engagement; finalize goals/strategies, roles/responsibilities, identify potential funding sources, confirm leadership and accountability mechanisms; approval by SAC and ACF; launch Dashboard	VDOE, VECF, SAC & Impact Workgroup, Stakeholders

1–24 (2020-21)	Implement SP; assess current local, state, federal statutory requirements to identify and address barriers to SP efforts	VDOE, VECF, UVA
25-36 (2022)	Implement SP; conduct focus groups, interviews, surveys; incorporate new data and insights from LinkB5 and Dashboard; review fidelity to PDG-R activities, assess changes, update SP	VDOE, VECF, SAC & Impact Workgroup, Stakeholders

**Activity Three: Maximizing Parent and Family Knowledge, Choice and Engagement**

*1. Learn from and better inform families; empower family choice; build knowledge and promote parent-child relationships.* Aligned with VA’s SP goal emphasizing family engagement (p.9), VA is actively building local B-5 systems that trust the wisdom of families as children’s first and most important teachers, promote strong parent-child relationships, and provide supports to families including those with unique needs including children with disabilities, ELLs, families of VA’s 11 tribal communities, and families in rural and underserved communities. VA has strategically grown its local networks and partnerships with families through Smart Beginnings, mixed delivery investments, and PDG Pilots (2019). In line with SP Strategy 2.2 (p.9), VA will use PDG-R to strengthen family engagement in the Pilots as they scale statewide, specifically expanding the Pilots’ core functions (*convene partners, expand access, improve quality*) to include *engaging families*. To accomplish this, VA is supporting communities to learn from, inform, empower, and build the capacity of families by:

<p><b>Evaluating how families access information and empowering choice through coordinated enrollment efforts</b></p>	<ul style="list-style-type: none"> <li>• Through PDG, VA developed tools for Pilots to self-assess how well they engage families in <b>coordinated enrollment processes</b>, with specific questions related to <b>children with special needs, ELLs and other vulnerable populations</b>. All 10 Pilots convened family child care home (FCCH), child care, Head Start and school partners in summer 2019 and evaluated how well families are supported in finding out about and applying for ECCE programs. Although 57% of communities provide information to families in a coordinated way for <i>some</i> programs, no community provides comprehensive information about all programs.</li> <li>• With this wake-up call, PDG-R Pilots will <b>develop community-wide plans to better coordinate information for families</b>, and innovation funds will support family-engaged coordinated enrollment (Bonus).</li> </ul>
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<p><b>Surveying families directly for their input</b></p>	<ul style="list-style-type: none"> <li>• UVA developed a <b>family survey</b> collaboratively with the Pilots and launched it in November 2019. The <b>survey</b> asks families about their experience finding ECCE and other services, preferences and needs, and perceptions of quality; the degree to which they have been respected and engaged; and <b>their ECCE needs for non-traditional hours, in native languages, for infants/toddlers, and children with special needs.</b></li> <li>• VA will expand the survey statewide through PDG-R; communities will use this feedback to inform their local plans to improve quality, strengthen access, provide more responsive systems, and track progress.</li> </ul>
<p><b>Creating a data portal (LinkB5) to capture the information families need to make informed choices about quality</b></p>	<ul style="list-style-type: none"> <li>• Family survey results will inform the evolution of LinkB5, VA’s PDG-created data portal with multiple indicators on the availability and quality of ECCE programs (teacher-child interactions, teacher credentials, and curriculum). Prior to LinkB5, families had to visit four websites to find quality information, only to learn that VA provides information about teacher–child interactions and curriculum for 5% of public sites.</li> <li>• With PDG-R, Pilots will work with families <b>to improve the availability and utility of quality information in user-friendly formats to help inform parental choice.</b> VA will design statewide tools (e.g., website, app) that build on LinkB5 and provide mobile-enabled, user-friendly information to families on ECCE options and child development.</li> </ul>
<p><b>Providing families with tools and resources for VA’s new kindergarten readiness assessment (VKRP)</b></p>	<ul style="list-style-type: none"> <li>• In partnership with families, VA built <b>family-friendly resources on school readiness and transitions</b>, aligned to VA’s new statewide kindergarten readiness assessment (VKRP), and developed reports and resources in multiple languages on literacy, math, self-regulation, and social-emotional skills that teachers can share with families to support their children. VA launched a website with family tools that can be used throughout kindergarten as VKRP is also used at the end of the year.</li> <li>• Through PDG-R, VA will refine these tools and explore others (e.g., text messaging) to <b>engage families in their children’s education as they transition from ECCE through kindergarten</b>, with targeted outreach and resources to families of children with special needs and ELLs.</li> </ul>

*2. Connecting families to other services.* VA’s Pilots provide a strategic forum for coordinating implementation of broader B-5 services as well as ECCE. Pilot communities are taking a more holistic view of the needs of young children and their families and are focusing on the broader range of supports including home visiting, food assistance, early intervention, and physical and mental health services. VA uses CommonHelp, a web-based app which allows families to simultaneously apply for assistance with food, child care, heating and cooling bills, health care, and cash assistance. VA is also: directly funding two-generation strategies in select



communities, working with community action agencies that also run ECCE programs like Head Start; increasing economic opportunity through local workforce apprenticeships and entrepreneurial/growth ventures; redesigning its behavioral health system, including mental health services for children B-5; expanding home visiting to every community; and has expanded Medicaid, serving 400,000 more individuals. Although services for vulnerable families have expanded, VA must now tackle the challenge and opportunity of fully connecting the service systems and streamlining holistic access for families. This includes better engaging VA’s 11 tribal communities, which are not currently included in the Pilots.

VA’s SP has two strategies (2.1 and 2.4) focused on **enabling access to comprehensive community resources** (p.9). Accordingly, VA will implement these PDG-R activities:

<p><b>Scale Best Practices</b></p>	<ul style="list-style-type: none"> <li>• Provide funding to expand Pilots’ family-informed redesign of eligibility redetermination, application processes, wait lists, enrollment, receipt of subsidies, and connections to social services</li> <li>• Develop targeted strategies to meet needs of families who are in rural areas, are homeless, are ELLs, are tribal members, have children with special needs</li> <li>• Document barriers and successful strategies to inform family engagement improvements needed at state level; improve practices in other communities</li> <li>• Measure impact of these efforts</li> </ul>
<p><b>Seed Innovation</b></p>	<ul style="list-style-type: none"> <li>• Provide innovation grants to select Pilots to streamline eligibility, build comprehensive, single-stop models for social services, workforce development, health and mental health services, food security, homelessness prevention and other two-generation approaches</li> <li>• Assess impact through PPEP (pp.46-50) and consider scaling</li> </ul>

**3. Supporting concerns about development, delays and IDEA services.** Per the NA, VA’s Part C and B systems need strengthening; SP strategy 2.5 was developed to increase timely identification, enrollment, and retention of children with disabilities. The Pilots currently include all children with special needs served through IDEA Part B, meaning they are accounted for in all community-wide coordinated enrollment, family survey, school readiness, and transition efforts. Pilots are focused on improving services for children with special needs; 80% of

communities reported they work closely with multiple providers that serve children with special needs and want to serve children in inclusive settings. The family survey includes specific questions for families concerned about their children’s development and will provide insights on VA’s strengths and weaknesses, enabling communities to take informed action. With this information, communities will be well-positioned to develop coordinated enrollment tools and processes that fully address needs of families with children with special needs and support children in more inclusive ways in B-5 classrooms and through transitions to elementary school.

With PDG-R, VA will 1) **expand access to information for families about early childhood development of children with disabilities** through comprehensive, locally coordinated outreach and enrollment efforts; 2) **strengthen the information about screening and referral services for families** with concerns about their children’s development across the B-5 continuum, informed by the family survey; 3) **link screening, assessment, and services for families of children under age 2** by integrating Part C fully into Pilot efforts; and 4) **promote high-quality, inclusive programs and IDEA services** through comprehensive quality measurement and improvement efforts in all publicly funded classrooms serving children with special needs.

**4. Improving family engagement and leadership.** VA strongly believes that families play essential roles as consumers of ECCE services and leaders in early childhood systems design. Families have actively participated in the NA, SP, and Impact Workgroup. As noted in SP Strategy 2.3, VA will increase **family leadership and engagement opportunities**.

With PDG-R, VA will: 1) expand the Impact Workgroup to include a new, stand-alone **Family Council** that enables a diverse set of families to participate in shaping policy and practice at the state level and advising on implementation; 2) increase funding to Pilots **to expand participation of family leaders** in efforts covering 40% of the state in Year 2 and 100%

by 2022, ensuring culturally and linguistically diverse families, including those from tribal communities, across all geographic regions are involved, supported, and respected as leaders; 3) **conduct surveys** to help Pilot communities understand how well they include families in shaping policy and practices (e.g., VA sent out 30,000 surveys in multiple languages to families in November 2019); and 4) provide **innovation funding to capable Pilots to develop models for family engagement** (e.g., including building families’ leadership and advocacy skills to participate in policy and system design, creating peer networks, exploring technology to more effectively reach rural families). VA will document innovations for replication statewide and will track progress of engagement efforts via the family survey conducted in multiple languages.

Insights gleaned from families across these activities will inform state efforts and **fill data gaps regarding maximizing parental choice and understanding the needs of families** who are working, seeking employment, or in job training (Bonus).

Months	Activity Three: Proposed Activities and Milestones	Responsibility
1–6	<ul style="list-style-type: none"> <li>● Expand Impact Workgroup to include Family Council; Award increased funds to Pilots to expand participation of family leaders in coordinated enrollment, connections to support services, participation in systems design; Conduct family surveys; Provide quarterly TA</li> </ul>	VECF, Pilots
7–12	<ul style="list-style-type: none"> <li>● Develop targeted strategies for ELLs, families of children with disabilities and/or who live in rural communities to access diverse early childhood and family support services</li> <li>● Award innovation funds to Pilot(s) to field test strategies supporting and engaging families and serving as exemplars; Document best practices in developing more responsive systems, streamlining enrollment; Incorporate results from innovations</li> <li>● Develop preliminary design of tools (e.g., website, app, text) for families; Build out LinkB5 processes and reporting functions that support families as ECCE consumers and engaged leaders in their children’s learning and development</li> <li>● Document local feedback/processes created, barriers encountered to streamlined enrollment, access to ECCE and support services; Target focus, and develop specialized strategies for families who speak diverse languages, have children with disabilities, infants/toddlers, rural and tribal communities and/or are homeless</li> </ul>	VDOE, VECF, UVA  VECF, UVA  VDOE, UVA  VDOE, VECF, UVA, VDSS

	<ul style="list-style-type: none"> <li>• Provide quarterly TA</li> </ul>	VECF
13–24	<ul style="list-style-type: none"> <li>• Build, expand, sustain Pilot activities engaging families; Refine strategies for families with diverse needs; Award innovation funds; Share best practices to develop more responsive systems, streamlined enrollment; Assess impact of innovation funds, integrate results</li> <li>• Refine LinkB5 and tools supporting family engagement; Beta test mobile app design; refine based on family feedback</li> <li>• Provide quarterly TA</li> </ul>	VDOE, VECF, UVA, VDSS  VDOE, UVA  VECF
25-36	<ul style="list-style-type: none"> <li>• Award funds to Cohort 4 Pilots to <i>build</i>, Cohort 3 Pilots to <i>expand</i>, Cohort 2 to <i>sustain</i> responsive ECCE systems for families; PDG model scaled statewide (see 33-34 for detail)</li> <li>• Expand and sustain best practice strategies for families with diverse needs (above); award innovation funds; scale best practices in developing more responsive systems and streamlined enrollment; assess results from innovation funds to support continuous QI</li> <li>• Implement LinkB5 and family tools statewide; refine app design and implement statewide</li> <li>• Document local feedback: processes created, barriers encountered to streamline enrollment, access to services; targeted focus on families who speak diverse languages, are homeless, have children with disabilities, infants/toddlers, children in rural communities</li> <li>• Provide quarterly TA</li> </ul>	VDOE, VECF,  VECF, UVA  VDOE, UVA  VDOE, VECF, UVA, VDSS  VECF

**Activity Four: Sharing Best Practices and Professional Development**

*1. Professional development (PD) and best practice activities.* VA will use PDG-R to implement VA’s SP goal 3 to improve workforce quality. In line with its *build, expand, and sustain* approach, VA will expand a measurement and improvement system with unified expectations and indicators, expand pathways of support involving diverse entities that prepare the ECCE workforce, and maintain improvements through an innovative educator incentive to **reduce workforce turnover** and improve quality.

Between CCDBG, Head Start, IDEA, and state funding, VA invests more than \$15 million annually in quality measurement and diverse **PD investments for ECCE providers** (e.g., through VA’s QRIS, child care resource and referral, IT specialist network, mental health consultants focused on **trauma-informed practices** (4.2), and training centers for supporting

children with disabilities. Through PDG, VA has begun its initial statewide program quality assessment in 20% of VA's localities, or ~2,000 infant, toddler and preschool classrooms and FCCHs including those with children with disabilities, homeless children and ELLs. VA will have data on teacher-child interactions (*CLASS*) and quality elements (e.g., ratios, credentials, PD) and use of curriculum/assessment for each classroom/FCCH in LinkB5 (pp.36-42).

Aligned to the SP which calls for incentives to ensure adequate compensation to **reduce workforce turnover**, VA has incubated an educator incentive program to promote retention and improve quality. The NA showed that 25-40% of ECCE educators turn over annually, mostly in child care where average compensation is \$9.83/hour. Turnover diminishes the return on VA's investments in ECCE educators and can have negative impact on children. With PDG, VA dedicated \$3.75 million to provide ~2,500 educators with up to \$1,500 for participating in shared PD, classroom observations, and improvement efforts. VA implemented three models to explore how incentive structures affect educators: 1) educators receive a single payment of \$1,500 at the end of the year; 2) educators receive three payments of \$500 over the course of the year; and 3) random-controlled trial (RCT) in which only a subset of educators receive \$500 three times over the year. VA surveys all educators at two points to understand the impact of the incentive on morale, workplace climate, and financial security. Using educator information in LinkB5, VA will evaluate to determine which is most impactful on retention, morale and quality (pp.46-48).

Both the NA and PDG survey results showed stark discrepancies between school, center, and FCCH ECCE educators in compensation, financial security, well-being and stability. With PDG-R, VA will restructure the incentive program, narrowing to FCCH and center educators and measuring impact over three years through highly rigorous approaches such as the RCT. The

results will help VA build a compelling case for a statewide educator incentive that could be sustained through federal child care quality funds or tax credits (pp.46-50,59).

The incentive program has also enabled VA to strengthen its **PD registry**. While VA has an existing voluntary registry, participation remains sluggish. With LinkB5 and the requirement that educators verify employment to receive incentives, VA is able to **assess performance of PD investments and workforce turnover efforts** and the impact of experience, education, background and context on quality and turnover across schools, Head Start, centers, and FCCH. With PDG-R, VA will explore using LinkB5 as a more efficient and effective PD registry option closely linked to program experiences and, ultimately, **child outcomes**.

VA has made significant investments in **interdisciplinary PD** across the B-5 workforce, particularly in home visiting and early intervention. VA will use PDG-R to link these efforts at the local level statewide and expand access to cross-disciplinary PD. For example, through a MIECHV Innovation Grant, VA helped launch the Institute for the Advancement of Family Support Professionals (Institute), which offers Family Support Professionals engaging, online modules and a personalized learning maps (see Activity 4.3 for expansion to ECCE).

To prepare educators and share best practices, VA provided nearly \$2M in PDG funding to Pilots for **evidence-based PD and personalized PD plans** for 2,000+ educators throughout the Commonwealth. These funds were also used to train site leaders, coaches and other local personnel to become reliable CLASS observers, increasing local capacity to provide specific, accurate and actionable feedback to teachers on an ongoing basis. Communities also strengthened **practice-based coaching** efforts, ensuring that I/T and preschool educators across all ECCE settings receive specific feedback on their interactions and instruction and supports to

improve their practices implementing **trauma-informed practices**, using curriculum and assessment, and strengthening children’s social-emotional skills.

VA has had limited information on quality across its B-5 mixed delivery system (p.5), making it difficult to provide individualized, evidence-based PD to support improvement, especially for educators of I/T, and children with disabilities. With PDG, VA established a strong foundation toward implementing a uniform, statewide classroom quality measurement and improvement system for all publicly-funded programs (SP 3.2). With the PDG-R, VA will incrementally expand access to the individualized PD and coaching model to serve 100% of sites and teachers. By the end of the grant, nearly 20,000 ECCE professionals will benefit.

As VA dramatically expands the Pilots through PDG-R, VA will also use the clearer picture of current program quality to **realign existing public investments and more efficiently invest multiple funding sources** (CCDBG, Head Start, IDEA and state investments) to develop individualized PD plans and support educators to improve quality. VA will also engage multiple organizations supporting the ECCE workforce (Smart Beginnings, universities, community colleges, community-based organizations that are funded through CCDBG or IDEA, Head Start) with the data gathered from the Pilots, and work collaboratively to re-align strategies and practices to meet the individual needs of ECCE programs and educators. Each Pilot will produce a comprehensive improvement plan for strengthening PD for the ECCE workforce, articulating how the community will leverage local resources to support improvement.

**2. Improving the training of ECCE professionals.** VA dedicates \$3.4M annually to provide on-site services including **individualized coaching** and targeted PD on key topics such as **trauma-informed practice and serving children with disabilities**. These services are provided to ECCE sites by regional coaches who understand the unique context and needs of their

educators, including those in rural areas, who work with ELLs and with homeless children or children with special needs. In PDG, VA obtained baseline quality information in Pilot regions and is providing **individualized coaching and PD** to teachers and sites based on the results. Through PDG-R, VA will maximize federal funds (CCDBG, IDEA, PDG), and expand access to **coaching aligned to the quality assessments and individualized QI and PD plans**. VA will integrate supports for I/T and children with disabilities into local PD and improvement planning processes, ensuring every community has a plan and is continually improving experiences for I/T and children with disabilities.

VA also offers targeted **coaching** to sites serving I/T, has recently developed a mental health consultation program for I/T educators through its highly regarded I/T Specialist Network, and offers in-depth, in-person and ongoing support statewide for educators who are working with I/T with more pronounced behavioral needs. Through the Pilots, VA is dramatically increasing the number of I/T classrooms that are participating in QI efforts, receiving observations, and sharing quality information via LinkB5. Moving forward, Pilots will work with I/T specialists to develop integrated PD plans and provide specialized PD to fully address the needs of I/T settings.

Similarly, VA dedicates roughly \$2M annually to provide **coaching and PD for sites that serve children with special needs** through five Training and TA Centers (TTACs) as well as an Autism Center for Excellence. These centers, co-located within institutions of higher education (IHEs), provide intensive TA to programs that serve children with disabilities across all early childhood contexts, support communities of learning for inclusion, identify and provide new resources on curriculum, assessment and strengthening interactions with children with special needs; and provide in-person training, TA and coaching directly to educators. With PDG-R, VA



will use Pilot data to **connect sites serving children with special needs to the TTACs and ensure children with special needs are fully addressed in PD and improvement efforts.**

VA will also leverage recent innovations in health and mental health PD focused on trauma-informed care (TIC) practices and addressing adverse childhood experiences (ACEs) with PDG-R, connecting key initiatives to Pilot efforts. In 2019, VA launched the VA Mental Health Access Program (VMAP) to help health care providers better support children with mental health issues by increasing access to child psychiatrists, psychologists, social workers and care navigators. VMAP has established a call center for physicians to access support for children with mental health needs and uses videoconferencing technology through a program known as Project ECHO to connect healthcare teams to a community of learners. As VA expands Pilots through PDG-R, VA will leverage this call center and videoconference infrastructure to **connect ECCE providers with TIC mental health resources for children as well as support collaborative, cross-disciplinary PD across the health, mental health and ECE sector.**

VA has launched 20+ trauma-informed community networks that help spread awareness, conduct trainings and workshops, support the implementation of TIC in ECCE and child-serving organizations across sectors, expand understanding the importance of **adverse childhood experiences** (ACEs), and connect practice across disciplines. Many Pilot leaders already sit on local trauma-informed leadership teams; through PDG-R they will leverage the LinkB5 data to increase coordination and develop approaches to better support ECCE providers with TIC resources and vulnerable families with ACEs.

**3. Aligning credentials, certifications, coursework.** Creating seamless PD pathways is a SP priority (3.3). VA recently built a system of 2+2 articulation that enables ECCE professionals to seamlessly move from an associate to a baccalaureate degree with teacher licensure with no loss

of credit. Before the pathway was developed, VA ECCE professionals had limited opportunities to advance along a higher education continuum. Individuals who earned an ECCE associate degree in a VA community college were able to access courses that had strong focus on competencies to support B-5 learning, but found that if they wanted to pursue a bachelor's degree in ECCE, they would need to repeat a year's worth of coursework to meet university requirements. The essential system reform, resulting from a thoughtful problem-solving partnership among ECCE faculty at six of VA's community colleges and five state universities, enabled agreements for a "universal" ~60-credit course block in colleges transferring seamlessly to a ~60-credit course block in universities. In addition, the VA Governor and General Assembly appropriate \$1M in state funds annually to support Pathfinders scholarships for competency-building coursework and promote registered apprenticeships for ECCE educators. The pathway provides **stackable and affordable career advancement opportunities** for the ECCE workforce across VA and a more **aligned, responsive PD system through higher education.**

To more effectively support a talented, continuously improving ECCE workforce, the Pilots will review local data on the workforce regularly and identify ways to link them to these stackable opportunities as part of individual PD plans to strengthen teacher-child interactions and improve the number of teachers with qualifying credentials.

To ensure efforts are tightly aligned with desired child outcomes, through PDG-R Virginia Commonwealth University (VCU) will continue its work with diverse stakeholders to unify disparate standards into new B-5 early learning and development standards. These standards will provide professionals, especially I/T teachers, with clear, actionable guidance on what children should know and be able to do and how to build these skills, as outlined in the SP (3.1). VA will also develop a suite of online modules on the revised standards and **aligned instructional tools**

with guidance on how to use across diverse settings, including for leaders, educators and families. VA will support IHEs and ECCE organizations to incorporate the new standards into preparation, PD and coaching and will fully align resources and contracts.

**4. Strategies to increase availability of qualified providers.** VA is employing strategies and devising concepts for ensuring a pipeline of ECCE workforce talent, including utilizing Pathfinders to support dually enrolled high school students' access to community college ECCE coursework. These students graduate from high school with a diploma and ECCE certificate or degree, ready to apply their skills in an ECCE program. **Registered apprenticeships** are another strategy to build VA's ECCE workforce through on-the-job training, mentorship, and college coursework paid for by Pathfinders. Apprentices are guaranteed wage increases at stages throughout the two-year apprenticeship which is compelling for a low-wage workforce. With PDG-R, Pilots will access these resources to expand and retain VA's bench of qualified teachers.

The NA showed **47% of Virginians live in a child care desert, including 50% of Hispanic/Latinx families, 61% of people in low-income neighborhoods, and 63% of people in rural areas.** This includes VA's **11 tribal communities, most located in rural areas.** In response, VA set a specific SP priority (1.2) for underserved communities and established a workgroup, led by VDSS, to develop and implement strategies to build the supply of child care, especially in rural areas (pp.9-10). This stakeholder workgroup, including providers, developed a three-tiered framework for increasing supply: 1) entice more providers to participate in VA's child care subsidy program to provide affordable access; 2) encourage participating providers to increase the number of children served, especially I/T; and 3) incent new providers to the market.

Moving forward, VA will use new CCDBG funding to implement strategies that address each of these tiers, including launching targeted recruitment, providing micro-grants and/or 0%

loans to support start-up costs, expanding shared services networks to increase the capacity of FCCBs, and implementing tiered reimbursement to reward QI and more fully cover the costs of quality, which will also help address SP Strategy 3.4. With PDG-R, VA will integrate this work in Pilots focused on rural areas, ensuring local leaders and families use LinkB5 data to inform decisions about where supply is needed and how to strengthen quality.

<b>Months</b>	<b>Activity Four: Milestones and Activities</b>	<b>Responsible</b>
1-12	<ul style="list-style-type: none"> <li>Expand measurement/improvement system; expand CLASS observations, individualized PD plans to every Pilot educator; enter Pilot data in LinkB5, support capacity to use data for improvement</li> <li>Expand aligned pathways of PD supports for ECCE workforce through higher ed articulation efforts and coaching opportunities; target resources to Pilot educators</li> <li>Refine educator incentives program, narrowing to non-school personnel and lengthening to 3-year term</li> <li>Link practitioners with cross-disciplinary PD opportunities</li> <li>Assess potential for LinkB5 to strengthen VA’s PD registry; refine</li> <li>Provide innovation funds to test strategies to increase supply of qualified educators and of ECCE sites, especially in child care deserts, rural communities, B-3</li> </ul>	VDOE, VECF, VDSS, Pilots  VDOE, VECF, VDSS, Higher Education VDOE, VECF, UVA  VDSS, VDOE  VECF
13-24	<ul style="list-style-type: none"> <li>Expand and refine measurement, improvement system (see above)</li> <li>Expand aligned pathways of PD supports for the ECCE workforce (above) and connect PD providers for more efficient use of resources; target resources to Pilot educators, especially for supporting ELLs, TIC, children with disabilities, and I/T</li> <li>Expand and systematize cross-disciplinary PD practices</li> <li>Assess results of innovations; refine strategies, continue to invest</li> </ul>	VDOE, VECF, UVA, VDSS, Higher Education  VDOE, VECF, VDSS, Higher Education
25-36	<ul style="list-style-type: none"> <li>Scale statewide and sustain unified measurement and improvement system for all VA’s ECCE educators and programs</li> <li>Complete 3-year educator incentives program; use results to inform strategies for expanding and sustaining statewide</li> <li>Assess performance of PD efforts and impact on qualified, stable, continuously improving ECCE workforce</li> <li>Scale and sustain statewide PD system that is accessible, affordable, high quality, and supports a diverse B-5 workforce including across specializations (e.g., I/T, ELLS) and disciplines (e.g., early intervention, TIC) and integrates resources efficiently</li> <li>Scale successful supply innovations</li> </ul>	VDOE  UVA  VDOE, VECF, UVA, VDSS, Higher Education  VDOE, VDSS, VECF

**Activity Five: Improving Overall Quality and Service Integration, Expanding Access**

*1. Needs identified from the NA/SP and how findings relate to the proposed activities.* The NA identified the need for QI, access to program assessments to increase understanding of quality, and QI supports (pp.5-6). VA's **PDG Pilot strategy has been designed to address VA's unique context and leverage existing local partnerships, especially to serve the most vulnerable and often disconnected families: those in rural areas and/or tribal communities, who are homeless, have ELLs, and/or children with special needs.** Expanding and strengthening Pilot efforts address six of VA's SP priorities (3.2, 3.4, 5.1, 5.2, 5.3, and 5.4). Through PDG-R, VA will engage the SAC and Impact Workgroup on Pilot progress to ensure local, family-driven efforts deeply inform state strategy and policy-making.

The plan for improving VA's ECCE system started with PDG investment in 10 Pilots that are actively transforming the quality and delivery of ECCE systems in their communities, targeting publicly funded providers to prioritize vulnerable children. The Pilots are recruited, selected, coordinated, and guided by VECF, which has a strong track record of implementing local and regional systems and innovation initiatives, with collaborative support in relevant elements from VDOE (PDG Lead/responsible agency, coordinated enrollment strategies, tools and templates, state infrastructure and reform) and UVA (surveys, incentives strategies, LinkB5, evaluation). The Pilots have **three key functions: build relationships, increase access, and strengthen quality; with PDG-R, these functions will be expanded to emphasize family engagement.** To accomplish these functional goals, the PDG Pilots convened partners and families; completed baseline assessments on all teachers in every classroom/FCCH in the community (including all age groups, multi-lingual classrooms and inclusive classrooms); used these baseline assessments to create individualized PD and improvement plans for every teacher; used data to understand the strengths and needs within each community and inform best QI investments; self-assessed on

enrollment practices and developed improvement plans across rural, urban and suburban settings, and worked with local families and leaders to make systems more efficient and responsive both locally and statewide, including leveraging local funds from CCDF, Head Start, local school divisions and other partners toward improving teacher-child interactions.

To reach every I/T and preschool classroom and engage the most vulnerable families, VA will expand this effort, **using subgrants to scale this shared vision for quality statewide** and facilitate needed reforms related to enrollment, families' access to other services, and QI investments and supports within each and every community. Pilots will address quality and systems reform comprehensively, improving the skills of teachers in effective interactions, and ensuring low-income, disadvantaged and other vulnerable families have access to better quality ECCE programs across the B-5 mixed delivery system. By convening diverse local leaders, **VA can also strengthen local systems in enrollment, integrate social services, health, mental health, home visiting and other services, and build capacity in underserved communities.**

Ultimately, **VA will involve every community** in this effort, thus ensuring VA's most vulnerable families and children are included – children from low-income or homeless families, I/T, children with disabilities, ELLs, and children living in tribal and rural communities. More than 263,000 vulnerable children will be impacted through the PDG-R grant. These children will include ~215,000 who are in low-income families; ~57,000 who have disabilities; and ~73,000 who are ELLs. Of these, ~243,000 children will be both living in low-income families and have disabilities. Pilots will also include the children of the 6,000 tribal members.

With PDG-R, VA will specifically focus on including VA's 11 tribal communities. Of the 7 federally-recognized and 4 other tribal communities in VA, none are currently included in VA's

Pilots. Recognizing this challenge and opportunity, VECF, in partnership with the Governor's Office, will do explicit outreach to these communities to ensure they can participate.

**VA defines a subgrant as funding to a community-level organization to indirectly improve the quality of local programs by enhancing early childhood systems and infrastructure.** With PDG-R, VA will provide three types of subgrant funding: 1) core activities for new and existing Pilots; 2) foundational for new Pilots; and 3) innovation. In Year 1 of PDG-R, VA will subgrant \$5.6M to Pilots which **represents 44.5%** of its overall PDG-R budget.

***2. Detailed and clear plan for improving local capacity; proposed project period.*** Through PDG-R, VA will refine its successful PDG Pilot model to: expand the focus on coordination, access, quality and family engagement; involve every VA community; and ensure sustainability beyond PDG-R through reallocating existing funds more effectively. PDG-R subgrants will help accelerate VA's efforts to transform its ECCE system and redesign existing investments to focus on what matters most: the interactions between adults and children and supporting families with more responsive ECCE systems connected to comprehensive services. State and local leaders strongly believe that systems for young children and their families must be both evidence-based and built to be responsive to families' needs; thus the state's role should be to help establish the model, set high standards reflective of best practices, and provide funding to support localities to *build, expand, and sustain* responsive local systems.

This theory of change was implemented in the initial PDG and the results have been remarkable. With PDG funding, VA: 1) launched 10 Pilots covering 20% of VA jurisdictions' ECCE programs, including centers, FCCH, Head Start and school-based preK; 2) conducted program assessments of nearly 2,000 classrooms and teachers/FCCH providers in a representative mix of the diversity of the state including rural communities; 3) targeted an

unprecedented focus on adult-child interactions coalescing previously diffuse local efforts on PD, QI and other efforts toward focusing on quality interactions and developing the skills of the workforce; and 4) revitalized local partnerships with innovative new ideas and bold new actions to develop more responsive programs and more engaging systems that better meet family needs. Through the initial PDG, VA gathered extensive data through LinkB5, which includes access and quality information on I/T and preschool classrooms and educators, as well as leader, teacher and family surveys administered in different languages to ensure a broad range of perspectives.

PDG Pilots are selected through a competitive process; for 2019, VA selected Pilots from communities with experience in mixed delivery systems. The first cohort included a diverse set of communities in rural, urban and suburban communities, including those serving large numbers of ELLs. For the second cohort, **VECF will conduct a rigorous statewide application process** in early 2020 to select communities best poised to complete the core Pilot activities while assuring that **all regions of the state** and at least one **tribal community** are represented. Each year, VA will provide funding to support these core Pilot activities and offer ongoing training and TA to Pilot leads. VA has developed a collaborative model for supporting subgrantees; PDG Implementation Partners VDOE, VECF, UVA, and VDSS work together to support communities and set the calendar for core activities and required deliverables with key weekly, monthly and quarterly state supports and supplemental resources for specific activities (e.g., LinkB5).

Currently, VECF coordinates communications, training and TA to Pilots; sending a weekly email to leads, conducting weekly update and support calls and hosting quarterly full-day, in-person TA sessions to prepare communities to complete core activities or build specific skills such as analyzing and using new data to inform improvement efforts. VECF, in collaboration with VDOE, UVA, and other agencies and partners, will continue providing TA, year over year,



to Pilot cohorts. Through this hands-on process with SMART objectives and specific deliverables required throughout the grant period, VA will ensure Pilots to achieve expectations.

**3. Justify project’s length and subaward strategy for greatest impact.** Heavily informed by PDG and family/stakeholder feedback, VA will dramatically expand the Pilots, scaling statewide to every VA community by the end of PDG-R. In year 1, VA will provide a total of \$5.6M in PDG subgrant funding to support up to 20 Pilots and cover 40% of the state for one year to achieve three objectives: 1) provide **core coordination, access, quality and family engagement** activities for B-5 mixed delivery systems for current and new Pilots (\$4.1M); 2) **incentivize teachers and leaders** and provide foundational supports for new Pilots (\$960,000); and 3) incent select Pilots via **innovation funding** to pursue cutting edge approaches to coordinated enrollment, shared services, strengthening quality and/or deepening family engagement in order to develop a set of statewide exemplars (\$500,000). A description of the three objectives follows:

<p><i>Core Pilot Activities:</i></p> <p><i>\$4.1M</i></p>	<p>In Year 1, VA will provide \$4.1M in funding to Pilots, new and expanding, to complete the four core annual activities of 1) convening and coordinating; 2) measuring and increasing access; 3) measuring and strengthening quality; and 4) deepening family engagement. Pilots will use these funds to:</p> <ul style="list-style-type: none"> <li>• Build capacity to strengthen relationships, convene partners including all ECCE providers as well as health, mental health, home visiting and other human services providers;</li> <li>• Conduct CLASS observations of all I/T, preschool classrooms and FCCH and ensure all quality information such as teacher-credential and curriculum used is entered in LinkB5;</li> <li>• Self-assess local efforts to coordinate information, eligibility and enrollment processes as well as integrate financing to increase access for vulnerable families and children;</li> <li>• Self-assess family engagement and transition efforts across programs, from home to ECCE and from ECCE to elementary school;</li> <li>• Support leader, educator and family surveys to track progress and ensure family and educator input informs improvement efforts; and</li> <li>• Use all of the above data to develop and implement comprehensive, cross-sector plans to increase access, coordinate enrollment, strengthen quality, and more deeply engage families</li> </ul>
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<p><i>Foundational Supports for New Pilots:</i></p> <p>\$960,000</p>	<p>VA will provide \$960,000 in (1 year) start-up funding to Cohort 2 Pilots to:</p> <ul style="list-style-type: none"> <li>• address one-time costs such as training leaders and educators as well as incentivizing participation, especially for publicly-funded FCCHs and child care centers that serve the most vulnerable families and children</li> <li>• ensure FCCH, center, Head Start, and school-based educators receive foundational training on CLASS before they are observed, leaders are trained on LinkB5 and are encouraged to become CLASS-reliable, and sites receive small stipends to purchase materials needed to improve quality</li> <li>• incent providers, especially those serving the most vulnerable children, and who are currently disconnected from many supports and services.</li> </ul> <p>Each Pilot will be required to submit a plan and budget on how they are using these funds to achieve these specific, measureable and realistic objectives for their educators within the one-year period.</p>
<p><i>Pilot Innovation Funding:</i></p> <p>\$500,000</p>	<p>Facilitating innovation is a priority of the SP. VA tested awarding innovation funding in PDG by providing additional resources to one Pilot to fully coordinate enrollment and strengthen family engagement (Coordinated Enrollment Bonus). This work will serve as a state exemplar, and with PDG-R, VA will document steps taken and lessons learned to replicate statewide. Building off this PDG success, VA will offer Pilots the opportunity to apply for up to \$500,000 in innovation funding for one year to utilize their data to identify and implement evidence-based, innovative practices to increase access, improve quality and/or deepen family engagement; and articulate how this innovation will help address community needs, especially their most vulnerable populations such as I/T, children with special needs, ELLs, and those living in child care deserts. Communities will apply to VECF and must agree to work with UVA to track implementation of innovations so models can be disseminated and adopted by others. VECF will run a competitive process, will limit eligibility to communities that have demonstrated success and will require communities to produce plans with specific, measurable and realistic innovation objectives for the one-year grant period.</p>

For Years 2 and 3, VA will expand to 70% and 100% of the state respectively, including all 11 tribal communities, providing core, foundational and innovation funding based on actual costs and lessons learned from prior year while ensuring that VA does not exceed the subgrant cap.

<b>Months</b>	<b>Activity Five: Proposed Activities and Milestones</b>	<b>Responsibility</b>
1-12	<ul style="list-style-type: none"> <li>• <i>Expand</i> Cohort 1 Pilots: add focus to family engagement; complete annual CLASS assessments on ~1,950 classrooms/FCCH, provide personalized PD to ~3,900 teachers based on CLASS scores; engage community partners/families to improve systems; enter data in LinkB5; connect families to comprehensive supports; apply for innovation grants</li> <li>• <i>Build</i> (recruit and competitively select) Cohort 2 Pilots: provide TA on CLASS, LinkB5; complete baseline CLASS assessments</li> </ul>	VECF, VDOE, UVA, Pilots

	<p>on ~2,000 classrooms/FCCH, provide personalized PD to ~3,900 teachers based on scores; develop individualized PD plans for teachers; engage community partners</p> <ul style="list-style-type: none"> <li>• Distribute incentives to 5,800 teachers and 850 sites</li> <li>• Evaluate results from Pilots (see PPEP on pages 46-50) and identify ways to streamline systems, improve enrollment, better meet family needs, improve impact of QI supports</li> </ul>	VECF, UVA
13-24	<ul style="list-style-type: none"> <li>• Provide funds and TA to continue Cohort 1 (sustain), Cohort 2 (expand) and Cohort 3 (build) to serve 70% of the state</li> </ul>	VECF
25-36	<ul style="list-style-type: none"> <li>• Provide funds and TA for Cohorts 1, 2, 3 and add Cohort 4 to serve 100% of VA with B-5 mixed delivery systems.</li> </ul>	VECF

**4. Overall SMART objectives and deliverables.** The goal of the PDG-R is to provide a more responsive, higher quality ECCE system for VA’s B-5 children and families. The specific objectives by the end of the PDG-R term are: expand the PDG Pilots to include 100% of the state’s ~9,800 ECCE classrooms throughout the state; improve the quality of 100% of publicly-funded ECCE programs through baseline and annual program and individualized PD plans for ~20,000 teachers; streamline the ECCE enrollment process to make it more responsive to family needs; streamline access to other services to meet family needs; engage VA’s 11 tribal communities and better serve its 6,000 tribal members and their families; realign up to \$15M in CCDF, state preK, school division, and other funding to focus on proven PD and other QI investments; sustain the improved B-5 mixed delivery system after the conclusion of PDG-R using more effectively invested public funds.

**5. Number of program, child and family beneficiaries.** With initial PDG funding, VA is serving 575 programs, 1,944 classrooms/FCCH, and 3,877 teachers, FCC providers; an estimated 68,000 vulnerable children B-5 and their families are benefitting. Through PDG-R, VA will:

Year	Number of Beneficiaries
Year 1	Serve 40% of the state impacting 1,155 programs, 3,904 classrooms, and 7,808 teachers; ~125,000 vulnerable children and their families will benefit
Year 2	Serve 70% of the state impacting 2,021 programs, 6,831 classrooms, and 13,662 teachers; ~185,000 vulnerable children and their families will benefit.

Year 3	Serve 100% of the state: 2,887 programs, 9,759 classrooms, 19,518 teachers; more than 260,000 vulnerable children and their families will benefit.
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## Activity Six: Monitoring, Evaluation, and Data Use for Continuous Improvement

### Data Integration, Management, and Data Use

*1. Status of data collection, management and use.* VA has actively focused on building an early childhood integrated data system (ECIDS) through PDG; several pieces are in place, several are in process, and detailed plans have been completed to build out core functionality; see page 42 for chart of status by aspect). With PDG-R, VA will have greater statewide ECIDS capacity and the ECIDS will connect to the existing VLDS, a fully operational integrated data system. With PDG-R, VA will: 1) **link child-, family-, teacher-, and program-level information** via LinkB5 to understand the ECCE experiences of VA’s children and the supports and services accessed by families; 2) integrate **ECCE data with health, social services, and other early childhood data** systems; 3) enable more **dynamic warehousing of data around key indicators** (i.e., changes in enrollment, teacher, etc.) and 4) connect these experiences to **longitudinal outcomes** in the VLDS to support transitions not only across early childhood programs but also across the ECCE and K-12 systems to inform policy and program decisions. VA will double the number of sites utilizing LinkB5 in 2020 and will reach statewide scale by the end of PDG-R. In terms of *build, expand, and sustain*, UVA will expand LinkB5’s capacity based on lessons learned, onboard thousands more users, reach scale and work with sites and communities to sustain the LinkB5 infrastructure and practices, including using LinkB5 to establish an ECIDS through VA’s longitudinal data system, measure impact and inform data-driven decision making.

*Current State of Data Systems* VA has had limited localized data about access (available classrooms, slots, etc.) and quality (CLASS scores, teacher credentials, etc.) across all B-5

programs, especially in child care and FCCH settings. No data system in VA captures ECCE data consistently across the mixed delivery system, and no data system connects child level data to classroom experiences to provide a more precise view of how specific classroom experiences impact children in the short- and long-term. To solve these gaps, **ECCE data integration efforts focus on local data collection, analysis, and decision making** by enabling Pilot communities to collect information through a single data portal (LinkB5) and to use data more dynamically.

VDOE used PDG funds in the current year to contract with UVA to develop and launch LinkB5 in close collaboration with Pilots. Users at three levels can add data to LinkB5 through a secure user management interface: 1) Pilot leads (e.g., Smart Beginnings directors); 2) site leads (e.g., family home providers, Head Start directors, etc.); and 3) teachers/aides. LinkB5 users can log in and enter information on the location, type, capacity, cost, quality rating, accreditation, and compensation scale of every program; credentials/experience of every director and teacher; and the quality of every classroom as measured by the *CLASS*. LinkB5 is operational in the 10 Pilot communities incorporating data from ~600 sites and 2,500+ educators.

**2. Early childhood data systems and linking data.** With PDG-R, VA will build out LinkB5's capacity and functionality to 1) include **child-level data**, 2) provide **community- and site-level reporting** (which will enable rich user-friendly information for families) and 3) enable more **dynamic access to data around key indicators** (i.e., changes in enrollment, teacher, etc.). UVA will work collaboratively with sites, communities, and agencies to sustain and continuously improve LinkB5 infrastructure and practices, including using LinkB5 to measure impact, engage families, and inform local decision making. VA will also be able to connect LinkB5 data to other service systems (e.g., health, home visiting, social services) via the VLDS, which incorporates data from nine state agencies including the VDOE, VDSS, the VA Community College System

(VCCS), and the State Council of Higher Education for VA (SCHEV). VA's home visiting and early intervention programs are working to connect their systems to VLDS. Within PDG-R's term, VA will link different early childhood service data, link children to families and ECCE sites, and track children longitudinally from birth through college and career through the VLDS.

VA also completed two PDG supplemental projects this year to better understand the state's overall data system infrastructure, resources, and barriers to building out an ECIDS connected to the VLDS, and to build a case for a fully functioning ECIDS. 1) VA analyzed current data integration efforts and assessed feasibility of establishing an ECIDS through full implementation of LinkB5 and the technical improvements needed to enable interface with VLDS. A national expert from Child Trends reported on VA's current culture around data sharing, data integration efforts, and gaps in data integration work. The SAC and Impact Workgroup responded positively to the expert's recommendations for solidifying the vision, leadership, governance decisions, and resources needed for a VA ECIDS.<sup>1</sup> VA will use \$25,000 to continue work with Child Trends to convene state and local partners to chart a clear vision and path forward for full implementation of ECIDS. 2) VA funded UVA to conduct an analysis of VLDS' capacity to support an ECIDS and produce a distinct count of children, birth to school entry, served by one or more ECCE programs. The analysis concluded that integration and analysis of ECCE data is achievable using the VLDS, though significant effort will be required to collect and connect the data.<sup>2</sup> VA is committed to achieving this capability through PDG-R.

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<sup>1</sup> Epstein, D. and Maya Cook. (2019). *Recommendations for Improving Early Childhood Data Integration in VA*. Child Trends.

<sup>2</sup> Schroeder, S. and Nair, Devika. (2019). *Analysis of the Capabilities of the VA Longitudinal Data System to Support Baseline Distinct Counts of Select Data Sets to Support the Establishment of a VA Early Childhood Integrated Data System*.

VA is well-positioned to connect multiple ECCE data elements across agencies because of the VLDS. The VLDS employs data sharing agreements across agencies and a recording-matching methodology to integrate data across programs and agencies for children and already includes all children in the public school system, including PreK, IDEA Part B, VKRP (KEA) and K-3. VLDS also already includes data on child care subsidy, TANF, SNAP, foster care, and Medicaid. VLDS can match data based on a child's unique K-12 identifier or state testing identifier (STI) or use a small number of common data elements to match records of families and children across data sets with an exceptional amount of precision. LinkB5 has been designed to enable the collection of these elements to allow for the inclusion of its data (linkages) in the VLDS. VA will use PDG-R innovation funds to test nimble ways to fully build out and ensure the capacity to use common identifiers to enable tracking of children from early childhood services into school systems and beyond. The UVA report built confidence in the feasibility of data integration, and the data sharing agreements that exist between agencies for the VLDS provide a blueprint for the B-5 ECCE mixed delivery system. PDG-R will enable VA to link or have a plan for linking **child care subsidy and provider data, Head Start, state preK, public K-3 education, home visiting, early intervention and early childhood special education, as well as social services, including TANF, Medicaid, CHIP, SNAP, WIC, and Healthy Start.**

*Community Data Collection* Through PDG, VA has significantly expanded its ability to capture and share baseline community level data for children across multiple ECCE settings. As discussed above, LinkB5 is a vehicle for the collection and analysis of data down to the classroom level and to offer decision-makers greater access to consistent data.

*Data Literacy* In PDG, VA has been assessing and increasing data literacy and the technological capacity of ECCE stakeholders, especially in child care and FCCH settings to build

the foundation for VA’s vision of localized data-driven decision making. LinkB5 contains a wealth of information on programs, administrators, teachers, and children that paints a clear community-level picture of access, cost, quality, and coordination of ECCE; with VLDS, the picture will broaden to include health, social services, K-12 and other inputs. To support decision-makers, VA has established a **robust infrastructure to build the technical capacity and data literacy**. UVA devised an onboarding strategy and spent time with end users during the design-build process to best understand users’ needs. VA designated local “ambassadors” to support programs and educators to enter data, building their capacity through a variety of modes, including site visits, webinars, video tutorials, printed materials, weekly calls and other outreach materials. VA created a hotline and online chat for LinkB5 that any user can use to receive assistance and a user-friendly manual, and is tracking all questions received to produce a summary on data literacy needs to support statewide scaling. Finally, UVA hosts in-person “datapalooza” events to facilitate full participation in LinkB-5 and opportunities for training and TA. To support the onboarding of several thousand more users in 2020 and reach statewide scale by 2022, VA will use PDG-R to build technical capacity and data literacy of statewide.

*Data Governance* VLDS is the backbone for multi-agency data governance in VA. VLDS provides a **common data dictionary, governance and decision-making structure, accountability and relevant protections and safeguards, and data-sharing agreement** protocol. VA will leverage this existing structure as it formalizes data governance guiding vision, coordination, security, and appropriate use of ECCE data. VA will build on recent legislative commitments in Senate Bill 580: *Government Data Collection and Dissemination Practices Act*<sup>3</sup> to facilitate the sharing of de-identified data across state agencies (2018). The legislation

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<sup>3</sup> [Senate Bill 580 Government Data Collection and Dissemination Practice Act.](#)



established a state-level data governance structure by creating a Chief Data Officer (CDO) position to support data coordination along with a Data Sharing and Analytics Advisory Committee. With the CDO and Attorney General's Office, VA can utilize existing structures and protocols for VLDS to facilitate implementation of VA's ECIDS within the PDG-R term.

*Unique Identifiers* As referenced, VLDS uses state testing identifiers (STI) as de-identified unique identifiers and can also use probabilistic data matching based on several demographic fields. In PDG-R, VDOE will hire personnel and work closely with Pilots to secure unique indicators for publicly-funded children under 5 and add them to LinkB5.

**3. Status or plans for unduplicated count.** Currently, VA cannot provide an unduplicated count of children receiving B-5 services but will do so by end of PDG-R term. In PDG-R, VA will either secure STIs for publicly funded children B-5 and add them to LinkB5 or add required demographic fields to LinkB5 to enable probabilistic matching. **Adding child-level data, scaling LinkB5 statewide, and integrating with the SLDS will enable VA to get an unduplicated count for ECCE for 40% of the state in Year 1 and a full statewide count by end of PDG-R.** Starting at the community level, Pilots will be able to use the unduplicated counts, along with the linked health, social services, home visiting, early intervention and K-12 data, to identify and target unserved, underserved or emerging populations. Communities will conduct unduplicated counts annually so they can track progress on outreach and intervention initiatives, whether the need is to reach more families or to better connect families to needed services. Community and site leaders will be able to look at their data in new and different ways, use it to align resources and supports, and deeply engage decision-makers and stakeholders including families. At scale, policymakers will conduct similar activities with statewide data.

The chart below summarizes the status of VA's data collection, management and use:

Aspects of IV.2 Project Description - Activity 6	Status and Timeline
6.1 Progress in developing ECIDS	In planning process; operational by 2022
6.2 Extent to which specific data captured as part of ECIDS/SLDS	Child care – included in VLDS IDEA Part B – included in VLDS IDEA Part C – in planning process Home Visiting – in planning State preK – included in VLDS Head Start and Early Head Start – in planning Public Education K-3 – included in VLDS Other programs – some operational; some in planning process (p.39)
6.3 Early childhood data systems link data	In planning process; operational by 2022
6.4 State or communities collect and use data	Operational in Pilots; statewide by 2022
6.5 State is assessing data literacy of key users	Operational in Pilots; statewide by 2022
6.6 Data governance	Operational through VLDS
6.7 Unique identifiers	Operational through VLDS
6.8 Unduplicated count	In planning process; statewide count by 2022

Monitoring, Evaluation and Continuous Improvement

*1. Tools and methods to promote accountability across the B-5 mixed delivery system.*

Identifying accountability as a need in its NA, VA dedicated a goal(4) to *Aligning and unifying responsibility for establishing standards, coordinating services, maximizing resources, and improving outcomes for children 05-, in partnership with local communities* with 4 discrete priorities (pp.9-10). In response, VA has sought to **integrate accountability into all aspects of PDG-R as it builds, expands and sustains the performance of its B-5 mixed delivery system.** In line with PDG, Governor Northam has explicitly focused his administration on accountability; Executive Directive 4 calls for consolidating oversight and accountability of the state’s mixed delivery system at the VDOE; development of a unified rating and improvement system; and an assertive goal to by 2025 ensure quality ECCE for all at-risk 3- and 4-year old children, holding **VA’s Chief School Readiness Officer accountable for these results.** The Chief also has lead responsibility for PDG’s vision and implementation and will strategically leverage and align the state’s investment and accountability to PDG-R.

In recent years, VA has strengthened its accountability tools and measures, including establishing the SAC, revising and expanding VA Quality (QRIS), publishing a Children’s Budget, convening an Integrated Financing Workgroup to better maximize resources, adding a school readiness page to the state’s elementary school profiles (funded by the prior Preschool Expansion Grant), and launching childcareva.com, a website for parents that included health and safety records on child care providers. In response to a study of the effectiveness of VA’s ECCE programs, VA’s legislature established greater accountability for state preK, including a CLASS observation in every 4-year-old classroom by 2020, which complements PDG-R plans to similarly support teachers in every publicly-funded B-5 ECCE classroom with an observation and PD for improving effective interactions. Yet, as noted in the NA, these tools do not fully establish clear accountability for actions and outcomes across the B-5 mixed delivery system (pp.5-6). These tools also focus on access and quality; there are few, if any, system-wide expectations or measures for family engagement or transitions; as noted in the NA, VA lacks a comprehensive framework or requirement for supporting engagement and transitions (p.6).

With PDG-R, VA will establish **several new tools and mechanisms to ensure accountability**. A summary of these tools and mechanisms with cross-references follows below:

<b>Tool/Mechanism</b>	<b>Description and Cross-References</b>
Impact Workgroup and Family Council	VA has or will create new stakeholder entities that receive data, shape policy and practice and ensure that recommendations that go to VA’s SAC reflect the needs and perspectives of diverse ECCE constituencies, especially families (pp. 8,18-9,51-53,Appendix p.A4)
Dashboard	VA will produce a statewide Dashboard to review annually with SAC; Governor’s Office will hold Chief School Readiness Officer and respective state agencies accountable for making progress against strategic priorities; VA will evaluate Dashboard impact as part of PPEP (pp.46-50).
LinkB5	Through PDG, VA launched LinkB5 to capture access and quality data that at scale will enable greater accountability at state and local levels; VA can use LinkB5 to track participation, accuracy, performance and progress over time at state and local levels; VA will use LinkB5 as the foundation for its uniform measurement and improvement system across the B-5

	mixed delivery ECCE system to ensure providers serving vulnerable children (and QI entities that serve them) are supported and accountable for providing high quality interactions and experiences (pp.20-25).
ECIDS/VLDS	VA will add child-level data to LinkB5 at the same time that home visiting, early intervention and other services connect their data with the VLDS, enabling the integration of both early childhood and longitudinal data. VA, through the Governor’s Office and Chief Data Officer, will use this information to identify and eliminate gaps, reduce duplication, and hold public entities accountable for improving short- and long-term outcomes for vulnerable children and families (pp.36-42).
Subgrant Monitoring and Improvement	With PDG-R, VECF carefully monitors subgrant performance, ensuring each community is accountable for performing core functions such as convening partners, connecting with comprehensive services, and measuring and improving access, quality, and family engagement. VECF has Pilots complete assurances and then monitors performance through quarterly reporting, completion of deliverables (e.g., coordinated enrollment self-assessments), LinkB5 and budget oversight. UVA will also evaluate impact of Pilots or subgrants as part of PPEP, including tracking and sharing educator and family perspectives (pp.29-35).
VKRP	VKRP, VA’s new kindergarten assessment, is used with all children in public schools at beginning and end of year starting in 2019; while VKRP will <b>not</b> be used for high stakes purposes, it provides a statewide baseline, enables VA to measure and track impact of ECCE, especially for vulnerable populations and link results with educational outcomes (p.16)

Ultimately, VA seeks to link children’s demographic data with their early childhood experiences, specifically duration and quality, and their short- and long-term outcomes at both the state and local level, thus enabling VA to better align and allocate resources and support public and private partners across the state to drive continual improvement in access, quality and family engagement to improve child and family outcomes.

**2. Areas of fragmentation and overlap and how state will address.** As described in Activity 1, VA’s NA highlighted numerous areas of fragmentation and overlap in the state’s mixed delivery system (pp.5-6). Through PDG-R and ongoing early childhood efforts, VA will build, expand and sustain efforts to reduce fragmentation and overlap by 1) aligning and strengthening governance and stakeholder engagement at the state level (pp.50-53); 2) funding Pilots to expand partnerships, better coordinate services, integrate financing and share best practices and support

aligned improvement across B-5 settings at the local level (Activities 3-5); 3) enhancing and scaling LinkB5 statewide and connecting LinkB5 to other early childhood systems and the VLDS (pp.36-42) and 4) thoughtfully evaluating how well Pilot efforts reduce fragmentation and overlap through the PPEP (pp.46-50). Governor Northam also established a Children’s Cabinet and issued Executive Directive 4 to reduce fragmentation and overlap across state agencies that serve B-5 children; Chief Conway is driving this work in parallel with PDG-R efforts.

VA’s SP cites 7 strategic priorities to be used to address fragmentation and overlap; the following chart illustrates how VA will use PDG-R to make progress in each of these areas:

<b>SP#</b>	<b>Addressing Fragmentation through PDG-R with Cross-References</b>
1.1	VA will collect new access and quality information for all publicly-funded B-5 programs and develop tools to better communicate this information to families. Currently families have to visit at least 4 websites (p.16).
1.3	VA has developed an integrated financing toolkit for Pilots; will provide funding technical assistance to Pilots to support local implementation; will measure the true costs of care, especially for infants and toddlers, children in rural and underserved areas; and will test innovative approaches such as shared services to reduce overlap and maximize efficiencies (pp.15-17, 66-68).
2.1	VA has developed a coordinated enrollment self-assessment and toolkit; will fund and offer TA to Pilots to support local implementation; will use family survey to track impact; will provide innovation funding and other resources to help Pilots fully coordinate ECCE, health, mental health, social services and other comprehensive services to create seamless experiences that help families thrive (Activity 3; Bonus).
4.1	With consistent and universal measurement of access, quality and family engagement across all VA communities via the Pilots, VA will be able to use data to drive the alignment and maximization of federal and state funding to increase equitable access, coordinate eligibility and financing, enhance PD supports, incent educators and establish clear expectations and supports for family engagement (Activity 5).
4.3	VA will drive transparency through deep engagement of diverse stakeholders including the SAC, Impact Workgroup and Family Council (pp.50-53); will publicly track progress and address gaps using the Dashboard and PPEP elements (pp.46-50); support Pilots to conduct fiscal maps and integrate financing to maximize resources and expend all available funds for ECCE (pp.15-17).
5.1	VA will provide PDG-R subgrant funding to communities to build infrastructure to convene early childhood providers, expand partnerships to health, mental health, home visiting and social services, measure and improve access, quality and family engagement in an aligned manner, enabling VA to better leverage and reduce overlap across state and federal QI investments (Activity 5).

5.4	VA has established a public-private, interagency governance structure with a clear decision-making path as well as a framework for unified and consistent messaging and engagement to stakeholders at state and local levels (pp.50-53); will provide innovation funding to Pilots to implement shared services to better serve infants and toddlers in underserved areas (I/T Bonus); will provide technical assistance to Pilots to establish more formal governance structures and mechanisms to sustain their efforts and improve school readiness at local and regional levels beyond the PDG-R.
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**3. Approach and Timeline for Program Performance Evaluation Plan (PPEP).**

*Purpose, intended audience, and evolution of evaluation* VA’s PDG-R PPEP will have five sub-components: Dashboard, Pilot Evaluation, Family Survey, Workforce Survey, and Educator Incentive Impact Evaluation. The PPEP has evolved based on lessons learned from PDG; the initial PPEP focused on three sets of evaluation activities, informed by the NA: 1) data collection and analysis of Pilots to measure implementation progress, using LinkB5 to provide a snapshot of capacity, quality, and cost of ECCE in the Pilot communities; 2) Family and Workforce Surveys to better understand experiences, challenges, and opportunities within local ECCE systems; and (3) evaluation, including a randomized control trial (RCT), of the innovative Educator Incentive approach described (p.21-22).

The table below provides detail on elements of the revised PPEP:

<b>Dashboard</b>	
Purpose	Track the progress of VA in increasing equitable access, engaging families, strengthening ECCE workforce quality, ensuring accountability across ECCE system and promoting local innovation
SP Alignment	Covers all 5 SP goals
Sample	Will use statewide data where possible; if no statewide data is available, Pilot data will be used
Data Source	Multiple state databases ( <i>existing</i> ), state budget ( <i>existing</i> ), LinkB5 ( <i>new</i> ), survey data ( <i>new</i> )
Methodology	Identify most reliable and consistent baseline point of comparison (e.g., October 1) for multiple statewide data sources and use that for both statewide and Pilot indicators; define indicators and work with agency data personnel to quantify limitations of data; compare LinkB5 data with existing statewide data for audit purposes; update annually and present to SRC and Impact Workgroup
Analysis	Descriptive statistics, group and geographical comparisons, longitudinal analysis
<b>Pilot Evaluation</b>	

Purpose	Understand the impact of PDG B-5 Pilot activities on leaders, educators, community partners, families and children
SP Alignment	1.2 / 1.4 / 2.1 / 2.3 / 2.4 / 2.5 / 3.2 / 3.3 / 4.4 / 5.1 / 5.2 / 5.3 / 5.4
Sample	Communities and ECCE providers participating in Pilots; 20% of state at outset with full state data available for comprehensive or sample analysis by 2022; Randomly selected, stratified samples of LinkB5 data will be used for validation and auditing; Focus groups would also be selected from stratified sampling of communities, based on both geography (i.e., rural/urban) and demographics (i.e., ELLs, children with special needs, very low income) with a diverse mix of providers and partners.
Data Source	LinkB5 ( <i>new</i> ), survey results ( <i>new</i> ), other state databases as needed to determine cost, funding and audit ( <i>existing</i> ), focus group interviews ( <i>new</i> )
Methodology	Use LinkB5 data to evaluate process, access and quality indicators with a validation of a sample to gain insight on accuracy; Analyze participation, validity, reliability and change over time; Integrate family and workforce survey data including perspectives on process and impact (see below); Conduct focus groups with Pilot leaders, educators and community partners to gain deeper insights on implementation; Engage expert to analyze cost of quality in targeted settings
Analysis	Descriptive statistics, cross-tabulations, subgroup analyses and hypothesis testing
<b>Family Survey</b>	
Purpose	Understand the landscape of ECCE quality and access in each Pilot community, from families' perspectives, especially most vulnerable families (e.g., children with special needs); analyze variation across subgroups of vulnerable populations; track progress in improving family engagement and access to high-quality ECCE programs over time
SP Alignment	2.1 / 2.3 / 2.4 / 2.5 / 5.3
Sample	All families of 0 to 5 year olds attending ECCE programs in the Pilot communities; about 30,000 families estimated for first year; with PDG-R, scope will increase to include a sample in every community
Data Source	Survey results via Qualtrics ( <i>new</i> )
Methodology	Conduct survey on paper and online via Pilot community leaders and ECCE program leaders; available in English, Spanish, Arabic, Vietnamese, and Simplified Chinese
Analysis	Descriptive statistics, cross-tabulations, subgroup analyses, and hypothesis testing
<b>Workforce Survey</b>	
Purpose	Provide a statewide portrait of early educators' experiences, challenges, and opportunities as well as their reactions to the PDG B-5 supports; analyze variation across settings and across treatment conditions (i.e., differences in incentive receipt and timing) for RCT; track progress in supporting ECCE educators
SP Alignment	3.2 / 3.3 / 3.4 / 5.1 / 5.2
Sample	ECCE Pilot program leaders, teachers, and family home owners; initial response rates ranged from 75% to 80%, indicating strong internal and external validity
Data Source	Survey results via Qualtrics ( <i>new</i> )
Methodology	Conduct survey on paper and online via Pilot community leaders and ECCE program leaders; available in English and Spanish; will also use text to capture multiple, brief inputs over time in addition to full survey(s)

Analysis	Descriptive statistics, cross-tabulations, and hypothesis testing, also used to provide key outcome data for randomized controlled trial
<b>Impact Evaluation of Educator Incentive</b>	
Purpose	Evaluate a statewide incentive program, designed to promote teachers’ retention, well-being, and classroom interactions, to inform statewide activities for supporting ECCE educators.
SP Alignment	3.3 / 3.4 / 4.3 / 5.1
Sample	ECCE teachers and family day home owners
Data Source	LinkB5 ( <i>new</i> ), survey results ( <i>new</i> ), other state databases to audit ( <i>existing</i> )
Methodology	Conduct randomized controlled trial, the gold standard of causal research for addressing selection bias and improving internal validity of results; randomly assign teachers to either receiving \$1500 or no incentive (50% of communities), or receiving one lump sum of \$1500 or three \$500 payments (50% of communities)
Analysis	Intent-to-treat (ITT) analyses conducted in regression framework to determine mean differences between treatment and comparison groups

The PPEP will enable VA to: 1) effectively scale the local Pilots statewide, gather extensive data, and use the data to **drive continuous program improvement at the local level** using the common data elements collected through LinkB5; 2) **measure the impact** of activities outlined in the SP on families and the workforce; and 3) **document the causal impact** of teacher retention incentive bonuses on retention rates and quality using a rigorous design that is highly credible to policymakers. The vision and long-term objective for VA’s evaluation efforts, in line with the SP, is to understand the impact of local systems reforms on improving short- and long-term outcomes for children and to incorporate these findings into the state’s improvement efforts.

With its dynamic PPEP, VA will be able to share meaningful insights with key audiences:

<i>Community leaders and early childhood program leaders who will use PPEP results to:</i>	Track the progress of efforts to improve access, quality, family engagement, workforce development, and accountability at the local level; with capacity building support from VECF; use these local metrics to drive continuous improvement through quarterly in-person sessions; regularly disseminate evaluation findings and launch an annual statewide summit in which community leaders share findings, best practices, and lessons learned, similar to VA’s successful approach with the Preschool Expansion Grant
<i>State-level administrators and TA providers who will use PPEP results to:</i>	Track implementation metrics at the community, site, and classroom level (e.g., number of teachers participating or who have received training); measure the impact on access, quality, and cost over time (e.g., changes in number of infant care options or quality of teacher–child interactions in



	toddler classrooms); understand baseline perceptions/experiences of families with ECCE system and how perceptions change as a result of SP activities.
<i>State-level policymakers will use PPEP results to:</i>	Evaluate the impact of Pilots; the costs of quality; and the return-on-investment in local infrastructure to quantify how funding communities to better coordinate services can help families and improve outcomes. VA will go further with the educator incentive, using its “gold standard” impact evaluation to compel policymakers to make a significant new investment in the workforce (at least 5 times the scale of PDG-R educator incentive).

For the PDG-R PPEP, VA revised its logic model (p.12) to align with NA, SP, and PDG lessons. Like the NA and SP, VA expects the PPEP will evolve as VA scales its Pilots statewide. For example, as LinkB5 scale, VA will have a more comprehensive picture of the availability, quality, and cost of ECCE and how these change over time, enabling new types of evaluation. The educator incentive is particularly unique; VA will have new and exciting data on turnover as well as insights on how incentives impact the educator experience (e.g. satisfaction, stress, performance) and how that affects children in care. Adding child-level data in LinkB5 opens up opportunities for research and evaluation on child and family outcomes, including school readiness, educational attainment, economic self-sufficiency, and workforce participation.

*Key Personnel* The PPEP will be conducted by an experienced team of evaluators at the UVA including Anita McGinty, PhD., Associate Professor and Daphna Bassok, PhD., Associate Director of EdPolicyWorks. The evaluation work is managed at the state level by Jenna Conway, Virginia’s Chief School Readiness Officer, with support from Eric Ekholm, PhD., Associate Director of Program Performance. All personnel are in place and supported the PPEP this year.

*Periodic Updates, Implementation Reporting and Dissemination Plan* VA’s PPEP will continue to evolve with new data and insights. As described earlier, VA will work with the SAC, Impact Workgroup, stakeholders, and national TA to evolve NA, SP, Logic Model and PPEP, with a full refresh in 2022. See Dissemination Plan for detail on PPEP dissemination (p.59).

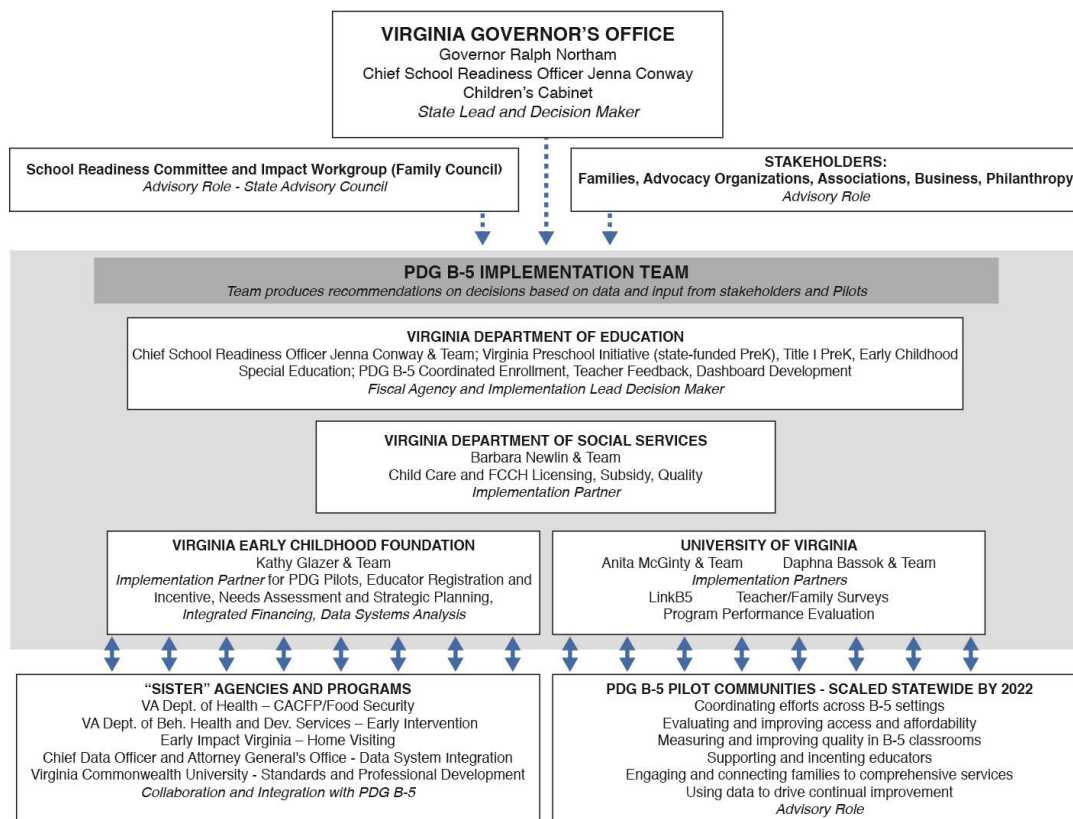
*Timeline* Timeline for key activities and milestones for the PPEP implementation follows:

PPEP Activity	Oct–Dec 2019	Jan–Jun 2020	Jul–Dec 2020	Jan–Dec 2021	Jan–Dec 2022
PDG Dashboard completed	X				
Final round of survey data collected		X			
Results of RCT published		X			
Annual review of Dashboard with SRC			X	X	X
Evaluation findings disseminated			X		X
PPEP updated based on updated NA/SP					X

## Meaningful Governance and Stakeholder Engagement

**1. VA’s governance structure.** Through PDG, VA has developed a thoughtful governance structure to ensure broad stakeholder input and effective implementation with public and private partners (below). VA’s PDG-R has full executive support as the State Lead, Chief School Readiness Officer Conway, is an appointment of Governor Northam, who is deeply committed to strengthening VA’s B-5 system as demonstrated recently with his Executive Directive 4.

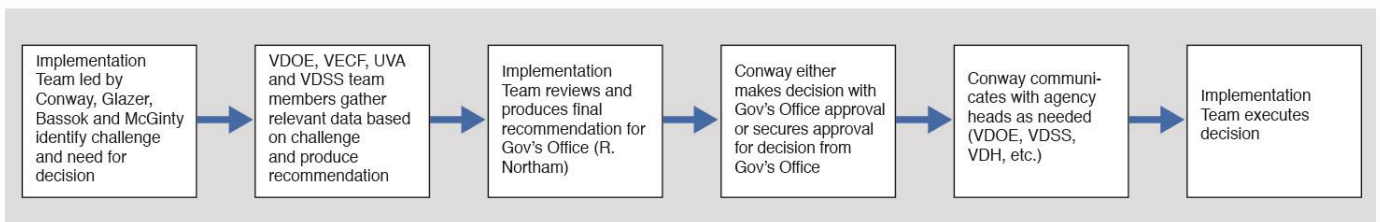
### PDG B-5 IMPLEMENTATION IN VA: GOVERNANCE AND DECISION-MAKING PATH



*Changes to Governance* While Conway and the VDOE have hosted monthly meetings with other state agencies and organizations in PDG, leaders acknowledge the need to collaborate more closely in PDG-R. Barbara Newlin (VDSS), who manages the CCDBG, will become a part of the Team, and all sister agencies will play a larger role in the PDG-R Pilots to help ensure **deeper linkages locally between ECCE and social service, health, mental health, home visiting and early intervention.** With PDG-R, the Team will meet with state organizations at least monthly to review progress, discuss strategy and ensure linkages across efforts. The Governance Structure has also been revised to include the Family Council (pp.18-19).

**2. State Decision-Making Path.** VA’s governance structure helps ensure decisions are made in a data-informed and collaborative manner. Conway ensures decisions are made thoughtfully and effectively across agencies and reflect the input of PDG-R Implementation Team, Pilots and stakeholders. To support expedient and informed decision-making, the PDG Implementation Team of VDOE, VECF, and UVA (Team) meets at least weekly to chart out strategy, reflect on implementation, and identify challenges, thus ensuring the work is aligned and iterative, based on what is working in the Pilots. The Team uses data from Pilots to inform practice, and Leads (Conway, Glazer, Bassok, McGinty) make recommendations for decisions collaboratively, with the Governor’s Office having final sign-off unless Conway is authorized to make the decision.

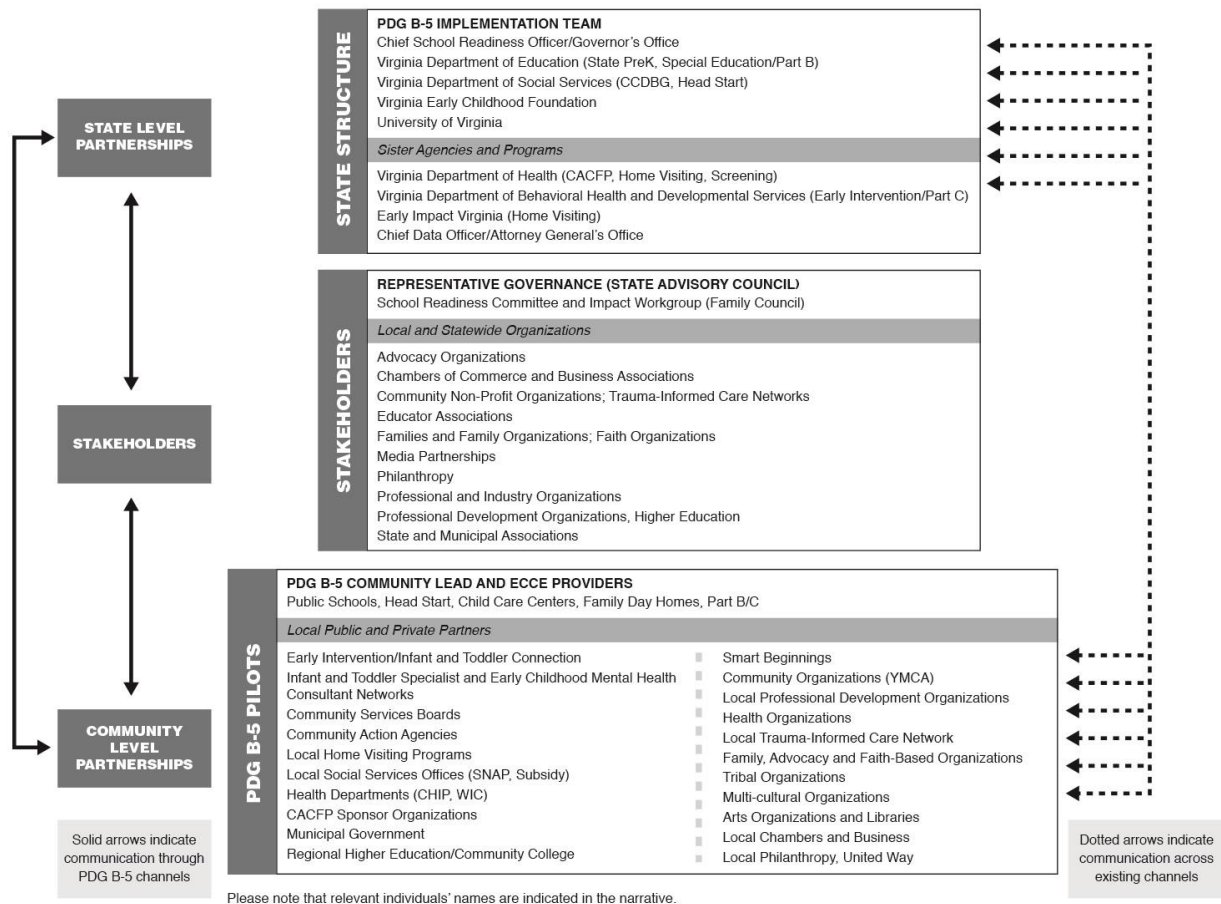
VA’s PDG-R decision-making pathway is below:



**3. Stakeholder involvement.** VA has developed a thoughtful and comprehensive approach to stakeholder engagement that involves a diverse set of stakeholders at the state and local level.

The figure below illustrates who has been involved in the assessment, planning, and implementation of the activities and who will contribute to the implementation of PDG-R. As the two-way arrows indicate, the Implementation Team both communicates to and intentionally seeks feedback from stakeholders, including the SRC as well as from the Pilots.

**FRAMEWORK FOR STAKEHOLDER ENGAGEMENT IN VA – PDG B-5**



At the ground level, Pilot leads help ensure site and educator input informs actions and decisions. As illustrated above, PDG-R Pilot leads will be responsible for regular communication and convening and then channel input from the field back to the state through weekly electronic/telephone communications and quarterly in-person interactions. In the PDG-R, VA proposes adding an annual summit in order to fully promote the Pilot work, disseminate best practices and lessons learned, and connect leaders and stakeholders across communities.

As this figure illustrates, VA recognizes that a strong B-5 mixed delivery system relies on partnerships across ECCE, health, social service, mental health and other organizations at both the state and local level, with stakeholder input driving action at both levels. As demonstrated here, the partnerships are slightly different at the state and local levels, which again explains why VA has focused so intently on using local capacity as the lever to drive systemic change. In response to lessons learned through PDG, VA will align communications across existing channels between state organizations and local subsidiaries. For example, as VA funds Pilots to connect with health partners, VDOE will work closely with state level health partners to ensure consistent communications and supports are shared across existing channels.

As evidence of this framework in action, Appendix A4 outlines all names and organizations of stakeholders involved during the first 10 months of PDG. As demonstrated by length, depth and breadth of partners involved, VA is committed to ensuring full representation across the B-5 system including health, mental health, family support, social services, nutrition, multi-cultural, higher education and other organizations. Meaningful engagement will continue to grow in PDG B-5 as VA launches its Family Council, scales its Pilots statewide, and supports communities to establish more formal governance for their local B-5 mixed delivery systems.

### **Project Timeline and Milestones**

Timelines and milestones are included within each section: Activity 1 (p.8); Activity 2 (pp.14-15); Activity 3 (pp.19-20); Activity 4 (p.28); Activity 5 (pp.34); Activity 6 (pp. 42, 50).

### **Organizational Capacity of Governing Organizations**

As illustrated above, VA will rely on the **expertise of four organizations** to execute PDG-R, with VDOE continuing as lead. See Appendices A2-A3 for organizational charts that indicate where key personnel are situated in each of these organizations. VA has put together a highly

talented and very experienced team to ensure the successful implementation of PDG-R; the organizations and key personnel are well-positioned to ensure VA's continued success.

The VDOE has demonstrated experience and capacity in managing large federal grants and successfully managed all budgeting, contracting, reporting, and data collection for PDG. The VDOE expanded the newly formed **Division of School Readiness (DSR), led by Conway**, to include expertise in coordinated enrollment, measurement and support of program performance, and aligned early learning supports for B-5 systems to meet PDG's strategic goals. The VDOE will continue to utilize its budget, finance, and policy functions to support PDG-R. As grantee for the **original Preschool Expansion Grant**, VDOE used that grant to increase access, strengthen quality, and deepen engagement with 10,000+ VA families, and will rely on these successful organizational structures to support PDG-R. VDOE serves as the **connection to 132 school divisions statewide**, helping support transition and other preK-3 systems alignment. VDOE manages \$8.5 billion in state and federal funding with \$148.2 million in ECCE funding.

VECF was also key partner for the **original Preschool Expansion Grant** to expand access to preK across the state and PDG, for which VECF coordinated all aspects of Pilot implementation. VECF has built additional staff capacity and procedures to support this work, and is prepared to scale to additional communities. VECF coordinated the Educator Incentive Pilot, using its unique relationship-building, communication and operational capacity to engage thousands of educators, and helped develop resources to support Pilots in integrated financing and planning for an ECIDS. With its unique position and support from the administration, VECF is well-positioned **to bring private partners to the table** at the state and local levels. VECF has experience managing large grants and working as an implementation partner with VDOE and VDSS. VECF

provides connection to **17 Smart Beginnings organizations** covering 90% of VA. Established in 2005, VECF has successfully managed more than \$38 million in ECCE projects.

UVA, with its nationally-recognized education school, has supported extensive federal ECCE and B-5 grants in VA, including more than \$10 million on UVA-VDOE projects in recent years. For PDG, UVA has developed LinkB5 and led the PPEP efforts. As described in the Sustainability Plan, UVA has a **longstanding research-policy partnership with VDOE** that extends beyond ECCE and brings extensive experience, resources, and expertise in the complex work of evaluating early childhood systems development, program quality, QI, public-private partnerships, and community change initiatives. UVA brings a unique and extensive understanding of the diversity of VA's communities, B-5 funding streams, K-12 system, needs of families, and the political landscape. The faculty and researchers at UVA are well prepared to continue and expand program evaluation to measure all goals of PDG-R's PPEP. For LinkB5, UVA leveraged existing internal projects (VA's early literacy [PALS] and kindergarten readiness [VKRP] assessment and support systems) to maximize resources and expertise; hired additional capacity to support the design, technical support and training needed for Pilot communities; and will expand supports statewide.

Finally, VDSS has served as a critical state agency partner in PDG implementation. VDSS oversees the licensing and quality rating of ECCE and provides extensive and comprehensive supports to VA families including CCDBG, public assistance, food assistance, TANF, Medicaid, etc. VDSS is currently **piloting two-generation approaches**, recognizing that positive childhood outcomes are closely related to parental supports and services, expertise that will be essential for PDG-R activities. VDSS has developed ECCE data collection protocols, improvement supports, and guidance on how to support the B-5 industry in VA. VDSS has also taken the lead on using

new federal investments to increase access, **dramatically increasing the number of families participating in child care subsidy, establishing a task force to address child care deserts, and exploring a tiered reimbursement strategy to incent quality.** VDSS connects to **120+ local offices** throughout VA. In the PDG-R, VDSS will take on a larger role given the expanded focus on engaging families and linking Pilots to existing B-5, cross-disciplinary supports.

### **Program Performance Evaluation Plan**

Full description of the PPEP, including approach, changes, timeline and milestones, is in Activity 6 on pages 46-50.

### **Logic Model**

Revised logic model and explanation of changes are in Activity 2 on pages 12-13.

### **Project Sustainability Plan**

Based on lessons learned from other early childhood federal grants and PDG, VA has **developed an interagency plan for sustaining and strengthening** its B-5 mixed delivery system following PDG-R. The core partners, VA state agencies, VECF and UVA, will all play a role, similar to prior efforts. State agency leaders, in response to Executive Directive 4 and PDG learnings: 1) are working collaboratively to map out existing funding streams and identify opportunities to align state preK, Head Start, CCDBG, IDEA Part B/C, Title I etc. and 2) produced recommendations for the Governor to better leverage resources to implement the SP, including increasing access through a mixed-delivery approach, expanding the QRIS via PDG Pilots, and establishing a durable point of accountability for the state B-5 mixed delivery system in the VDOE. Building on the momentum of PDG and growing bipartisan commitment for early childhood reforms, VA will firmly solidify the key structures and elements of PDG-R in the Commonwealth by 2022, including **realigning current public investments to sustain more integrated and streamlined services for families, improved program quality, targeted PD**



**for teachers, and other improvements** brought about through PDG-R. VA leaders will also complete a thoughtful review and alignment of streamlined regulations, requirements, and standards to **create more efficiency in the mixed delivery system, as well as streamline eligibility determination, enrollment, and access to services across B-5** to more effectively and efficiently support families with young children. To sustain cross-sector leadership, the SAC and its facilitation by VECF are established in VA statute, and VECF and VDOE will continue to support the SAC in its **public-private oversight of the SP implementation**, tracking Dashboard indicators over time, and engaging the Impact Workgroup on strategic issues.

To sustain local community level efforts, VA has learned that it must grow local capacity to build a uniform statewide QRIS for all publicly funded ECCE programs including FCCH, child care centers, Head Start and state preK. VA's Preschool Expansion Grant (2015-2018) demonstrated that VA can build the capacity of preK classrooms to improve quality with grant funds and sustain this quality through better use of existing funds. With PDG, VA took the first steps toward engaging the full mixed-delivery system, not just preK classrooms in school settings. PDG-R will enable VA to scale its model quickly and cost-effectively and provide a strong proof point of what is possible for children, families, and communities throughout the state. VA will use **existing federal and state funding streams such as CCDBG and state preK investments to sustain the work of the Pilots through a uniform QRIS**. Measuring and supporting improvement in teacher-child interactions across mixed delivery settings will continue beyond the completion of PDG-R. VA will realize savings by measuring consistently and aligning resources at scale and better ensuring all resources are driving continuous QI.

VA will strategically invest PDG-R resources in one-time start up and build costs, bolstering stronger infrastructure. For example, PDG-R is dramatically improving VA's data system and

analysis capacity through LinkB5. VA will be able to **repurpose CCDBG quality funds, IDEA, Title I and other federal and state funds more cost-effectively** as it transitions to **uniform QRIS** and implements a **tiered reimbursement system**, given these start up investments.

LinkB5 can help VA **reduce redundant technology costs, realize greater efficiencies, and build a uniform portal for families** to better inform choice in the B-5 mixed delivery system.

Through PDG-R, communities across VA will dramatically improve the way they engage and respond to the needs of families and improve the quality of ECCE settings. VA is intentionally building this capacity through PDG-R, ensuring more families are engaged in local planning and development efforts, local partners are more effectively supporting QI in ECCE settings, and coordination across disciplines will meet the diverse needs of families. This capacity and modes of collaboration will be embedded by the time PDG-R is completed, resulting in better and more effective coordination and use of funding. In the last two years of PDG-R, VA will support communities to **establish more durable local governance**, taking advantage of the fact that communities will have comprehensive access, quality, and child information about their B-5 systems and will be using new funding and resources to drive improvements in access, quality and family engagement. As the key private partner and liaison to the communities, VECF will continue to support communities and provide TA to strengthen public-private partnerships and blending/braiding funds; PDG-funded resources will continue to scale a community self-assessment and toolkit for **effectively integrating varied existing revenue streams to more fully cover the cost** of ECCE services.

UVA and VDOE have a longstanding collaborative relationship and currently work together on state preK, preK-3<sup>rd</sup> grade literacy screening, VKRP (KEA), PDG, etc. Building on this

research-policy partnership, UVA will support alignment of these funding streams and pursue outside funding to help sustain the evaluation efforts beyond PDG-R.

Lastly, the Team will build a compelling case and widespread support for the educator incentive to sustain and scale it statewide. Through its unique random-controlled trial and precise measurement of impact, VA will **demonstrate that the educator incentive “pays for itself”** by strengthening the ECCE workforce, reducing turnover, maximizing PD investments, increasing operational efficiencies, and improving experiences for children. VA leaders use data and testimonials of impacted educators and families across communities to build support for funding a statewide educator incentive program. As part of the sustainability planning, VA leaders will explore multiple revenue options, such as tax credits or wage subsidies. For full detail on how VA is spending funds differently in response to PDG, see pages 13-14.

### **Dissemination Plan**

As described throughout application, VA will use a tiered approach to broadly disseminate PDG-R materials:

<b>Audience</b>	<b>Approach</b>
State partners	<ul style="list-style-type: none"> <li>• Partner state agencies, stakeholders and advocates will receive updates, findings, data summaries and reports through monthly sister agency meetings, webinars, and meetings of the SAC, Impact Workgroup and new Family Council.</li> </ul>
Community-level leadership	<ul style="list-style-type: none"> <li>• Materials for community-level leaders will be disseminated, reviewed and discussed via weekly office hours, weekly email updates, quarterly in-person TA sessions as well as featured at the annual summit.</li> </ul>
Site leaders, teachers, and families	<ul style="list-style-type: none"> <li>• With resources from state, community-level leaders will facilitate dissemination of materials to site leaders, educators and families on at least a monthly basis. Site leaders, teachers and families will receive surveys, electronic communications and webinars from state quarterly.</li> </ul>

A website and a bi-weekly newsletter will share updates and documents with all groups.

## Third Party Agreements





**PROJECT BUDGET AND BUDGET JUSTIFICATION**  
**FEDERAL EXPENDITURES DETAIL:**

Personnel =	\$421,775
Fringe Benefits =	\$147,621
Travel (out-of-state) =	\$4,512
Equipment =	\$0
Supplies =	\$13,750
Contractual =	\$0
Construction =	\$0
Other =	\$11,760,342
Indirect Charges =	\$152,000
<b>Total Federal =</b>	<b>\$12,500,000</b>
30% Match from Non-Federal Resources =	\$3,750,000

**PERSONNEL: Total \$421,775 (Salary)**

- Erin Carroll, 25% FTE, Director of Early Childhood
- Eric Ekholm, 100% FTE, Associate Director of Performance
- Tamilah Richardson, 100% FTE, Associate Director of Learning
- Hire Pending, 50% FTE, Data Coordinator
- Laura Kassner, 100% FTE, Project Manager
- Cheryl Smith, 100% FTE, Grants Manager
- Laura Heath, 75% FTE, Administrative

The VDOE will use PDG B-5 funding to manage the grant effectively and maintain important organizational capacity to perform ECCE data analysis and drive systemic continual improvement, manage the alignment and production of policies, practices and tools to improve classroom quality and support the field to improve kindergarten readiness. All personnel will continue to be in the Division of School Readiness under the Chief School Readiness Officer.

**BENEFITS: Total \$147,621**

Benefits for PDG B-5 grant staff employed by VDOE are calculated at an average rate of 35% of total salary costs. Standard benefits included in this rate are: VA Retirement System employer contributions; Social Security/Medicare contributions; group life contributions; employer health insurance premium; retiree health insurance credit premium; short- and long-term disability insurance; and deferred compensation contribution.

**TRAVEL (out-of-state): Total \$4,512**

Funds support participation in TA activities leading to successful grant implementation and to cover travel costs for at least 4 individuals to attend a 3-day meeting in Washington, D.C. The cost projection is based on 4 attendees, total transportation costs at \$300 per person, and three days lodging (\$200 per night) and per diem (\$76) based on Washington, DC rates.

**EQUIPMENT: Total \$0**

**SUPPLIES: Total \$13,750**

For VDOE PDG B-5 grant staff, funded at an annualized amount of \$2,500 per FTE. This covers non-equipment office furnishings, paper/printer supplies, office supplies, and postage.

**CONTRACTUAL: Total \$0**

**CONSTRUCTION: Total \$0**

**OTHER: Total \$11,760,342**

Includes personnel, support costs, and project funding for VECF and UVA as grant partners. Additionally, \$5,558,940 in subgrant funding (44.5% of the overall grant) will be allocated to community entities to build and establish community infrastructure. VA defines a subgrant as funding to a community-level organization to indirectly improve the quality of local programs by enhancing early childhood systems and infrastructure. Major projects funded are:

- Each community/region would receive subgrant funding to complete required activities based on the number of publicly funded classrooms; funding to conduct two local CLASS observations, provide feedback and ensure accurate quality data is entered in LinkB5; tri funding in support of foundational or start-up year only costs; innovation subgrant funds will be provided to five (5) select Pilot communities to test innovations related to maximizing family choice/engagement, sharing best practices and/or improving quality (\$5,558,940 or 44.5% of overall grant)
- VECF will administer educator incentive program, focused on child care, Head Start, and family day homes in cohorts 1 & 2 (\$4,152,400); support capacity-building among Pilot leads (\$491,940); oversee performance of cost analysis to help the state understand what it will cost to meet uniform quality expectations, with a specific focus on infants and toddlers (\$25,000); contract with a consultant to oversee data and data system assessment in order to ensure needs assessment and strategic plan fully address need and strategy for building early childhood data systems (\$25,000);
- UVA will conduct program performance evaluation (\$630,000) (5.0% of overall grant); contract with Tech Dynamism to add capacity for reporting, capturing child level data at the classroom level and data warehousing (\$370,000); and print and disseminate family surveys and support family engagement via text messaging. Also, funding to support educator surveys to understand impact of incentive, reforms, and to ensure that educator input informs improvement efforts (\$500,000)
- VCU will support collaboration in the development of resources for infant, toddler, and preschool educators and families on how to use the new Early Learning and Development Standards (ELDS) to promote children's learning and development (\$25,000)

**INDIRECT: \$152,000**

This is indirect charges for VDOE. Indirect is based on VDOE's currently approved restricted indirect cost rate of 8.10 percent and a direct cost base of VDOE salary, fringe benefits, supplies, computer charges, travel, honorariums, and first \$25,000 (allowable limit) of contracts.

**COST SHARING OR MATCHING: Total \$3,750,000**

Table below lists the sources of VDOE's required 30% match from non-federal sources for the PDG B-5 grant. These funds are not claimed as non-federal matching funds for any other federal grant award. The required 30% match will be met by the end of the 12-month grant period.



	<b>Appropriated State Funds</b>
1. Virginia Kindergarten Readiness Program (VKRP) (Item 128 H. 2019 Appropriation Act)	\$1,229,716
2. Virginia Kindergarten Readiness Program (VKRP) – UVA CASTL Individualized Prof. Development (Item 128 J. 2019 Appropriation Act)	\$700,000
3. Virginia Kindergarten Readiness Program (VKRP) – UVA CASTL Observation Instrument (Item 128 K. 2019 Appropriation Act)	\$350,000
4. Staff state salaries and benefits (J. Conway 100%) / (E. Carroll 25%)	\$256,049
5. Virginia Preschool Initiative (VPI) Site Reviews	\$50,000
6. Virginia Preschool Initiative (VPI) – Provisional Teacher Licensure	\$306,100
7. Wolf Trap (Pre-K specific)	\$529,251
8. Pre-K portion of PALS contract	\$196,999
9. VPI state formula funding (verbal approval from U.S. ED Received 10/18/19)	\$131,885
<b>Total</b>	<b>\$3,750,000</b>

**PROJECTED FEDERAL FUNDING BY ACTIVITIES 1-6 FOR ONE YEAR PERIOD:**

<b>Activity</b>	<b>Total Federal Funding</b>
1 and 2: Needs Assessment and Strategic Plan	\$74,860
3: Maximizing Parent and Family Knowledge, Choice and Empowerment and Engagement	\$589,085
4: Sharing Best Practices and Professional Development for the Early Childhood Workforce	\$4,938,434
5: Improving Overall Quality and Service Integration, Expanding Access and Developing New Programs	\$5,704,339
• <i>Subgrant Total (%)</i>	• \$5,558,940(44.5%)
6: Monitoring, Evaluation, Data Use for Continuous Improvement, Meaningful Governance and Stakeholder Engagement	\$1,193,283
• <i>Funds specifically for Program Performance Evaluation (%)</i>	• \$630,000(5%)
<b>Overall Federal Funding (not including Cost Sharing or Matching)</b>	<b>\$12,500,000</b>

**VA will use \$4,512 in PDG-R funding in Year 1 to support related technical assistance activities leading to successful implementation of grant requirements and to cover travel costs for at least four individuals to attend a 3-day meeting in Washington, D.C.**

**DESCRIPTION OF COST SHARING OR MATCHING REQUIREMENT**

VA commits to meeting the required federal match by the end of each of the 3 years. The following is a description of these sources of matching funds for Year 1:

1. VKRP = \$1,229,716 (Item 128 H. (a and c) 2019 Appropriation Act (Chapter 854). This state funding is provided through VDOE to UVA to continue statewide implementation of the VKRP student assessment conducted in the fall, and to develop and implement a post-assessment upon the conclusion of the kindergarten year. This allocation is to provide training to school divisions on how to use VKRP data to improve instructional practices and student learning.

2. VKRP PD = \$700,000 (Item 128 J. 2019 Appropriation Act). This state funding is provided through VDOE to UVA to ensure that all Virginia Preschool Initiative (VPI) classroom program teachers receive appropriate individualized professional development training to support quality teacher-child interactions and effective researched-based curriculum implementation.
3. VKRP PreK Observations = \$350,000 (Item 128 K. 2019 Appropriation Act). This state funding is provided through VDOE to UVA to ensure that all VPI classroom programs have the quality of their teacher-child interactions assessed at least once every two years using the state approved observational instrument.
4. Program staff state salaries and fringe benefits Item 128 (Erin Carroll) and Item 134 (Jenna Conway) - \$256,049 - portion of salaries and benefits for 2 staff members, either fully or partially state funded, that will be dedicated to support of this grant initiative.
5. VPI Site Reviews - Item 128 2019 Appropriation Act - \$50,000 - Supports on-site quality reviews and technical assistance of local VPI programs and classrooms.
6. Virginia Preschool Initiative (VPI)- Provisional Teacher Licensure - \$306,100 - Item 136 C.14. 4h. 2019 Appropriation Act - provide state-funded financial incentives to provisionally licensed teachers teaching students in the VPI and who are engaged in coursework and professional development, toward achieving the required degree and license.
7. Wolf Trap (Pre-K specific portion) - \$529,251 - Item 135 P.) 2019 Appropriation Act - Total appropriation of \$725,000 to localities to support expansion of STEM program for kindergarten and preschool students. Portion utilized for match is linked to preschool expenditures.
8. PALS Contract (Pre-K portion) Item 128 2019 Appropriation Act - \$196,999 - to provide a comprehensive assessment of students' knowledge of literacy fundamentals. State-provided screening tool for Virginia's Early Intervention Reading Initiative through UVA.
9. VPI state formula funding - (Item 136 C 14 a 1) - g. 2019 Appropriation Act (tentative approval received 10/18/19 from US ED) - \$131,885.

### **Bonus: Coordinated Application, Eligibility, and Enrollment for Families**

VA made solid progress developing coordinated enrollment strategies and models through PDG to better reach vulnerable families who may be served, underserved, and unserved with a broad array of holistic services. In partnership with Pilots, VA developed toolkits and templates to facilitate streamlined enrollment processes with a centralized point of entry for families to efficiently access needed services. VA drafted a coordinated enrollment self-assessment tool, information guide, and tip sheet, as well as complementary tools to facilitate Pilots' capacity to

integrate ECCE financing. The self-assessments provide a lens on how well Pilot partners coordinate and address sharing of information, eligibility, application processes, preference matching, and waitlists, and where there are opportunities for more efficient integration of funds.

Through a collaborative process, Pilots convened relevant community partners and families from June to August 2019 to complete the self-assessment and develop plans for action related to coordinated enrollment. All Pilots participated, engaging more than 110 diverse public and private partners, and found that while no communities are fully coordinating enrollment, nearly 80% were coordinating with all or some providers that serve children with special needs, 70% were conducting joint enrollment efforts, 60% were using shared digital or paper resources with all or some providers, 43% were referring families to other providers, and 35% were using common applications with all or some providers. UVA included questions about access and enrollment on its PDG family survey to provide communities with more precise data on the impact of lack of coordination on families, with results due back by end of 2019.

Armed with this information and PDG-R funds, VA will help Pilots build on strengths, learn with peers, and grow capacity to coordinate enrollment and measure progress annually by building models and foster improvements by providing innovation funds as follows:

<b>Building Models</b>	<ul style="list-style-type: none"> <li>• Support all Pilots to self-assess, develop action plans for coordinated enrollment systems, focus on family engagement in designing systems, expertise in integrated ECCE financing, and improved transitions</li> <li>• Embed transition strategies in the coordinated enrollment model</li> </ul>
<i>Scale best practices</i>	<ul style="list-style-type: none"> <li>• Develop a state template and TA for Pilots’ coordinated enrollment action plan to turn insights from self-assessment into concrete action</li> </ul>
<b>Seeding Innovation</b>	<ul style="list-style-type: none"> <li>• Establish single point-of-access and no-wrong-door strategies among all ECCE programs and B-5 support services</li> </ul>
<i>Leverage diverse community service providers</i>	<ul style="list-style-type: none"> <li>• Expand community service providers engaged in coordinated enrollment (beyond Head Start, school division, social services, and FCC and child care providers) to include parents; leaders from human services and community action agencies (delivering dual-generation services); health, mental health, early intervention, home visiting, and</li> </ul>

	food security programs to more seamlessly connect families to needed support services.
<i>Strengthen data and information access</i>	<ul style="list-style-type: none"> <li>• Partner with a national vendor (ChildPlus) to adapt software to Virginia’s needs and strengthen the capacity to have real-time information about slots and vacancies.</li> </ul>
<i>Engage families</i>	<ul style="list-style-type: none"> <li>• Integrate family engagement strategies as part of coordinated enrollment through training from the National Network of Partnership Schools’ family engagement model to consider its relevance for Pilots.</li> <li>• Develop processes, messaging, communications materials, and activities to communicate with families as consumers of ECE; engage with families as their child’s first teachers; and enlist families in designing systems and strategies.</li> </ul>

**Bonus: Infant/Toddler Emphasis**

VA’s NA highlighted the gaps in access to quality ECCE options for I/T, with pronounced challenges for families who are vulnerable, in rural communities and child care deserts, homeless, seeking employment, in school or training, and/or working non-traditional shifts. VA will utilize infrastructure assets including the uniform rating system, LinkB5, and QI networks to engage all publicly funded programs that serve I/T in 40% of the state by Year 2 and statewide by end of grant period. By the end of PDG-R a total of 4,000 classrooms and FCCH serving I/T will have CLASS assessments completed and 8,000 I/T teachers will have personalized PD plans developed. This will improve the quality of ECCE for 54,000 I/T by the end of PDG-R. Other B-5 services will be integrated into more effective B-5 systems for families with I/T in local communities across the state, through coordinated enrollment in services such as home visiting, WIC/SNAP, Medicaid, and early intervention (Activity 3 and prior Bonus).

Through Pilots, VA will strengthen existing efforts to bolster the competencies of family providers, including streamlining access to peer learning opportunities, low- or no-cost PD (using existing scholarships) and coaching supports including CCDBG-funded I/T specialists and mental health consultants (pp.24-26); start-up funds for materials and training on health and

safety; access to observations and feedback on effective interactions and instruction; and connection to VA's LinkB5 to use data and reports to continually improve practices. VA will support cross-program PD for professionals who work with I/T, including ECCE educators, mental health consultants, I/T coaches, home visitors and early interventionists. Leveraging online resources, including VA's nationally-recognized home visiting PD modules, VA will increase access to high quality cross-sector PD to meet the unique needs of I/T and their families.

Through Pilot access and enrollment efforts, VA will also test strategies to improve B-3 partners to connect families with support services including screening and referrals for developmental delays and disabilities, two-generation trauma-informed services, health and mental health consultation and services, and food security programs (e.g., through expanding and facilitating enrollment in CACFP). As it relates to I/T health and nutrition, VA has established a multi-agency, public-private partnership to increase enrollment in CACFP in child care, especially in I/T classrooms; the dual-strategies (increasing access to healthy meals for children in ECCE and supplementing revenues through reimbursements for meals for providers) can be leveraged by Pilot innovators to improve nutrition and stabilize B-3 sites.

Driven by insights from brain research about supports needed in the earliest years, VA will provide innovation funds to test low-risk, low-cost mechanisms to build replicable models to:

- Expand the supply of quality services for children birth to three. VA will test financial incentives to encourage sites and educators to address family needs and preferences for B-3 services; work closely with VDSS to maximize CCDBG (e.g., to support tiered reimbursement for I/Ts), partner with tribal communities, and reduce child care deserts (e.g., using new VDSS toolkit to increase child care supply in rural areas); and

- Strengthen the capacity of FCCH businesses: Many VA I/Ts are served in home settings; VA will provide innovation funds to Pilots to develop a shared services network (SSN) for family providers to more efficiently serve families with I/T, especially in communities with a lack of options. In rural southwest VA, with stark gaps in equitable access to quality ECCE and in Northern VA, with high populations of ELLs, VA will support SSNs to expand access to services in home settings for I/Ts for vulnerable working families.

### **Bonus: Collaborative Transition and Alignment from Birth to the Early Grades**

VA learned from PDG that collaborative transitions will require stronger partnerships with families, providers and community program partners, and schools through PDG-R. Specifically the NA indicated that VA has no statewide framework for transitions (currently only focuses on homeless children) and does not require publicly-funded programs, which serve the most vulnerable children, to have plans for supporting families. Moving forward, VA will expand on the coordinated enrollment and family engagement efforts via Pilots, to (1) evaluate transitions as part of the coordinated enrollment toolkit (self-assessment and guidance for communities) that all Pilots complete annually; and (2) fund at least one Pilot to innovatively strengthen transitions and serve as state exemplar to inform replication (Activity 3, 5 and Bonus).

The NA also revealed how little data VA has on how well communities support transitions. In response, VA has added questions about transitions to both the family survey (~30,000 families) and to the survey of all kindergarten teachers and leaders (~5,000 individuals) in fall 2019, with specific questions related to experiences for families of children with special needs, in rural areas, homeless families and ELLs. Supported by this data, VA will require Pilots to evaluate how well they support transitions from home to ECCE to early elementary via the annual coordinated enrollment self-assessment. This will also include tribal communities in

future Pilots. Similar to other areas, VA will require Pilots to create SMART objectives for supporting transitions and will use survey results to track progress over time.

Pilots will receive funding to build on their strengths and specifically address weaknesses as they develop community-wide structures to support families through transitions in partnership with home visiting, early intervention, social services and ECCE providers. VA will test out ways to use text messaging to support families through transitions, conduct campaigns to increase awareness among families about school readiness and use school entry as an opportunity to better link families with comprehensive services. VA will measure impact of these efforts through the annual self-assessment and family and kindergarten educator surveys.

VA will also leverage its recent state investment in measuring school readiness; as of 2019, 90,000+ VA children complete the Virginia Kindergarten Readiness Program (VKRP), an assessment of literacy, math, self-regulation and social skills, annually. With this new baseline, Pilots can better identify gaps, target unserved or underserved populations and work across programs to strengthen ECCE programs and transitions. VKRP is used at the beginning and end of year; Pilots will use this data to devise new strategic approaches to reduce fade-out and will carefully track the relationship between school readiness and early elementary outcomes.

VA's Pilots already include all school divisions in their geographic areas; through QI efforts (pp.20-28, 33-35), Pilots will better align ECCE with early elementary efforts. Armed with cross-program data about quality elements, Pilots will develop approaches that align instructional tools, supports and PD across ECCE and early elementary and better leverage multiple ECCE and K-12 funding resources including Every Student Succeeds Act-Title I (for at-risk), IDEA (for special education), McKinney-Vento (for homeless), and local funding.