



Ready?

Implementing an Early Head Start Partnership Program With Family Child Care

PRESENTED BY:

**Early Education Achievement
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- Understanding how this grant funding was built and why
- Model components
- Layered funding and cost drivers
- Funding Opportunity Announcement (FOA) review – 6 key categories specific strategies to incorporate family child care





POLL

On a scale of 1-5, with 1 being “very little” and 5 being “very knowledgeable”:

Where would you rate your current knowledge of the regulations related to the family child care option contained in the Head Start Program Performance Standards?

<https://eclkc.ohs.acf.hhs.gov/programs/article/family-child-care-option>



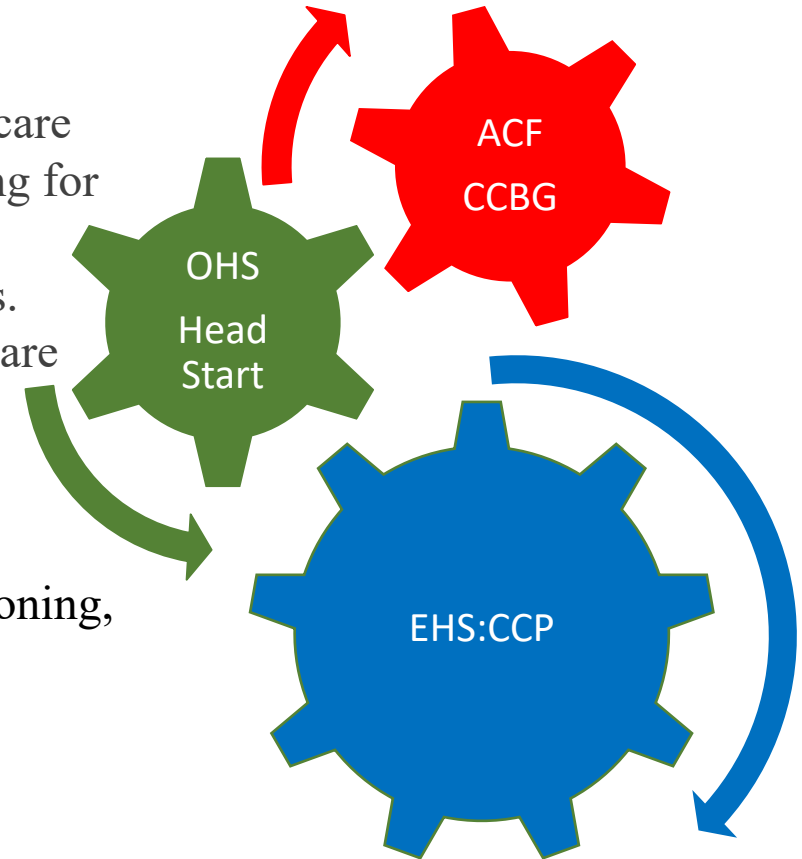
Grantee / Delegate Readiness - Offices of Child Care and Head Start Join Forces

Child Care Development Fund Goals

- ✓ Children birth to 12 in vulnerable families have access to quality child care
- ✓ Low-income families who are working or in training receive help paying for child care; and may select a provider of their choice
- ✓ FCC providers receive reimbursement for serving low-income families.
- ✓ FCC providers receive supports to improve and coordinate quality of care

Head Start (ages birth-age 5) goals

- ✓ Learning environment that ensures optimal school readiness (focused on language, literacy, mathematics, science, social and emotional functioning, creative arts, physical skills, and approaches to learning)
- ✓ Provision of health, educational, nutritional, social & other services
- ✓ Provide family-centered comprehensive services





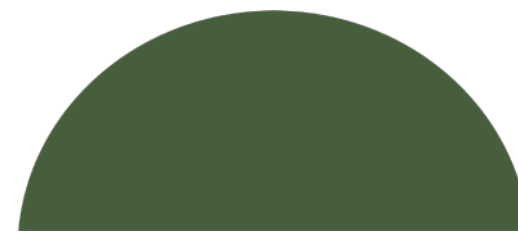
Children

- ..Full-day, full-year program
- ..Developmentally appropriate, safe and healthy learning environments
- ..Highly skilled caregivers and educators
- ..Research based curriculum and assessments
- ..Health (physical, mental, dental) and disabilities services
- ..Formula, meals, snacks and diapers

Families



- ..Resources and referrals that supports family health, well-being and financial stability
- ..Leadership and employment opportunities and training
- ..Child care subsidy acquisition and support
- ..Partnership agreements to support the education and care of their child(ren)



Child Care Providers

- ..Coaches support best practices and individualization
- ..Support for professional development (CDA)
- ..Support learning environments
- ..Financial & other resources to meet required standards and highest QRIS rating
- ..Child, family and staff record keeping resources
- ..Five-year grant opportunity



Head Start Management Systems Wheel

A visual representation of the 12 program management, planning, and oversight systems that are critical to high-quality service delivery.



Grant Sections

- Community Needs and Objective – 20 Points
- Program Design and Approach – 30 points
- Staffing – 15 points
- Planning and Implementation – 10 Points
- Organizational Infrastructure and Management Systems – 15 Points
- **Budget and Budget Justification – 15 Points**

<https://eclkc.ohs.acf.hhs.gov/organizational-leadership/article/management-systems>



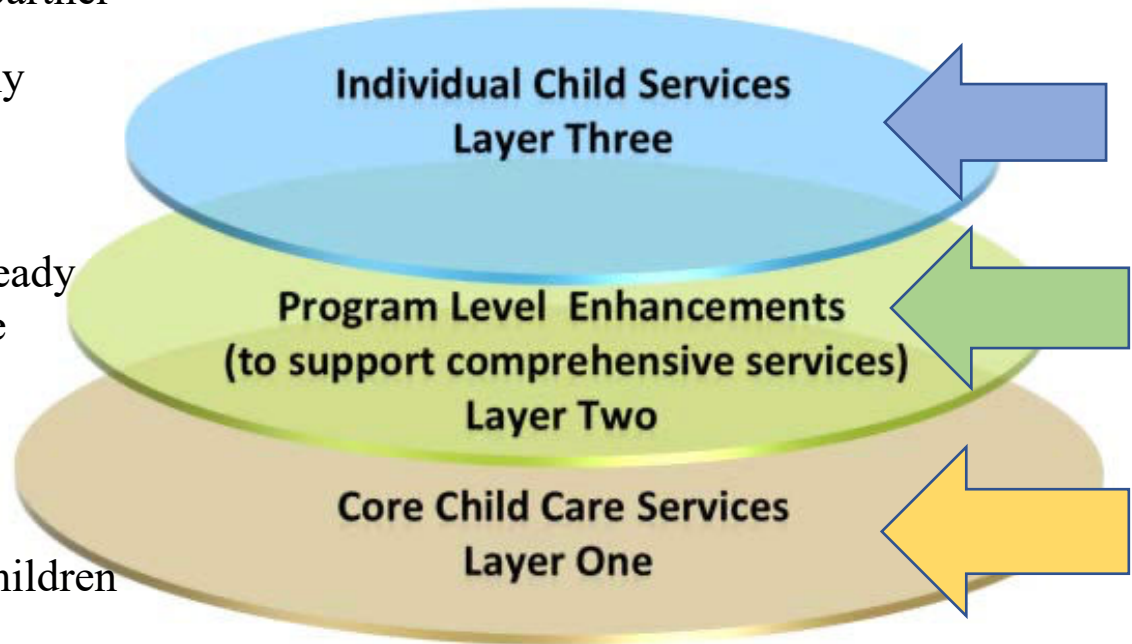
ADMINISTRATION FOR
CHILDREN & FAMILIES



NATIONAL CENTER ON
Early Childhood
Program Management and Fiscal Operations

Grantee / Delegate Readiness – Layering Funding Process

- Step 1: Determine the services provided by the child care partner
- Step 2: Layer One – Estimate potential subsidy loss and any other reduction of Subsidy that needs to be covered with Partnership funds
- Step 3: Layer Two – Reflect on the services the partner already provides & add costs for additional services that need to be covered by Partnership funds
- Step 4: Layer Three – Estimate costs for delivering individualized services to EHS/HS children. Identify other funding sources to cover costs for non-EHS/HS enrolled children who may receive the same service
- Step 5: Identify the methods of payment to the partner for these costs, considering provider-friendly payment practices and fiscal accountability requirements



<https://eclkc.ohs.acf.hhs.gov/search/eclkc?q=EHS%3ACCP+layering+funding>

Scenerio 1



POLL

A family child care home just became an EHS:CCP partner and will require a few minor facility renovations to ensure the safety of children and meet the Head Start Program Performance Standards. The Provider is serving 4 EHS:CCP children and 4 private pay families.

Do the renovation costs need to be allocated? Yes or No





POLL

Scenerio 2

Head Start requires that formula and diapers be provided for EHS:CCP children while in care. A family child care Provider buys diapers for all 6 of the children in her care. Three of 6 children are enrolled in EHS:CCP.

The Providers orders 300 diapers at a cost of \$300.

Can all of the expense be charged to the EHS:CCP grant? Yes or No



Scenerio 3

The Grantee and Provider agree that all 6 children in the Providers care will receive sensory and developmental screenings. Three of the children are enrolled in the EHS-CCP program.



POLL

Can EHS:CCP funds pay for the costs of all the screenings? Yes or No



Grantee/Delegate Readiness - Successful Implementation with Family Providers

- Family Child Care: Children are eligible from 6 weeks to school age 4
Center Based: Children are eligible from 6 weeks to age 3
- Group size and Ratios:
 - 1 Provider alone can care for a maximum of 6 children, with no more than 2 under 2;
 - A Provider with an assistant can care for a maximum of 12 children, with no more than 4 I/T (only 2 under 18 mos)
- Continuity of Care
- Funds follow the child
- Non-Federal Share



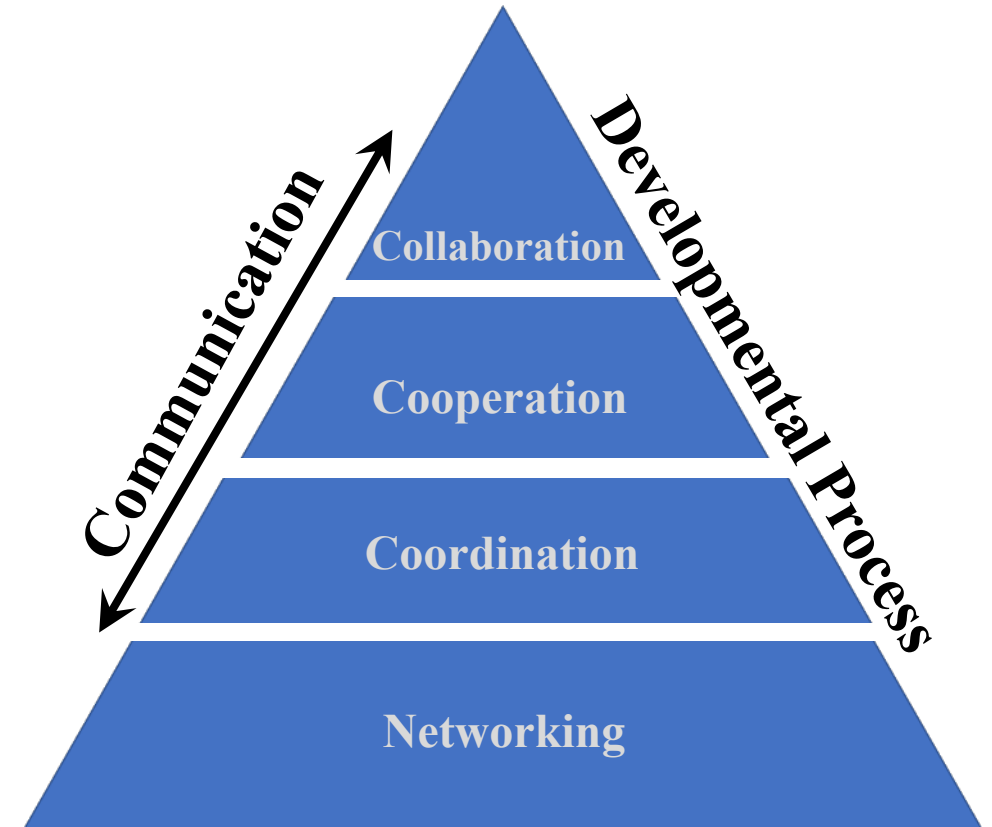
Grantee /Delegate Readiness – FCC Partnership Agreements

- Create and define the fiscal relationship between the Network & FCC partner
- Address fiscal rights and responsibilities of both parties, including record retention.
- Establish potential payment arrangements that includes a fiscal model of EHS:CCP funds, subsidy or other scholarship funding
- Develop a protocol for determining subsidy status of eligible children.
- Include confidentiality agreement to allow for regular and by-request exchange of fiscal records, information and reports.
- Develop & include procedures for ongoing monitoring and fiscal oversight.



Grantee / Delegate Readiness - Communication Plan

- Creation of a formalized plan, with regular, open, and shared communication with each Provider and with the group of FCC.
- Your plan must be communicated with transparency, building on strengthening relationships with Providers
- Continuous formal and informal communicating will be documented in the partner agreements and use flexible strategies that are imbedded in your on going monitoring protocols.



<https://eclkc.ohs.acf.hhs.gov/publication/foundations-fostering-partnerships-head-start-early-head-start>



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ADMINISTRATION FOR
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Grantee /Delegate Readiness – Criteria 1: 20 points

COMMUNITY NEED AND OBJECTIVES

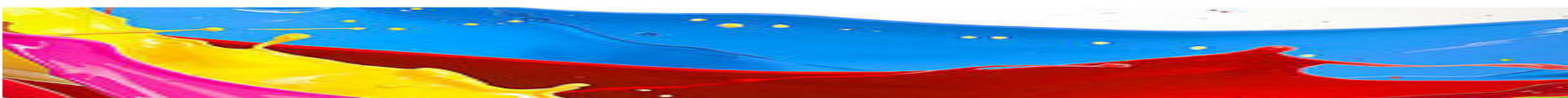
- Describe proposed service area & comprehensive services will be directed to eligible children
- Provide rationale for the number & ages of children
- Ensuring the community was involved in model selection.
- Analyze child care in your community; include Number of eligible children receiving subsidy & the quality of child care and services
- Plan for leveraging available funding streams (Subsidy)
- Plan for enrolling children with disabilities & other vulnerable children
- If you are doing a delegate model – discuss number of children and location. If not – say none for clarity of reader

QUESTIONS TO THINK ABOUT

What criteria will you use to judge a potential partner's ability to become an EHS program?

Think about defining your community and what number of children and programs would you feel confident engaging?

What are the most critical community partners to formally engage in your EHS:CCP program?



Grantee /Delegate Readiness – Criteria 1: 20 points

COMMUNITY NEED & OBJECTIVES

- MAP
- Utilize both internal and external data in assessment design:
- Be sure to analyze and aggregate data – specifically relating to child care in general and EHS children's use of subsidy
- Identify issues or challenges affecting data collection and analyze your sources in your discussion
- Justify full day, full year programming for (1) infants (2) toddlers (3 year olds) & pregnant mothers.
- Identify *barriers* for EHS children to access subsidy.

QUESTIONS TO THINK ABOUT

How have you selected partners & how do you know they are committed to the program?

How will you support parents in overcoming *barriers* to regular attendance & participation in the program?

How will you or will you - serve pregnant and newborn parents?



On a scale of 1-5, with 1 being “very little” and 5 being “very knowledgeable”, please answer this question.



POLL

How well do you know the needs of family child care providers in your community?



Grantee /Delegate Readiness – Criteria 2 – 30 points

PROGRAM DESIGN AND APPROACH

- The Network will work with a research consultant or internal expert to design a system of reviewing and aggregating child outcome data to measure school readiness and design strategies for improvement. Plan
- The Network with support providers in supporting families in providing a continuum of care for their child as transitioning into school or other child care options happens.
- The Network will provide benchmarks for selected partners that demonstrate their committed to EHS programming.

QUESTIONS TO THINK ABOUT

What benchmarks will indicate the provider is committed to the EHS:CCP proposal?

Have you developed a professional development framework to ensure all staff and teachers meet HS required qualifications.?

BIG QUESTION FOR MANY – What is the plan for the provider to meet HS teacher/child ratios and what supports will you, as the grantee provide?



Grantee /Delegate Readiness – Criteria 2: 30 points

PROGRAM DESIGN & APPROACH

Coaches will support the integration of a research based curriculum and assessment in FCC programs.

FCC providers and their families will be part of the planning and be integrated into the process for the Networks' School Readiness Plan.

The Network will have a plan to support providers in enrolling vulnerable children

The Network will have a plan and monitoring system to support providers in meeting HS comprehensive services.

QUESTIONS TO THINK ABOUT

How will FCC providers be supported to provide comprehensive services to enrolled children?

What will the monitoring protocols look like and how will they be implemented in a collaborative and relationship based manner?

How will the Network maximize community resources in providing comprehensive EHS FCC based services?




On a scale of 1-5, with 1 being “very difficult” and 5 being “very easy”, please answer this question.



POLL

How difficult do you think it will be for family child care providers to implement a research based curriculum?



Grantee /Delegate Readiness – Criteria 3: 15 points

STAFFING

The Network will recruit, hire, retain and manage staff to administer an effective and efficient EHS:CCP project.

The Network will review provider's education and training and develop an individualized plan to ensure all providers meet HS educational requirements.

The Network will develop human resource systems, including hiring, background checks, and training specific to developed job descriptions, staff protocols and reflective practice.

QUESTIONS TO THINK ABOUT

What systems and training in start-up and on-going support will most effectively and efficiently leverage staff 's ability to support independent providers to implement EHS comprehensive services.?

How will the Network develop accurate and time limited professional development plans for providers?



Grantee /Delegate Readiness – Criteria 4: 10 points

PLANNING AND IMPLEMENTATION

Start up planning is clear and demonstrates efficient use of internal and external resources to ensure full enrollment in 12 months after receipt of the grant.

The Network will provide a “fast track” plan for identification of families and enrollment of families currently receiving CCDF funding.

Start-up must include facility changes needed based on health and safety checks, as well as program improvements as needed to meet HSPPS.

QUESTIONS TO THINK ABOUT

What *barriers* need to be addressed during start-up to provide training and technical assistance to providers for reporting when using technology equipment and data bases?

What is your plan for currently enrolled children to be enrolled in the EHS:CCP project?

What are the barriers you seen in engaging FCC parents in EHS?



Grantee /Delegate Readiness – Criteria: 4 or 5

PROVIDER AGREEMENTS

- Identified partners committed to the proposed project.
- Commit providers to the number of enrolled EHS children
- Provider has a plan to meet HS teacher/child ratio
- Provider has a plan to use or integrate a RB curriculum.
- Provider and grantee staff have professional development plans to meet HS education and other required qualifications.
- Providers agree to support, learn and conduct child assessments and screenings as requested by the grantee.
- Providers will ensure families are utilizing subsidies.

QUESTIONS TO THINK ABOUT

What benchmarks will indicate the provider is committed to the EHS:CCP proposal?

Have you developed a professional development framework to ensure all staff and teachers meet HS required qualifications.?

Barrier– What is the plan for the provider to meet HS teacher/child ratios and what supports will you, as the grantee provide?

<https://eclkc.ohs.acf.hhs.gov/publication/foundations-fostering-partnerships-head-start-early-head-start>,



Grantee /Delegate Readiness – Criteria 5: 15 points

ORGANIZATIONAL INFRASTRUCTURE

The Network has demonstrated capacity and experience to implement a high performing EHS:CCP project with full and sustained enrollment through 2026.

The Network has an effective, established Board of Directors that has effective collaboration and coordination with the Policy Council.

Senior management staff and others have experience and expertise that will extend to the support and monitoring of FCC homes.

The Network's effective monitoring and evaluation occurs through self assessment processes and review of reporting formats in the Early Learning Outcomes Framework.

QUESTIONS TO THINK ABOUT

How will include past experience and success to show your accountability and ability to fully implement HS in a new program?

How will the BOD & PC extend their membership and reporting structures to include the EHS:CCP program when awarded?

How will you expand and include a SR report, PFCE report, and the use of other assessments in the completion of an annual self-assessment that aligns with your Strategic Plan and Mission?



Grantee /Delegate Readiness –Criteria 5: 15 points

ORGANIZATIONAL INFRASTRUCTURE

The Network' continuous quality improvement will include provider input through qualitative and monitoring data in our self-assessment and strategic plan.

The Network will use benchmark reports that synthesize data to provide governance bodies and leadership staff with meaningful and relevant oversight of accountability and to help develop strategic improvement plans.

Network reporting requirements will be created with the provider's capacity in mind, and be concise and minimal; combining reporting as much as possible.

The Network will conduct a Community Needs Assessment every 5 years, and update the community needs each year.

QUESTIONS TO THINK ABOUT

How do you ensure the Network's accountability in your partnerships?

How will you overcome potential *barriers* to reporting requirements?

How will you leverage your organizational structure to successfully plan and implement an effective and useful self-assessment plan and a community needs assessment?



On a scale of 1-5, with 1 being “little confidence” and 5 being “very confident”, please answer this question.



POLL

How confident are you that you can develop systems to ensure accountability in your partnerships?



Grantee /Delegate Readiness – Identify Critical Action Steps

Critical Action Steps:

1.

2.

3.

4.

