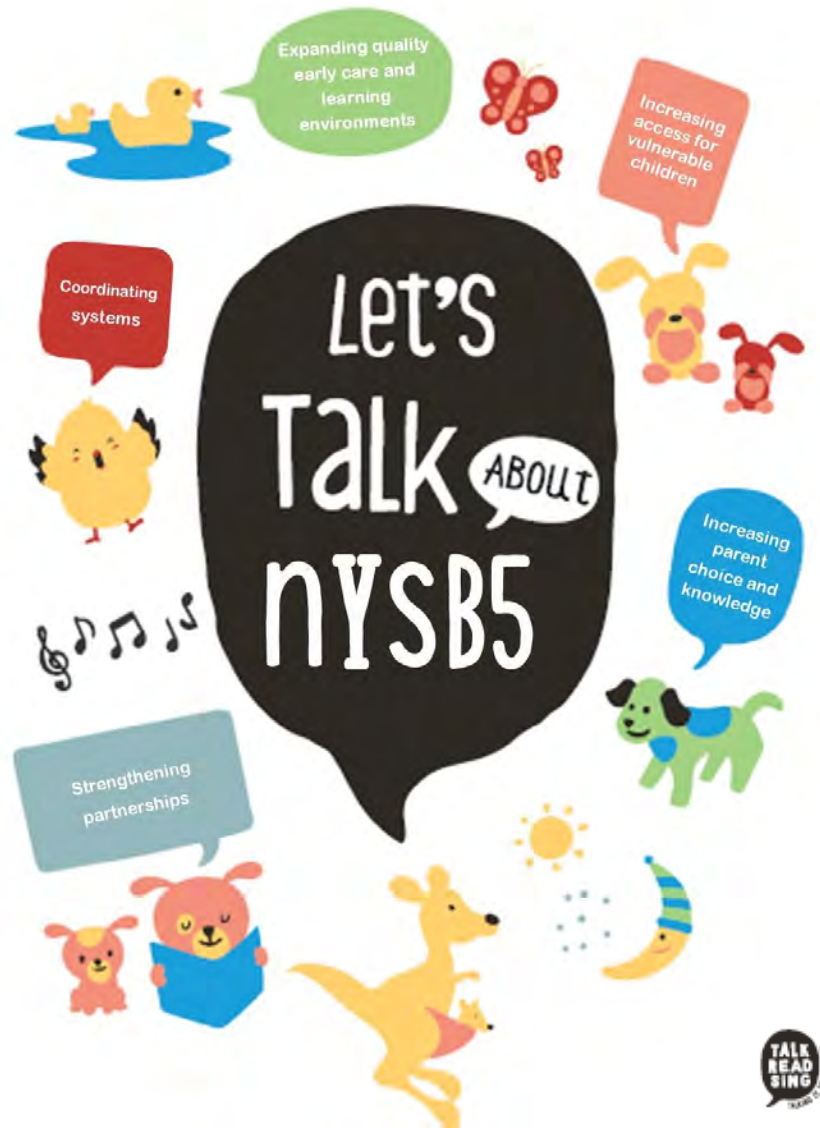


New York State Council on Children and Families

New York State PDGB5 (90TP005902)
Annual Program Performance Report

April 1, 2022



Council on Children and Families

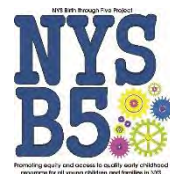


Table of Contents

Question 1.....	4
2021 Needs Assessment Update - Findings from Parent Survey and Focus Groups	4
A. INCREASING PARENT CHOICE AND KNOWLEDGE	5
B. QUALITY	7
C. INCREASING ACCESS FOR VULNERABLE FAMILIES	7
D. STRENGTHENED PARTNERSHIPS	9
E. COORDINATION OF SYSTEM BUILDING EFFORTS.....	9
Question 2.....	11
A. RESOURCE SHARING	11
B. STATEWIDE COORDINATION OF SERVICES.....	12
Question 3.....	18
Improving Coordination and Delivery of Services Across Mixed Delivery System (MDS):.....	18
A. STRENGTHENING THE ECCE WORKFORCE.....	18
B. CROSS-SECTOR PROGRAM IMPLEMENTATION	19
Question 4.....	24
A. State Technical Assistance (TA) and Business Training	24
B. The Shared Services Pilot.....	25
C. Family Child Care Network	26
D. Transportation Study.....	26
E. Statewide Media Campaign, Parent Portal and Welcome Baby Bundles	27
Question 5.....	29
A. QUALITYstarsNY	29
B. Early Childhood Career Centers.....	30
C. Early Childhood Leadership Initiative	32
D. Aspire Registry Expansion.....	32
E. NYSB5 Trainings	32
F. Infant and Early Childhood Mental Health	36
Question 6.....	39
A. Parent Advisory Council.....	39
B. Talking is Teaching Media Campaign.....	39
C. NYS Parent Portal	40

D.	Annual Parent Leadership Conference.....	40
E.	Resources for Families	41
F.	Welcome Baby Bundles	42
Question 7.....		43
A.	Kindergarten Transition Summits and Seed Money.....	43
B.	Baby Bundle Pilot Project	45
C.	Strong by Six Pilot	45
Question 8.....		46
A.	NYS Pyramid Model Data Coordination	46
B.	NYS Healthy Steps Data Coordination	47
Question 9.....		48
A.	Are activities being implemented as intended.....	49
B.	Is the project reaching the target population (vulnerable children):	49
C.	What is the participant reaction to the activities.....	49
D.	Are the activities aligned with the logic model:	50

Question 1

Discuss in detail how you used the PDGB-5 grant to support the development or enhancement of your statewide comprehensive early childhood care and education system. Use data to support your response.

The NYSB5 2019 Needs Assessment underscored the need for a more coordinated Early Childhood Care and Education (ECCE) system to provide children and families with swifter access to resources, more quality programming and an easier to navigate service system. In response to these findings, the NYS Early Childhood Advisory Council (ECAC)/NYSB5 Strategic Plan was developed. Specifically, goals 2 to 5 of this Strategic Plan focus upon the following drivers: A) increasing parent choice and knowledge; B) improving quality; C) increasing access for vulnerable populations using a whole child perspective; D) strengthening partnerships; and E) coordinating system building efforts. The highlights included below are categorized based upon the 2019 NYSB5 Needs Assessment recommendations and woven into the Strategic Plan (read more about the plan and support for **NYS's vision**: *All young children are healthy, learning, and thriving in families that are supported by a full complement of services and resources essential for successful development* in APPENDIX 1.1).

2021 Needs Assessment Update - Findings from Parent Survey and Focus Groups

- The 2021 Needs Assessment, an update to the 2019 NYSB5 Needs Assessment report, echoed the lack of access to ECCE programs and services and challenges faced by vulnerable families¹ in NYS, all of which were amplified by the coronavirus pandemic. Parent survey responses and focus groups revealed that immigrant families were especially impacted. The fallout from the pandemic continues to ripple through the immigrant community, as evidenced by the xenophobia and hate directed at immigrants from Asian countries, adding to the already present national racial discord. A significant impact on young children with developmental delays and disabilities because of service interruptions due to the virus also were highlighted, resulting in the needs of many children who needed services the most often not being met. Virtual services, an option for some, were no replacement for in-person programs and services. English language learning parents felt particularly disconnected from programs and services, relying on small networks of family and close friends to receive information and resources.
- Local providers prioritized race equity in hiring practices and policies. By ensuring equitable hiring practices for direct services providers to administrators, providers demonstrated their commitment to better reflect the racial diversity of the communities they serve. Providers also sought out training and classroom curricula to increase staff knowledge around equity and worked closely with partners to address injustices and inequities in their communities. (APPENDIX 1.2)
- The pandemic increased inconsistency of child care availability, and increased cost especially for families who needed care most (vulnerable families). The high cost of care was a major issue during the pandemic. Finding affordable child care was already a struggle for many families prior to the pandemic. This issue was further exacerbated after March 2020 due to job losses and decreased income. As families were losing

¹ Vulnerable populations are identified as children who are experiencing homelessness, children receiving early intervention or preschool special education services, children in homes with low income, children who are immigrants or refugees, children who are members of minority/ethnic groups, children who live in multi-language households, children who live in rural communities

income, child care costs were increasing (e.g., from \$170/week to \$200/week per child). Parents and caregivers speculated it was because of the extra cost of cleaning supplies, personal protective equipment, and technology to enable virtual learning. In addition, costs increased because, in order to follow social distancing guidelines, some programs split their classrooms into smaller groups of children, which required hiring additional staff, and thus increased tuition fees. Families also had to pay to retain a “slot” even if programs were closed, impacting affordability since they also had income loss.

- The Child Care Resource and Referral (CCRR) agencies were responsive to providers and families by offering specialized programming to early childhood providers, providing supports to meet the basic needs of families and providers and helping to alleviate emotional stress during the pandemic (APPENDIX 1.3).
- New York was able to streamline its subsidy program with the federal stimulus funding, to expand access to quality and affordable care. Notably, parental co-payments were capped at 10 percent of a family’s income for families that earn up to 200 percent of the Federal Poverty Level in 58 NYS counties (NYC has different eligibility criteria). This was a need noted in both the NYSB5 2019 NA and in the NYS Governor’s Child Care Availability Task Force report issued that same year (see below for more information about the Task Force). Another big positive change that occurred were regulatory changes to facilitate the implementation of 12-month eligibility for child care assistance regardless of a temporary change in the status of a child’s parent work.

A. INCREASING PARENT CHOICE AND KNOWLEDGE

The **Parent Advisory Council (PAC)** (highlighted in question 6) increased parent voice on the ECAC with ongoing parent engagement to inform the state’s early childhood system. In the 1st quarter of 2021, nine parents with a diversity of backgrounds and experiences joined the PAC. At the end of the year, 3 parents were unable to continue with the PAC due to competing priorities. However, the Family Engagement Specialist who leads this activity actively continued to recruit parents to participate. The PAC meets monthly to review new and existing family engagement projects and to share project experiences. PAC members also attend ECAC meetings and present on the PAC to partners statewide. A survey was conducted with PAC members to gather feedback and ensure responsiveness to parent needs.

PAC DATA HIGHLIGHT: The parents reported that their opinions were valued, and their input was used to implement PAC work, and 80% strongly agreed that the PAC allowed them to use their skillsets to help the group. When asked about PAC meetings, all respondents strongly agreed that objectives of PAC meetings were met, and the information presented at PAC meetings was relevant to their work. Of the 60% of respondents who had given a presentation about the PAC, 100% felt very comfortable and had a very positive experience doing so. All of them would also be willing to give more presentations to state agency and other stakeholders in the future. All respondents indicated that they would recommend participating in the PAC to other parents. When asked why, respondents stated that the PAC created a sense of community with other parents and gave parents the power to make a difference for their children. When asked if there was anything else they would like to share about their experiences being a part of the PAC, respondents said the PAC is a rewarding experience and they enjoy having a seat at the table. The creation of the PAC not only supports the integration of parent voice into policy decisions for families, but it is a key component of building equity. The PAC, when at its height of realization, will become a microcosm of NYS, that is rich in diversity, and speaking for the needs of families statewide.

The **Family Guide to NYS Early Childhood Services for Families with Children 0-5 (Guide)** (APPENDIX 1.4) is a perfect example of the NYS Mixed Delivery System² (MDS) and developed in response to the Needs Assessment 2019. In addition to resources provided on the NYSB5 Parent Portal (described below), the Guide features home visiting, child care, early intervention, Head Start, state funded prekindergarten and special education and provides families easily accessible information about these services, as well as others supports (mental health, health and safety, basic needs, addiction services, etc.). The Guide has been distributed widely throughout NYS to ensure connection to vulnerable communities and is available in the 11 most common NYS languages (pictured below). It is the first of its kind in NYS. Read further about distribution of the Guide in question 2.



Family Guide to NYS Early Childhood Services for Families with Children 0-5

NYS Parent Portal (APPENDIX 1.5)

The **NYS Parent Portal website** (www.nysparenting.org) was developed to centralize resources for parents and caregivers of children 0-5. The Portal includes 4 NYS CCF websites (www.nyschildcare.org, www.nysparentguide.org , www.msnavigator.org, www.everystudentpresent.org) and links to COVID-19 resources, Talking is Teaching posters and partner websites (NYS Office of Children and Family Services (OCFS), NYS Office of Mental Health (OMH), NYS Education Department (NYSED), NYS Department of Health (DOH), NYS Office of Temporary and Disability Assistance (OTDA), NYS Parenting Education Partnership (NYSPEP), Early Care and Learning Council (ECLC), Hunger Solutions, Learn the Signs Act Early (LTSAE), Help Me Grow (HMG) and NYS Parent Teacher Association (PTA)). Read more about the Parent Portal in question 6.

Talking is Teaching Media Campaign (APPENDICES 1.6-1.8): The media campaign targeted low-income families, non-English speaking families and first-time parents. The intent of the campaign is to increase early brain development by encouraging parents to talk, read and sing to their children every day to support healthy development and school readiness. The campaign featured an array of multicultural images, both digitally and throughout communities in buses, bus shelters, hair/nail/barber salons, laundromats, billboards, wallscapes and malls in the 11 most popular NYS languages. See appendix for examples. Read more about the campaign in question 6.

² **Mixed Delivery System (MDS)** is a system of early childhood care and education services that are delivered through a combination of programs, providers, and settings (such as Head Start, licensed family and center-based child care programs, public schools, and community-based organizations) and is supported with a combination of public and private funds.

B. QUALITY

Strengthening and furthering quality ECCE programming, with a focus on vulnerable populations, is a key NYSB5 project, with funding to expand the NYS Quality Rating Improvement System (QRIS), **QUALITYstarsNY (QSNY)**. The NYSB5 project has supported QUALITYstarsNY expansion.

QSNY DATA HIGHLIGHT: Since 2019, QSNY has enrolled 286 new programs. In 2021, there were 136 new programs spread across all 10 economic regions in NYS (read more about QSNY in question 5). In addition, there were 78 events held during the year to recruit new sites. Considering that the year 2 goal was to recruit 100 additional programs, this project is exceeding expectations.

QUALITYstarsNY along with the statewide expansion of new Career Centers (supporting career development in the early care and learning field) and Leadership Initiatives (supporting and building the leadership capacity in the ECCE field) are collectively building and supporting a sustainable supply of high-quality early childhood workforce. NYSB5 support for QUALITYstarsNY is coupled with the NYS Governor's historic appropriation of \$45 million to expand the reach of the state's QRIS.

C. INCREASING ACCESS FOR VULNERABLE FAMILIES

A significant outcome related to the NYSB5 project relates to the recommendations provided by the **NYS Governor's Child Care Availability Task Force** (www.ocfs.ny.gov/reports/childcare/Child-Care-Availability-Task-Force-Report.pdf). The Task Force, supported in part with NYSB5 funds, is a 20-member cross-systems group that convened over the course of 2 years because NYS recognized that child care is not just a women's issue, but a societal and economic issue that touches every family, in every community, regardless of neighborhood or economic status. The Task Force recommendations for affordability, equity, quality and coordination include setting a statewide standard for affordability, increasing provider capacity to eliminate child care deserts, supporting program quality and developing a data system to support quality, efficiency and transparency (APPENDIX 1.9). With the COVID-19 pandemic further demonstrating how foundational child care is to our

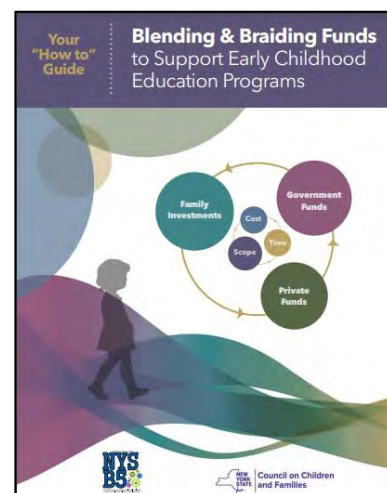
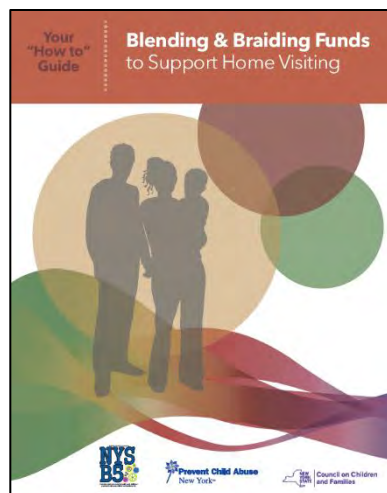


NYS Governor's Child Care Availability Task Force Report

lives and our economy, the Task Force now will shift its focus to evaluating the impact of COVID-19 on the child care industry, identifying recommendations to address workforce issues that plague the provider community, and advising the state on implementation of a universal child care model using existing state and federal funds. Notably, the Task Force includes a representative from both the NYS Council on Children and Families (the NYSB5 awardee) and the ECAC and since it was originally established has expanded its membership to include four parents, two who have used subsidized child care and two who have not. This Task Force will allow for NYS to be bolder and more visionary in our thinking around child care. Duties of the Task Force are codified in [NYS Social Services Law section 390-k](#)/[NYS Social Services Law section 390-k](#) ([www.public.leginfo.state.ny.us/lawssrch.cgi?NVLWO](http://www.public.leginfo.state.ny.us/lawssrch.cgi?NVLWO;)).

NYS has excelled at using NYSB5 funding to build a statewide infrastructure that prepares, strengthens and enhances school readiness for low-income and disadvantaged children and families by providing effective and innovative transition practices for families and children as they prepare for the transition to kindergarten. Statewide **Kindergarten Transition Orientation trainings** are funded by the NYSB5 project, led by the NYS Council on Children and Families, and developed in collaboration with partners from the Early Care and Learning Council, NYS Education Department, Head Start Collaboration Office, Pyramid Model Leadership Team and local CCRR agencies. This one-day orientation training includes sample agenda items and a packet of handouts for local agencies to use to lead their own Kindergarten Transition Summits and transition team meetings. In 2021, the NYS Council on Children and Families converted the training into a video production available online: <https://www.ccf.ny.gov/council-initiatives/nysb5/faqs/>. This new resource will be available each year moving forward and will save time and funds to ensure kindergarten transition practices grow and are sustained statewide.

Another improvement developed in response to the 2019 Needs Assessment included the creation of how-to guides, **Blending and Braiding Funds to Support Early Childhood Education Programs**, with the companion Training of Trainers (ECE TOT) curriculum, and the newly released, **Blending and Braiding of Funds for Home Visiting Programs**. The ECE TOT kicked off in July 2021, with trainers from 8 CCRRs participating. The



CCRRs have the capacity to act as local experts to provide technical assistance (TA) to the ECCE programs in their region.

BLENDING AND BRAIDING DATA HIGHLIGHT: The ECE TOT trainers trained 7 cohorts of child care providers at centers and family child care providers statewide. Half of the participants (56%) reported demographic data. Most participants were female (75%), and either White (35%) or Black or African American (35%), and not Hispanic (70%). These newly-trained TOT trainers will be conducting at least 21 trainings over the course of next year, 2022, including another round of TOTs for the CCRRs that were not able to participate in the first round.

These trainings are the first step in teaching ECCE providers how to financially support their businesses, using available funding streams, which will lead to creating a sustainable statewide infrastructure and increasing access for families. Of note, these trainings were included in the NYS OCFS Family First Prevention Plan. ([FFPSA-Prevention-Plan-2022Feb23.pdf \(ny.gov\)](#) – see p. 23).

A significant stride over the past year in NYS was the focused effort on the development of a statewide **early childhood integrated data system** (ECIDS). While NYS does not yet have an ECIDS, the NYS ECAC, with NYSB5 support, continued to explore creating a NYS ECIDS through regular data meetings and discussions with other states. NYS recognizes the importance of an integrated data system to identify gaps in the 0-5 MDS and track outcomes for vulnerable children, but a number of barriers have impacted the development and implementation of an ECIDS in NYS. However, in 2022, the ECAC with support from the NYSB5 project will create a shared NYS early childhood data dashboard. This data dashboard will provide a foundational first step in identifying and widely sharing key cross-sector metrics, including the number of children participating in Head Start, child care, home visiting, special education and prekindergarten and possibly other metrics such as developmental screening data.

D. STRENGTHENED PARTNERSHIPS

The partnerships developed through the NYSB5 project are significant. The bi-monthly scheduled **NYSB5 Partner Meeting** regularly yields 80 participants and has established a communication pathway between state and local agencies and the opportunity to develop cross-sector relationships and awareness of efforts underway by historically siloed agencies. The NYSB5 meetings are attended by associate commissioners, non-profit executive directors, local CCRR agencies, parents, just to name a few (APPENDIX 1.10). The sustained collaborative relationships developed with a range of cross-sector partners provides a key building block to systems change that supports comprehensive and aligned early child care and education programs and services that will support young children and families. The building of relationships has been evidenced by impromptu telephone calls between agencies to learn more about a particular project mentioned at a meeting and ideas for collaborations have been sparked. For example, a recent presentation about a NYSB5 project, the Strong Starts Initiative to change child welfare practices, prompted follow-up discussions with child welfare, child care, substance abuse, court staff and social services. The same occurred after a NYSB5 presentation about the NYSB5 Fatherhood Coordination Initiative, which prompted follow-up discussions with the NYS Office of Addiction Supports and Services.

The **NYS Technical Assistance (TA) Alignment** meetings have provided a forum for all 20 of the early childhood professional development networks to share professional development opportunities and best practices to better support the coordination of TA and professional development statewide and decrease confusion across the mixed-delivery system. The meetings have resulted in the development of a statewide resource that identifies the 0-5 TA leads in NYS. In 2022, a simplified companion graphic will be developed (APPENDIX 1.11).

E. COORDINATION OF SYSTEM BUILDING EFFORTS

NYS has excelled in supporting coordinated professional development opportunities statewide. The **Aspire Workforce Registry** (NY's early childhood online professional development registry) expansion has been significant. Aspire provides its users with a free online portfolio and helps locate high quality training. Every training posted in Aspire undergoes an extensive review process to ensure it meets high quality early care and learning standards.

ASPIRE DATA HIGHLIGHT: In 2021, Aspire added 9,821 new individual profiles, 250 new active organization accounts, and 218 registered as trainers. Second, the NYSB5 project required all funded trainings be submitted and approved through Aspire to support both its coordinated use and ensure the trainings are of high quality. In the last year, 4,127 training events were approved.

Further, Aspire added an Application Programming Interface (API - a software intermediary that allows two applications to talk to each other) between Aspire and the Pyramid Model Implementation Data System (PIDS), detailed in questions 2 and 6. In addition, there are plans to add another API to connect Aspire to the Head Start Coaching Companion. Other coordination efforts include the partnership between State University of NY at Albany Professional Development Program Enhanced NYSB5 Workforce Scholarship: Early Childhood awards and the Professional Development Institute Career Development Pathways and the bi-annual NYSB5 TA Summit (see question 2).

Question 2

How have B-5 funds helped you use federal, state, local, and non-governmental resources more efficiently to strengthen program delivery? Include efforts to align regulations, standards and requirements, and efficiencies, addressing one, two or all three of these efforts: (1) resource sharing (2) coordination of services, and (3) reduction in the duplication of services. In addition, describe other approaches to improve resource efficiency. If available, use data to support your response (STATE LEVEL IMPACTS)

A. RESOURCE SHARING

NYS continues to strengthen efforts to coordinate and align the governance of our state's NYSB5 Mixed Delivery System (MDS). One of the fundamental activities supported by the NYSB5 has been the building of relationships across early childhood care and education (ECCE) programs, providers and settings. The NYSB5 project has supported these relationships by regularly convening Partner Meetings, 6 times per year (or every other month), with attendance of 85 partners per meeting. Some of the other significant and tangible evidence of coordinated support of the state's MDS involves consistency in messaging through our statewide media campaign, ease of access to cross-sector resources and services through our NYSB5 Parent Portal and Mobile App, bi-monthly distribution of the NYSB5 newsletter, and sharing of electronic and printed resources for providers and families. For a full breakdown, see APPENDIX 2.1.

RESOURCE DISTRIBUTION DATA HIGHLIGHT: In 2021, the NYSB5 project distributed 39,951 of resources across NYS. The most widely distributed resource was the Talking is Teaching Coloring Book (English) (4,875 books were distributed), and Early Learning Guidelines were shipped to all child care sites (4,976 in English, 154 in Spanish) and institutions of higher education were responsible for distributing the most publications.

Resources shared and key initiatives are listed below:

Resources for Providers and Families:

- **NYS Early Learning Guidelines** were mailed to all child care sites (including all QUALITYstarsNY (NYS QRIS) participating programs). An overview training of the **NYS Early Learning Guidelines** was conducted for trainers, family child care providers, providers at child care centers, and licensors and registrars.
- **Family Guide to NYS Early Childhood Services: Prenatal through Age 5** this Guide, developed in collaboration with our NYSB5 partners, beautifully illustrates the NYS MDS for families and providers (i.e. home visiting, child care, early intervention, Head Start, state-administered prekindergarten and preschool special education) and includes links to connect parents to each program as well as to resources for meeting basic needs, family support, developmental disabilities, substance abuse, mental health, health and safety, and domestic violence (APPENDIX 1.4). The Guide is translated into the 10 most common languages other than English spoken in NYS (i.e. Arabic, Bengali, Chinese, Haitian-Creole, Italian, Korean, Polish, Russian, Spanish, Yiddish). The NYS Office of Children and Family Services posted the Guide in all 10 languages on its child care website for both families and providers.

FAMILY GUIDE DISTRIBUTION DATA HIGHLIGHT: The Guide was sent to all 11 Baby Bundle awardees who distributed 8,000 copies of the Guide (discussed in question 6). In addition, the Guide was sent to the state's 34 Child Care Resource and Referral (CCRR) agencies and each of the 24 Family Court Children's Centers in NYS. The Children's Centers provide drop-in child care for families attending court proceedings.

- **NYSB5 Bimonthly Newsletter** is distributed to over 400 statewide partners, representing programs, providers, and settings from each component of the state's MDS (Head Start, child care, prekindergarten, special education, early intervention, community-based organizations, higher education, etc.). The newsletter features NYSB5 opportunities, upcoming professional development trainings, and resources for families.
- **NYSB5 Parent Portal and App** (see questions 1 and 6).
- **NYSB5 Media Campaign**(see questions 1 and 6).

B. STATEWIDE COORDINATION OF SERVICES

The **NYS Early Childhood Advisory Council (ECAC)/NYSB5 Strategic Plan** update and implementation has had the greatest impact on statewide coordination of services to young children and families. The NYS early childhood system has benefited by having cross-sector representation at ECAC meetings and on the ECAC goal teams. (To see ECAC membership, codification and other information go to www.nysecac.org.) These cross-sector meetings and projects have strengthened the communication channels between state agencies and statewide organizations. Adding parents of children under age 8 to the ECAC, with the creation of the Parent Advisory Council, has provided the ECAC with true parent voice. It also has enabled the ECAC to learn and respond to parent's ECCE system's concerns and challenges in NY.

The ECAC Strategic Plan serves as a foundation for coordination and collaboration to support the NYS vision that all children in NYS will be healthy, learning and thriving in a family that is supported by a full complement of services and resources essential for successful development. The ECAC's 10 Goals are below. Included in APPENDIX 2.2 is the ECAC Goal Team membership list, illustrating cross-sector participation across the state.

- Goal 1: The ECAC strengthens its structures and capacity to provide strategic direction and formal recommendations to the Governor, while communicating to and engaging with its stakeholders and other agencies and organizations to ensure that every young child thrives in early childhood, particularly the most vulnerable populations.
- Goal 2: Family engagement and leadership are essential to inform ECAC early childhood system building efforts.
- Goal 3: All NYS ECCE programs are prepared to provide children and families with high quality settings and have supportive services and resources in place to improve quality.
- Goal 4: All system building efforts are informed by a whole child perspective that includes mental health, oral health and physical health as integral for high-quality early care and education programs.
- Goal 5: An increased number of successful partnerships will further develop the mixed-delivery system of high-quality early care and education programs.

- Goal 6: Comprehensive interdisciplinary strategies are in place to grow the workforce and to support children from birth through age five and their families.
- Goal 7: NYS's early childhood education workforce system, New York Works for Children, is fully implemented.
- Goal 8: Actionable short and long-term strategies are in place to fund essential elements for NYS's mixed-delivery system.
- Goal 9: An Early Childhood Integrated Data System (ECIDS) is created for tracking service delivery, outcomes and system improvements to drive accountability, policy development, funding and best practices across NYS.
- Goal 10: Research findings and evaluation results are used to recommend policy, statutory and regulatory changes, as well as structures and best practices to strengthen the NYS early childhood system.

Each goal has a team, comprised of content experts, including deputy commissioner and senior staff representatives from: the NYS Education Department Office of Special Education and Office of Early Learning; Home Visiting; NYS Office for Children and Family Services (OCFS) Division of Child Care; NYS Office for Persons with Developmental Disabilities (OPWDD); NYS Office of Mental Health (OMH); NYS Department of Health Office of Health Insurance Programs; Title V, QUALITYstarsNY, Early Intervention and NYS Office of Temporary and Disability Assistance. The ECAC members, goal coordinators, and goal team participants act as liaisons and key messengers to connect other prominent NYS early childhood working groups including the NYS Governor's Child Care Availability Task Force, NYS Early Intervention Coordinating Council, NYS OCFS Division of Child Care Stakeholders Meeting, NYS Early Childhood Comprehensive Systems (ECCS) State Advisory Team, NYS Home Visiting Coalition, NYS Parenting Education Partnership, NYSB5 Technical Assistance (TA) Alignment, NYS Home Visiting Coordination Meetings and NYS Pyramid Model Community Wide Leadership Team.

To further support system coordination and implementation of the ECAC Strategic Plan, PDGB5 funds have provided the opportunity to hire several key positions: the Early Childhood Advisory Council Coordinator, Early Childhood Collaboration Coordinator (highlighted below), Early Childhood Transition Coordinator (highlighted in question 7), The Family Engagement Specialist (highlighted in question 6), and the Pyramid Model Training Coordinator. These PDGB5 staff provide everyday connections between representatives of the ECCE programs in NYS including those under the purview of the NYS Education Department, the NYS the Head Start Collaboration Office, NYS OCFS, NYS DOH, NYS OMH and others. In the past year, the NYSB5 Early Childhood Collaboration Coordinator has supported the NYS Head Start Collaboration Director and the Director of NYSED's Office of Early Learning in presenting a webinar about how community-based organizations can braid their funding to collaborate with their school districts to deliver prekindergarten instruction. In short, with PDGB5, NYS has built the scaffolding at the state level, as well as the local level, to ensure communication and coordination across sectors.

The NYSB5 initiatives listed below serve to further connect programs in the NYS MDS:

- **NYSB5 Partner Meeting:** NYSB5 project holds a Partner Meeting every other month with NYSB5 contractors and other MDS partners. Attendees include the NYS OCFS, NYS OMH, NYS Office of Addiction Supports and Services, NYS Office for Temporary and Disability Assistance, NYS Department of

Labor, the State University of NY at Albany, the City University of NY, NYS Education Department, Prevent Child Abuse NY, NYS Association for Infant Mental Health, Children’s Institute, Inc., Fatherhood Connection, NYS Parent Teacher Association, Early Care and Learning Council, and CCRR agencies. In 2019, the meeting began with 25 participants and since has increased to routinely having over 85 participants (APPENDIX 1.10). Other notable collaborations included the NYSB5 project presentation to the Early Care and Learning Council, the NYS Office of Children and Family Services Division of Child Care and the Region II Tribal Administrators Unit.

- **NYSB5 October 2021 Virtual Convening:** The 2021 NYSB5 Convening was a virtual event held on October 15, 2021. The goals of the event were to share information and provide updates about NYSB5 funded activities across NYS. The event consisted of a featured speaker and six 75-minute sessions. Following the featured speaker, the attendees had the option of choosing one of two sessions that were offered during each of three time blocks (early morning, late morning, and afternoon).

NYSB5 CONVENING DATA HIGHLIGHT: There were 116 attendees at the conference. The majority (69%) indicated the convening helped them to better connect to the state practitioner community. Despite the many challenges of having people attend virtually, most (69%) said they were able to fully participate in the meeting. Most (97%) identified as female. Fifteen percent of respondents reported themselves to be Hispanic and 21% described themselves as a race other than White. Approximately one-quarter (24%) of all respondents worked for state government and the two most common programs where respondents worked were Early Intervention (12%), and Home Visiting (9%). The four most prevalent age groups/grades served by programs at which respondents worked were toddlers (71%), birth through 18 months (65%), 3-year-old children (55%), and 4-year-old children (55%).

- **NYSB5 TA Alignment:** This cross-sector group, which meets 2 to 3 times per year, provides a platform for all NYS TA Early Childhood providers to meet and network with each other, share updates, and share resources (i.e., NYS Early Learning Guidelines, the Core Body of Knowledge and NYC Family Child Care Network Curricula) and further their collaboration and connections. The meetings serve a critical purpose: providing the opportunity to break down siloes, promote and learn from one another, share professional development opportunities, align and leverage resources. (APPENDIX 1.11)

TA ALIGNMENT DATA HIGHLIGHT: In August, most agencies (82%) reported they had plans to align/coordinate TA Systems and most (86%) had taken steps to do so. After the final TA meeting for the year, almost all respondents (96%) reported the meetings were useful.

- **First Children Finance State Business Strategies TA:** In 2020, NYS began receiving TA from First Children’s Finance to explore collaborative and innovative financing strategies to support ECCE businesses. The NYS Collaborative Team (TA Team) of five convenes to hear from state and national financing strategies experts about initiatives designed to support the ECCE businesses. In addition, the TA Team has a standing weekly meeting to develop and implement financing strategies plan to support ECCE businesses who deliver early care and educational services to vulnerable, underserved, or unserved children and children with, or at risk for, disabilities. The implementation plan is a culmination

of: (1) resource sharing; (2) coordination of services with colleges, universities, loan funds, state agencies, and non-for-profits; (3) reduction in the duplication of services; and (4) expansion to existing services and trainings (APPENDIX 2.3).

- **The NYSB5 Home Visiting Coordination Initiative (HVCI):** This Initiative is connected with several complimentary home visiting projects including MIECHV, Raising NY Coalition (a diverse statewide coalition of parent, early childhood, education, civil rights, business, and health organizations dedicated to increasing the number of children who are on track for school readiness), and the Schuyler Center for Analysis and Advocacy’s efforts to increase access to home visiting. Community-based organizations work with each of the 10 economic development regions in NYS to support ongoing coordination of regional home visiting plans that include supporting policy to implement universal home visiting, develop an adapted Talking is Teaching media campaign (including materials to support local coordination and decrease stigma of home visiting) and increase coordinated intake and referral. (APPENDIX 1.6-1.8). The HVCI project plan includes the development of a White Paper to assess the home visiting workforce and make recommendations for enhanced support. At Prevent Child Abuse New York’s (PCANY) discretion, we will forgo this Paper at this time. NYS does not currently collect comprehensive data on the workforce. To obtain the data, the burden would be placed upon program/models to provide the data via survey. The pandemic has made it difficult for programs to do all but the required work. Instead the recommendation is for home visitors be required to participate in Aspire. Our colleagues in Illinois shared a report on the status of the home visiting which was only possible workforce and told us it was only possible because of the state mandate that home visitors be active in Aspira workforce registry. We will use this information to encourage NYS to do the same.

- **The NYSB5 Fatherhood Coordination Initiative:** This initiative launched in July 2021 to much statewide interest. The first of its kind in NYS, this Initiative seeks to bring together regional stakeholders to identify local fatherhood programming, conduct regional Strengths, Weaknesses, Opportunities, Threats (SWOT) analyses, and develop recommendations to support fatherhood coordination statewide. The NYSB5 project manager and NYSB5 Fatherhood Coordination Initiative lead along with several NYS fatherhood programming administrators from the Cattaraugus Department of Social Services, NYS Department of State Community Block Grant Fund and NYS OCFS presented at the NYS Community Action Agencies Professional Development Conference in October 2021. In December 2021, the initiative presented at the NYSB5 Partner Meeting and has connected with the NYS Office for Addiction Supports and Services, the NYS Parenting Education Partnership and local departments of social services. The initiative has identified 10 regional champions through the statewide network of Community Action Agencies (CAA). The CAAs are connecting with local CCRR

Fatherhood Conference Attendee

“The speaker was exceptional. He broke down...the stereotypes that many use when they refer to black men. That more black men are in prison than are in college ... moved from sharing personally about his own children to data and research that he knows well as a very accomplished professional. Personally, he spoke about how critical it is to simply show up - to be PRESENT in your children's lives!! Dads MUST always do all that they can to create a connection with their children even if they are behind the wall/incarcerated or if the children do not live with them.”

agencies, home visiting coordination champions and the NYS Parenting Education Partnership grantees and completed - the National Fatherhood Initiative's Father Friendly Check Up. The Father Friendly Check Up is an assessment tool across four domains (leadership development, organizational development, program development, and community engagement) that helps assess how welcoming and encouraging an organization is in its engagement and development of father-related activities, programming and services. The initiative also partnered with the White Plains Youth Bureau to help coordinate the 7th Annual Fathering Conference which was held virtually on November 9th and December 9th. The conference featured presentations on employment, connecting with children, and wellness.

- **NYS Pyramid Model Implementation:** (APPENDIX 2.4) The Pyramid Model is a social and emotional framework of evidence-based practices for promoting young children's healthy social and emotional development. This framework can be applied in all ECCE modalities. In NYS, Pyramid Model implementation expansion is active in the MDS in every region of the state. Blended funding from CCDGB, PDGB5, Head Start, NYS Office of Mental Health and other funding sources and in-kind supports enable Pyramid Model trainings and coaching to be offered for free to all in the ECCE field. To ensure statewide coordination and reach, two statewide events took place over the past year. First, a two-week virtual Pyramid Model Summit (the first ever in NYS) was convened and culminated in a celebration for all of the Master Cadre trainers who provide leadership, training, and ensure fidelity. Second, the State (PM) Leadership team, comprised of members from state agencies, higher education and other sectors in early childhood met virtually to share progress.

PYRAMID MODEL DATA HIGHLIGHT: In 2021, 20 additional Master Cadre Trainers were trained bringing the total to 40 statewide. Additionally, over the past year, 4 new Master Cadre trainers provided bilingual training. 30 new diverse children's books with accompanying Pyramid Model Book Nook Activity Cards (beginning to be translated into Spanish) were created, bringing the total to 52 Activity Cards. The Pyramid Model Parent Guide and Handbook were translated into Arabic (which was shared with the National Center on Pyramid Model Innovation so other states can use it too). Pyramid Model State Leadership Team's Benchmarks of Quality: In 2020, the State Leadership team participants rated 4 of 49 BOQs as "emerging/needs improvement". In 2021, the team identified only 1 of 49 as emerging/needs improvement. In addition to braided funding strategies to support Pyramid Model sustainability, the NYSB5 project hired a consultant to develop an ECCE financing strategy plan to analyze the Return on Investment (ROI) on the Pyramid Model and develop a Social Impact Bond (SIB) feasibility study to determine if SIBs can support Pyramid Model implementation costs. The reports will be completed in 2022.

- **NYS Pyramid Model Data Coordination:** The Pyramid Model Implementation Data System (PIDS) was created with PDGB5 funding and was launched in 2020 and was used by all Pyramid Model-implementing sites in 2021. The capabilities and cross-sector data collected by PIDS are highlighted in question 8.
- **NYS Healthy Steps Data Coordination:** Currently, there are 13 Healthy Steps sites funded by the NYS Office of Mental Health. Of these, with PDGB5 funding, 11 Healthy Steps sites are enhancing data collection and reporting of key elements have been identified to support implementation, maintain fidelity and measure Healthy Steps outcomes. This Healthy Steps initiative is highlighted in question 8.

- **NYS Policy Mapping Tool:** Building on efforts to address child care deserts, working with the NYS OCFS Division of Child Care, the NYSB5 helped to support the creation of a NYS child care desert mapping tool. This tool supports the policy decisions involved in the development of the NYS Child Care Desert Request for Applications (RFA) using federal coronavirus stimulus funding, by providing state and county level data to guide RFA requirements to ensure funding is targeted to under resourced communities. The link to the mapping tool is https://bit.ly/cc_deserts. The NYSB5 Needs Assessment was referenced when developing RFA guidance with OCFS. To respond to the need for more infant and toddler care, additional points are provided to submissions focusing on this age group.

Question 3

How have PDG B-5 funds helped you improve the coordination and delivery of services across models and funding streams in the state's mixed delivery system? In your response, include Head Start and child care providers, home visiting and preschool programs, state and local governments, Indian tribes and tribal organizations, private entities (including faith and community-based entities) and local educational agencies, if applicable. If available, use data to support your response. (SERVICE DELIVERY COORDINATION)

Improving Coordination and Delivery of Services Across Mixed Delivery System (MDS):

There are several NYSB5 initiatives working across all programs, providers and settings within NY's MDS. Some initiatives focus on (A) strengthening the Early Childhood Care and Education (ECCE) workforce, while others focus on (B) cross-sector program implementation.

A. STRENGTHENING THE ECCE WORKFORCE

NYSB5 funds have supported the workforce by expanding **Aspire** (NY's early childhood professional workforce registry) which includes the full MDS.

DATA HIGHLIGHT: Over the past 2 years over 7,000 people have been added to Aspire working in the MDS (child care, Head Start and prekindergarten). Efforts continue to increase enrollment of professionals that encompass the entire NYS MDS including home visitors, infant and early childhood mental health specialists and early intervention providers. 9,821 new individual profiles were added in 2021. Below are highlights of the demographics of these new Aspire participants. See APPENDIX 3.1 for a detailed breakdown of the demographics.

Chart 3A. Aspire Registrants Race and Ethnicity 2021

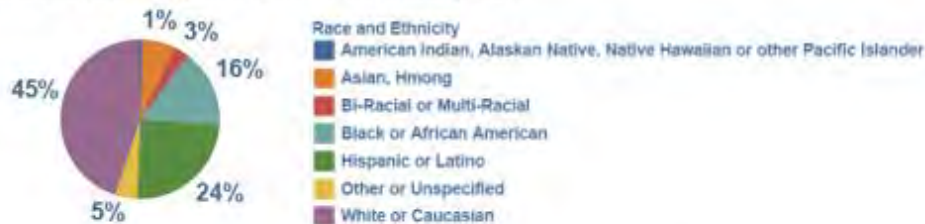


Chart 3B. Aspire Registrants Gender 2021

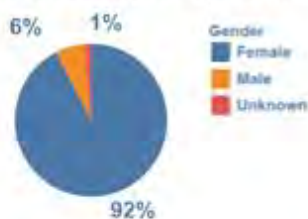


Chart 3C. Aspire Registrants Education



All NYSB5 vendors are required to enter NYSB5 funded trainings into Aspire to ensure the professional development is of high quality and that it is tracked in the participant’s profile. This practice change implemented in 2019 was expanded and is envisioned to be sustainable as more users, trainers and programs see the benefits of adding their information to this growing and comprehensive early childhood workforce registry.

B. CROSS-SECTOR PROGRAM IMPLEMENTATION

The Strong by Six pilot program provides an example of one community’s cross-sector initiative to ensure children are developmentally on track and receive needed services while receiving guidance through local navigators in their community. Other cross-sector projects supported and strengthened by NYSB5 are described below, too.

Strong by Six Pilot: The Strong by Six pilot is an expansion of the “Get Ready to GROW” project that began comprehensively screening three-year-old children in 2016, with the goal of ensuring that young children are developmentally on track and ready for kindergarten. The NYSB5 funding enabled the program to expand to reach younger children (ages 12 to 60

months) and provide earlier connections, when needed, with services to provide support for developmental delays. The comprehensive screening and referral pilot provides vision, hearing, speech, motor, dental, height and weight screening to provide a comprehensive view of a child’s development at no cost to the family. Using a data system called COMET, the pilot screens and employs navigators who work with the family to follow up on screening results and help them become stronger advocates for their children. Referral lists



The Strong by Six “Mobile Screening Bus” increases access to screening and referral for vulnerable children – traveling throughout the local community and reaching children where they are.

have been developed based upon local community resources and monitored regularly to include Early Intervention (EI), the local school district, medical providers as well as providers that accept Medicaid. The project regularly recruits new sites to provide screening. To support ease of communication with providers, the pilot has a shared data agreement with the Regional Health Information Organization system which allows efficient exchange of confidential health data. This integration into the health data system has been key to

STRONG BY SIX DATA HIGHLIGHT: In Year Two, 983 children were screened. A substantial number of children did not have complete race data (30%). Of the children screened who did have their race reported, they were predominantly from vulnerable populations. The age range of children being screened has gradually been expanding, with the most increases reported from children who are 2 and 4 years and the least for children who are 1 and 5 years. (APPENDIX 3.2)

the success of the pilot. In addition, the pilot signed an agreement with the local providers association to conduct screenings at medical homes for children who have Fidelis insurance. Furthermore, the NYSB5 funding helped the project leverage additional funding and expand into neighboring regions of the state. This

project that initially covered one county, now covers 13 counties, and is focused on statewide spread. Project has work flow diagrams, uses a continuous quality improvement framework and will be developing a guide to replicate the model.

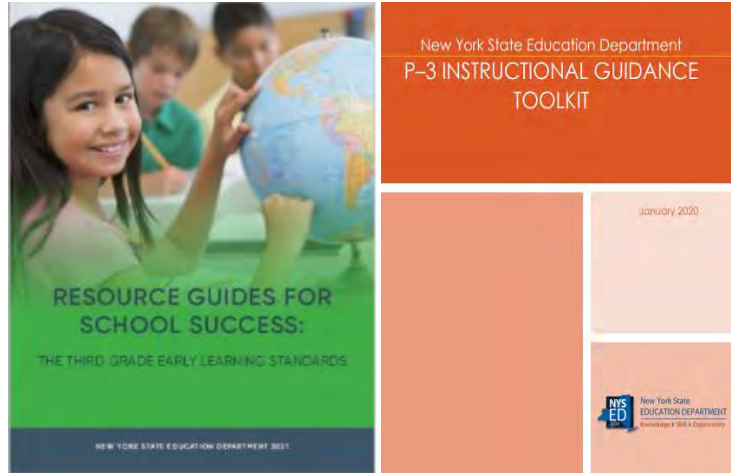
Pyramid Model Statewide Implementation, referenced in questions 1 and 2, has expanded across the MDS. The Pyramid Model Statewide Leadership team oversees implementation of the Pyramid Model at the state level. Local success of Pyramid Model implementation largely is due to the support of PDGB5 funded regional Pyramid Model Hubs at five Child Care Resource and Referral (CCRR) agencies in NYS. By building community teams, these local hubs support the MDS to implement the Pyramid Model and eliminate the suspension and expulsion of children under 6 in NY. Notably, the Pyramid Model Hubs have continued to successfully recruit new programs; in 2021, two Hubs launched 22 new implementation programs.

Along with Pyramid Model Hubs, PDGB5 funded 200 trainings modules that were delivered by the Pyramid Model Master Cadre. The training modules that were conducted included Pyramid Family Child Care Providers Module 1 & 2, Pyramid Model Preschool Module 1,2 &3, Pyramid Model, Parents Interacting with Infants (PIWI) and Intro to Coaching Early Childhood Professionals. Gathered from the training evaluations from these modules, below is a chart that lists the participants by modality, illustrating MDS participation. Table 3D shows the statewide reach of Pyramid Model trainings showing that we’re well on our way to statewide implementation, an accomplishment only made possible with NYSB5 funds.

Table 3D. Pyramid Model Participant’s Modality 2021 Illustrating MDS Participation

After School Program	118
Babysitter/ Nanny	114
Child Care Center	66
Community Based Organization	45
Department of Social Services	38
Early Head Start	36
Early Intervention	15
Head Start	9
Higher Education	9
Home Visiting Program	7
Hospital	7
In-home Family Child Care	7
In-home Group Family Child Care	6
Legally Exempt Child Care	5
Migrant and Seasonal Head Start	4
Nursery School	3
Other County Providers	3
Prekindergarten at a Community Based Organization	3
Preschool Special Education	1
Private Practice	1

NYSB5 Prekindergarten through Third Grade Institute (P-3): In collaboration with the NYS Education Department’s (NYSED) Office of Early Learning, the P-3 Institute was held virtually in 2021. This virtual format allowed attendees to flexibly view the sessions, enabling more participants, who work with children in prekindergarten to third grade.



P-3 DATA HIGHLIGHT: 1,000 people registered for the event, though substantially fewer attended. There were a total of 362 unique attendees and 122 responses to the reaction survey. Participants included prekindergarten teachers, K-12 administrators, special education teachers, elementary school teachers, administrators, Head Start and child care teachers, early childhood administrators, principals and teachers as well as those who work in preschool special education, child care and other prekindergarten programs.

The P-3 Institute held 6 unique sessions, releasing a new virtual presentation every week. Dr. Junlei Li of Harvard Graduate School of Education delivered a keynote titled “Finding More Than One Way”. Dr. Li addressed how educators can remain connected to children and families during physical distancing. Dr. Li also presented a follow-up workshop with guest presenters titled “The Power of Simple and Ordinary Interactions”, which uses the “Simple Interactions” approach to identify what ordinary people do extraordinarily well with children in everyday moments. Other workshops focused on transitions during unpredictable times, NYS Standards P-3 resources, equity and cultural responsiveness, and a P-3 instructional learning toolkit. Participants who attended the workshops received hard copies of **An Introduction to the NYSED P-3 Instructional Toolkit** (pictured), and **An Introduction to the Resource Guide for School Success: The Third Grade Early Learning Standards** (pictured).

NYSB5 also worked with NYSED to deliver two additional webinars. One with the NYSED Office of Special Education’s Preschool Policy Unit, to present to the directors/administrators of CCRR agencies about the referral process for a preschool aged child who may have a suspected developmental delay. The second webinar featured the NYSB5 Early Childhood Collaboration Coordinator, the NYS Head Start Collaboration Director and the Director of NYSED’s Office of Early Learning presenting on how community-based organizations can collaborate with their school districts to braid funding to deliver prekindergarten instruction.

Public private partnerships to deliver professional development

NYS excels in the private public partnerships developed and strengthened through NYSB5 funding.

- **City University of NY (CUNY) Professional Development Institute (PDI) partnership with NY Association for the Education of Young Children (NYAEYC):** CUNY PDI partners with NYAEYC to deliver Early Learning Guidelines, Core Body of Knowledge, and Interest Driven Learning trainings to the MDS.
- **The CUNY PDI Early Childhood Career Center partnership with the State University of New York (SUNY) Professional Development Program (PDP):** CUNY PDI partners with SUNY PDP to provide an enhanced scholarship (\$4,000 per person rather than \$2,000) to Career Center participants who develop a career plan, helping to further support individuals seeking early childhood credentials, certificates, degrees or certification in early childhood education. Career Center advisees who work with a career counselor are eligible for the increased scholarship amount. The Early Childhood Career Centers are now, because of PDGB5, in all 10 regions of the state, providing support to the MDS, assisting people new to the early childhood workforce to understand the qualifications for different positions in the MDS and helping them design their study plans and obtain a 2 or 4 year degree.
- **The CUNY PDI partnerships with community-based organizations are leading the Early Childhood Career Centers:** PDI is working with the following organizations who house the Career Centers: Child Care Councils of Nassau and Suffolk (Long Island CCRR agency), Child Care Resource Network (Western NY CCRR), Madison-Oneida Board of Cooperative Education Services (Mohawk Valley BOCES), Brightside Up (Capital District NY CCRR), Child Care Council (Finger Lakes CCRR), Child Care Solutions (Central NY CCRR), Orange-Ulster BOCES (Mid-Hudson CCRR), Family Enrichment Network (Southern Tier CCRR), and the Adirondack Community Action Program (Northern NY CCRR).
- **NYS Office of Mental Health (OMH) partnership with the NY Center for Child Development (NYCCD), NY Technical Assistance Center (TTAC) and New York University (NYU):** NYS OMH's partnership with the NYCCD, TTAC and NYU has been a huge success in providing DC:0-5™ Training to over 2000 clinical professionals statewide since 2019 with a total of 936 in 2021 alone. In addition, nearly 500 participants have been provided with overview and awareness training on the content and approach of DC:0-5™ through a webinar for Allied Professionals. In question 5, professional development is discussed at length. It should be highlighted that our partners at the NYC Center for Child Development worked closely with Zero to Three to modify the DC:0-5™ training for delivery in a virtual format to fidelity to ensure statewide access during COVID-19.
- **NYS Office of Children and Family Services (OCFS) partnership with Prevent Child Abuse NY (PCANY):** PCANY is providing professional development webinar trainings to statewide home visiting programs and other stakeholders on topics such as domestic violence, indigenous culture, and early intervention.
- **NYS Office of Children and Family Services partnership with NYS Association for Infant Mental Health (NYSAIMH) and the Center for Court Innovation:** NYSAIMH is providing professional development training on infant mental health basics to the ECCE workforce. In addition, NYSAIMH recently partnered with the NY Center for Court Innovation to expand the **Strong Starts Court Innovation Project** (discussed in question 5), which provides comprehensive and targeted supports for families with children 0-3 who are involved in the court system due to allegations of abuse or neglect.

Coordinated application, eligibility, enrollment systems or consumer websites

While the NYS *myBenefits* (<https://www.mybenefits.ny.gov/mybenefits/begin>) application provides coordinated eligibility and enrollment for HEAP, SNAP, public assistance, health insurance, tax credits, WIC and other benefits, there is not yet a coordinated application to screen for early care and learning program

eligibility. To address the need for a more coordinated application and screening process, NYSB5 published a **Family Guide to NYS Early Childhood Services – Prenatal to Age 5** (discussed in questions 1 and 2) that provides easy access to information for families to connect to needed services. This one-stop Guide is a laminated, placemat (sized 11x17), and translated into 10 languages other than English spoken in NYS. Another area of growth in the area of coordinated application and eligibility has emerged from several of the home visiting coordination regional plans (discussed in question 2) that have prioritized coordinated enrollment for local home visiting programs.

Program Level Practices to Blend and Braid Funds

NYS leads a few PDGB5 initiatives to support coordination among funding streams within the MDS (Head Start and child care providers, home visiting and preschool programs, state and local governments, Indian tribes and tribal organizations, private entities (including faith and community-based entities and local educational agencies).

Training of Trainers: Using the **Blending and Braiding Guide to Support Early Childhood Programs**, this Training of Trainers increases the capacity of local CCRR agencies to provide training and technical assistance (TA) to the local ECCE community. This, in turn, supports the blending and braiding of funds across NY’s MDS. This activity began in Year Two with seven trainings offered.

BLENDING AND BRAIDING DATA HIGHLIGHT: The training had 36 participants. Approximately half of the participants (56%) have demographic data reported. Most participants were female (75%), White (35%) or Black or African American (35%), and not Hispanic (70%).

Braiding and Blending Guide for Home Visiting (discussed in question 1): The purpose of the Guide is to increase access and collaboration within and between the home visiting and early childhood sectors by understanding why and how to develop a braided or blended fiscal model. The Guide is a companion document intended to advance the work of the Home Visiting Coordination Initiative by demonstrating how to creatively utilize funding streams to increase family access to existing services and make more services available to more families.

Question 4

Taking into account the realities of COVID, describe how PDG B-5 funds have helped you develop recommendations to better use existing resources to serve more children and families and improve the overall participation of all children in a mixed delivery system of federal, state, and local early childhood care and education programs. Please ensure your response includes specific mention of infants and toddlers, vulnerable, underserved, or unserved children and children with, or at risk for, disabilities – even if these recommendations may not be implemented until after the pandemic is under control. If available, use data to support your response. (Access)

The NYSB5 Needs Assessment found that high-quality programming, particularly for infants and toddlers and young children with disabilities, too often remains inaccessible to vulnerable families in under-resourced communities. Vulnerable children are classified as those from low-income households, living in rural areas, receiving early intervention or special education services, members of certain racial or ethnic groups, living in multi-language households, and those who are experiencing homelessness. To support access for vulnerable children, NYSB5 initiatives are focused on working with Child Care Resource and Referral (CCRR) agencies to provide business-related technical assistance (TA) to local providers. If providers are able to braid and blend funding, develop successful business models and shared services partnerships, and partner with community organizations, they will have capacity to serve more children sustainably.

As shared in question 3, the NYSB5 project worked closely with our partners at New York’s Office of Child and Family Services (OCFS) to develop a NYS child care desert mapping tool. This tool is helping to identify and target areas of NYS with limited child care. Specifically, the NYS Child Care Desert Request for Applications (RFA), supported by federal coronavirus stimulus funding, is providing state and county level data to ensure funding is directed to under-resourced communities.

A. State Technical Assistance (TA) and Business Training

NYS began receiving TA in 2020 from First Children’s Finance to explore collaborative and innovative financing strategies to support early childhood care and education (ECCE) businesses. The NYS Collaborative Team (TA Team) is composed of members from NYS Council on Children and Families (CCF), Division of Child Care Services at OCFS, the Early Care and Learning Council and the Business Council of NYS. The members convene to learn from state and national financing strategy experts about initiatives designed to support the ECCE businesses. In addition, the TA Team has a standing weekly meeting to develop and implement a financing strategies plan to better support ECCE businesses to deliver early care and educational services to vulnerable, underserved or unserved children, and children with, or at risk for, disabilities. The implementation plan is a culmination of: (1) resource sharing; (2) coordination of services with colleges, universities, loan funds, state agencies and non-for-profits; (3) reduction in the duplication of services; and (4) expansion to existing services and trainings.

The TA Team worked closely with the CCRRs to increase the number of free business training opportunities for ECCE providers. In addition, the CCRRs collaborated with the Early Care and Learning Council, Small Business Development Councils (SBDC) and Community Development Funding Initiatives (CDFI) to train an

additional 90 trainers from the SBDC to provide infant/toddler specific business training and from CDFI to provide business trainings and offer fiscal support for managing and starting an ECCE business.

A highlight from the initiative comes from the Long Island SBDC that provides a content specialist credential to ECCE providers who attend early childhood business development trainings. The credential allows ECCE providers and their staff to receive training credit that can be used towards OCFS licensure requirements. In addition, all ECCE providers who complete the business development are eligible for individual business development TA.

Another success is evidenced by the Community Loan Fund of the Capital Region (a CDFI), which is developing an Early Child Care Accelerator Pilot in 11 counties (expected to begin in 2023). This pilot allows ECCE providers that receive business training to apply for funds to obtain no interest, low interest, and/or grant funds, as well as access facility experts to support structural modifications to their ECCE site. The goal is to connect ECCE businesses with CCRRs and CDFIs statewide.

The CCRRs lead the **Braiding and Blending Training of Trainers** (question 3) as well as the 6-course Early Childhood Core Business Training series. Currently, there are 12 CCRRs that provide the early childhood business courses: (1) Business and Financial Structure, (2) Ongoing Financial Management, (3) Staff Recruitment, Management, and Retention, (4) Marketing, (5) Facilities and Liability, and (6) Program Contracts and Policies. The TA provided the opportunity to align with the NYSB5 funded early childhood core business development courses led by staff at the CCRRs.

EARLY CHILDHOOD BUSINESS DATA HIGHLIGHT: The training series began in Year 2 and was offered 14 times to 191 people. The demographic data reported showed that participants were mostly female (97%) and White (69%), 23% Black or African American and not Hispanic (82%).

The CCRRs and TA team works in concert with the Shared Services Pilot detailed below. These projects work together to ensure providers have regional supports needed for success. The goal is to increase the number of ECCE providers to create more access opportunities for families which in turn increases choices.

B. The Shared Services Pilot

New York Early Learning Resources is the knowledge and resource hub for NY's Early Learning Alliance whose mission is to support the business of high-quality early care and learning. This web-based platform provides a wealth of early childhood specific resources designed to help ECCE programs save time and money while attaining and sustaining high quality programming. The website was updated with resources to support providers through the pandemic. New York Early Learning Resources is also working with suppliers across the country to support the purchase of essential personal protective equipment (PPE) and supplies. On the current Shared Source website, ECCE providers can access information and training in key areas including business practices, family engagement and health and safety requirements. Resources available are policies and procedures, guides, forms, templates, trainings and checklists that support compliance with the federal Child Care Development Block Grant. Additionally, buying power is provided because Shared Source created a nationwide pool of purchasers and members can benefit from the buying power and save on child care

products (anything from furniture to office products). During the initial NYSB5 grant year, NYAEYC with support from the NYSB5 project upgraded the shared services platform www.sharedsourceecny.org. NYAEYC conducted train the trainer sessions with a consultant (CCA Global) to familiarize CCRR staff and NYAEYC volunteer leaders to increase understanding of the benefits of shared services and prepare them to conduct regional trainings to promote use and impact of the platform.

SHARED SERVICES DATA HIGHLIGHT: Participants in Year Two (2021) included 57 child care centers, 59 family child care programs, and two school age child care programs. Since the website was upgraded, 89 new members requested membership and the site has increased usership by over 40%.

NYS has benefitted from the synergy of several opportunities with NYSB5 at its center. The project worked with partners to support the Child Care Desert RFA and worked closely with the business TA team to provide statewide business training to providers through family child care networks. Then, by leveraging existing CCRR partnerships, NYS was able to increase training opportunities for ECCE providers.

C. Family Child Care Network

In addition to the TA, the NYSB5 is funding a Family Child Care Network in CCRRs in four regions of the state: the Mid-Hudson region, Central NY, Southern Tier, and Finger Lakes regions of NYS. These networks increase the capacity of CCRRs to work with the family and group family providers to develop their business practices.

D. Transportation Study

NYSB5's project in collaboration with a transportation consultant and NYS Education Department's (NYSED) Office of Early Learning (OEL) conducted a survey to identify barriers around transporting 3- and 4-year-old children in rural communities, that was distributed to all ECCE providers in the Mixed Delivery System (MDS). While the response rate was limited, challenges transporting young children was evident and illustrative of more widespread issues.

TRANSPORTATION STUDY DATA HIGHLIGHT: Respondents stated that barriers include: 1) the car seat requirement for 3-year old children inhibits offering transportation due to a lack of available staff; 2) lack of CDL drivers (a problem that was further exacerbated by the pandemic); 3) not having enough transportation funding (72% of respondents for non-district programs) to pay for gas, safety systems, vehicle, insurance; 4) COVID bussing restrictions; 5) regulations requiring adult to child ratios on the bus; and 6) travel time was too long for the young children.

When asked about best practices around transporting young children, recommendations included providing bus safety lessons for children and families, practicing bus drills, setting forth behavioral expectations and positive reinforcements that help support 3-year-old students with bus safety. In rural communities, bus runs are scheduled by the number of children to be transported, however, this often creates long wait and ride times for young children drives. One suggestion was to recommendation schedule bus runs by location to minimize wait times and travel distances the length of the bus ride for young children.

E. Statewide Media Campaign, Parent Portal and Welcome Baby Bundles

In question 2, resources for families and the early care and learning community were referenced and included data related to the success of the media campaign and parent portal. While statewide distribution of resources supports coordination of services, it also supports access for families. A key piece to access is connected to parent choice and knowledge. The NYSB5 Talking Is Teaching media campaign represents NYS' effort to increase family awareness of resources available for children 0-5. This culturally vetted, nationwide campaign promotes early brain development by encouraging caregivers to talk, read and sing to their child every day and encourages parents to download the NYSB5 Parent Portal application (app) (or go to the website www.nysparenting.org). The campaign uses geo-mapping to target vulnerable families in different regions of the state and features images of families and children from diverse backgrounds and is translated into 10 different languages other than English (Arabic, Bengali, Chinese, English, Haitian-Creole, Italian, Polish, Russian, Spanish and Yiddish). The Talking is Teaching media campaign connects directly to the NYSB5 funded Parent Portal that seeks to ease access to early childhood programming for families by increasing knowledge of local resources. The Portal can be translated into over 100 languages. It can be accessed online and as a Mobile App and includes links to state resources and agencies. Notably, the site links to nyschildcare.org, a mapping website, created in accordance with Section 483-h of the NYS Social Services Law, that provides information on child care, after school, and home visiting programs. The data is provided by the NYS OCFS, the NYS Education Department, and the NYS Department of Health (DOH). Child care data on this resource also is provided by the New York City Department of Health and Mental Hygiene. The application helps families find child care and home visiting programs based upon their chosen location as well as includes oversight agencies for each setting and includes monitoring reports.

Another NYSB5 initiative, **Welcome Baby Bundles**, features media campaign materials and many other



Clockwise from Top: ABCs of Safe Sleep brochure, Can Your Baby Hear You brochure and an expectant family poses with their Welcome Baby Bundle resources.

resources and was developed with vulnerable children in under-resourced communities who may have limited access to the Internet. The Bundles are delivered to new parents (adoptive, foster, kinship, birth) in a reusable tote bag with Talking is Teaching media images and includes resources for the new “bundles” caregivers. Resources include the NYS Parent Guide, Starting Life Together, What to Do When Your Child Gets Sick, infant toothbrushes, Family Guide to NYS Services – Prenatal through Age 5, newborn screening brochure from the NYS DOH, a Talking is Teaching Coloring Book and board books (APPENDIX 4.1). Eleven local agencies were awarded funds to distribute the bundles and will include local resources to the bag. The project was designed to support parent choice and knowledge from the start, along with resources to support access and transitions during the early years as well.

In sum, the NYSB5 project has approached access by supporting new child care businesses statewide through desert mapping and increasing business training for current providers. It also has focused on access for vulnerable families by the implementation of the statewide media campaign, which provides messaging that is culturally diverse in imagery and translated into 11 languages to help ensure families have knowledge

of available resources. These efforts, combined with the work of the newly created culturally diverse Parent Advisory Council (mentioned in questions 1 and 6) have helped to build the foundation that will lead to an infusion of parent voice into equitably sound policy decisions in NYS to ensure the success of children and families right from the start.

Question 5

Taking into account the realities of COVID, describe how PDG B-5 funds have helped improve program quality, and the degree to which you have been able to maintain access and availability of services. Include in your response, workforce initiatives, expansion or revisions of quality standards, program expansion. If available, use data to support your response. (Quality)

Activities to improve program quality include expanding QRIS activities, staff recruitment through the statewide Early Childhood Career Centers and Leadership Institutes, expanding Aspire and providing free cross-disciplinary training of the workforce that includes topics on race equity, Early Learning Guidelines, Core Body of Knowledge and infant mental health.

A. **QUALITYstarsNY** expansion is supported by NYSB5 and other state support for **QUALITYstarsNY** serves as the annual state match. In 2021, **QUALITYstarsNY** also received an additional \$39 million in federal funds provided in the Coronavirus Response and Relief Supplemental Appropriations Act, 2021 and the American Rescue Plan Act of 2021.

Once a site is enrolled in **QUALITYstarsNY**, a Quality Improvement Specialist is assigned to work with staff to create a Quality Improvement Plan that may address purchase of curriculum, materials, and equipment, professional development, college coursework, minor repairs to facilities, improvements of outdoor space, developmental screening training, and use of data to inform curriculum and program decisions. Funds are also used to provide leadership and classroom coaching. Family engagement standards represent 25 percent of the **QUALITYstarsNY** standards. In the renewal grant, **QUALITYstarsNY** redesigned materials for families to better support families in their search for high-quality programs that meet their particular needs. A goal of the NYSB5-R grant is to have **QUALITYstarsNY**, with its intensive continuous quality improvement, reach at least 10 percent of all licensed and regulated ECCE sites across the state's MDS. Another goal is to ensure that improvements are tracked by the **QUALITYstarsNY** database, including improvement action steps taken, dollars spent on improvements, and the rate of improvement over time. As well, **QUALITYstarsNY** strives to ensure that the programs that participate in **QUALITYstarsNY** are able to maintain their high quality after the grant period ends. To help with this, sites participating in **QUALITYstarsNY** engage in reflective groups, or Communities of Practice, where participants support one another by sharing lessons learned. Notably, all staff enrolled in **QUALITYstarsNY** programs are in the ECCE workforce registry, Aspire, and that data is useful in helping to build supports for the entire ECCE workforce.

QSNY DATA HIGHLIGHT: The NYSB5 project has supported its expansion with an increase in 286 newly enrolled sites (centers and family child care) for a total of 864 sites. In Year Two, there were 136 new sites spread across all economic regions in NYS. In addition, there were 78 recruitment events that happened during the year to recruit new sites. Considering that the goal was to recruit 100 additional programs, this project is exceeding expectations. Most of the staff at the sites are female (96%) and White (53%), followed by Hispanic or Latino (21%), and Black or African American (14%).

Table 5A QSNY growth in Year 2

Program Details	2021 Growth
New Sites Enrolled	136
Recruitment Events	78
QSNY staff hired	10

B. Early Childhood Career Centers

Early Childhood Career Centers began as a program through the City University of NY (CUNY) Professional Development Institute. Over the course of the past 2 years, PDGB5 funds allowed the expansion of the Centers to all 10 economic development regions of NYS, building the statewide infrastructure to support early care and learning career development. The number of people connecting to the Centers over the past year is significant.

CAREER CENTER DATA HIGHLIGHT: At the end of Year Two, there were 14,405 clients, 1,552 client sessions, and 4,911 client contacts. Collectively, the Centers worked with 963 employers and 2,358 job seekers. The population served by the Career Centers is primarily female (97%). Racial breakdown of participants was White (29%), followed by Hispanic or Latino (28%) and Black or African American (26%).

The Career Counselors support early care and learning practitioners at any point in their career. They support those who want to attend college for the first time or those interested in returning. Support includes developing a career plan and applying for scholarships to support their degree attainment. A NYSB5 partnership, between the CUNY Early Childhood Career Centers and State University of NY (SUNY) Professional Development Program (PDP), provides additional financial support to advisees. While funds are available, eligible advisees can receive up to **\$4,000 in scholarship funds to towards an early childhood degree on their study plan**, an increase of \$2,000 per person.

B5 SCHOLARSHIP DATA HIGHLIGHT: In Year Two, PDP issued 804 awards totaling \$570,424.82 of NYSB5 grant funds. Most of the awardees (55%) and money awarded (68%) went to advisees in New York City. This makes sense because half of the teachers in NYS are in NYC. The scholarships were most often used for college course credit (N=285), CDA training (n=225), training or conference (n=159), or CDA assessment (n=102). Most awards went to individuals with a high school diploma or high school equivalency (56%). The recipients mostly spoke English (58%) or Spanish (39%). Most awardees (55%) were relatively new to working in early childhood care and education (ECCE), with one to five years of experience. Most of the awards went to individuals working in child care centers (48%) or group family child care (40%). Family child care staff only represented 6% of recipients. For a more detailed breakdown see the tables in APPENDIX 5.1. The B5 Scholarship does an excellent job reaching a diverse group of participants with varying levels of education and years of experience in the ECCE system. Efforts are underway to reach more teachers in the rest of the state via the newly opened Career Centers.

Chart 5B. Awards 2021



Chart 5C. Program Modality 2021

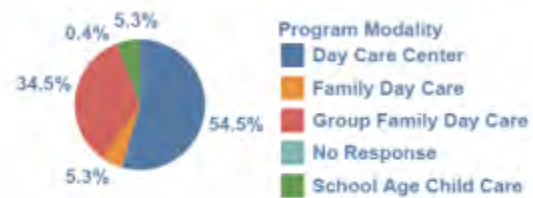


Chart 5D. Years Working 2021



The Career Centers are recruiting in their local communities, partnering with community colleges to offer the Infant Toddler Child Development Associate (CDA) with funding from NYSB5. This initiative to support more people obtaining their **Infant and Toddler CDA** increases competencies and the number of qualified infant and toddler teachers statewide (APPENDIX 5.2).

CDA DATA HIGHLIGHT: In 2021, there were 81 students who pursued the Infant Toddler Child Development Associate Credential; Currently CDA course agreements are signed with SUNY Farmingdale, SUNY Schenectady Community College, Onondaga Community college, SUNY Empire State College and SUNY Corning Community College.

C. **Early Childhood Leadership Initiative** works closely with the Career Centers to support early childhood leaders in NY. The Leadership Initiative recruits early childhood leaders who want to strengthen their leadership and management skills. It includes a speaker series, book discussions, mentorship and communities of practice around specific topics. The initiative creates an early care and learning leadership community. The initiative has expanded into several regions of NYS with PDGB5 funding. Initiatives in NYC, Western NY and Long Island have continued to strengthen while launching new chapters in the Southern Tier, Finger Lakes, Mid-Hudson, the North Country, Capital Region, Mohawk Valley and Central NY. Most of the membership is female (96%) and most (62%) have a master’s degree or higher. The gender and education for participants fit the expected demographics for this project. The most frequently reported race of members is White or Caucasian (40%), followed by Black or African American (24%) and Hispanic or Latino (21%). For a more detailed breakdown of the demographics see the tables in APPENDIX 5.3.

Chart 5E. Leadership Initiative Participant Gender 2021

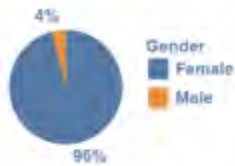
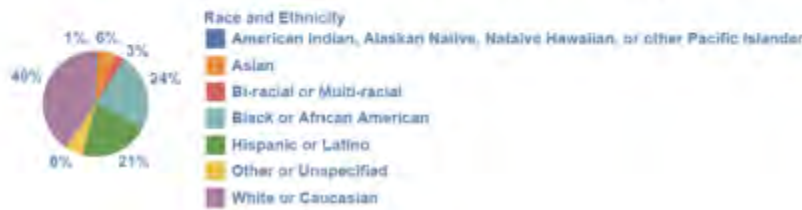


Chart 5F. Leadership Initiative Participant Education 2021



Chart 5G. Leadership Initiative Participant Race and Ethnicity 2021



D. **Aspire Registry Expansion**

By requiring more ECCE professionals to use Aspire, NYS is increasing and strengthening the data the state has on the current early childhood workforce, which guides informed early care and learning policy decisions. In addition, it’s helping each early childhood professional track their education and professional development.

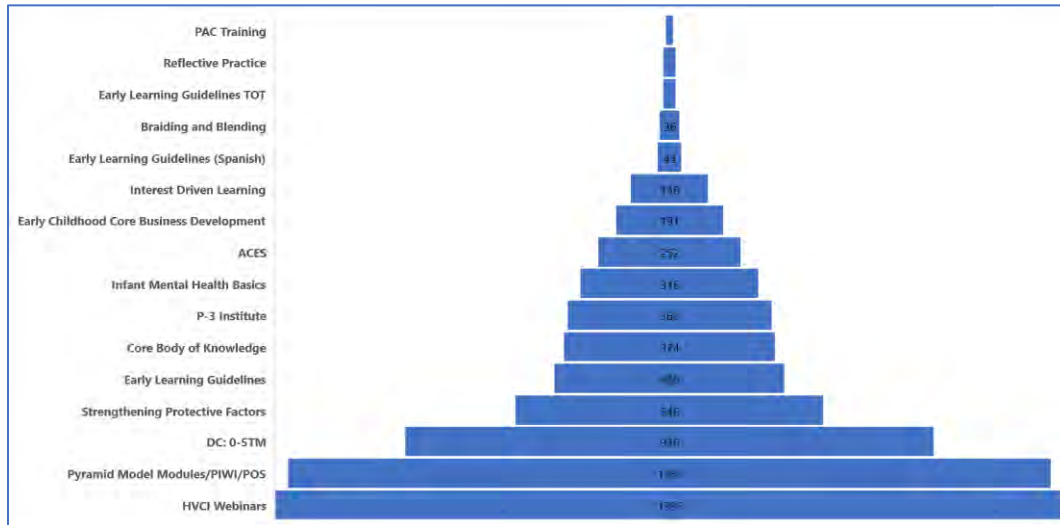
ASPIRE DATA HIGHLIGHT: In Year Two, there were 9,821 new individual profiles, 250 new active organization accounts, 218 people who registered as trainers, and 4,127 new training events approved.

E. **NYSB5 Trainings**

In 2021, the NYSB5 project held trainings on 16 different topics for a total of **6405** people trained. To ensure access for providers statewide, trainings were shifted to virtual format. The top 5 most attended trainings were 1) Home Visiting Coordination webinars, 2) Pyramid Model Modules, Parents Interacting with Infants and Positive Solutions for Families, 3) Early Childhood Core Business Development, 4) DC:0-5™ and 5) Strengthening Protective Factors. From a data perspective, it tells us there is great interest coming from the

ECCE community in NYS about trauma informed practices and infant and early childhood mental health, possibly underscored due to the mental health impacts of COVID-19. The chart below provides an overview of all NYSB5 trainings.

Chart 5H. NYSB5 Training Participant Numbers



Interest Driven Learning Framework (virtual): This three-session series provides early childhood professionals with the foundational knowledge necessary to create curriculum that embodies the Core Body of Knowledge (CBK) and NYS Early Learning Guidelines (ELG).

Early Learning Guidelines (virtual): Providers can attend an ELG introductory course or a three-day training of trainers is for professional development providers to train educators and leaders on the revised Early Learning Guidelines.

Core Body of Knowledge (virtual): This course explores how the CBK is used as the foundation for professional preparation and development of the early care and learning workforce. The course includes antibias education and ethical conduct as well as training and coaching days (DATA). Attendees can also attend a CBK training specific to supervisors that provides a framework to evaluate the performance of individual staff and how to plan for professional development. Finally, there is a CBK learning community that provides opportunity for individuals to discuss how to use the CBK as a reflective and planning tool for personal growth.

Home Visiting Coordination Webinars (virtual): The webinars, presented by Prevent Child Abuse NY (PCANY), support the Home Visiting Coordination Initiative (HVCI) by offering free, program neutral training opportunities for all home visitors, a first of its kind in NYS. In 2021, topics included: immigrant families, Indigenous cultural competency (2-part), child abuse and neglect prevention for home visitors and early childhood professionals, Ages and Stages Questionnaire, NYS GrowingUp Healthy Hotline, domestic violence for home visitors (2-part).

HVCI WEBINARS DATA HIGHLIGHT: There were fifteen HVCI webinars held in Year Two, with a total of 1,396 session participants. The webinars covered a wide range of topics of interest to home visitors. The attendees serve families across NYS, and the vulnerable populations that are a focus of the grant were served by the majority of the attendees (57-83%). The majority of session respondents stated that the events helped improve knowledge, skills, or abilities and most indicated they would use what they learned to do something new or different in the future.

Strengthening Protective Factors (SPF) Training (virtual): The SPF Training project is a partnership with PCANY. PCANY is currently the only statewide organization implementing the SPF trainings systematically across NYS as a tool to build and strengthen the skill sets of children and family service providers across sectors. PCANY provides support, technical assistance (TA) and trainer networking opportunities for all of the NYS trainers certified by the Children’s Trust Fund Alliance. With NYSB5 funding, PCANY is also able to offer a modest stipend to support trainers in expanding the number of trainings offered. The commitment of NYSB5 funds in SPF has spurred state agencies to commit to supporting similar efforts. Specifically, this funding has demonstrated that the SPF trainings are prerequisite trainings that can unlock the daily operationalization of trauma-responsive practice. This project has led to additional projects in NYS dedicated to the SPF – including projects working with K-12 teachers and administrators, child welfare workers, attorneys working with survivors of child sexual abuse, pediatricians and law enforcement. NYSB5 funding has also led to the development of a leadership training. This training has been instrumental in supporting culture change and helping organizations strengthen the protective factors of their staff, thereby reducing staff turnover, recognizing that staff have families and improving direct service staff engagement with the children and families they work with.

SPF DATA HIGHLIGHT: There were 546 people who received the Protective Factors training in Year Two. The majority of the attendees, 328, were in the first two quarters of the year. There appears to be a considerable decline in attendance at the end of Year Two. There are a number of possible factors contributing to this trend: the trainers have indicated they are seeing change with providers choosing to leave early childhood, that people are getting “Zoomed-out”, and that there are more free on-line trainings available, so people are reluctant to participate in trainings for which they must pay.

Leading with Race Equity (LWRE) (virtual): The LWRE project launched in February 2021 and includes a cohort of 36 cross-sector participants from CCRRs, Higher Education, Public School systems, 4410s (preschool special education), QRIS specialists and non-profit NYS agencies. The project intent is for each participant to become a race equity change agent within their organization by learning about intercultural competence; the capability to shift perspective and adapt behavior to cultural differences and commonality. The cohort meets hourly each month and all day once per quarter. Change occurs over the course of this virtual project through small breakout discussions focused on issues around culture, understanding different perspectives on race, equity journaling and the development of a capstone project (discussed below). The Intercultural Development Inventory (IDI), a valid and reliable assessment of intercultural competence is used pretest to level set and posttest to measure impact over the course of the initiative. Each participant completes the inventory, is provided an individual profile report and accompanying Intercultural Development Plan. Scores for the cohort are aggregated and shared to identify trends.

LWRE DATA HIGHLIGHT: The project cohort completed the IDI in 2/2021 and again in 12/2021 to show shifts in perspectives in response to participation in the initiative. The IDI places participants along a continuum of intercultural orientation starting at denial and ending at adaptation. The goal for all participants is to achieve a more intercultural and global mindset (acceptance and adaptation). The pre- and post-tests demonstrated the following success after 10 months of participation:

2/2021 Administration	12/2021 Administration	Percent Shift
Denial 5.3%	Denial 3.6%	decrease of 1.7% (less of the cohort is in denial)
Polarization 21.1 %	Polarization 3.6%	decrease of 17.5% (less of the cohort is in polarization)
Minimization 65.8%	Minimization 46.4%	decrease of 19.4% (less of the cohort is in minimization)
Acceptance 2.6%	Acceptance 35.7%	increase of 33.1% (more of the cohort has moved to acceptance)
Adaptation 5.4%	Adaptation 10.7%	increase of 5.3% (more of the cohort has moved to adaptation)

Chart 5I. Age of Participants

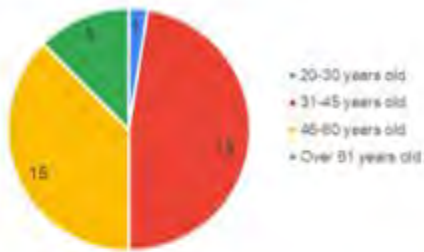
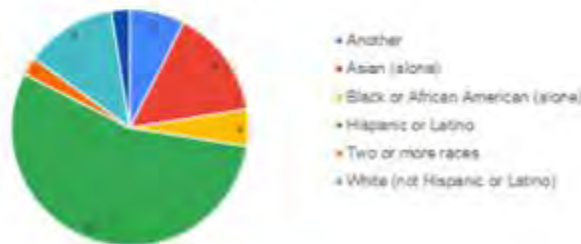


Chart 5J. Education of Participants



Chart 5K. Race of Participants



The capstone projects use a race equity lens to address racial disparities related to children (B-5) and involve two or more early childhood systems. NYS CCF has developed a capstone project that focuses on the impact of race on mental health. NYS CCF will work with experts in early childhood development, race equity, mental health and infant and early childhood mental health as well as parents to develop 5 animated short videos for children and families that discuss race, intersectionality, discrimination and microaggressions. The scripts and videos will be reviewed by early childhood system partners from OCFS, OMH, OTDA, NYSED and the ECAC. The project will kick-off in year 3. Two other capstone examples from cohort participants are: 1. How Implicit Bias Fuels the Preschool to Prison Pipeline and 2. Increasing Access to ECE for Immigrant and Refugee children ages Birth to Five Year; these projects will continue to be created and implemented into 2022.

Adverse Childhood Experiences (ACEs) and Resilience Training (virtual)

The Early Care and Learning Council (ECLC) provided trainings for the CCRR staff focused on transforming compassion fatigue to compassion resilience and provided tools to build organizational resilience. A Trauma Advisory Workgroup was established to provide ongoing transfer of resilience learning and created a toolkit (APPENDIX 5.5) for members of the CCRR agencies to provide information around trauma informed practices. The kit was distributed to all of the CCRRs in the summer of 2021, in response to CCRR staff expressing the need for more training and support around trauma informed practices. Also, this abled the CCRRs to better serve the general public and the child care providers more effectively, along with preventing burnout among CCRR staff. One of the training topics was “Turning Compassion Fatigue into Compassion Resilience,”. In Year 2, they will hold trainings on “Building Organizational Resilience”.

ACES DATA HIGHLIGHT: There were 7 ACEs trainings for a total of 252 people trained and 7 Trauma Advisory Groups held in Year Two. All participants in the first part of a two-part trainings were female or preferred not to report their gender. There was very low diversity in training series on trauma informed organizational practices, which was launched by ECLC in conjunction with the National Council for Mental Wellbeing (formerly the National Council for Behavioral Health).

F. Infant and Early Childhood Mental Health

Infant Mental Health (IMH) Basics Courses, Endorsement and Reflective Supervision: The NYS Association for Infant Mental Health has partnered with the NYSB5 project to offer several infant mental health related trainings. The first, IMH Basics course is a two-day virtual course that provides a deep dive into IMH from brain development to attachment and relationship development.

IMH DATA HIGHLIGHT: In 2021, 316 ECCE professionals completed the Infant Mental Health basics course. A majority of participants reported race as White (62%) and ethnicity as non-Hispanic (75%). The most common vulnerable populations served by participants were families who are a member of a racial or ethnic minority (83%), children receiving early intervention or special education services (81%), and low-income families (80%).

One exciting development is the creation launch of the NYSB5 funded Infant Mental Health First Responses E-learning course in response to a request from a NYC-based CCRR who wanted 24-hour access to this training opportunity for the 700+ child care providers in their coverage area. NYSAIMH developed the first response course using the infant mental health basics curricula. The 2nd part of the e-course has been completed and will go live in 2022.

Once the IMH Basics course is complete as a prerequisite, attendees can begin participating in monthly reflective practice groups to provide support for enhancing infant mental health practice in their work. These reflective practice groups are also being conducted with a cohort of infant toddler mental health consultants and are based at the 35 CCRRs statewide, who are currently working towards their NYS-AIMH Family Specialist endorsement. The consultants are funded through the CCDBG funds, and the PDGB5 funding provides a braided funding opportunity to further support professional development and growth. The reflective supervision offers a safe space for IMH specialists to share and reflect and receive support and advice from their fellow IMHs. This has been especially important as the pandemic has continued, and

regulations, policies and practices have changed (like whether in person visits could occur), at the same time as the need for these types of support services increased. Topics for these meetings include: self-care, challenges that face the early childhood workforce (which leads to feeling ineffective at their jobs), noticing triggers, and establishing boundaries.

ENDORSEMENT DATA HIGHLIGHT: At the end of Year Two, 30 participants were on track to receive their NYS-AIMH endorsement. All participants were female or preferred not to report their gender. Most participants were White or preferred not to report their race. There were four participants (22%) who were Black or African American in the first quarter and two (7%) in the third and fourth quarters. There were two participants (5-14%) who were Hispanic each quarter. More inquiry should be made into the lack of diversity in the NYS-AIMH Endorsement participants.

Through the Society for the Protection & Care of Children, supervisors of the infant toddler mental health consultants haven been invited to participate in reflective supervision training and opportunities. "Supervisors have found the reflective supervision space to be an ideal venue to share, express and support their unique challenges across their roles and agencies/sites." Supervisors have stated that they "are feeling more attuned to their work, able to be mindful while having supervision and able to pause and provide space to the supervisees instead of just a question/answer format". It should be noted that this type of support for supervisors at the CCRRs have not been offered before in this type of formal and ongoing process. It not only allows participants to become more reflective within the supervisory role, but also within their own lives and how they face issues and problems that may arise. Many of these supervisors do not have mental health background, therefore the practice of reflective supervision is a new concept. This type of model gives the supervisors a roadmap and different types of strategies to implement when needed.

In Year Two, there were 24 Reflective Practice Sessions.

REFLECTIVE PRACTICE DATA HIGHLIGHT: Almost all of the participants of these sessions were White or preferred not to report their race, with the exception of the fourth quarter when two participants (20%) were Black or African American. Similarly, all participants were not Hispanic or preferred not to report their ethnicity until the last quarter when three participants (30%) were Hispanic. There were no male participants. More inquiry should be made into the lack of diversity in the Reflective Practice Training participants.

NYS CCF is partnering with NYS AIMH and the Center for Court Innovation to pilot the **Strong Starts Court Initiative** in Westchester County. Currently the initiative is in each of the 5 NYC boroughs, and this will be the first upstate program. Strong Starts (APPENDIX 5.6) promotes a collaborative approach in addressing the needs of families connected to family court. Infants and parents received customized service plans and access to a network of community providers. An infant mental health consultant is placed in the family court building and holds regular case conferences to ensure needs of the child and family are being met. The initiative convenes a local leadership team and steering committee. In Westchester, the infant mental health consultant has been hired, completed the Parent Child Psychotherapy training and provides the local community monthly infant mental health trainings. The consultant also brings together a local leadership team and steering committee made up of the director of the initiative at the Center for Court Innovation,

judges, court attorneys, child welfare, 9th judicial district personnel, the unified court system as well as local service providers and community mental health, legal services and parent representatives. The project that began in July 2021 will receive at least 2 referrals per month. This partnership has sparked ongoing discussions with the Center for Court Innovation to build the infrastructure to support Strong Starts statewide.

Pyramid Model Module Training and Coaching (virtual and in-person): Pyramid Model modules shifted to a virtual format given the pandemic and allowed trainers to expand their geographic reach to include statewide participants. Trainings include Infant/Toddler Modules 1-3, Preschool Modules 1-3, Family Child Care Modules 1-2, Parents Interacting with Infants training and Positive Solutions for Families Trainings. Trainers and participants reported that due to the pandemic, these trainings were much needed, as the stress levels of both the providers, parents and the children were high. Positive Solutions for Families trainings were delivered to caregivers, including a cohort of foster parents. Leadership Coaches conducted leadership team sessions, both virtually and in person, supporting implementing programs. A strength of the Pyramid Model implementation is its inclusion of members from NYS’ MDS (see table below). For a more detailed breakdown of the demographics see the tables in APPENDIX 5.7.

Table 5B. Leadership Team Roles

PYRAMID MODEL PARTICIPANTS
Family Child Care/Group Family Child Care
Child Care Teacher
Other
Head Start Teacher
Child Care Administrator
CCRR Staff
Prekindergarten Teacher
Community members, state and local govt., parents
Higher Education
Special Education Teacher
QUALITYstarsNY Quality Improvement Specialist

Question 6

How have PDG B-5 funds helped maximize family and parental choice and knowledge of engagement with existing programs in the state’s mixed delivery system, easing access to all services? Include specific mention of progress related to coordinated application, eligibility, and enrollment. If available, use data to support your response. (Parent Choice)

Activities are being implemented to maximize parent choice and knowledge of state and local resources. These include launching a Talking is Teaching media campaign, convening the annual Parent Leadership Conference, creating a Parent Advisory Council and distributing resources like the Welcome Baby Bundles. Each of the activities work together to help families learn about resources, support parent leadership opportunities, facilitate access to services and provide a platform for parents to inform state-level early childhood policies.

A. Parent Advisory Council

In 2020, the Early Childhood Advisory Council (ECAC) demonstrated its commitment to family engagement by establishing a Parent Advisory Council (PAC). Led by the Family Engagement Specialist, the PAC was created by the end of 2020 with nine members from across the state, representing ethnic and racial diversity, parents of children with disabilities, fathers, rural areas of the state. Since its beginning, the PAC has participated in three ECAC meetings and presented on family engagement (on different occasions) to more than 350 people consisting of nonprofit and state agency staff. In 2021, the PAC members were asked to join ECAC Goal Activity Teams to provide the parent perspective and their insight into the work. They also produced a PAC Manual, Best Practice Brief for Family Engagement, participated in parent training, participated in discussions about effective early childhood data systems, learned about state agency programs and systems, and the group aims to create a PAC website with a PAC logo. The success of the creation of the PAC is the result of the fulltime B5 Family Engagement Specialist. In short, the addition of the PAC is a significant stride for NYS and is a step toward institutionalizing parent voice to influence policy. (APPENDIX 6.1 & 6.2)

B. Talking is Teaching Media Campaign



Talking is Teaching
Media Campaign Poster

The media campaign featured both digital and out-of-home placements (see APPENDIX 1.6-1.8). Digital placements were leveraged to drive parents and caregivers to install the App or visit the Portal website. Display banners on social media platforms helped to drive people to the App and websites. To reach families in communities, media placements were included in multiple places in neighborhoods. This included transit, street furniture, high dwell locations like mall elevators, restrooms and billboards and wallscapes to reach pedestrian or vehicle traffic. In 2021, the campaign delivered 194,896,558 total impressions and drove 347,438 clicks to the Portal and 31,292 Mobile Application (App) installs.

C. NYS Parent Portal

In 2021, the App was downloaded 31,292 times and the website had 113,143 unique users. Most of the people (45,695) that visited the website did so by direct search, this was followed by people visiting via Facebook and Instagram (29,513). The average amount of time spent on the site was 1 minute 49 seconds. We saw an increase of web traffic in response to the media campaign. Overall, we saw a drop in visits to pages for COVID-19, resources, media posters, about us, feedback and “learn more.” However, there was a 15% increase in the visits to the child care and home visiting program locator..This may signal efforts in the future to highlight the child care locator..The NYSB5 funds have helped increase and improve parent choice and knowledge of the early childhood care and educational (ECCE) choices in their community, of the safety net and basic needs resources available during the pandemic and of child growth and development. This improvement can be seen in the **15%** increase of users on the child care locator tool and the **31,292** of NYS Parent Portal app installs (downloads). The Child Care Locator is updated nightly with current program and monitoring information. The mobile App has the same coronavirus resources as the website. The development of the Portal as well as the Family Resource Placement are two statewide resources created with families and for families.

D. Annual Parent Leadership Conference

In spring of 2021 Prevent Child Abuse New York (PCANY) hosted a virtual parenting conference for parents and caregivers in NYS. Originally scheduled to take place in 2020, the conference was adapted from an in-person to virtual conference due to COVID-19 restrictions.

SPRING PLC DATA HIGHLIGHT: There were 187 conference registrants and 15 participants the day of the conference. Most of the parents were female (90%) and non-Hispanic (73%). Black/African American participants totaled 39%. Registrants lived in 37 of the 62 counties in NYS. Parents predominantly felt that the “Family Fun Night” activities were fun for the whole family and appropriate for children ages 0-5-years-old. When asked for additional feedback, parents commented that they “enjoyed it”, that is/was “really fun” and a “casual way to connect”. Conference topics included: Building Parental Resilience and Advocating for Yourself and Your Child by keynote Jacob Dixon, A Father’s Journey by keynote Edward Casillas, Helping your Child Solve Social Problems, Self Care Practices, Areas of Influence by Fathers, Creating Effective Partnerships: Maximizing Opportunities to Connect and Engage, Using Children's Books to Develop Your Child's Social and Emotional Skills, A Recipe for Change in Our Schools: Best Practices for organizing on the outside to see changes in our schools, Office for New Americans: Celebrating All Newcomers to NYS, Engaging with Children Through Creative Mindfulness, Powerful Advocacy Steps and Effective Communication: Tools, Tips, and Tricks to help with Virtual Classes, Meetings and More, Proactive Caring Program: How Mindfulness Techniques Help You Find Your Calm.

In fall 2021, the second Parent Leadership Conference was convened as a hybrid event. Attendees had the option to attend the conference in-person (in Albany) or virtually on the Zoom platform.

FALL PLC DATA HIGHLIGHT: There were 25 parents and 11 children who attended the conference in-person and 107 attendees who attended at least a portion of the conference virtually. Most conference participants who responded to the parent reaction survey were female (84%) and 82% identified as non-Hispanic. The two most common races respondents described themselves as were White (42%) or

Black/African American (40%). Nearly all the in-person attendees were from NYC (Kings County (40%), New York County (33%), Queens County (13%), with some attendees from Onondaga County (13%). Most respondents found the keynote presentations to be extremely or very useful (94%) and stated that they were extremely or somewhat likely to apply what they learned in the presentations (98%). Most respondents stated that the workshops were extremely or very useful (81%) and that they were extremely or very likely to use what they learned in the workshops (85%). When asked if they had any additional feedback about the event, respondents generally expressed that they really enjoyed the conference, learned a lot, and were thankful for the opportunity to participate.

The most common suggestion for improvement was to offer additional child care options and more activities for children at future conferences. Conference topics included: Surviving and Thriving in the New Normal: The Importance of Relationships and Connections, Learning Through Play, Getting to Know QUALITYstarsNY, Empowering Parents with Evidence-Based Pax Tools, I Really Want to Finish my Degree, But...Overcoming Educational Barriers, Raising a Resilient Child, Books, Balls, and Blocks, Parenting Gender Expansive Kids, and Resilience Overcome Adversity. In addition to workshops, the conference included representatives from the NYS Parenting Education Partnership, Prevent Child Abuse, NYS Office for Children and Family Services, NYS Council on Children and Families and Families Together NYS.

Quotes from Parents who attended the leadership conference

“This conference saved my life!”

“The generosity of this event was really amazing. I feel really hopeful about the support available for parents.”

“Thank you! Best ever! SO much pride for attending.”

E. Resources for Families

The Family Resource Guide (APPENDIX 1.4) was updated this past year (highlighted in question 1 and 2). This easy-to-use resource provides links to each of the Mixed Delivery System (MDS) programs (home visiting, child care, early intervention, Head Start, state-administered prekindergarten and preschool special education). The resource includes simplified live links for electronic use such as to Child Care Resource and Referral (CCRR) agencies, information on child care subsidy, Kinship Care, developmental disabilities resources, addiction supports, domestic violence and more. The most exciting revision is that the resource was translated into 10 languages (Arabic, Bengali, Haitian-Creole, Italian, Korean, Polish, Russian, Spanish, Simplified Chinese, Yiddish). The resource is posted on the NYS Office for Children and Family Services website in sections for both child care providers and parents. In addition, it was distributed in English and Spanish to NYSB5 Baby Bundles recipients (described in question 4), Children's Centers at family courts throughout NYS, NYS Office for Addiction Services and Supports (OASAS) prevention programs and NYS Department of Health Maternal Infant Early Childhood Home Visiting (MIECHV) sites.

F. Welcome Baby Bundles

Eleven organizations in under resourced areas of NYS were chosen to distribute Baby Bundles³. These bundles include resources and information for the families of infants and toddlers. The goal of the bundle is to connect families with newborns, fostered or adopted children to state and local resources. The bundle is delivered to parents in a reusable tote bag with beautiful Talking is Teaching images (pictured). The bag includes resources for the new baby’s adults: Books like, *Starting Life Together* (NYS Parent Guide) and *What to Do When Your Child Gets Sick*, brochures from the NYS Department of Health called, *Can Your Baby Hear You?* (the importance of the early hearing screening), the importance of early oral health practices, information about the NYS Parent Portal (how to find child care, navigate multiple systems and other valuable local resources), the Family Guide to NYS Early Childhood Services - Prenatal through Age 5, Talking is Teaching materials, and two children's board books. The local agencies that distribute the Baby Bundles also add local resources to the bag and talk to new parents about available services and supports. The goal of the Baby Bundle is intended to welcome, support and empower new parents. We anticipate delivering **9080** Baby Bundles throughout NYS. We will also have two new agencies that will be distributing Baby Bundles in 2022. See Appendix 4 for Baby Bundle Images.



Talking is Teaching
Media Campaign Poster

Table 6A. Baby Bundle Data

<p>BABY BUNDLE DATA HIGHLIGHT: At the end of 2021, 556 bundles have been distributed across NYS, overwhelmingly reaching low-income families. 7,930 Baby Bundle books and resources were purchased and shipped to the 11 regional awardees.</p> <ul style="list-style-type: none"> • 83% of respondents reported household income between \$0 - \$27,000 per year. • 61% of survey respondents reported that the information in their Baby Bundle was new to them. • 68% of respondents somewhat/strongly agreed that they will be able to use the information in their Baby Bundle to help them care for their new baby. • 76% of respondents would recommend the resources in the Baby Bundle to other new parents. • 13% of survey respondents indicated that they had not had time to look through the Baby Bundle upon receiving it, thus could not provide satisfaction/agreement ratings yet. 	
<p>The top three most used items in the Baby Bundles:</p> <ol style="list-style-type: none"> 1. Children’s board book (42%) 2. “What To Do When Your Child Gets Sick” book (37%) 3. Family Guide to NYS Early Childhood Services (36%). 	<p>The top three most useful items:</p> <ol style="list-style-type: none"> 1. “What To Do When Your Child Gets Sick” book (62%) 2. "Starting Life Together" NYS Parent Guide (59%) 3. Children’s board book (53%).
<p>When asked if there was anything else they thought should be added to the Baby Bundles respondents suggested:</p> <ol style="list-style-type: none"> 1. Breastfeeding assistance resources 2. Baby items (diapers, pacifiers, clothes, etc.) 3. Infant first aid training resources. 	

³ Niagara Falls Memorial Medical Center, Wyoming County Health Department, Oswego County Opportunities, Adirondack Birth to Three Alliance, Cornell Cooperative Extension of Oneida County, NYS Federation of Growers and Processors Association, Delaware Opportunities, Ossining Union Free School District, Family of Woodstock, Economic Opportunity Council of Suffolk and Albert Einstein College of Medicine-Bronx Health Start Partnership

Question 7

Taking into account the realities of COVID, describe how PDG B-5 funds have helped enhance school readiness for children from low-income and disadvantaged families, and assisted in the development of effective transitioning practices for children into elementary school. If available, use data to support your response. (Kindergarten Transition)

PDGB5 funding has enabled a range of activities, as described throughout this report, to support New York's young children and families, with a focus on low-income and historically marginalized families. To promote connectedness with families and support successful transitions during the early years, an Early Childhood Transition Coordinator position was created and dedicated to creating cross-sector transition teams and providing resources to the Early Childhood Care and Education (ECCE) workforce to help facilitate smoother transitions from birth to kindergarten, as well as overseeing the distribution of "Welcome Baby Kits" in select communities to help build nurturing, healthy relationships and provide the foundation for successful development. These activities are described below.

A. Kindergarten Transition Summits and Seed Money

On March 25, 2021, the project held a Kindergarten Transition (KT) Summit Orientation for school districts and community-based organizations as a prerequisite to applying for funding to prepare, strengthen and enhance school readiness for low-income and disadvantaged families with effective and innovative transition practices as they prepare for the transition to kindergarten. A great success is that most of the organizations that were awarded the Seed Money plan to continue hosting similar events with funds from other sources in the future. To support the sustainability of the Transition Summit Orientation, the project worked with a video production company to develop a Transition Summit Orientation video. The video led by the NYSB5 Transition Coordinator kicks off with welcome messages from the NYS CCF Executive Director and NYSB5 Project Manager. The production features presentations from the NYS Head Start Collaboration Director, the Director of the Office of Early Learning at NYSED, the a representative from 619 Coordinator at the Office of Special Education at NYSED, the Executive Director of the Early Care and Learning Council, staff from CCRRs and QUALITYstarsNY. Next the participants hear from the Seed Money awardees who excitedly talk about and show examples of their innovative transition practices. The recording is available at <https://drive.google.com/file/d/1A1tZEEpiVifZfC4r4izeXCZ096jBMES7/view>.

KT SEED DATA HIGHLIGHT: NYSB5 supported 22 new kindergarten transition teams with plans to add 10 more in 2022. The kindergarten transition Seed Money activities reached 2,825 children and all participating organizations serve vulnerable⁴ populations identified in the NYSB5 project. All organizations reported serving children of families who are a member of a racial/ethnic minority group and who are low-income, 75% served families in rural areas and those whose primary language is other than English, 50% served families who are currently homeless and receiving early intervention or special education and 25% served families who were immigrants or refugees. One of the districts reported 70% parent participation and found that fewer children expressed feelings of anxiety about leaving parents or attending school because they had already met the teacher and had been in the school before. Parents reported an increased level of excitement on behalf of their student as well as for themselves. They also expressed an increased level of comfort as their student started kindergarten. This comfort also helped with uncertainty and questions around starting kindergarten during the pandemic. Principals and school staff generally reported that Opening 2021 was very successful, indicating that their students were familiar and comfortable with classroom expectations and ready to learn sooner than in previous school years.

Activities led by the awardees included pop-up events with a Talking School Bus, opportunities to ride the bus around town, bags of school supplies and books about starting kindergarten, fine and gross motor skills, speech skill and cooperative learning opportunities, obstacle courses, scavenger hunts, arts and crafts, building tours, presentations on “Special Needs for Special Children” for children who have medical or mental health needs and children who are receiving special education services, interactive story times, meet the principal, local librarians and teachers. One of the awardees held a week-long KinderCamp orientation for children, where they learned about their school, teacher, rode the bus, and enjoyed meals. Another used funds to put up local billboard advertisements about kindergarten registration activities. Over the course of 30 days, they were seen by approximately 828,930 vehicles.

The KT Orientation and Seed Money activities were successful largely due one staff person, the NYSB5Transition Coordinator who, being dedicated full-time to supporting best practices and the alignment of state and local systems to promote positive transitions in early childhood, including transitions from early intervention to preschool special education and special education, and the transition into kindergarten. The Transition

Quotes from Kindergarten Transition Seed Money Recipients

“This seed money helped us take our dreams and jump into providing this experience for our students. Thank you!”

“Since the kids were the only students in attendance, they felt a sense of ownership of their new school- and no big kids to get in their way...yet!”

“We are absolutely overwhelmed with the positive response to this activity. We can't thank you enough for the opportunity!”

“We hope to help others create a similar transition summit for their community with the lessons we have learned.”

“We were so excited to hold this event, even during pandemic challenges and are looking forward to continuing each year forward. The program has already paid dividends- and ones we want to see continue. We are so grateful for the opportunity. Thank you so much.”

⁴ Action for a Better Community, Barker Central School District, Binghamton City School District, Chautauqua County Kindergarten Transition Team, Indian River Central School District, Lyndonville Central School District, Niagara Falls City School District, Saranac Lake Central School District

Coordinator has led the convening of the NYS Kindergarten Transition Training, expanded and increased the number of kindergarten transitions teams throughout NYS, increasing parent choice and knowledge about community resources and school readiness for children from low-income and disadvantaged families and assisting in the development of effective transition practices for children entering elementary school. The Transition Coordinator has presented on the transition from Early Intervention to Committee on Preschool Special Education (CPSE) and the CPSE to Committee on Special Education (CSE) to help providers and families better understand the differences between these programs and to be prepared for the next step. In addition, the Transition Coordinator works to make sure that families and providers know where to find the resources they need for positive educational transitions.

B. **Baby Bundle Pilot Project** (discussed in question 6) supports transition right from the start! Baby Bundles provide information, resources and opportunities for families with infants and toddlers in vulnerable and underserved communities to feel confident and connected to their community from their child's birth, adoption or foster placement. The Baby Bundle helps the whole family build a strong foundational understanding of what early childhood services, supports and transitions that happen in the birth through five years such as from home into a care setting and into kindergarten.

C. **Strong by Six Pilot** (discussed in question 3) also helps to ensure that every young child is developmentally on track, receiving the appropriate services and supports, and ready for kindergarten. Specifically this pilot is providing comprehensive screenings including developmental screenings recommended by the American Academy of Pediatrics, as well as screenings for Social Determinants of Health and Education, Adverse Childhood Experiences, and Protective Factors; referring and connecting children and families to needed services; using technology to collect, integrate and share data and information with parents and other cross-sector partners to test the feasibility of implementing an early childhood integrated data system; and building and strengthening relationships with elementary school administrators and staff; pediatricians, home visitors, and ECCE providers (including early intervention and preschool special education).

Quotes from Parents who received the Baby Bundle:

"Loved the baby book! Thank you!"

"I think this is a great resource for parents."

"I think the bags are a wonderful start off for new parents."

"I was happy to receive information for the best care for my baby."

"The Baby Bundle has information that helped me better understand my baby's developmental needs."

"It helps a lot for new moms because we have so many questions and concerns."

"The mirror is a great idea! Getting a few new books and things felt like a treat! New moms often don't get out to the store to pick up much (especially during a pandemic). It felt like opening a present. It brought me lots of joy to go through the items. Thank you!"

Question 8

How have PDG B-5 funds helped enhance or improve data coordination and sharing in your state's early care and education system? Include in your response progress related to ECIDS, SLDS, and distinct counts (unduplicated count). (ECIDS)

The APPR Excel document completed in year 1 was shared with the NYS Early Childhood Advisory Council (ECAC) finance (Goal 8) and data (Goal 9) Activity Teams and provided an example of how NYS can envision a statewide early childhood data dashboard. The report served as a catalyst for team members and focused their attention on developing a data dashboard with the goal to create an early childhood integrated data system (ECIDS). The ECAC Goal 8 and 9 Activity Teams were familiarized with the APPR document and discussions began around what can be developed by NYS to provide a live snapshot of the early care and learning system. The ECAC Goal 9 Data Activity Team has been meeting regularly to explore implementation of an ECIDS in NYS, by learning about how ECIDS are being used in other states. Three states (Pennsylvania, Utah and North Carolina) presented on lessons learned and the different paths taken to develop an ECIDS. The common thread was that developing an ECIDS takes time, strong leadership, resources and agreement about where the data will be housed and how it will be used.

Additionally, NY early childhood data sets were reviewed to identify potential starting points to develop an early childhood state dashboard in NYS for the purpose of bringing together the multitude of fragmented early childhood data that currently exists throughout NYS and helping to frame a more comprehensive picture of early childhood in a dashboard. The dashboard would include child care data, Head Start data, early intervention, prekindergarten etc. In addition to the Mixed Delivery System (MDS) data, discussions centered on whether the dashboard may also include the federal, state, local and other funding streams that support the early childhood system. Looking ahead, the Goal Activity Team will review the data sets that exist and discuss the components needed to develop an early childhood data dashboard. The ECAC is working on the planning with the NYS Governor's office.

Without an ECIDS yet established in NY, the Goal Activity Team has not tackled getting an unduplicated count of children served by the MDS in the past year. However, we do have the Strong by Six initiative pilot (question 3), led by the Children's Institute in Rochester, NY, this is a regional screening and referral pilot that tracks children and families through collaborative data agreements and a local network of referral partners. Participants in the pilot are active members of the ECAC and the Data Goal Activity Teams and share successes and lessons learned. We remain committed to continuing to develop and strengthen partnerships among the many programs, providers and settings that compose the state's MDS (including Head Start, prekindergarten, preschool special education, home visiting, etc.).

Data successes include the development of the **Pyramid Model Implementation Data System (PIDS)** and the **Healthy Steps Data Coordination Initiative**.

A. NYS Pyramid Model Data Coordination

The PIDS was created with PDGB5 funding and was launched in 2020 and was used by all Pyramid Model-implementing sites in 2021. The PIDS data is used to provide data for child, classroom, programs and

statewide to aid in better supporting children and providers. It also helps the State Leadership Team with guidance and coordination of Pyramid Model Implementation across the state. PIDS has received national recognition thanks to NYSB5 funding; 7 other states are using PIDS to support Pyramid Model implementation. An API was created to link PIDS to the Aspire Workforce Registry, so that Pyramid Model trainings can be automatically linked with Early Childhood Care and Education (ECCE) professionals' professional profile maintained by Aspire. This has been a wonderful addition to the state's data collection and a real time saver. In the last year, the PIDS team completed 5 bug fixes, 22 forms updates, 34 help desk calls. PIDS is being highlighted at the national Pyramid Model Conference in April 2022, and 7 other states are starting to use it for their Pyramid Model implementation.

B. NYS Healthy Steps Data Coordination

Currently, there are 13 Healthy Steps sites funded by the NYS Office of Mental Health. There are 11 Healthy Steps sites participating in the PDGB5 funding opportunity. With PDGB5 funds, sites are enhancing data collection and reporting of key elements have been identified to support implementation, maintain fidelity and measure outcomes. Specifically, to support data infrastructure development, a needs assessment survey was conducted, and each site created an implementation plan. Some implementation examples include integrating the Ages and Stages Questionnaire (ASQ-3) and/or other screening tools into the electronic health record such as maternal depression screens, family needs screens, enhancing ability to extract data from electronic medical record or reporting and communications. These tools help to align the Healthy Steps program within the pediatric/primary care practice. Reported positive impacts of the projects include:

- Improved documentation and communication with team members
- Increased ability to retrieve data, faster and more efficiently
- Saved time to spend more time with families
- Improved ability to generate reports for improved internal and external reporting
- Enhanced ability to track progress
- Improved referral feedback loop
- Ability to build in multiple language for screening tools
- Ability to screen more families
- Improved ability to monitor status of screens

Question 9

How have PDG B-5 funds helped ongoing efforts to enhance and/or implement your state's Program Performance Evaluation Plan? Provide a description of how your Program Performance Evaluation has informed your PDG B-5 grant activities to date. (PPEP)

- The Center for Human Services Research (CHSR) at the University at Albany has been contracted by the NYS Council on Children and Families (CCF) to perform a required evaluation of the projects being implemented in the Preschool Development Grant Birth through Five (PDG-B5) Renewal grant (Grant number 90TP0059-01-00). The 35 activities evaluated are focused on the following goals and can be found in the Early Childhood Advisory Council (ECAC)/NYSB5 Strategic Plan and logic model. Increase Parent Engagement
- Improve System Coordination
- Enhance Professional and Business Development
- Expand Early Care Environments

Early in 2020, the global COVID-19 pandemic created significant delays in the NYSB5 grant activities. In addition, many of the vendors needed to develop modifications to tasks and activities due to COVID-19 restrictions and delays (e.g., pivoting to providing trainings on virtual platforms instead of holding trainings in-person). These circumstances resulted in delays in implementation for many of the planned NYSB5 activities and thus delays in evaluation. But Year Two saw implementation of all grant activities.

The NYSB5 project is evaluated through a combination of data dashboards, surveys, feedback evaluations and reports. Data submitted each quarter by CCF and each of the vendors inform the dashboards. Screen shots of each of the dashboards are included in APPENDIX 9.1 and can be accessed at <https://public.tableau.com/app/profile/center.for.human.services.research>. The dashboards allow activity leads to see progress in real time, collectively problem solve areas of confusion and shift course if needed. Some of the challenges reported include: poor response rate on surveys, and inconsistent collection of demographic data and roles of training participants. The evaluation being conducted is an implementation evaluation with the understanding that over a period of several years, an evaluation implemented to fidelity will produce the outcomes indicated on the logic model. The purpose of this evaluation at present is to assess the extent to which the activities are implemented as planned, and if they are not, to help identify barriers to implementation. This evaluation addresses the following types of questions:

- A. Are the activities being implemented as intended?
- B. Are the activities being accessed by the target population (vulnerable families)?
- C. What are participants' reactions to these activities?
- D. Do these activities align with the short-term and long-term goals included on the logic model?

An implementation evaluation can begin as soon as the activities begin. The benefits of an implementation evaluation are that activities can be monitored from the beginning to ensure the activities are being carried out as intended. This timing allows for early warnings of potential derailment so that adjustments can be made during the course of implementation of an activity rather than waiting for the end of a project.

The COVID-19 pandemic has presented a substantial barrier to implementing the activities as originally intended. Thus far, the activities are being carried out with reasonable accommodations, such as moving trainings from in-person to virtual while also balancing the awareness of the digital divide. The vulnerable populations that are a focus of this grant are being reached by providing trainings to professionals who work with those populations and providing direct services to children and families from those populations. Most professionals and parents report that they find the activities to be useful.

- A. **Are activities being implemented as intended:** The activities that had the most challenges with participation are those that provide services/supports to families. This difficulty is likely due to competing priorities for families that have been underscored due to COVID-19. Young children under age 5 cannot be vaccinated against COVID-19, making outings a challenge. When activities are virtual, finding time to focus with children under age 5 can be challenging. Activities for families, such as the Parent Leadership Conference and the Fatherhood Conference, experienced low participation despite high satisfaction. The Kindergarten Transition Summits and Seed Money activities did not receive as many applications as expected (9 received out of 14 budgeted). It's widely reported that since the beginning of the COVID-19 pandemic, school districts have been flooded with staffing shortages in classrooms and drivers for busses, in addition to managing changing health and safety protocols.
- B. **Is the project reaching the target population (vulnerable children⁵):** Some activities are not reaching a racially and ethnically diverse population. This is especially true of some of the infant mental health activities, reflective practice trainings, and ACEs trainings. These activities are reaching a primarily White, non-Hispanic, female population. Other projects, like the QUALITYstarsNY program, exceeded their expansion goals, yet most of the staff at the programs are female (96%) and the racial diversity of participants remains a focus for improvement, with White participants representing a slight majority (53%). The Leadership Initiative reports primarily female memberships with most (62%) having a master's degree or higher. The most frequently reported race of members is White or Caucasian (40%), followed by Black or African American (24%) and Hispanic or Latino (21%). While the gender and education for participants may fit the expected demographics, from an equity perspective, it's important that expectations are challenged to support more Early Childhood Care and Education (ECCE) leaders who identify as members of underrepresented groups. The trend being that a high tide raises all ships, however, it is important to consider a targeted universalism framework and apply an equity lens. While the goal of the project is to support equity for families and children in NYS, targeted universalism would develop short- and long-term targeted solutions to support different members of a region or community. This focused attention could help reassess how outreach is conducted, who are the messengers, and what curricula is used. Also for consideration is the extent the diversity of populations reached match the diversity of possible participants. Questions to consider include: 1. Is the curricula culturally relevant? 2. Where is outreach happening? 3. How can we incorporate an equity lens into the work?
- C. **What is the participant reaction to the activities:** The extent to which we can evaluate the populations reached by the activities and their reactions to activities is limited by the quality of data

⁵ Vulnerable children are defined as: children who are members of minority/ethnic groups, are immigrants or refugees, are experiencing homelessness, living in multi-language households, living in low-income households, living in rural communities, receiving early intervention or special education services.

collected. Attention must be given to collecting process measures to facilitate quarterly data collection and progress monitoring. Challenges continue around consistent collection of demographic information of participants and populations served. Attention should be given to improving practices around feedback survey distribution to improve response rates. Low survey response rates are problematic in that the data gleaned from the responses may not be representative. Partners who distribute surveys should be encouraged to provide the survey link during, immediately after and/or within a couple of days of the training/events.

- D. **Are the activities aligned with the logic model:** The NYSB5 logic model shown below was developed in 2019 and highlights the activities, outputs and expected outcomes of the NYSB5 project. The model helps ensure the project remains committed to defined goals. Regular review of the model helps keep our activities, short- and long-term outcomes in sight and prevents project creep. To make certain the project is meeting intended goals, the logic model is compared to the NYSB5 Program Performance Evaluation Plan (PPEP) progress. The table below shows the APPR questions that address each of the activities and outputs. All activities are ongoing and are assessed using the following descriptors:
- **Beginning (B):** This project activity is in the first 6 months of starting, data is not yet available.
 - **Accelerating (A):** This project activity has been conducted for at least 1 year, data is available.
 - **Striding (S):** This project activity has been conducted for at least 1 ½ years, PPEP data is available and has been used to help guide QI.

NYS VISION: <i>All young children are healthy, learning, and thriving in families that are supported by a full complement of services and resources essential for successful development.</i>					
GOALS					
<ul style="list-style-type: none"> • Use CQI to inform a responsive SP and activities to implement comprehensive ECCE programs and services using SMART goals. • Institutionalize parent voice and support parent knowledge/choice by forming a Parent Advisory Council (PAC) that represents all families and supports successful early childhood transitions. • Expand access to high quality programs by increasing participation in QUALITYstarsNY (QSNY). • Integrate NYS early childhood data to enable better tracking of outcomes. 					
Column 1: Activities	S	Column 2: Outputs	S	Column 3: Short Term Outcomes	Column 4: Long Term Outcomes
Update NA and SP Question 1 and 2 – ongoing through year 3 Monitor SP implementation Question 2 – ongoing through year 3 Track progress of PPEP Question 9 – ongoing through year 3	S	NA and SP updated Question 1 and 2 – ongoing through year 3 PPEP monitoring Question 9	S	Ongoing PPEP monitoring	Ongoing CQI to inform SP implementation and NA updates

Create PAC Question 1 and 6 – ongoing through year 3 Promote Talking is Teaching Question 2 and 6 – ongoing through year 3	S	No. Parents on PAC Question 1 and 6 – ongoing through year 3 No. hits on Parent Portal Question 1 and 6 – ongoing through year 3	S	Increase parents attending ECAC/ECCE meetings representing the PAC Increase parent knowledge and engagement in ECCE programs	Institutionalize parent voice
Expand technology to reach families Question 4	A	No. districts implementing new transition policy Question 7	S	Increase local transition teams	Local transition teams will welcome families from the very start to ensure all children enter kindergarten ready to learn
Conduct best practice activities Question 5 – ongoing through year 3	S	No. providers attending professional development training Question 5 – ongoing through year 3 No. resources disseminated Question 1 and 2 – ongoing through year 3	S	Increase staff knowledge of best practices to promote quality	Providers have access to high quality PD
Expand QSNY Question 1 and 5 – ongoing through year 3 Expand Aspire Registry Question 1 – ongoing through year 3	S	No. programs in QSNY Question 1 and 5	S	Increase QSNY/Aspire participation	ECCE system is a mix of early care and education, medical, mental health and other supports MDS maximizes financing strategies
				Increase access to cross systems data to inform QI	Early Childhood Integrated Data System

The NYSB5 project is accelerating (A) and/or striding (S) in all areas on the logic model above indicated by the letter S or A in the model. For additional descriptions of how the project is implementing activities, please refer to the question numbers in column 1. We continue to work toward the short- and long-term outcomes. The project has achieved 6 of the 7 short- term outcomes indicated in column 3. These include: 1) increasing parent knowledge and engagement in ECCE programs; 2) parents attending the ECAC/ECCE meetings; 3) increasing staff knowledge of best practices to promote quality; 4) increasing QUALITYstarsNY and Aspire participation; 5) increasing local transition teams and 6) ongoing PPEP monitoring. One area for further strengthening includes building access to shared data. Question 8 addresses the NYS plan for a shared data dashboard and ECIDS. In addition, there are pockets of data sharing between Aspire and the Coaching Companion and Aspire and PIDS. In addition, lessons learned and guidance around shared data will be gleaned from the Strong by Six pilot also addressed in question 8.

In 2021, the NYSB5 project hit its stride with all activities up and running. Collaboration and partnerships are at an all-time high demonstrated by the cross system leadership of the ECAC Goal Activity Coordinators in their steady implementation of the NYSB5/ECAC Strategic Plan. The attendance at the NYSB5 Partner Meetings is flourishing with regular attendance above 80. PDGB5 funds have given rise to several successful state and local partnerships that provide state agency support for community-based organizations who wouldn't otherwise have the capacity to serve children and families in their neighborhoods. This is evident by the local leaders at CCRRS who are providing statewide training on business development, developing resiliency toolkits and leading Pyramid Model Hubs. With PDGB5 funding, more communities have built local kindergarten transition teams, families are participating in the development of the Parent Leadership Conference and for the first time are lending their voice to ECAC meetings and policy decisions that impact their children. The sharing of PDGB5 resources on several levels has created a communication pathway between local organizations and state agencies that not only serves to cross-pollinate the knowledge of state and local agencies, but it creates authentic relationships and shifts mental models, both key components to changing any system. While NYS has not yet realized our vision, with PDGB5 funds we have found our common goal, led with an equity framework, crept out of our silos and circled our wagons to ensure that *all young children are healthy, learning, and thriving in families that are supported by a full complement of services and resources essential for successful development.*