

TABLE OF CONTENTS

Project Summary/Abstract 2

Project Description..... 3

Expected Outcomes 8

Approach..... 9

 Activity One: Update Comprehensive Statewide Early Childhood Needs Assessment 9

 Activity Two: Update Comprehensive Statewide Early Childhood Strategic Plan 20

 Activity Three: Maximize Family Engagement in the Early Childhood System 24

 Activity Four: Support the Early Childhood Workforce and Disseminate Best Practices..... 36

 Activity Five: Support Program Quality Improvement..... 44

Project Timeline and Milestones 52

Organizational Capacity..... 55

 Stakeholder Engagement and Sustainability 57

Program Performance Evaluation Plan..... 58

Plan for Oversight of Federal Award Funds and Activities..... 63

Protection of Sensitive and/or Confidential Information..... 63

Dissemination Plan 64

Third-Party Agreements..... 65

Project Budget and Budget Justification..... 65

PROJECT SUMMARY/ABSTRACT

Title: New Hampshire’s Preschool Development Grant – 2023 Planning Grant Application

Applicant’s Name: University of New Hampshire

Address: 51 College Road, Durham, NH 03824

Phone: 603-862-4848 (voice), 603-862-3564 (fax)

E-mail address: Lisa.Scigliano@unh.edu

Website address: www.unh.edu; www.chhs.unh.edu/early-childhood/preschool-development-grant

New Hampshire (NH) is proud that the 2022 Annie E. Casey Foundation Kids Count report again ranked our state second in the nation for overall child well-being, as well as for health and family/community indicators. Statewide data, however, mask important disparities in poverty status, health outcomes, and service delivery among groups of people and regions of the state. Furthermore, the need for a well-coordinated, reliable early childhood system was emphasized by the COVID-19 pandemic, highlighting gaps in accessibility and affordability across the state. NH’s 2023 Preschool Development Grant (PDG) Planning application intends to expand and build upon prior PDG work in the state to implement the early childhood strategic plan’s vision that all NH families are afforded comprehensive and responsive supports, so they are healthy, learning, and thriving now and in the future.

NH embraces the US Administration for Children and Families (ACF) Office of Child Care (OCC)’s purpose of Preschool Development Grant funding, that the well-being of infants and young children requires a well-functioning early childhood “system,” which integrates traditional care and education programs with services that strengthen, engage, and stabilize families, including supports that target health and wellness. The success of NH’s mixed delivery system requires participation by all sectors of society relevant to the well-being of young children and their families. To strengthen and further integrate NH’s early childhood system, NH’s planning PDG proposes investments in the early childhood workforce, including family child care providers, support for opportunities to expand access to high-quality early care and education programs, and strengthening of the integrated, comprehensive mixed delivery system, birth through third grade.

The NH PDG planning application reflects the state’s new early childhood governance system, guided by the Governor’s advisory Council for Thriving Children. The Council is co-led by the state’s Departments of Health and Human Services (DHHS) and Education (NHED), directed by PDG-funded staff, and informed by “quadrants”: Early Childhood Integration Teams (ECITs) at NHED and DHHS, Birth through age 8 Family and Community Advisors, and an Early Childhood Scientific Advisory Panel. With advisement from the Council and quadrants, leadership at DHHS, NHED, and the University of New Hampshire (UNH) will collaboratively manage PDG efforts. Focusing on children, families, schools, and communities, NH intends to implement best practices and quality improvement activities in early childhood to increase families’ partnership in, knowledge of, and choices for their child’s development; increase families’ access to integrated quality early childhood opportunities and services; increase comprehensive wellness of young children; ensure children achieve early childhood developmental and educational goals; and increase providers’ and educators’ knowledge and access to resources for quality programs and services. NH’s planning PDG approach includes expanding the work of the current implementation PDG, leveraging funding streams to further develop and improve the early childhood system, and building on successful efforts initiated in response to the COVID-19 pandemic.

PROJECT DESCRIPTION

New Hampshire’s (NH) 2023 Preschool Development Grant (PDG) Planning application intends to expand and build upon prior PDG work in the state and implement the early childhood strategic plan’s vision that all NH families are afforded comprehensive and responsive supports, so they are healthy, learning, and thriving now and in the future. To strengthen and further integrate NH’s early childhood system, the NH PDG planning proposal includes investments in the early childhood workforce, support for opportunities to expand access to high-quality early care and education programs, and strengthening of the integrated, comprehensive mixed delivery system, birth through third grade. NH embraces the fact that the success of its mixed delivery system requires participation by early childhood program and service providers, public school administrators and educators, family support organizations, families, health practitioners, business leaders, state and local government, higher education, advocacy, and philanthropic entities, essentially all sectors of society relevant to the well-being of young children and their families.

The need for a well-coordinated, reliable early childhood system was emphasized by the COVID-19 pandemic, highlighting gaps in accessibility and affordability across the state. NH endeavors to improve the system and build upon flexible solutions developed in response to the pandemic to meet the needs of children, families, child care providers, businesses, and communities. In alignment with US Administration for Children and Families (ACF)’s goals, NH intends to prioritize the following activities:

- Promote an integrated early childhood system that reflects a mix of programs and services across the state, including kindergarten and other family/child services beyond traditional early childhood care and education.

- Improve program quality by coordinating professional development activities across programs serving children from birth through 8 years, while also maintaining access and availability of services, including investments in the early childhood workforce (e.g., pathways to licensure and degrees).
- Maximize family choice, knowledge of, and engagement with existing programs in the state’s mixed delivery system, easing access to services.
- Elevate and support efforts to coordinate instructional alignment and developmentally appropriate learning experiences from birth through third grade, including children’s social-emotional and behavioral needs.
- Enhance partnerships among Head Start programs, child care providers, preschool programs, early intervention services, preschool special education services, local educational agencies, family support, and the health care system to support family engagement, developmental health, and promotion of family well-being.

NH’s early childhood system is inclusive of Child Care Development Fund (CCDF) activities and mixed delivery system providers (center-based, family child care, and informal care); Early Head Start and Head Start programs; home visiting through the Maternal, Infant, and Early Childhood Home Visiting Program (MIECHV) and state-funded services; Part C and section 619 of Part B of the Individuals with Disabilities Education Act (IDEA); district-funded preschool and programs funded by Title I of the Elementary and Secondary Education Act (ESEA); as well as family support programs including, but not limited to Medicaid Children's Health Insurance Program, Title V Maternal and Child Health Programs, Healthy Families America, Child and Adult Care Food Program (CACFP), Supplemental Nutrition Assistance Program (SNAP), Women, Infants and Children (WIC), and Temporary Assistance to Needy Families (TANF). NH

concur with ACF that the well-being of infants and young children requires a well-functioning early childhood “system,” which integrates traditional care and education programs with services that strengthen, engage, and stabilize families, including supports that target health and wellness.

To this end, proposed grant activities align with and leverage federal, state, and local initiatives, including:

- collaboration with the NH Department of Health and Human Services (DHHS) Bureau of Child Development and Head Start Collaboration (BCDHSC). To increase quality and access, the NH PDG will build on and align with CCDF activities, including continued support for the implementation of a revised Quality Recognition and Improvement System (QRIS), known in NH as Granite Steps for Quality (GSQ), and initiatives deemed successful in response to the COVID-19 pandemic. PDG investments to stabilize the child care sector will supplement current DHHS efforts to increase provider payment rates and improve subsidy payment policies. The NH PDG will focus on building the supply of child care for underserved populations and expanding access to child care assistance.
- enhanced focus on young children’s social-emotional development and behavioral health. As the 28th Pyramid Model State with the national Pyramid Model Consortium, NH is developing sustainable state and local infrastructure for the implementation, evaluation, and sustainability of positive behavioral supports in early childhood programs and schools. Building on the collaboration with the New Hampshire Department of Education’s (NHED) federal iSocial project (State Systematic Improvement and State Personnel Development Grant), NH’s 10-year mental health plan, children’s system of care, and efforts to implement trauma-informed care, NH will utilize current infrastructure (e.g.,

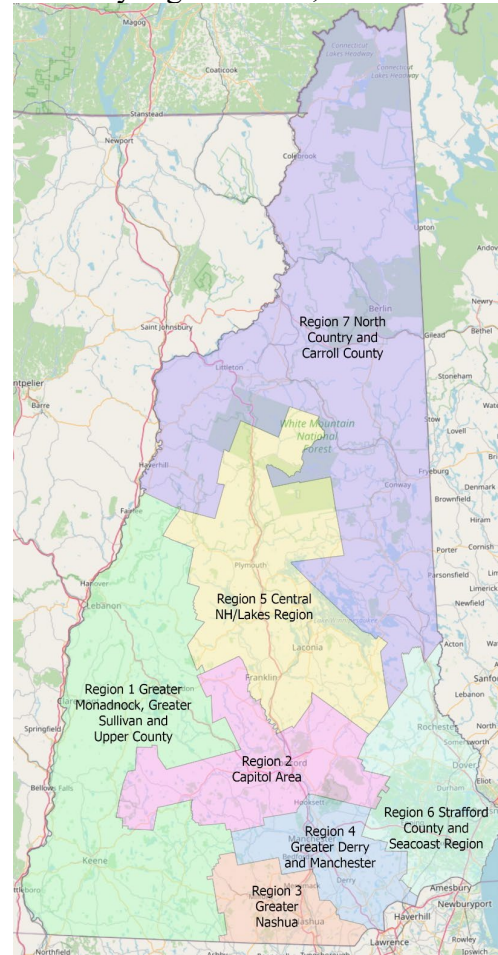
Preschool Technical Assistance Network) to understand and address suspensions, expulsions, and other exclusions or inappropriate and ineffective disciplinary practices.

- educational policy enhancements. Building on funding for full-day kindergarten, the release of NH’s Early Learning Standards and Kindergarten Readiness Indicators, and legislation that supports early childhood best teaching practices and play-based learning (2017 Kindergarten Focus and Components, HB 1499; 2018 Substantive Educational Content of an Adequate Education law, RSA193-E:2-a), in 2023 the NH PDG aims to provide practice-based coaching to school-based preschools, aligning professional development efforts across DHHS and NHED.

The governance of NH’s early childhood system is guided by the state’s early childhood advisory council, the Council for Thriving Children, established by Executive Order in 2020. The Council is co-led by DHHS and NHED, with members appointed by the Governor and staffing funded by NH PDG, and fulfills the federal Improving Head Start for School Readiness Act of 2007, Public Law 110-134 requirement. Council members include family member advocates, early childhood experts, health care leaders, state legislators, business leaders, and Commissioners from state agencies. The Council is informed by four “quadrants”: Early Childhood Integration Teams (ECITs) at NHED and DHHS, Birth through age 8 Family and Community Advisors, and an Early Childhood Scientific Advisory Panel. Of particular importance, the Executive Order requires DHHS and NHED to seek to establish a joint Office of Early Childhood Care and Education. With the establishment of the Council, NH significantly addressed state governance and coordination of publicly funded early childhood programs to better meet child and family needs.

Another major infrastructure change is the establishment of NH’s Early Childhood Regional System in 2021. The Regional System realizes the shared DHHS-NHED vision of coordinated and

collaborative regional partnerships that include families, community organizations, and schools to build capacity, equip families to support children’s readiness for learning, support family engagement and well-being, and encourage quality programs across the state. This vision was informed by extensive input from a broad array of stakeholders, data from multiple sources (e.g., location and use of early childhood programs and services, and access gaps), and the development of a model for a statewide regional early childhood system¹. Within this system, each of the seven identified regions has a Lead that supports communication, coordination, and collaboration between families, community partners, and schools. By creating formal connections between schools, early learning providers, and family support organizations, the regional system aims to effectively coordinate existing programs, improve transitions across early childhood programs and from early childhood programs to the local educational agency or elementary school, address the equitable participation of families as relevant within a specific region, and ultimately improve school readiness and long-term stability in the early childhood system. The Regional system also promotes bidirectional communication, with regular meetings between the Leads and appointed State Points of Contact.



In 2021, NH PDG awarded Regional Lead partnership grants to seven organizations, primarily United Way affiliates and NH non-profits that offer comprehensive and family-oriented health

¹ <https://chhs.unh.edu/early-childhood/preschool-development-grant/pdg-resources>

care and support services, early intervention, and/or inclusive child care. These Regional Leads were required to include representation from early childhood care and education (ECCE, e.g., child care), school (e.g., local educational agency), and family support (e.g., Family Resource Center, FRC). Partnership funding supports the regional collaboration to enhance ECCE-school-family support connections and build infrastructure for cross-sector alignment for the purpose of coordinating resources and services within the identified regions. Additionally, optional one-time funding was available for specific local projects to support a comprehensive and coordinated service continuum at the local level to meet the wide range of needs of a community's children and families. Examples of Early Childhood Regional Lead projects include a home visiting program for New American families, staffed by a same-language speaking provider; scholarships to quality early care and education program; kindergarten transition supports to enhance early learning opportunities; and a community-specific parent leadership group to address safety and transportation barriers to school and for extracurricular activity participation. The NH PDG will fund the Leads and their projects through the calendar year 2022, with the sustainability of the infrastructure to be addressed by State partners. While NH's 2023 NH PDG planning grant application is not requesting direct funding for the Regional Leads, the infrastructure is embedded within many of the proposed projects specified under the Activities.

EXPECTED OUTCOMES

For many children and families, NH is a great state in which to grow up and live. We are proud that Annie E. Casey Foundation's Kids Count report for 2022 again ranked NH second in the nation for overall child well-being and for health and family/community domains, and fourth in economic well-being and education. Statewide data, however, mask important disparities among groups of people and regions. The PDG-funded 2020-2021 Needs Assessment noted that poverty status varies by region and gaps remain in health outcomes and service delivery, conditions likely

correlated with and exacerbated by NH being a largely rural state. After four years of PDG funding, NH continues to strive for a comprehensive, coordinated early childhood system.

With a focus on children, families, schools, and communities, NH intends to implement best practices and quality improvement activities in early childhood to achieve the following expected priority outcomes, as identified by NH’s Council for Thriving Children:

- Increase families’ partnership in, knowledge of, and choices for their child’s development
- Increase families’ access to integrated quality early childhood opportunities and services
- Increase comprehensive wellness of young children
- Ensure children achieve early childhood developmental and educational goals
- Increase providers’ and educators’ knowledge and access to resources for quality programs and services

With the exception of Needs Assessment and Strategic Plan, each Activity has identified outcomes.

APPROACH

The 2023 NH PDG planning grant proposal is pragmatic and feasible within a one-year timeframe, innovatively addresses program quality and kindergarten readiness, and is responsive to the communities of NH. Expanding the work of the current implementation PDG, NH intends to leverage all available funding streams in developing strategies to further improve the early childhood system, and build on successful efforts initiated in response to the COVID-19 pandemic. The NH PDG planning proposal articulates the state’s approach to sustain or enhance previous efforts in the five major activities as outlined in the Notice of Funding Opportunity.

Activity One: Update Comprehensive Statewide Early Childhood Needs Assessment

As NH conducted and substantively updated comprehensive statewide early childhood needs assessments in 2020, 2021, and 2022, for the 2023 planning period NH proposes a targeted update. Intentionally building off work already completed in this area (i.e., previously funded NH PDG

Needs Assessments; child care supply and demand mapping; a snapshot of the early childhood workforce by state entities; see Table 1), assessments in 2023 will explore elements not previously studied, those identified as initial gaps, or that are emerging.

Table 1. Needs Assessment Topics Addressed by NH Reports

| | Topics: quality and availability of ECCE | Topics: ECCE workforce |
|--|--|---|
| 2020 Needs Assessment | underserved communities high-poverty communities rural areas infant-toddler slots | status of the early childhood care and education workforce, including Kindergarten teachers |
| 2021 Needs Assessment | underserved communities high-poverty communities vulnerable populations rural areas | impact of the COVID-19 pandemic on the FRC workforce |
| 2021 DHHS Workforce survey | | status of the early childhood education workforce specifically needs related to compensation and COVID-19 |
| 2021 Brief: Child care access and COVID | underserved communities high-poverty communities rural areas infant-toddler slots | impact of COVID on licensed programs |
| 2022 Needs Assessment | underserved communities high-poverty communities rural areas infant-toddler slots | status of the children’s behavioral health, and early supports and services workforce |

While the NH PDG has surveyed families statewide and by urban/rural designation; across all incomes and representing those engaged in state-administered/funded programs, including the child welfare system; reflective of diverse family composition, and families raising children at risk of or with disabilities and/or special health care needs; participation by particular communities (i.e., dual/multi-language learners, migrant and seasonal workers, and immigrant families) has been limited. Generally, data collected in PDG Needs Assessments could not be disaggregated based on race/ethnicity and there was limited participation with translated surveys, language-specific focus groups, and targeted/local data collection.

NH is cognizant of possible disparities for families and providers from diverse cultural and linguistic backgrounds and those who have been traditionally marginalized (e.g., limited English proficiency). To avoid duplication of efforts in a small state and potential survey/sample fatigue in identified populations, NH PDG participated in the Early Childhood Equity Movement², which supported community co-researcher-led conversations with families in Spanish, Nepali, Portuguese, Arabic, and Swahili, and with Abenaki and African American families in the spring of 2022. NH PDG staff serve as an Advisor on this study by Child Trends to understand the strengths and needs of families and children in accessing the early childhood system, including systemic barriers and inequities across race and ethnicity. This effort was funded by NH’s Endowment for Health, and emerging themes will be included in the 2022 PDG Needs Assessment and inform proposed 2023 PDG planning grant activities.

In the 2019 PDG planning grant, NH partnered with the RAND Corporation to conduct a comprehensive statewide Needs Assessment (see findings in Table 2), including material review, the definition of early childhood terms (e.g., quality, availability, access, vulnerable/underserved) catalog of programs considered part of the “early childhood system”, informant interviews including parent focus groups, and surveys of families and the care and education workforce, including Kindergarten teachers. As the majority of NH’s early childhood system is federally funded, understanding the state-level infrastructure allows for the strategic investment of state and local funds in integrated, high-quality programs and services.

Table 2. NH PDG Planning Grant Needs Assessment Key Findings, published 2020

| Needs Assessment Topic | NH Needs Assessment Finding (published 2020) |
|--|--|
| Family Knowledge of the Birth to age 5 (B–5) System | <ul style="list-style-type: none"> ▪ Awareness of many specific B–5 services is low among parents. ▪ Top information sources for parents are friends and family, social media, and Google. |

² <https://endowmentforhealth.org/early-childhood-equity-movement>

| | |
|--|--|
| | <ul style="list-style-type: none"> ▪ Parents report difficulty accessing information about B–5 services, and providers report gaps in their knowledge of other service providers and the services they offer. |
| <p>Family Experiences with Access to and Quality of B–5 Programs</p> | <ul style="list-style-type: none"> ▪ Issues with accessing ECCE affect many families and various barriers affect access to and participation in B–5 programs. ▪ Access issues are greatest for some groups of families, typically those with the lowest income, and those with children with special needs or complex medical issues. ▪ In terms of quality, parents often settle for what is available or affordable and often define quality differently than experts. ▪ Parents facing complex situations would benefit from support to better navigate the system. Many parents reportedly do not have employment-related supports to ease the burden, such as jobs that offer family-friendly or flexible hours. |
| <p>Family Experiences with the Transition to Kindergarten and General Service Coordination and Continuity</p> | <ul style="list-style-type: none"> ▪ Most parents reported receiving at least some support for their child’s transition to kindergarten and being generally satisfied with the information, timeliness, and activities. ▪ Kindergarten entry assessments are being used by a majority of teachers, but the practice is not standardized. ▪ Generally, coordination of services is an issue, both at a point in time or over time, especially when children have special needs or complex medical conditions. |
| <p>B–5 System Workforce</p> | <ul style="list-style-type: none"> ▪ B–5 workforce members have varied backgrounds and positions. Opportunities for professional development exist for the ECCE workforce, but various barriers limit participation. ▪ A shortage of qualified ECCE staff hinders the provision of high-quality care. ▪ Compensation data confirm low pay and limited benefits for ECCE classroom staff. Similar issues are not as prevalent for other segments of the B–5 workforce but concerns remain. ▪ Overall the commitment to the field and job satisfaction are high for the ECCE workforce, despite issues with compensation and professional support. |
| <p>B–5 Infrastructure: Facilities, Data, Governance, Financing</p> | <ul style="list-style-type: none"> ▪ There is near universal concern among providers and other leaders in the field with the shortage of quality B–5 facilities. ▪ Key informants almost unanimously acknowledged that the lack of integrated data is problematic, especially in limiting the options for care coordination and data-driven decision-making. ▪ The general agreement across those who were interviewed is that state governance structures need to be improved, with the potential for reduced administrative burden and better coordination across the B–5 system. ▪ Across stakeholders interviewed, there was a common expression of the need for more funding to ensure that families with young children can access high-quality services that would support healthy development. |

In the PDG implementation period, NH sought to update the comprehensive statewide needs assessment with (1) a focused consideration of vulnerable families and the system of supports provided by FRCs, NH’s network of community-based programs and a sector of the early childhood workforce; and (2) further exploration of the mixed delivery system statewide and specifically the non-care and education early childhood workforce (i.e., children’s behavioral health, and early supports and services). Both updates considered family knowledge of and experiences with early childhood systems, services, and supports, and their concerns and priorities, as well as particular sectors of the workforce. While the second Needs Assessment update will be completed in December 2022, the first implementation period update was conducted June 2020 through June 2021, coinciding with the COVID-19 pandemic and allowing for the identification of needs created by the pandemic as well as strategies successful in addressing those needs.

The National Center for Children in Poverty (NCCP), a non-profit policy research center, considered two areas of inquiry for the 2020-2021 Needs Assessment:

- (1) the perspectives of vulnerable³ families, through a statewide Family Survey and focus groups with primary caregivers of children under age 9 (e.g., the concerns and needs of families, especially families facing serious challenges; what services they can access; what barriers they face in accessing supports; what additional supports they would like to receive; how the COVID-19 pandemic affected needs and barriers to services; and lessons learned to be carried forward after the pandemic); and

³ Vulnerable families, jointly defined by NCCP and the NH PDG project team as: Families experiencing housing insecurity (i.e., have had to move to a temporary residence because of difficulty paying rent or mortgage); Families with children with delays, disabilities, or chronic health conditions; Families whose primary language is not English; Families that have at least one parent of color; Families that have at least one parent who was not born in the US; Families with children living in alternative care arrangements, such as foster or kinship care (e.g., grandparents, legal guardians); Families who are disconnected from services.
https://chhs.unh.edu/sites/default/files/media/2022/02/2020-21_nh_needs_assessment_final_report.pdf

- (2) supports and services provided to families with young children by FRCs, through a survey and in-depth interviews with FRC staff (e.g., how FRCs support families with young children; promising practices they use; resources FRCs need to better support families).

The 2020-2021 Needs Assessment findings included a high level of concern expressed by parents about their own and their children's mental health. Parent and child mental health was affected by the COVID-19 pandemic, likely due to service disruptions, social isolation, and economic insecurity. Additionally, parents faced constraints in income that exacerbated financial concerns. Many working parents were not eligible for economic assistance due to income eligibility guidelines yet they still struggled to meet basic needs. The cost of child care was cited as a challenge by many parents, regardless of income.

Parents were overwhelmingly positive about many of the support services they received, although parents of children with disabilities reported service disruptions during the pandemic. NCCP also identified unique strengths of FRCs in their capacity to meet many of the needs of families with young children, including families facing adversities. FRCs identified several resources that would increase their capacity to strengthen the well-being and optimal development of young children while identifying serious gaps in community supports for families.

Before the onset of the pandemic, NH was developing strategies to mitigate the impact of the cliff effect in an effort to strengthen child and family well-being. The cliff effect occurs when an individual takes a new job or accepts a promotion, yet the increase in wages does not account for what is lost in public assistance, leaving a family less financially secure. NH, with the use of consultants, conducted an economic impact study that led to the development of a 2021 plan to close the cliff effect⁴. The work to close the cliff effect is part of larger efforts to strengthen and

⁴ <https://www.dhhs.nh.gov/solving-benefits-cliff-effect>

support families, including but not limited to Community Collaborations to Strengthen and Preserve Families, Children’s System of Care, Home Visiting Programs, Family Reunification Vouchers, and FRC Quality Designation.

Also complementing the NH PDG Needs Assessment, NH DHHS via the NH Impact Project released a workforce study report in August 2021 to inform the quantity, quality, and retention of child care staff. Data from 631 workforce members in the fall of 2020 presented the impact of COVID-19 and general needed supports (see Table 3).

Table 3. NH DHHS Workforce Study Key Findings.

| Workforce Topic | NH DHHS Workforce Study Finding |
|--|--|
| Financial Well-being | <ul style="list-style-type: none"> ▪ While most survey participants reported having key indicators of financial stability such as health insurance, secure housing, and transportation, a small percentage of participants did demonstrate significant financial insecurities. ▪ Workforce members’ sense of financial security was negatively impacted by the COVID-19 pandemic. |
| Professional Development | <ul style="list-style-type: none"> ▪ Before the pandemic, survey participants mainly accessed professional development resources via training sessions or workshops. ▪ The most common barriers to accessing professional development before the pandemic were timing and travel. Additional barriers related to coverage, cost, and alignment with their needs. ▪ Survey participants reported that several types of financial support would be beneficial to their professional development, mainly support to cover costs and time commitments and incentives for completing their training. ▪ Following their experiences during the pandemic, survey participants reported a desire for more online training and workshops. The most desired topics for professional development included health and safety and various topics related to teaching and classroom practices. |
| Work Conditions | <ul style="list-style-type: none"> ▪ Survey participants reported generally high job satisfaction, especially satisfaction in working with children, and good working conditions. ▪ While participants were generally happy with their jobs and working conditions, many expressed concerns over specific aspects of their jobs, such as benefits, supervision, and support with challenging interactions. ▪ Moderate to high levels of stress were reported by survey participants, especially center-based program administrators, along with concerns about work/life balance and job satisfaction due to the pandemic. |
| Career Motivations and Intentions | <ul style="list-style-type: none"> ▪ Survey participants reported feeling highly motivated to work with children and planned to remain within their programs and roles; however, financial concerns could motivate them to look for jobs elsewhere. |

Furthermore, the early childhood workforce study assessed specific indicators, such as level of degree/credential attainment (at least some college education for nearly all participants, and of those who graduated from college nearly half had a degree related to early childhood education), the average number of years of experience (19 years), the average salary for teachers and paraprofessionals by settings (\$47,500 for program administrators; \$50,000 for family child care providers; hourly wages of \$14–\$16), and the age of children served (preschoolers aged 3–5 being the most prevalent, 63%), and demographic makeup of the workforce (White, middle-aged females who were either married or living with a partner).

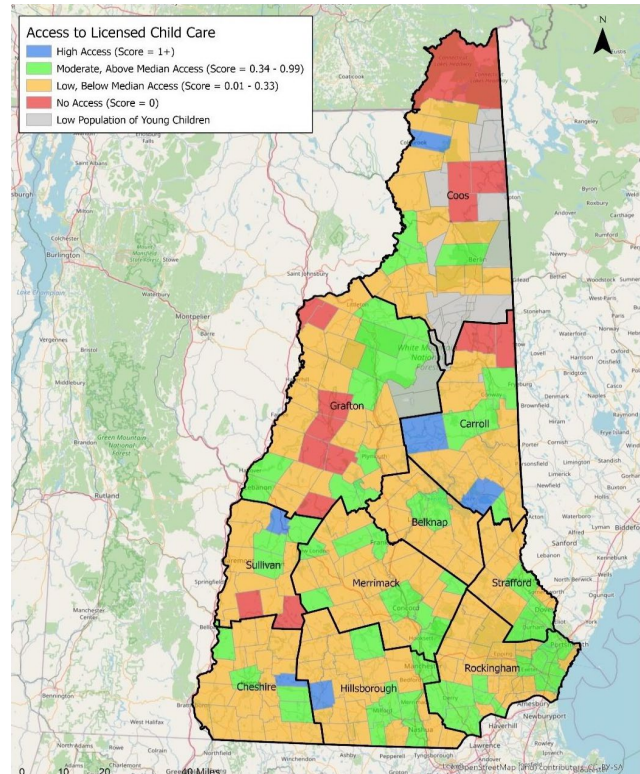
To assess the availability of and demand for existing programs in the state, NH PDG contracted with Abt Associates to analyze the disequilibrium of the supply of and demand for licensed child care⁵ (i.e., family- or center-based programs that care for young children before kindergarten entry), amid the COVID-19 pandemic. To identify communities with an insufficient number of child care slots to adequately serve the families with young children who live nearby, Abt plotted “access scores”. Building on and supplementing previous child care desert efforts, Abt incorporated the location of child care deserts in the Spring of 2021 with information about the distance families may need to travel to access care and the availability of child care slots relative to the nearby population of families with young children who might want to enroll.

The analysis of child care availability shows gaps in supply varying across communities. Overall, access scores trended toward the lower to middle range. The statewide median access score was 0.34, suggesting there was about one licensed slot for every three children within a 20-minute driving distance of a family home. Higher access scores tended to concentrate in urban areas (e.g., Concord, Manchester, Portsmouth), and lower access scores in rural parts of the state

⁵ Abt notes that informal/unregulated care is integral to the child care landscape, but due to the lack of administrative data about the number of children served, such programs were not included in the analysis.

(e.g., Coös County). Access varied across the Early Childhood Regions, from about one licensed slot for every two children in the Greater Derry and Manchester Region, to one slot for every four or five children in the Greater Monadnock, Greater Sullivan, and Upper Valley Region, and Central New Hampshire/Lakes Region.

Acknowledging that community-level characteristics play an important role in understanding how and why access may vary, Abt included additional mapping layers for the child population, health care access,



immigration status, limited-English household, poverty status, and race and ethnicity. In this way, programs could also be identified that serve vulnerable populations, children in rural areas, and underserved areas, while also considering the real-time impact of COVID-19 on the capacity and financial sustainability of early childhood programs.

Furthermore, ongoing work considers not just the supply of and demand for child care, but the representation of the mixed delivery system as a whole, reflecting preschool and kindergarten administrative data, use of and capacity for child care subsidy, Head Start, Title I preschool, and other school-based preschool programs, and consideration of parents' desire for care, as measured in the 2022 NH Family Survey. A coordinated, family-focused, mixed delivery system will improve access to quality care and education while also considering the *type* of services families prefer (e.g., decisions based on affordability, desire for out-of-home care, etc.). The fiscal analysis

will consider federal, state, and local funds available for 3-, 4-, and 5-year-olds for out-of-home care (e.g., Title I, Title II, and Title III Every Student Succeeds Act; IDEA Part B Sec 619 preschool grants), and potential COVID-19 pandemic influences on the system, including American Rescue Plan Act (ARPA) funding (e.g., for family eligibility, reimbursement rates, copayment rates/waivers, compensation or bonus payments to staff) as well as program effects (changes in staffing, space availability in public schools, financing options for renovation). In particular, this work addresses the 2020 NH PDG Needs Assessment finding related to facilities, specifically the lack of available, adequate space appropriately constructed and organized to meet federal, state, local, and service provider requirements, including accessibility for children with disabilities. On-going assessment of the availability of and demand for existing programs is further supported by DHHS's current survey of child care providers, which will provide updated data on ECCE programs' wait list lengths, number of open and closed classrooms, and staffing capacity.

The comprehensive 2022 Needs Assessment, conducted by UNH's Carsey School of Public Policy, will be completed in December 2022. Utilizing the UNH Survey Center's Granite State Panel to collect statewide population-level data, the update intends to identify the diverse array of needs among NH families with young children and to identify opportunities for state and local early childhood-serving systems to meet those needs. Running concurrently is a workforce survey of professionals providing (1) developmental and educational supports and services, and (2) socioemotional and behavioral health services to children ages birth to 8 and their families. The goal of this additional element is to quantify the expertise, skills, capacity, and training needs of these populations to support a fuller assessment of the degree to which this workforce is equipped with the tools they need to serve the state's children and families.

Given the extensive Needs Assessments and updates conducted throughout the NH PDG funding periods, proposed 2023 planning grant activities will address evolving early childhood needs in the state, as informed by the Council’s Early Childhood Scientific Advisory Panel. The Early Childhood Scientific Advisory Panel supports system strengthening by sharing research and best practices, as well as deepening connections to and within regions and local communities. The Panel includes representatives from four-year higher education institutions in NH and reflects a range of research expertise: the social safety net, quality child care and early education, community partnerships to improve behavioral health practice, outcomes for underserved populations, social justice and health equity, early intervention for infants and toddlers, trauma-informed care initiatives and services, urban-rural disparities in pediatric healthcare quality, systems building in child protection, and children’s cognitive development and math learning.

The Needs Assessment focus will be identified by the Scientific Advisory Panel either at the request of Council members or in response to emergent themes. These may relate to child and family access to programs and services (e.g., specific to families involved with the child welfare system; what supports would be useful for kinship and/or foster care), the quality of the mixed delivery system (e.g., the frequency of suspensions/expulsions; pandemic-specific consequences for the early childhood workforce), the level of coordination in the early childhood system for particular populations (e.g., extent to which health and early learning systems are coordinating to serve dual-language learners, migrant or seasonal worker families, immigrant families), and opportunities for more efficient use of resources (e.g., fiscal mapping of the provision of high-quality early childhood services). The process to update the needs assessment will involve key stakeholders specific to the target questions and will align with and/or inform the updated strategic

plan. NH PDG Needs Assessment findings are intended to guide proposed activities to improve overall participation in high-quality early childhood programs.

As statewide data generally cannot be analyzed at the regional level and fielding a family survey is often more intensive than anticipated, NH anticipates utilizing the Early Childhood Regional System, with representation from FRCs, Community Action Agencies, parent organizations, and other partners. Region-specific questions could be addressed through analysis of existing data, such as US Census demographic data, NH Employment Security data on employers' hiring, SNAP data to identify areas that include households with financial hardship yet not connected to the safety net, CCDF data on providers that accept scholarships, child care licensing data to inform changes in supply. Continuous quality improvement and sustainability planning may be addressed without primary data collection. Additionally, the role of the Birth through age 8 (B-8) Family and Community Advisors quadrant (lead by NH Family Voices, NHFV, and Parent Information Center, PIC, with expertise in engaging parents of children with chronic health conditions and/or disabilities) ensures any NH PDG Needs Assessment effort will be a collaborative process, engaging state system partners and inclusive of families, providers, and previously underrepresented populations. See Table 5 under "Project Timeline and Milestones" and Table 6 under Program Performance Evaluation for outcomes, milestones, and timeline.

Activity Two: Update Comprehensive Statewide Early Childhood Strategic Plan

In 2021 Greenway Strategy Group was selected by Council representatives to facilitate the development of an updated Strategic Plan for Early Childhood, with a specific request from the Governor to include recommendations for an Office of Early Childhood Care and Education. The initial Strategic Plan (2020-2022), funded by the NH PDG planning grant in 2019, reflected a pre-pandemic early childhood system and was issued under the newly-formed Council for Thriving Children. To accurately and pragmatically recommend quality improvement activities following a

global pandemic, projected over multiple years and inclusive of federal, state, and local funding, the Council sought to present a short- and long-term vision relative to all participants of the early childhood system. A Council subcommittee initiated for the Strategic Plan and co-led by the Family-Community Advisors quadrant lead and a parent representative, includes non-members representing NH’s legislatively-enacted Child Care Advisory Council and NH’s Wellness and Primary Prevention Council as well as other early childhood stakeholder group leaders. Greenway Strategy Group conducted an environmental scan and collected input from over 200 early childhood stakeholders and parents through focus groups and individual interviews, sharing analysis findings at an April 2022 Council meeting. Utilizing the analysis, the subcommittee created a framework inclusive of priority outcomes, themes, and objectives, presented to and approved by the Council in June 2022. The subcommittee assembled strategy teams to develop initiatives and activities to support the plan’s five strategic themes:

1. Quality, consistent, equitable access to opportunities and services for all NH families
2. Early childhood workforce capacity and quality
3. Investment in early childhood programs and services
4. Systems integration
5. Office of Early Childhood Care and Education

The resulting initiatives identified by the Strategic Plan subcommittee were reviewed by the Council in September 2022 and presented at community learning and feedback sessions⁶. The final Council for Thriving Strategic Plan will go to vote at the Council’s November 2022 meeting.

Predicated on Council approval, the 2023 NH PDG planning grant proposes to create action plans with measurable progress indicators for the 26 initiatives of NH’s Strategic Plan for Early

⁶ <https://councilforthrivingchildren.org/past-meetings?meetingType=strategic-planning>

Childhood. Activities proposed for 2023 to implement the state’s comprehensive strategic plan include strategies to address the needs of families as well as the challenges in the early childhood system exacerbated by the COVID-19 pandemic, and specifically support for the early childhood workforce (see Table 4). While most work plans can be created by the Council with federal-level technical assistance, some activities will require deeper engagement and expertise (see Activity 5, related to the Office of Early Childhood Care and Education). NH values collaboration, coordination, and partnerships among the state’s early childhood programs and agencies, including CCDF, Part C, Head Start, etc., in developing opportunities specific to the workforce and mixed delivery system programs and services (e.g., access, participation, quality, and transitions); furthermore, integral to successful implementation is meaningfully stakeholder engagement, including families, providers, and vulnerable or underserved populations. Consideration of new partnership opportunities to improve coordination and alignment, program quality, and delivery of services will occur under the Office of Early Childhood discussions, part of Activity 5.

Table 4. NH’s Early Childhood Strategic Plan Framework, September 2022

| Objectives | Initiatives |
|---|--|
| Strategic Theme 1. Quality, consistent, equitable access to opportunities and services for all NH families | |
| i. Increase early intervention and primary prevention | <ul style="list-style-type: none"> ▪ Eliminate barriers to access by engaging diverse family perspectives early in the planning process ▪ Increase provider awareness of and collaboration with all available primary prevention and early intervention services |
| ii. Increase accessible child care and early learning options | <ul style="list-style-type: none"> ▪ Expand eligibility for child care assistance, increase the amount of assistance for each family, and increase awareness and utilization of NH Child Care scholarship assistance ▪ Expand options for and access to child care and early learning statewide, particularly in areas where options are limited |
| iii. Increase family awareness, voice, influence, engagement and knowledge | <ul style="list-style-type: none"> ▪ Establish a Statewide Family Engagement Framework including feedback loops ▪ Expand Home Visiting programs to every baby in New Hampshire |

| | |
|--|---|
| | <ul style="list-style-type: none"> ▪ Expand NH parent/caregiver access to family support/FRCs |
| iv. Enhance quality of early childhood programs and services | <ul style="list-style-type: none"> ▪ Increase participation in NH QRIS ▪ Increase family awareness of quality care and early learning options |
| Strategic Theme 2. Early childhood workforce capacity and quality | |
| i. Increase workforce | <ul style="list-style-type: none"> ▪ Promote early childhood careers and career path ▪ Engage more people in the early childhood field ▪ Promote the availability of workforce incentives and tax credits and expand them beyond early childhood education to include family support and health |
| ii. Increase workforce knowledge regarding early childhood development | <ul style="list-style-type: none"> ▪ Equip the early childhood workforce with evidence-based practices to meet the needs of children and families |
| Strategic Theme 3. Investment in early childhood programs and services | |
| i. Leverage and sustain new and existing funding | <ul style="list-style-type: none"> ▪ Create and implement a comprehensive early childhood system funding plan ▪ Develop and implement a wages study across the various roles within the early childhood field |
| ii. Increase business and community support for early childhood programs and services | <ul style="list-style-type: none"> ▪ Create and implement a plan to increase businesses’ financial investment in the early childhood system ▪ Create and implement a plan to increase community awareness of and engagement in building the capacity of the early childhood system |
| Strategic Theme 4. Systems integration | |
| i. Increase state, regional, and local level collaboration and program integration | <ul style="list-style-type: none"> ▪ Affirm and institutionalize the early childhood regions and networks, ensure ongoing support, and foster collaboration with families and local communities ▪ Formalize, strengthen, and broaden local early childhood coalitions that integrate with regional and state structures ▪ Establish a shared, compatible early childhood data system to inform decision-making |
| ii. Enhance family navigation of integrated programs and services | <ul style="list-style-type: none"> ▪ Establish and promote a comprehensive and inclusive system for families to navigate and access resources that leverage existing tools ▪ Increase individualized support for families in navigating the system ▪ Build cultural and linguistic competence of early childhood professionals to better support families |

| | |
|---|---|
| <p>iii. Increase community voice and influence in design of programs and services</p> | <ul style="list-style-type: none"> ▪ Create approaches to specifically engage under-represented groups to influence decisions about programs and services that affect them |
| <p>Strategic Theme 5. Office of Early Childhood</p> | |
| <p>i. Ensure a cohesive and collaborative approach to a mixed-delivery, early childhood system</p> | <ul style="list-style-type: none"> ▪ Establish a collaborative process to define the role of the Office of Early Childhood, including structure, primary responsibilities, fiscal structure, and functions ▪ Establish authority in Office of Early Childhood for leadership of Office to cultivate political will |
| <p>ii. Expand public understanding of the importance of quality early childhood experiences for all children</p> | <ul style="list-style-type: none"> ▪ Coordinate messaging across key early childhood champions to ensure a diverse set of voices that will expand public understanding of the importance of early childhood experiences for all children and families ▪ Clarify and communicate roles and responsibilities of the early childhood system to include early childhood agencies, families, policymakers, service providers |

2023 PDG planning funding is anticipated to continue to support staffing for the Council to engage with NHED and DHHS. During this year, a contractor will be engaged to assist with the development of an operational plan and policy recommendation relative to an Office of Early Childhood Care and Education (see Activity 5). Expected outcomes related to Strategic Planning include the development and/or revision of measurable indicators to assess progress and support continuous quality improvement; identification of current and potential barriers to coordination among partners; and documentation of the process to prioritize and articulate the perspective of a variety of early childhood and school partners, including parents, providers, community leaders, and faith-based representatives, in the planning and implementation of the state's approach.

Activity Three: Maximize Family Engagement in the Early Childhood System

NH celebrates parents and families as fundamental to the well-being of children. With PDG funding, NH has made great progress in prioritizing families’ engagement in the early childhood system. In particular, the establishment of the B-8 Family and Community Advisor quadrant as an

equal partner to State agencies and the Early Childhood Scientific Advisory Panel in NH's early childhood governance structure demonstrates the state's commitment to family engagement. A competitive RFP process through DHHS awarded the quadrant lead to PIC/NHFV, an organization with more than 50% parent representation on its board of directors and considerable expertise in bolstering family voice at the state level and ensuring equity in recruitment and representation. The B-8 Family and Community Advisors evolved from a PDG-funded state-level family leadership team convened by PIC to provide feedback and insight from a diversity of voices. This team represents biological and adoptive parents, grandparents raising grandchildren, families of color, refugees families, those who speak languages other than English, families who have experienced home and food insecurity, families of children with disabilities and special healthcare needs, families with parents in recovery, parents who have been incarcerated, and others.

Based on findings from previous NH PDG needs assessments and strategic plans, 2023 planning grant funding is proposed to maximize family engagement, choice, and knowledge in the education and development of their children through two primary methods: (1) ensuring that families and caregivers are engaged in ways that are accessible, equitable, and culturally and linguistically responsive; and (2) expanding the state's efforts to support family choice across the mixed delivery system. To avoid supplanting current funding (e.g., CCDF) to maximize parent and family knowledge about the state's mixed delivery system of programs and providers, the NH PDG planning proposal emphasizes partnership with BCDHSC contractors (e.g., Child Care Aware) to ensure families are provided timely, accurate information in a culturally and linguistically sensitive manner. For example, during the NH PDG implementation period, funding to NH Children's Trust created an opportunity for BCDHSC to develop a combined CCDF and QRIS public awareness campaign to increase utilization and share information with families about

program quality. Similarly, as current state-administered activities (e.g., Community Collaborations, FRCs) promote family protective factors and multi-generational approaches that focus on family well-being, NH PDG activities will be most effective in supporting family leadership and engagement opportunities in mixed delivery system improvements and particularly, collaborating with partners across the early childhood system, including parents and caregivers.

As evidenced by the B-8 Family-Community quadrant of the Council for Thriving Children, NH strives to ensure opportunities for family voice and participation in the development of policy and program decisions affecting the mixed delivery system as well as family engagement with state leaders in planning and implementing improvements related to early childhood, including transitions between and across programs and services. An example from the NH PDG implementation period is the joint NHED/DHHS Kindergarten Entry Assessment (KEA) and Transition Taskforce that recommended a standardized KEA and effective and appropriate kindergarten transition practices. Collaborating with partners across the mixed delivery system, the NH PDG supported school readiness, collaborative transition and alignment, and continued family engagement through the early grades in partnership with schools.

To expand meaningful family engagement and leadership, the NH PDG anticipates supporting the B-8 Family-Community Advisors quadrant to extend its activities and representation and inform projects identified in this proposal (e.g., community schools, family child care, and capacity for infant/toddler care). Particularly when investing in strategies to address access and quality within the early childhood system, NH is committed to supporting practices that enable full participation by children with, or at risk of, disabilities and their families in the least restrictive environment. NH also intends to leverage these families' extensive experience and knowledge of their children's needs. Additionally, in recognition of the fact that the B-8 Family-Community

quadrant is charged with soliciting feedback across the state and multiple perspectives, the NH PDG anticipates the need for a framework to engage families throughout NH, with a focus on vulnerable populations.

The current Family-Community quadrant lead supported numerous PDG efforts, including

- recruitment and screening strategies for the Needs Assessment to capture the voices of families that represent diverse backgrounds, experiences, socioeconomic levels, geographic locations, cultures, and languages;
- family engagement technical assistance at the regional level to engage diverse groups of family members as advisory councils to inform early childhood work locally; and
- trainings, frameworks, and interactive webpages on meaningful family engagement, bringing families on board as partners, and systemic approaches to family engagement⁷.

As an example of regional work, all Regional Lead partnerships (funded by NH PDG, and described under “Project Description”) have prioritized engaging family voice and increasing family participation and are creating related policies and strategies (e.g., a policy template regarding stipends for family leaders). At least four regions have created Family/Community Engagement Specialist positions, one region is conducting a family-driven needs assessment, and several regions are using PDG resources to map family voice efforts in their communities. PIC continues to support the regions in advocating for assistance to family leaders to be able to access and participate in family leadership and voice activities, and to recognize how organizations benefit from diverse family voices informing early education and care work.

NH also defines family engagement in the early childhood system as the choices of families related to the care and education of their children. In the 2023 planning grant, NH proposes

⁷ <https://picnh.org/family-engagement-resources/>

expanding those choices by increasing infant/toddler care access and capacity in the family child care workforce. NH was one of the few states in the country to keep child care open during the COVID-19 pandemic, resulting in a better understanding of the necessary efforts for a coordinated, family-focused, mixed delivery system. The 2021 PDG Needs Assessment documented that “the need for child care increased as child care centers and schools closed. Working parents reported struggling to balance work responsibilities with caring for their children. They reported difficulty finding affordable child care, and the systems to provide support for child care, like Child Care Scholarships, were difficult to navigate.”⁸

Many in the early care and education realm, including DHHS and NHED are aware of the early childhood workforce shortage, NH's child care deserts, challenges relative to infant/toddler care, and the myriad of issues the early care and education sector faces, consistent with what is occurring across the country. Although the NH state government is currently operating at a 22% staff vacancy rate, both departments have committed time and resources to prioritize early childhood, evidenced in part by the application to and execution of the current implementation PDG. NH Senate Bill 446 (SB446)⁹, signed into law by Governor Sununu in June 2022, directed DHHS to develop a sustainable child care strengthening plan. Solutions to stabilize NH's child care workforce benefit all industries, working families, and the children and youth in their care. In accordance with SB446, DHHS, in consultation with the legislatively enacted NH Child Care Advisory Council, developed the NH Child Care Strengthening Plan,¹⁰ with strategies to rapidly increase recruitment and retention of staffing at child care facilities, including consideration of bonus and benefit grants

⁸ https://chhs.unh.edu/sites/default/files/media/2022/02/2020-21_nh_needs_assessment_final_report.pdf

⁹ http://www.gencourt.state.nh.us/bill_status/billinfo.aspx?id=2142&inflect=2

¹⁰ <https://www.dhhs.nh.gov/sites/g/files/ehbem476/files/documents2/dhhs-child-strengthening-plan.pdf>

for certain child care employers, costs for facilities, and strategies to increase access and affordability of child care for families statewide.

In addition to the SB446 plan, DHHS BCDHSC, within the Division of Housing & Economic Stability, engaged stakeholders to develop recommendations for the use of ARPA-Discretionary (ARPA-D) Funds to support the early childhood system. According to the *DHHS ARPA Discretionary Funds Recommendations: Considerations and Opportunities Summary Report*,¹¹ “outreach efforts ranged from webinars and discussions to social media (website postings, Facebook posts, dedicated email). More than 400 individuals and organizations were engaged, representing families, providers and programs (child care, Head Start/Early Head Start, out-of-school time), policymakers, advocates, the business community, philanthropy, state agencies, and others. BCDHSC also conducted an online survey, receiving nearly 430 responses from over 56 organizations, entities, and individuals.” The plan, coupled with philanthropic support, is foundational to NH’s efforts to expand access to family child care and specifically infant/toddler capacity. Key initiatives underway include:

1. NH PDG scope change request to support license-exempt family child care providers to become licensed, utilizing the Early Childhood Regional System, a cohort of Regional Leads representing partnerships between child care, schools, and family support. Costs related to infant/toddler care by family providers and the transition to center-based care will be informed by previously funded PDG work (i.e., Community Grant to Early Care and Education Associates to facilitate the recruitment and establishment of sustainable

¹¹ https://www.nh-connections.org/uploads/NH-DHHS_ARPA-Discretionary-Funds_Summary-Report_October-2021.pdf

family child care providers, and increase their use of connections to family support resources, thereby increasing availability of high-quality infant/toddler care).

2. NH Charitable Foundation (NHCF)-DHHS joint listening sessions to engage existing and potential family child care professionals regarding the use of ARPA-D funds to support family child care programs and expansion. The sessions include a mix of rural and urban providers and intend to reach individuals exploring becoming a family child care provider, former family child care providers, and existing providers (licensed or exempt).
3. Partnership between NHCF, Granite United Way, and the Rochester Child Care Center to develop new family child care homes. The partnership is piloting a sustainable child care business application in addition to working with municipalities and provider networks.
4. A developing partnership between the Cheshire Children’s Museum, Monadnock United Way, Hannah Grimes Center, NHCF, and Keene city and Cheshire county officials to fund a cohort of family child care providers. Leveraging ARPA funds to establish child care businesses could be a model for other counties/cities.
5. Strafford County Community Action Program’s back-office support for small to medium child care providers, including family child care.
6. A partnership between Home Grown, a collaborative of funders seeking to expand family child care networks through planning grants, technical assistance, and possibly implementation funds, and City of Lebanon/Upper Valley early childhood stakeholders.

Investments to expand access to infant/toddler child care by increasing the family child care workforce align with NH's Strategic Plan for early childhood framework (see Activity 2).

A multi-pronged approach to increase capacity for infant/toddler care will expand access by building a pipeline of new family childhood providers and retain, support, and educate current

family child care providers to maintain and stabilize this workforce. To consider how best to improve and support the career development, training, and experience of family child care providers, especially those serving infants and toddlers, NH proposes convening current family child care workforce professionals, DHHS and NHED leaders, philanthropic partners, and families to evaluate and develop a report on current initiatives (public, private, or pilot) targeted to NH's family child care workforce. A contractor will develop a coordinated and comprehensive plan to increase the number of family child care businesses and increase access to new infant/toddler care and education spaces, including strategies focused on diversity and equity in NH's child care landscape. The plan will include design options, document costs, and identify outcomes for targeted strategies, and be considered a cornerstone activity for NH's Strategic Plan for early childhood, strategic themes 1 (Quality, consistent, equitable access to opportunities and services for all NH families) and 2 (Early childhood workforce capacity and quality). See Activity 4 for initiatives designed to increase access to high-quality, inclusive care for infants and toddlers by building the capacity of family child care providers.

The proposed family child care initiative scan and evaluation will result in a coordinated and comprehensive plan to increase the number of family child care providers, including:

- Description of how this project builds on current initiatives (e.g., DHHS-NHCF listening sessions with family child care providers) and coordinates with DHHS BCDHSC's ARPA-D projects to maximize opportunities to leverage federal, state, and local resources toward the achievement of common goals
- Recommendations from NH's legislatively enacted Child Care Advisory Council
- Feedback from NH's B-8 Family and Community Advisors
- Current and relevant NH-specific data

- Proposed annual measurable performance objectives and outcomes (e.g., increase the number of family child care providers, increase the number of infant/toddler spaces)
- Proposed budget to sustain a staffed family child care network and onboarding program, including a description of applicable funding sources
- Project results and recommendations to inform the development of NH’s 2025-2026 CCDF Plan, the 2023 Head Start Collaboration Office Annual Refunding Application, and DHHS investment in family child care

A second project proposed to increase family choice is to support preparation necessary for the coordination of academic, social, and health services through partnerships, as delineated by the U.S. Department of Education’s Full-Service Community Schools, and in alignment with the Council’s proposed Strategic Plan priority outcomes (e.g., increase families’ partnership in, knowledge of, and choices for their child’s development; families’ access to integrated quality early childhood opportunities and services; comprehensive wellness of young children; and ensuring children achieve early childhood developmental and educational goals¹²). US Education’s Full-Service Community Schools (FSCS) program intends to “improve the coordination, integration, accessibility, and effectiveness of services for children and families, particularly for children attending high-poverty schools, including high-poverty rural schools.”¹³ A 2017 report concluded that “well-implemented community schools lead to improvement in student and school outcomes and contribute to meeting the educational needs of low-achieving students in high-poverty schools, and sufficient research exists to meet the Every Student Succeeds

¹² <https://councilforthrivingchildren.org/uploads/attachments/cl5sc0pp50c2plkkak7977yv4-nh-early-childhood-strategic-plan-framework-approved-6-14-21.pdf>

¹³ <https://oese.ed.gov/offices/office-of-discretionary-grants-support-services/school-choice-improvement-programs/full-service-community-schools-program-fscs/>

Act (ESSA) standard for an evidence-based intervention.”¹⁴ To date, NH has not been successful in the award of Full-Service Community School funding. With the support of the PDG, NH will finance the planning and collaboration activities necessary to effectively coordinate and integrate services, which will strengthen NH’s application for future community school grants.

While NH is ranked “best” by the Annie E Casey Foundation for overall child well-being¹⁵, the 2022 Kids Count Data Book also notes that 23,000 children (or 9%) in NH were in poverty over the period 2016 to 2020, and 62% of NH fourth graders were not proficient in reading or math. Furthermore, 8,000 children lacked health insurance, and 12,000 3- and 4-year-olds in NH were not in school (46%). The 2021 Needs Assessment reported that parents of children under the age of 9 expressed a high level of concern about their own and their children’s mental health, with parent and child mental health exacerbated during the COVID-19 pandemic due to service disruptions, social isolation, and economic insecurity. Similarly, the 2022 Kids Count Data Book reports that the percentage of children ages 3-17 who had anxiety or depression in New Hampshire rose from 14.4% in 2016 to 18.4% in 2020, reflecting a 27.8% change.

NH PDG’s 2020-2021 Needs Assessment also found that parents faced barriers to some income supports that worsened their financial concerns. Likewise, the 2022 Kids Count Data Book reports that 58,000 children’s parents lacked secured employment (22%), and 65,000 children lived in households with a high housing cost burden (25%). Finally, in the 2020-2021 NH PDG Needs Assessment, parents were overwhelmingly positive about many of the support services they received, although parents of children with disabilities experienced disruptions in services during

¹⁴ <https://learningpolicyinstitute.org/product/community-schools-effective-school-improvement-brief>

¹⁵ <https://assets.aecf.org/m/resourcedoc/aecf-2022kidscountdatabook-2022.pdf>

the pandemic.¹⁶ Additionally, interviews with FRC staff noted several serious gaps in community supports for families, creating family stress and hardship.

The NH PDG proposes offering grants to public school districts and/or their proxies (e.g., Regional Leads) to support the complex interagency efforts and extensive preparation and communication among partners and key stakeholders inherent to a community school model. The US Department of Education defines a full-service community school as, “a public elementary school...that— (a) Participates in a community-based effort to coordinate and integrate educational, developmental, family, health, and other comprehensive services through community-based organizations and public and private partnerships; and (b) Provides access to such services in school to students, families, and the community, such as access during the school year (including before- and after-school hours and weekends), as well as during the summer.” The NH PDG will offer a competitive Request for Proposal through the University System of NH’s Procurement office, for funding to school districts, representing the different communities in NH, to engage in the planning activities related to coordinating and integrating services provided by community-based organizations, government agencies, and key stakeholders.

Applicants will be expected to partner with community-based organizations, non-profit organizations, and/or public or private entities and develop a Memorandum of Understanding (MOU) to provide “comprehensive academic, social, and health services for students, students’ family members, and community members that will result in improved educational outcomes for children.” Services shall be specific to and successfully address the needs of the target population or other identified needs. Awardees are expected to engage with the district’s Regional Lead and State Points of Contact (see “Early Childhood Regional System” under Project Description), to

¹⁶ https://chhs.unh.edu/sites/default/files/media/2022/02/2020-21_nh_needs_assessment_final_report.pdf

share successes and challenges in developing the model. Competitive proposals will be reviewed by representatives of the PDG Leadership team, with PDG-funded staff facilitating and managing the grants (i.e., invoicing, reporting requirements), and connecting grantees to US Ed Technical Assistance as needed.

Expected outcomes of the community school project include:

- A memorandum of understanding among partner entities that will assist to coordinate and provide pipeline services¹⁷, and which describes the roles the partner entities will assume.
- A statement of anticipated challenges (e.g., need for school board permission to apply for community school funding) and expected responses.
- A comprehensive plan that includes descriptions of: the student, family, and school community to be served, including demographics; the academic, physical, non-academic, health and mental health, and other needs of the students, families, and community residents; the pipeline services (existing and/or additional) to be coordinated and provided by the district and its partner entities, and to the extent practicable, integrated into a comprehensive and coordinated continuum; proposed annual measurable performance objectives and outcomes; and a proposed budget that ensures a full-time coordinator of pipeline services at each school, including a description of applicable funding sources

¹⁷ Evidence-based activities, strategies, or interventions supported by promising evidence, and which create a continuum of coordinated supports, services, and opportunities for children from birth through entry into and success in elementary education. Strategies will focus on children from birth through age eight, and their families, including at a minimum services or programs (including integrated student supports) related to: (a) High-quality early childhood education. (b) High-quality school and out-of-school-time. (c) Support for a child’s transition to elementary school, including any comprehensive readiness assessment determined necessary. (d) Family and community engagement and supports, which may include engaging or supporting families at school or at home. (e) Community-based support for students who have attended the schools in the area served by the pipeline, or students who are members of the community, facilitating their continued connection to the community. (f) Social, health, nutrition, and mental health services and supports.

The final product will include clearly defined responsibilities, timelines, and milestones for the project, professional development for the personnel managing, coordinating, or delivering pipeline services, plans for joint utilization and management of school facilities, and anticipated sustainability planning – the essential components necessary to apply for federal funding.

Activity Four: Support the Early Childhood Workforce and Disseminate Best Practices

NH strives to develop a workforce that is well-educated, highly skilled, and culturally competent, and systems that promote high-quality early childhood care and education within and across settings (i.e., home, child care, school, and community). Based on Needs Assessment findings summarized in Activity 1, NH’s planning PDG proposes to support the early childhood workforce through systemic approaches (e.g., strengthening career pathways) as well as sharing best practices among early childhood providers at the community or program level, particularly the transition to elementary school. To date and with PDG support, NH has made significant progress implementing a revised QRIS, with successful onboarding of programs on two pathways, the Pyramid Model and the Environmental Rating Scales. Additionally, NH PDG-funded staff continue embedded practice-based coaching for early childhood care and education professionals across the birth to grade 3 workforce, to support high-quality in-service professional development efforts and the experience of providers. Throughout these efforts, NH aims to facilitate strong partnerships between early childhood care and education and school systems and increase collaboration, coordination, and alignment.

To extend the implementation of developmentally appropriate practices, instructional alignment from preschool through third grade, and general support for the early childhood workforce, the NH PDG proposes (1) continued practice-based mentoring, coaching, and professional development to address the needs and improve the effectiveness of the workforce; (2) access to scholarships and tuition assistance to attain credentials and degrees; and (3) a system-

level investment to support the family child care workforce. Building a statewide early childhood workforce infrastructure that ensures providers are professionally prepared and well-supported in turn creates strong early childhood systems that facilitate transitions and referrals across programs. Additionally, strengthening career pathways and professional development opportunities to build a pipeline of effective early educators, including those who serve infants and toddlers, supports equitable access to qualified teachers for children across settings and ages.

To improve interdisciplinary understanding for early childhood providers and connections with early grade teachers, NH proposes creating and implementing alignment between preschool and Kindergarten professional development, resulting in continuity across the workforce under the purview of DHHS and NHED. As evidenced by the sustainable practice-based coaching model developed with support from previous NH PDG awards (90TP0006, 90TP0060), UNH successfully provided high-quality in-service professional development as well as evaluation of the effectiveness of the model to change teacher practice and child outcomes¹⁸. An immediate result of this work is the designation of UNH as the entity to execute the NH PDG initial and renewal grants and the proposed 2023 planning grant. Furthermore, workforce training efforts are endorsed by NH's Council for Thriving Children's Strategic Plan priority outcomes to increase providers' and educators' knowledge and access to resources for quality programs and services, and the related strategic theme addressing early childhood workforce capacity and quality.

From 2019 through 2022, UNH provided practice-based coaching to support DHHS's efforts towards continuous quality improvement through the revised QRIS, and Kindergarten teachers' use of developmentally appropriate best-practice, including play-based learning in accordance

¹⁸ Hirsh-Pasek, K., Golinkoff, R. M., Nesbitt, K. T., Lautenbach, C., Blinkoff, E., & Fifer, G. (forthcoming). Making schools work: Bringing the science of learning to joyful classroom practice. Teachers College Press
Nesbitt, K.T., Blinkoff, E., Gunersel, A. B., & Hirsh-Pasek, K. (under review). Impact of playful learning coaching in New Hampshire kindergarten classrooms

with the 2018 amendment of New Hampshire’s education law (HB 1499). Through an iterative program designed to encourage kindergarten teachers to recognize, facilitate, and implement evidence-based practices (guided play) within classrooms, UNH’s Early Learning Coaching team collaborated with Abt Associates to assess the embedded practice-based coaching model. Guided play provides a framework to expand teachers’ existing curriculum and incorporates evidence-based principles of how children learn with opportunities for children to co-construct their learning with teachers and peers. These principles (i.e., active learning, engaged learning, etc.) are intentionally flexible, thereby enabling teachers to exercise professional discretion in developing activities that simultaneously align with curricular learning objectives and students’ backgrounds and experiences inside and outside the classroom. Throughout the NH PDG implementation period, the Early Learning Coaching Team provided embedded coaching to teachers representing about one-third of NH school districts and led workshops with teachers statewide.

Individualized coaching to improve teacher-child interactions and instruction is aligned with ACF’s Guide to Effective Consultation and highlights the importance of supportive relationships, open communication, continuous observation, and feedback. Relatedly, leveraging existing professional resources and other initiatives in the state (e.g., Pyramid Model, play-based coaching, trauma-informed care, QRIS), DHHS recently created a unified coach credential. While DHHS formalizes the role of coaching in the QRIS, UNH is primed to coordinate practice-based coaching opportunities relevant to early childhood professionals across sectors. These efforts to encourage continuity of best practices across the transition to elementary school also support the workforce that cares for children as they transition into the early elementary school grades. To extend the work of the UNH Early Learning Coaching Team, NH proposes developing interdisciplinary

partnerships to co-design practices to support children’s learning and development in diverse contexts, spanning preschool through first grade statewide.

To extend the important alignment between extensive evidence on the value of play for child development and statewide educational policy and practice, UNH will maintain an Early Learning coaching team (a Lead Early Learning Coach and Coordinator, and two Early Learning Coaches) to provide practice-based coaching. The goal of the coaching model is for teachers to increase the implementation of evidence-based best practices, improve the quality of early childhood education, and lead to greater positive outcomes for children and families. UNH’s embedded practice-based coaching process is highly collaborative and individualized with each participating teacher receiving support from an instructional coach. To initiate the process, early elementary teachers and associated administrators are convened to formalize an agreement for these best practices. Coaches then engage in bi-weekly visits (observations and one-on-one meetings) over six months to support teachers in reflecting on practice to identify relevant and meaningful goals. Coaching cycles include goal planning, focused observation, and reflection and feedback conducted in collaboration with teachers. The UNH Early Learning Coaching Team uses a practice-based coaching model that is individualized (co-designed with the teacher), intensive (bi-weekly visits), sustained (6 months), and context-specific (embedded in the classroom).

In an effort to coordinate professional development across sectors, implement a universal practice-based coaching model, and continue support for transitions, the NH PDG proposes focusing on school-based preschool programs for children aged 3-5 years (e.g., preschool special education, Title 1, local public and private preschool programs) and Kindergarten classrooms. The Early Learning Coaching team will align and coordinate practice-based coaching while respecting the unique needs of each classroom as well as the continuity of the pedagogical approach in the

early years. Efforts will focus on the simultaneous implementation of coaching in preschool and kindergarten classrooms within an individual school or district, with consideration of interested first-grade classrooms as resources permit. Expected outcomes of the project include

- Sustainment of an Early Learning Coaching team with the capacity to provide evidence-based coaching directly in programs and classrooms that aligns with the state’s Substantive Educational Content of an Adequate Education law and state requirements for early childhood education teacher certification.
- Seamless delivery and coordination of cross-sector professional development opportunities and practices that improve the training and experience of early childhood providers.
- Expanded capacity of NH’s early childhood workforce to implement best practices throughout settings.
- Alignment of standards, curriculum, assessment, and expected child outcomes across the birth to third-grade education community.
- Strengthened transitions, family communication, and partnerships between families and schools.

NH’s second strategy to support the early childhood workforce is tuition assistance for the early childhood and out-of-school time (OST) workforce. Workforce shortage significantly affects programs, families, and businesses: child care and Head Start/Early Head Start programs unable to find teachers to operate at their licensed or approved capacity; families lacking access to needed care and education for their children, especially infants and toddlers; businesses constrained in hiring workers who need but cannot secure child care. Over the past several years, NH has worked diligently to address the early childhood/OST workforce shortage through new or expanded initiatives to reduce barriers for prospective and current teachers to enter and/or remain in the field.

One such effort funded by DHHS BCDHSC is the long-standing Early Childhood Tuition Assistance (ECTA) program at Granite State College (GSC). ECTA currently provides tuition assistance grants to early childhood teachers working a minimum of 20 hours per week in an NH-licensed center, and directors working a minimum of 30 hours per week in an NH-licensed center.

BCDHSC contracts with Granite State College (GSC) at \$250,000 per year to administer the ECTA program, which provided 393 total grant awards in the calendar year 2021. As some recipients received more than one award, this represents 154 partial grants (50%) and 239 full grants (100%) from 124 different early childhood programs. GSC reports, however, that funds are exhausted within a week of publicizing the grants each term, and applicants must be turned away. Due to insufficient funds to support all applicants, ECTA criteria further limit access to tuition support to early childhood teachers working with children from birth to five years. Only four courses are fully covered while other early childhood courses are covered at 50% of tuition; in 2021, 187 grants were awarded and then dropped due to students' inability to pay the remaining 50% of the tuition. Additionally, students are allowed to receive funds for only one course each term. To address the workforce shortage, there is a need to expand tuition assistance eligibility to include teachers working in out-of-school time programs, increase the number of courses students may access with full tuition support, and allow teachers to receive more than one grant each term. Lastly, both early childhood and out-of-school time programs currently struggle to hire and retain teachers qualified to work alone with groups of children. Expanding tuition assistance funding and criteria will also help NH to address this issue by expediting the time it takes for teachers to become qualified to work without supervision.

Over the next few years, BCDHSC will utilize ARPA-D and CCDF Discretionary funds to further build capacity to support the recruitment and retention of the early childhood/OST

workforce with opportunities and support for professional development and career advancement. At this juncture, additional funding for tuition assistance will increase NH's capacity to address this goal in the short term while long-term, sustainable strategies are explored.

GSC has demonstrated the capacity to successfully administer the tuition assistance program and maximize tuition assistance funds for teachers in collaboration with the Community College System of NH (CCSNH). GSC will leverage PDG and BCDHSC funding for tuition assistance by capitalizing on its current program structure, including outreach activities and reporting, to expand tuition assistance during the planning PDG period. GSC, in collaboration with CCSNH, will utilize PDG funds to support expanded eligibility and funding for tuition assistance as follows:

1. Extend eligibility to teachers serving children in out-of-school time programs to align with NH's definition of "early childhood" as inclusive of children from birth through grade 3.
2. Remove the current "one course per term" limit to a maximum of two courses per term.
3. Expand course offerings as appropriate (e.g., content for out-of-school time teachers).
4. Fund 510 courses (minimum) at full tuition (calculated as, GSC: 65 4-credit courses Spring 2023, 40 Summer 2023, 65 Fall 2023; CCSNH: 150 3-credit courses Summer 2023).

Applicants will be selected on a first-come, first-served basis. BCDHSC staff will manage this contract alongside the CCDF-funded tuition assistance contract and provide financial and programmatic reports to PDG as required and/or requested.

Although this project will serve as a one-time, capacity-building grant to bolster the early childhood/out-of-school time workforce during this time of need, results from this project will inform DHHS' future investment in tuition assistance. Outcomes are anticipated to include:

- GSC, in collaboration with CCSNH, will award a minimum of 510 course grants to early childhood and out-of-school time program teachers.

- At least 30% of teachers receiving grants will complete basic course requirements in a shorter timeframe due to their ability to take two courses per term, strengthening their career trajectory and likely resulting in an wage increases.
- Teachers will receive 100% of tuition costs for courses.
- A minimum of 50 out-of-school time teachers will receive tuition assistance grants.
- Centers that paid half of tuition costs may redirect funds to other workforce needs.

Future efforts will consider combining tuition assistance programs with apprenticeship efforts and expanding negotiated tuition rates with all NH colleges and universities offering early childhood courses. The goal of moving low-income child care workers to degree completion, beyond meeting minimum requirements to be alone with children, supports early childhood professionals in educational attainment, career development, and economic stability.

Finally, as referenced in Activity 3, the NH planning PDG proposes the initiation of a family child care network organization to provide start-up costs, staff, and activities to increase the number of family child care providers. Based on existing initiatives, the organization will:

1. Retain NH's current family child care workforce through engagement, coordination, relationship building, ongoing peer support, information sharing, shared professional development, and financial investment in materials required to create quality early childhood care and education environments and experiences.
2. Support current (and future) family child care professionals' participation in the convening, evaluation, and comprehensive plan described in Activity 3. Intense collaboration and partnership will identify opportunities to build access to infant/toddler care and education through the expansion of family child care businesses.

3. Support family child care professionals to include family voice in program design and operation, and to engage families in fostering their children’s health and development (e.g., training/support for providers and families for developing literacy skills).
4. Increase participation with NH’s Child Care Scholarship Fund program by assisting family child care providers with the application process to serve families enrolled in the program.
5. Develop metrics and measure the number of infant/toddler child care spaces created through the onboarding of new family child care professionals.
6. Process stipends to family child care professionals (and future professionals) engaged in the activity using a staffed family child care network model.¹⁹

Expected outcomes of the family child care network are (1) increased access to infant toddler care and education by recruiting new family childhood providers and (2) retention, support, and education of family child care providers in a proactive approach to maintain and stabilize NH’s current early childhood workforce. Providing resources and technical assistance to family child care providers intends to support program sustainability, reduce administrative burden, promote shared learning, and successfully implement inclusive and high-quality programming.

Activity Five: Support Program Quality Improvement

Leveraging the findings of previously completed needs assessments and the new strategic plan, NH will improve the overall quality of early childhood programs and services through data-informed decision-making and greater coordination among financing mechanisms and governance. The strategies under Activity 5 will not begin until ACF confirms NH PDG’s completion of Needs Assessment and Strategic Planning. Activities 3 and 4 present statewide access and workforce efforts to ensure high-quality programming: evidence-based practices that

¹⁹ <https://www.urban.org/sites/default/files/2022-08/home-based-child-care-networks-and-federal-programs.pdf>

ensure the inclusion of all children, and enhanced and aligned program standards and professional development across programs and settings. Particularly in support of strategies that supplement but do not duplicate currently funded efforts (e.g., partnerships and systems to support enhanced monitoring and program quality improvement through the QRIS) the NH PDG aims to strengthen systems for data sharing and use, accountability, effective governance, communication, and decision-making.

NH's Council for Thriving Children supports efforts related to the interoperability of data systems across state agencies, to assist with monitoring equitable access to services. The NH PDG currently funds the integration of program data (e.g., child care scholarships/subsidies, SNAP, TANF, IDEA Part C) with other data sources to identify 1) geographic areas of underserved communities and 2) child program eligibility and participation rates, to improve access to services and evaluate long-term outcomes resulting from program participation. Achieving an integrated cross-Department data system specific to early childhood is a multi-year effort. To date, NH is unable to produce either distinct or unduplicated counts across DHHS/NHED early childhood programs given that data-sharing agreements have not yet been executed; information is not captured with consistent annual timelines, and there is no unique identifier used across data systems. Considerable work has been accomplished within DHHS, however, with the integration of multiple programs related to early childhood and in particular the application of integrated data systems to data-informed decision-making and continuous quality improvement.

NH continues to work towards data integration, interoperability, management, and data used in support of developing and implementing integrated/collaborative state data systems, and data sharing to strengthen and enhance information on children and family needs and workforce capacity, facilitate enrollment, and identify the needs of providers. For two years a “shared” data-

position between DHHS and NHED, the PDG-funded Council Business Analyst, addressed state agency capacity for high-level decision-making related to the data governance structure. The

Business Analyst worked with DHHS and NHED staff to identify data elements to be collected

and linked across

programs, generating a

working “rainbow

diagram” of the type of

data that could be

included and groupings to

organize programs and

data systems based on the

primary focus of the

programs. The diagram

identifies which programs could be a part of the Early Childhood Integrated Data System (ECIDS)

and represents where similar data reside in an effort to link program staff and data

stewards/owners. These program representatives have been or will be involved in the process to

inform data governance policies and make decisions (e.g., data definitions) that will apply to

programs in the ECIDS.

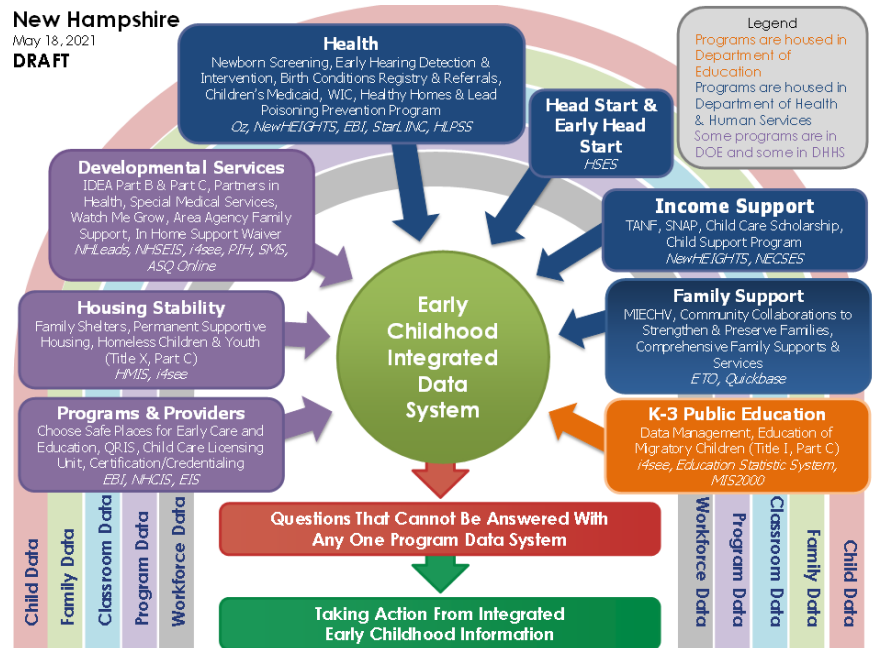
NH previously leveraged a professional services contract to collect, integrate, maintain, store,

and report information from early childhood programs across DHHS data systems and programs

that serve families with children. An existing scalable data integration platform, the state-owned

Enterprise Business Intelligence (EBI) at DHHS, is a central data repository transforming multiple

data sources to efficiently allow for analytics, dashboards, and reporting on early childhood



programs. A pilot project integrated early childhood data from DHHS assistance programs to be able to answer questions about early childhood programs and participation. The enhanced reporting model includes program details and household information for families receiving assistance (i.e., integration into the EBI master person index with customers receiving other forms of assistance, to aggregate the breadth of services received by NH families, including key service delivery data not currently included in EBI). To honor data privacy, identifying information has been used only to establish links across programs, and find and merge duplicates. Identifiers are secure and not accessible to anyone outside of designated staff. Any data brought into EBI follow the same security and governance policies as the original data source.

Using this system, DHHS, with the assistance of a contractor, will be able to generate a “distinct count”, to evaluate current service levels and track progress toward Department goals, such as what services children and families most commonly receive at the same time, or what common service paths children and families follow for coordinated care and transition services. Areas of future data analytics could include identifying geographic areas of underserved communities (service deserts); improving access to services; tracking child program participation rates; evaluating long-term outcomes from program participation; and identifying families that could benefit from complementary services offered by the State.

The creation of an early childhood data governance structure will leverage the existing EBI system to integrate early childhood programs and data across existing data systems, as well as Departments. The documented NH Data Governance and Management Program framework outlines how data governance is addressed across people, processes, and technology, including a detailed list of recommended membership, decision-making processes, and the roles and responsibilities of each member. Work has begun with a diverse team exploring some of the

structural and legal barriers to integrated reporting for data from multiple sources, but without future support for resources for IT, training and analytics, these efforts will languish.

In the current PDG grant year, NH documented programs listed as part of the mixed delivery system but not included in the plans for the ECIDS, due to issues such as reporting only an aggregate number of children, data sharing policy constraints, or using Excel as the data system. Looking forward, NH is focusing on the following programs and data systems:

- Integrating data from Family Centered Early Supports and Services (FCESS) Part C (IDEA) into EBI;
- Reporting and analytics for Part C Monitoring Dashboard and Error Reporting;
- Developing an Early Childhood Risk Dashboard;
- Comprehensive Family Support Prevention services and Child Protection Dashboard; and
- Developing a Human Services (TANF, SNAP, CCDF) Eligibility Dashboard.

NH has formed a team of data stewards and subject matter experts in child-serving programs to collaborate with the contractor. Together they will develop the toolsets and processes to ingest data sources into an environment, transform the data into a data mart and data warehousing solution to allow for modeling to provide trends and create linkages between services through probabilistic matching based on defined business rules and predictive analytics. Findings from a previous readiness assessment reveal that program staff would benefit from building a stronger understanding of the status and key features of programs' data systems²⁰. Additionally, targeted trainings, through the work of the PDG, regarding program data governance and developed dashboards will help programs understand how to prepare for participation in and utilization of an ECIDS. At this critical stage, NH will need data-informed decision-making support to include

²⁰ Grannemann, K., & Coffey, M. (2022). New Hampshire's Early Childhood Integrated Data Systems (ECIDS) Readiness assessment: A summary report. SRI International.

training and building staff capacity for utilization of the ECIDS, dashboard enhancements, and program support on data governance.

Many of the DHHS programs that provide services to children and families are managed using separate data systems. The State has begun the process of integrating data from these different systems into the centralized EBI platform, which includes technology architecture to support internal and external reporting, data transformation and modeling, data governance to comply with federal regulations and state statutes, metadata management for data integrity and search ability, and integration components. PDG funding in 2023 will enable NH to maximize current resources and provide the needed training and governance support as final steps towards a utilized ECIDS. Program staff at DHHS need to be engaged in training on the utilization of the dashboards and understanding the data governance process, with a well-documented plan to onboard new users of the dashboards to support the sustainability of an ECIDS. Specific work activities include tasks to help the State build a strong ECIDS foundation with support for data integration, training, governance, reporting, and other early childhood integrated data efforts across DHHS programs. By expanding the State's capacity to analyze and report data at multiple levels (i.e., child, program, region, state), and ECIT staff capacity to understand and utilize data, the NH PDG intends to ultimately increase access to high quality care, especially in traditionally underserved communities and for infants and toddlers and children with disabilities, and intentionally align with and build on previous and current statewide efforts.

As described in Activity 2, New Hampshire is in the preliminary and eager stages of developing a new governance structure and considering possibilities for the early childhood system. The state's comprehensive Strategic Plan for Early Childhood, pending Council vote in November 2022, recommends the following objectives related to an Office of Early Childhood Care and

Education: (1) Ensure a cohesive and collaborative approach to a mixed-delivery, early childhood system, and (2) Expand public understanding of the importance of quality early childhood experiences for all children. NH's Strategic Plan for Early Childhood, coupled with state engagement in activities such as the Whole Families Approach to Jobs Initiative and the ARPA-D plan, will allow significant infrastructure changes to the service system supporting young children and their families. The NH PDG proposes support for developing a plan to operationalize the infrastructure required for an Office of Early Childhood Care and Education.

In partnership with DHHS, NHCF has been awarded funding through the New Venture Fund's Early Childhood Governance and Financing Project to support the state's transition to a joint Office of Early Childhood Care and Education. A change this consequential to State policy and governance requires due diligence and resources to adequately assess and evaluate financial, operational, and unintended impacts. Establishment of an Office will require untangling a maze of federally funded programs and regulatory and statutory constraints, and creating a viable plan for data integration. Before making any changes, policymakers and community partners need to be assured that a new governance structure can effectively sustain itself, produce improved quality across all sectors, and promote equitable access to opportunities.

The Early Childhood Governance and Financing Project began in October 2022 and will set the foundation for continued work in this area through the PDG. Both sources of funding and resources will be leveraged to create a coordinated and comprehensive plan, including transition and operations for a joint Office of Early Childhood Care and Education. Convening DHHS and NHED leaders, the Departments' ECITs, philanthropic partners, and families, the consulting firm and Council staff will work collaboratively and consider necessary subcommittees in developing an operational plan and public policy recommendation relative to an Office of Early Childhood.

Operational aspects such as, but not limited to, governance structure, staffing structure, financing (transferring funds across agencies and/or departments), information technology systems, and billing and payment systems, must be considered and fully vetted. Similarly, a realistic transition plan will ensure no disruption to service delivery and that the new system not only replaces what exists but enhances and creates increased access for NH families.

Expected outcomes of the project include:

- Continue the work initiated and identified through the New Venture Fund Early Childhood Governance and Financing Project.
- Identify an Office of Early Childhood Transition Team and mechanisms for input (e.g., separate workstreams for rule-making, regulatory, fiscal, policy, etc.).
- Develop a plan to operationalize the infrastructure that will be required for an Office of Early Childhood. The proposal should include clearly defined responsibilities, timelines, and milestones for accomplishing the project, and anticipated sustainability planning.
- Develop a public policy recommendation relative to an Office of Early Childhood.

Sustainability across the early childhood system will be addressed by analysis and planning for a statewide Office of Early Childhood Care and Education.

PROJECT TIMELINE AND MILESTONES

Table 5. NH PDG Project Timeline and Milestones*

| Project Activity and Tasks | Timeline (Quarters) | | | | Milestones |
|---|---------------------|---|---|---|---|
| | 1 | 2 | 3 | 4 | |
| Activity 1. Needs Assessment | | | | | |
| Convene Council’s Panel | | | | | <ul style="list-style-type: none"> • Scientific Advisory Panel identifies NA update topics |
| Collect and analyze data | | | | | <ul style="list-style-type: none"> • Collaborate with Birth through age 8 (B-8) Family and Community Advisors • Analyze data for regional questions with Early Childhood Regional System • Ongoing consultation with Council’s Core group for advisement |
| Disseminate deliverables | | | | | <ul style="list-style-type: none"> • Scientific Advisory Panel presents deliverables at Council meeting • <i>Updated reports may be published early 2024</i> |
| Activity 2. Strategic Plan | | | | | |
| Create action plans for 2023-2025 Strategic Plan initiatives | | | | | <ul style="list-style-type: none"> • Council staff, subcommittee, and Core group utilize TA to create action plans • Ongoing updates at Council meetings regarding progress |
| Identify indicators of progress for initiatives | | | | | <ul style="list-style-type: none"> • Council staff, subcommittee, and Core group utilize TA to identify indicators • Ongoing updates at Council meetings regarding progress |
| Disseminate deliverables | | | | | <ul style="list-style-type: none"> • Council staff/subcommittee present deliverables at Council meeting for approval • <i>Formal release of activity plans and indicators may occur early 2024</i> |
| Activity 3. Family Engagement, Knowledge, and Choice | | | | | |
| Support B-8 Family and Community Advisors | | | | | <ul style="list-style-type: none"> • Enter contract with Lead to supplement activities, representation of Advisors • B-8 actively solicits feedback across the state and multiple perspectives • B-8 supports family voice, leadership, engagement throughout PDG projects • Ongoing updates at Council meetings regarding progress |
| Family child care scan | | | | | |
| Identify contractor for facilitation and evaluation | | | | | <ul style="list-style-type: none"> • NH PDG staff develop RFP, distribute via USNH Procurement; award announced • Contractor engages family child care stakeholders, workforce, State leaders, etc. |
| Evaluate initiatives, develop plan to increase family child care provider workforce | | | | | <ul style="list-style-type: none"> • Contractor evaluates current initiatives, relevant NH-specific data • Contractor coordinates with DHHS BCDHSC’s ARPA-D projects, and seeks recommendations/feedback from Child Care Advisory Council, B-8 Advisors |

| | | | | |
|--|--|--|--|---|
| Release plan for staffed family child care network, onboarding program | | | | <ul style="list-style-type: none"> • Contractor finalizes plan (design options; documentation of costs, proposed budget, and applicable funding sources; outcomes and performance objectives) • Plan and recommendations inform development of State reports (e.g., CCDF Plan, 2023 Head Start Collaboration Office Refunding Application) |
| Community Schools | | | | |
| Solicit and award grantees for planning and collaboration activities | | | | <ul style="list-style-type: none"> • NH PDG staff develop and distribute RFP with input from B-8 Advisors • Awards announced • Grantees engage stakeholders, convene partners, identify needs to be addressed |
| Grantees develop plan to coordinate services | | | | <ul style="list-style-type: none"> • Grantees partner with community-based organizations, non-profit organizations, public or private entities and develop a Memorandum of Understanding • Grantees develop plan for coordination and integration of services • Grantees share successes/challenges with Regional Leads, State Points of Contact |
| Grantees conduct budget, implementation planning | | | | <ul style="list-style-type: none"> • Grantees propose measurable performance objectives and outcomes • Grantees develop budget, including a description of applicable funding sources • Grantees compile a summary of anticipated challenges and expected responses |
| Grantees submit final comprehensive plan | | | | <ul style="list-style-type: none"> • Grantees submit comprehensive plan, including defined responsibilities, timelines, and milestones for the project, and anticipated sustainability planning |
| Activity 4. Sharing Best Practices | | | | |
| Practice-based coaching | | | | |
| Assemble cohorts of preschool teachers | | | | <ul style="list-style-type: none"> • Early Learning Team solicits cohort of preschool teachers for coaching • Teachers and associated administrators convene to formalize agreement • Early Learning Team conducts initial classroom visit |
| Coaching cycles and evaluation | | | | <ul style="list-style-type: none"> • Early Learning Team engages in bi-weekly visits: focused observations and one-on-one meetings to support teachers in goal planning, reflection, and feedback • Early Learning Team facilitates cohort meetings and communities of practice • Early Learning Team summarizes final outcomes |
| Tuition Assistance | | | | |
| Contract with Granite State College (GSC) | | | | <ul style="list-style-type: none"> • USNH contracts with GSC to conduct outreach activities, administer program • GSC collaborates with Community College System of NH (CCSNH), implements changes to expand eligibility and funding for tuition assistance • DHHS staff manage contract, provide financial and programmatic reports |

| | | | | |
|---|--|--|--|---|
| Tuition assistance applicants apply via GSC | | | | <ul style="list-style-type: none"> • Spring term: GSC offers 65 4-credit courses • Summer term: GSC 40 4-credit courses, CCSNH offers 150 3-credit courses • Fall term: GSC 65 4-credit courses |
| Family child care network | | | | |
| Identify contractor for staffed family child care network and onboarding program | | | | <ul style="list-style-type: none"> • DHHS/Council staff develop RFP, distribute via USNH Procurement • Award announced • Contractor engages stakeholders, convenes workforce, DHHS/ NHED leaders, etc. regarding family child care and initiates network |
| Provide resources and technical assistance to family child care providers | | | | <ul style="list-style-type: none"> • Contractor provides start-up costs, collaboration/partnership, and support to include family voice in program design and operation, and engage families in fostering children’s health and development |
| Support program sustainability, reduce administrative burden, promote shared learning | | | | <ul style="list-style-type: none"> • Contractor supports establishment or expansion of family child care businesses • Contractor assists family child care providers with NH’s Child Care Scholarship Fund program application process • Contractor develops metrics, measures number of infant/toddler spaces created |
| Activity 5. Program Quality Improvement | | | | |
| <i>(Activities will start with ACF confirmation of Needs Assessment/Strategic Plan responsibilities achieved)</i> | | | | |
| Data-informed decision making | | | | |
| Engage contractor to develop and implement plan for training | | | | <ul style="list-style-type: none"> • Evaluate training needs of program/technical staff in utilization of dashboards • Develop training plan with Data Governance and DHHS teams • Provide trainings on informed decision making |
| Design and implement reporting data model, dashboard enhancements | | | | <ul style="list-style-type: none"> • Incorporate and develop enhancements to existing ECIDS/dashboards • Integrate sources allow DHHS to create reports based on data needed by programs • Provide data governance program support as needed |
| Office of Early Childhood planning | | | | |
| Identify contractor to develop plan for Office of Early Childhood | | | | <ul style="list-style-type: none"> • Council staff develop RFP, distribute via USNH Procurement; award announced • Contractor identifies and convenes Transition Team, coordinates with New Venture Fund |
| Develop plan and policy recommendation for Office | | | | <ul style="list-style-type: none"> • Contractor identifies and facilitates workstreams (regulatory, fiscal, policy) • Contractor develops plan to operationalize infrastructure required for an Office • Contractor develops public policy recommendation |

ORGANIZATIONAL CAPACITY

For the 2023 planning grant, UNH is again selected as the State’s lead agency, following successful performance in executing the 2019 planning grant and 2020-2022 implementation grant (see Governor Sununu’s letter designating UNH as the state entity in the Appendix, accompanied by a joint letter of commitment from DHHS Commissioner Shibinette and NHED Commissioner Edelblut). In close collaboration with state, regional, and local partners, UNH has the resources and expertise to successfully oversee the project. NH’s flagship public institution and a federally recognized land-, sea-, and space-grant university, UNH has a strong organizational record in federally sponsored programs and community partnerships, evidenced by its R1 Carnegie Classification (i.e., very high research activity university). UNH has successfully managed and completed multiple federal grants, collaborating with numerous state and local partners while also providing state-of-the-art training to prospective educators and practicing professionals.

UNH will: (1) administer and serve as fiscal agent for the grant and ensure that the work plan of the grant is effectively carried out; (2) provide budgetary oversight and ensure the project’s budget is managed effectively and efficiently and supports project sustainability; and (3) ensure that memoranda of understanding and contracts are executed, in accordance with the timelines set herein. The oversight of grant management at UNH will be facilitated by the grant’s primary investigator, Dr. Kimberly Nesbitt, and a full-time project director, Meredith O’Shea, under the guidance of the leadership of DHHS and NHED and in consultation with PDG key partners. Dr. Nesbitt is an associate professor in the Department of Human Development and Family Studies. Dr. Nesbitt has been a collaborator on numerous large-scale federally funded grants engaging in multidisciplinary and cross-site collaborative research and served as the PI for the NH PDG planning and implementation grants. She has extensive knowledge of early childhood educational pedagogy and serves on numerous early learning and childhood committees in NH. Ms. O’Shea

has more than a decade of experience, with a demonstrated strong capacity for project management and leadership of multifaceted multimillion-dollar federal grants at institutes of higher education, including oversight of funding and serving as the primary contact for sponsors. She has served as Project Director of the NH PDG planning and implementation grants. These positions will substantially contribute to program performance evaluation by monitoring ongoing activities and the progress toward the goals and objectives of the project and completing program reporting.

Project partners include the NHED, DHHS, and NH's Council for Thriving Children. NHED provides educational leadership and services that promote equal educational opportunities and quality practices and programs. DHHS is responsible for the health, safety, and well-being of the citizens of NH, and in particular, the Bureau of Child Development and Head Start Collaboration, which includes CCDF and the Head Start Collaboration Office, will integrate work with the project in all relevant areas, leveraging resources and dedicating staff time to project teams and committees. Both Departments will participate in the execution of the project and plan activities as specified in the scope of work. The Governor-appointed early childhood advisory council will serve in an advisory capacity to the grant and provide leadership on strategic planning implementation, and coordination and facilitation of cross-departmental systems and programs.

UNH will participate in the execution of the project activities. To ensure alignment with DHHS and NHED grant and operational activities, UNH will employ PDG staff members to support the Council and cross-Department activities; these staff will support related TA activities leading to the successful implementation of grant requirements. Formal decision-making rules and protocols will be used to assure that state and federal regulations are followed, that all project stakeholders have a forum within which to express their ideas and opinions, and that the project goals and activities are achieved on time and within budget. A leadership team, comprising representatives

of the proposal's primary partners (e.g., DHHS, NHED, Council, UNH), will meet monthly to track the progress of the grant activities, make decisions on project activities, and inform future efforts. The Core Support Team of the Council will serve as the NH PDG's primary advisor; this group was consulted in the development of the NH PDG planning proposal and includes the leads of NH's early childhood governance structure, the Council and key quadrants (Department ECITs, Family-Community Advisors, Scientific Advisory Panel). While UNH currently leads the Scientific Advisory Panel, if the Panel transfers to another institute of higher education, UNH will maintain representation in the Council Core group. See Appendix for Organizational chart of state entity and partners and governance.

Stakeholder Engagement and Sustainability

As mentioned in Activity 1, numerous partnerships and collaborations support coordination and quality improvement activities in the early childhood system as well as policy alignment and service delivery. Key continued partnerships are anticipated with state-level departments; community organizations such as the NH Children's Trust, the Facilitating Organization for Family Resource Centers (FRCs), or those promoting trauma-informed approaches (e.g., NH Pediatric Improvement Program, UNH's Institute on Disability); private funders (NHCF, Endowment for Health); the Early Childhood Regional System, and the many activities and programs relevant to the Council: DHHS Family Strengthening and Child Well-Being Plan; NHED ESSA Plan; Community Collaborations Grant; Whole Families Approach to Jobs: Parents Working, Children Thriving Initiative; USDA School and Child Care meal programs; Safe Schools, Healthy Students; Maternal Opioid Misuse Model; Child Welfare Systems Transformation; National Child Abuse Prevention efforts, CAPTA. Specifically, the NH PDG will utilize the existing infrastructure and organizational capacity of the Council for Thriving Children.

NH's sustainability strategy considers the importance of local ownership and capacity building that aligns with statewide systems and strategies. Sustainability at both the state systems level and the project level depends on leveraging and expanding existing efforts and resources, launching projects with clear and feasible sustainability strategies, and building infrastructure, collaboration, and coordination to pursue a variety of funding strategies to support the system.

PROGRAM PERFORMANCE EVALUATION PLAN

Immediately upon award, UNH will identify an external contractor to develop a formal Project Performance Evaluation (PPE) Plan that outlines specific approaches for measuring progress toward the proposed PDG activities, outputs, and short-term outcomes (see Table 6). The UNH Project Director will work closely with the PPE Contractor to ensure effective contributions to ongoing learning and continuous quality improvement efforts throughout the course of the grant. Specifically, the PPE Contractor will be responsible for drafting a PPE Plan that proposes feasible approaches for measuring progress, while also clearly articulating plans for engagement with PDG staff, contractors, and other key partners to propose recommendations whenever challenges arise. Three primary approaches will be used to measure progress for the PPE.

(1) All contractors will be required to report on progress, identify barriers, and propose corrective actions in a quarterly reporting system. This quarterly reporting system has been effective at ensuring regular vertical communication (between UNH and contractors) and horizontal communication (with updates and lessons learned widely disseminated across staff, contractors, and key partners at quarterly check-in meetings). Upon award, the PPE Contractor will be responsible for developing a template for quarterly reporting. Then the PPE Contractor will tailor each of the templates to include measurable indicators organized by the five PDG Activities and aligned with the partner's scope of work. The PPE Contractor will collect and summarize information from the reports on a quarterly basis for the UNH Project Director.

(2) The PPE will employ a set of interviews (mid-year and year-end) with PDG staff, contractors, and other key partners (e.g., Scientific Advisory Panel; Family-Community quadrant). Similar to prior PDG PPE activities, the external contractor will be responsible for developing a protocol to gather information about facilitators and barriers to progress. The contractor will provide a written summary of findings and debrief with UNH to share recommendations for how to improve PDG progress. For example, during the NH's implementation PDG, qualitative information revealed inefficiencies in communication among key staff, and UNH adopted recommendations from the PPE Contractor on how to adapt meeting agendas, frequency, and attendees to better facilitate communication across the project.

(3) The PPE Contractor will develop a system for measurement, data collection, and reporting on quantitative metrics specific to each project (e.g., number of classes completed with tuition assistance; number of preschool and Kindergarten teachers coached; number of family child care providers recruited; etc.). This information will be used to inform the federal reports and recommendations by the PPE Contractor on potential improvements.

A key component of the PPE Plan will involve clear approaches for dissemination of findings. As a first step, the PPE Contractor will support UNH in summarizing progress, challenges, and upcoming activities in required reports for the federal government. Additionally, lessons learned from the prior PDG work will be applied to quarterly meetings with PDG partners, contractors, and key stakeholders. The PPE Contractor be responsible for drafting agendas, convening, and facilitating these meetings. The PPE Contractor will also draft quarterly newsletters to be posted to the state's PDG website. These meetings and written materials address the need to share information systematically with partners, to promote transparency and create additional opportunities for collaboration across activities.

Table 6. PPE procedures to evaluate progress on NH’s proposed PDG planning activities

| PDG Planning Activities & Tasks | Outputs/ Short-Term Outcomes | PPE Activities | |
|---|--|--|---|
| <p>Activity 1. Needs Assessment</p> | <ul style="list-style-type: none"> • Scientific Advisory Panel creates clear methods for updates (Q1) • Information is gathered from stakeholders to address Needs Assessment topics (Q2-Q3) • Needs Assessment updates are disseminated (as produced) | <ul style="list-style-type: none"> • Updated Needs Assessment Reports • Needs Assessment is used to inform future activities | <ul style="list-style-type: none"> • Reports from Scientific Advisory Panel at Council meetings • Mid-Year, Year-End Interviews with members of the Scientific Advisory Panel |
| <p>Activity 2. Strategic Plan</p> | <ul style="list-style-type: none"> • Council for Thriving Children, NHED, and DHHS collaborate (ongoing) on progress towards Strategic Plan goals • Engage parents, community leaders, providers, faith-based partners in implementing Strategic Plan • Review indicators to assess progress and continuous quality improvement • Identify barriers to coordination among partners | <ul style="list-style-type: none"> • Action plans for Strategic Plan initiatives • Strategies for improved coordination among partners • Updated list of measurable indicators to assess progress and support continuous quality improvement | <ul style="list-style-type: none"> • Quarterly Reports from Contractor • Mid-Year, Year-End Interviews with leaders from Council for Thriving Children, NHED, and DHHS |
| <p>Activity 3. Family Engagement</p> | <p>Contract with external entity to:</p> <ul style="list-style-type: none"> • Engage stakeholders to assess current initiatives that target family child care • Develop plan to increase the number of family child care providers | <ul style="list-style-type: none"> • Comprehensive report on current family child care initiatives • Comprehensive plan to increase family child care providers (informed by stakeholders, including clear objectives and aligned budgets) • Deliverables inform development of related State plans, funding applications, etc. | <ul style="list-style-type: none"> • Quarterly Reports from Contractor(s) • Mid-Year, Year-End Interviews with Contractor(s) |
| | <ul style="list-style-type: none"> • Contract with Family-Community quadrant lead to supplement and | <ul style="list-style-type: none"> • Family voice and participation in the development of mixed | <ul style="list-style-type: none"> • Quarterly Reports from Contractor |

| | | | |
|--|---|--|--|
| | <p>extend family voice care, engagement, and leadership activities</p> | <p>delivery system policy/program decisions</p> <ul style="list-style-type: none"> • Family engagement with state leaders in planning and implementing early childhood activities (e.g., community schools, family child care) | <ul style="list-style-type: none"> • Mid-Year, Year-End Interviews with Contractor • Access ongoing data collection efforts (e.g., NH’s 603 Survey) |
| | <ul style="list-style-type: none"> • Fund public school districts to support planning for community school model | <ul style="list-style-type: none"> • Detailed plans for creating community school models (i.e., MOUs, measurable goals and objectives, budgets, timelines, management plans) | <ul style="list-style-type: none"> • Quarterly Reports from public school districts • Mid-Year, Year-End Interviews with public school districts, NHED staff |
| <p>Activity 4. Workforce and Best Practices</p> | <ul style="list-style-type: none"> • Early Learning coaching team serves school-based preschool programs (e.g., preschool special education, Title 1, local public and private preschool programs) and Kindergarten classrooms | <ul style="list-style-type: none"> • NH’s early childhood workforce has increased capacity to implement best practices • Alignment of standards, curriculum, assessment, and expected child outcomes across birth to third grade • Strengthened transitions, partnerships, and communication between families and schools | <ul style="list-style-type: none"> • Monthly updates from UNH’s Early Learning Coaching Team • Mid-Year, Year-End Interviews with preschool/ Kindergarten teachers, administrators |
| | <ul style="list-style-type: none"> • Expand tuition assistance for early childhood and out-of-school time (OST) workforce | <ul style="list-style-type: none"> • At least 500 credits are funded for the early childhood and OST workforce • At least 30% of teachers receiving grants complete basic course requirements on an accelerated timeline | <ul style="list-style-type: none"> • Quarterly Reports from Contractor • Mid-Year, Year-End Interviews with DHHS, GSC, students regarding implementation of program |
| | <ul style="list-style-type: none"> • Initiate a family child care network to provide start-up costs, staff, and activities | <ul style="list-style-type: none"> • Implementation plans for a family child care network (e.g., engagement, professional development, family voice) | <ul style="list-style-type: none"> • Quarterly Reports from Contractor • Mid-Year, Year-End Interviews with existing |

| | | | |
|---|---|--|--|
| | | <ul style="list-style-type: none"> • Recruitment to engage family child care providers in network activities | <p>and new family child care providers</p> |
| <p>Activity 5. Quality Improvement</p> | <ul style="list-style-type: none"> • Contractor to convene data stewards, subject matter experts, and program staff to develop toolsets and applications to allow for the analysis of trends, linkages between services. | <ul style="list-style-type: none"> • Processes allow for data linking and integration of program data • Tools that support real-time analytics, dashboards, and reporting • Trainings that build staff capacity to use data | <ul style="list-style-type: none"> • Quarterly Reports from Contractor • Mid-Year, Year-End Interviews with DHHS staff |
| | <ul style="list-style-type: none"> • Contract to facilitate planning activities and engage stakeholders in creating a plan to establish a joint Office of Early Childhood. | <ul style="list-style-type: none"> • Comprehensive plan that operationalizes infrastructure requirements for transitioning to an Office of Early Childhood Care and Education | <ul style="list-style-type: none"> • Quarterly Reports from Contractor • Mid-Year, Year-End Interviews with key partners, stakeholders |

PLAN FOR OVERSIGHT OF FEDERAL AWARD FUNDS AND ACTIVITIES

UNH is a campus of the University System of New Hampshire (USNH), a not-for-profit institution of higher education created in 1963 as a body politic and corporate under the laws of the State of New Hampshire. The campus manages over \$260 million in federal grant expenditures annually. The University maintains fund accounting in accordance with Governmental Accounting Standards Board standards. In addition to the resources described under Organizational Capacity, this project will utilize the financial management capabilities of the UNH Sponsored Programs Administration (SPA), as well as departmental administrators and Procurement and Purchasing departments, to monitor all expenditures and ensure compliance with federal guidelines. To disseminate awards objectively and fairly, NH will employ industry-standard practices for announcing opportunities and collecting applications as well as standardized guidelines and objective vetting of (e.g., safeguards against conflicts of interest). UNH is audited by an external firm annually and its Financial Research Administrators (FRAs) provide accounting and financial compliance support for all UNH-sponsored programs. The FRA secondary reviews of costs allocated to sponsored program funds consider award terms and sponsor restrictions, including allowable direct and indirect costs. FRAs prepare and submit required sponsor financial reports, support the establishment of a grant record, including approved budgets, communication of financial and grant information to the project director and partners, and close out awards and support during audits. As needed, SPA has a dedicated Subrecipient Monitor and a Research Integrity Services unit.

PROTECTION OF SENSITIVE AND/OR CONFIDENTIAL INFORMATION

UNH's Office of Research, Economic Engagement, and Outreach oversees research integrity, including the protection of human subjects in research and the UNH Institutional Review Board (IRB); UNH's responsible conduct of research and scholarly activity program; UNH's financial

conflict of interest in research programs and the UNH Disclosure Review Committee; and consultation to UNH faculty regulatory groups. UNH recognizes its responsibility to produce and disseminate knowledge in accordance with its mission of research, teaching, and public service. When non-human models are insufficient, the use of human subjects in research is an integral aspect of scholarly activity at UNH. UNH recognizes its ethical and legal responsibilities to provide a mechanism to protect individuals involved as subjects in research conducted under the auspices of UNH. All research activities involving human subjects must be conducted in accordance with federal, state, and local laws and regulations applicable to the use of human subjects in research. These include, but are not limited to, Federal Policy for the Protection of Human Subjects, Title 45 Code of Federal Regulations Part 46; Food and Drug Administration (FDA) Regulations for Human Subjects Protections, Title 21 Code of Federal Regulations Parts 50 and 56; and the principles set forth in “The Belmont Report”.

DISSEMINATION PLAN

NH proposes a multi-pronged approach to the dissemination of grant-related activities and products to ensure that stakeholders across the state are engaged in the process and the outcomes. Stakeholders across early learning, family support, and health, as well as local communities and families, are always welcome to join the ongoing state strategic planning process, contribute to the needs assessment process, provide insights and feedback on proposed activities, and request assistance in implementing strategies and best practices. Grant work products will be publicly available through NHED, DHHS, Council for Thriving Children, and UNH’s Early Childhood Initiative website (chhs.unh.edu/early-childhood). DHHS and NHED have dedicated communication staff to disseminate the findings and activities of the grant (e.g., needs assessment, new data collection; strategic plan and updates; reports) as well as outcomes from activities and information on best practices that emerge as a result of grant efforts. As part of the ongoing

strategic planning work, the PDG team will utilize the Council and quadrants to reach target audiences in the co-development of strategies. As practicable, results of findings will be shared on a regional and national stage through conferences and events held by organizations inside and outside of NH (e.g., meetings of the Council for Thriving Children, Society for Research in Child Development, PDG Annual Convening) and current structures (i.e., Early Childhood Regional System, NHED’s Friday Forum; DHHS contract with Child Care Aware).

THIRD-PARTY AGREEMENTS

Not applicable. In the Appendix are: (1) letter from NHED and DHHS outlining the partnership with UNH (2) cost share commitments from NHED and DHHS in the amount of \$300,000 each by the end of the 12-month project period, and (3) Governor Sununu’s letter establishing UNH as the lead agency.

PROJECT BUDGET AND BUDGET JUSTIFICATION

Table 7. Line-Item Budget by Activity

| Cost Category | Description | Federal Share |
|---|--|--------------------|
| Activity 1. Needs Assessment | | |
| Service Provider | Stipends/Consulting for specific NA topics | \$100,000 |
| Total Cost Activity 1 | | \$100,000 |
| Activity 2. Strategic Plan | | |
| Contractual | <<See Activity 5>> | |
| Activity 3. Family Engagement | | |
| Service Provider | Family-Community Quadrant support | \$75,000 |
| Contractual | Grants for Community Schools | \$850,000 |
| Contractual | Family Child Care Scan | \$100,000 |
| Total Cost Activity 3 | | \$1,025,000 |
| Activity 4. Sharing Best Practices | | |
| Contractual | Tuition Assistance | \$500,000 |
| Contractual | Family Child Care Network | \$500,000 |
| Misc. | Stipends to compensate for coaching | \$20,000 |
| Total Cost Activity 4 | | \$1,020,000 |

| | | |
|---|---|--------------------|
| Activity 5. Quality | | |
| Contractual | Data-driven decision making | \$210,000 |
| Contractual | Office of Early Childhood planning | \$150,000 |
| Total Cost Activity 5 | | \$360,000 |
| General Grant Activities | | |
| Salary | UNH-based grant-contracted staff (1 Project Director, 3 Center of Excellence Coaches); Council staff (1 Director, 1 Cross-Department Coordinator); PI | \$526,556 |
| Fringe | NICRA 35.7%; Summer faculty @ NICRA 8.1% | \$181,953 |
| Contractual | Evaluation expert to conduct PPE | \$100,000 |
| Travel | Grantee meeting (\$10,000), In-state for meetings, coaching (\$40,000) | \$50,000 |
| Total General Grant Activities | | \$858,509 |
| Total Direct Costs | | \$3,363,508 |
| Facilities and Administrative/Indirect Costs | | \$584,859 |
| Total Sponsor Cost | | \$3,948,367 |
| Cost Match | DHHS (\$300,000), NHED (\$300,000), UNH (\$600,000) | \$1,184,510 |

Table 8. Budget Justification and Narrative based on SF-424A

| Personnel | Total Requested Funds = 526,556 |
|--|--|
| Kimberly Nesbitt, Principal Investigator (.35 FTE), will have overall responsibility for the implementation of the proposed project, including supervision of practice-based coaching, PPE activities, and program reporting. \$25,553 is requested to support Dr. Nesbitt’s time during the Academic year (2 course buyouts) and \$21,840 for 2 summer months. | |
| Meredith O’Shea, Project Director (1 FTE), will report to the Principal Investigator and be responsible for implementing and managing grant activities, ensuring coordination with grant subcontractors and service providers, and substantial contributions to PPE activities and program reporting. \$86,684 is requested to support the position. | |
| Christina Lachance, Council for Thriving Children Director (1 FTE), will report to the Principal Investigator and be responsible for coordinating the governance structure, aligning DHHS/NHED integration initiatives, including facilitating and managing activities in this proposal and related TA, and be a liaison with UNH. \$126,672 is requested to support the position. | |
| TBN, Cross-Department Coordinator/Office of Early Childhood Liaison (1 FTE), will report to the Council Director and be responsible for facilitating and managing related projects (e.g., family child care), including development of UNH-issued RFPs and ensuring coordination with Technical Assistance and other partners, and serve as a liaison between DHHS, NHED, the Council, and UNH. \$72,632 is requested for this position. | |

| | |
|--|---|
| <p>TBN, Lead Early Learning Coach and Coordinator (1 FTE), will be responsible for implementing the cross-sector practice-based coaching model and providing practice-based coaching. \$72,836 is requested to support the position</p> | |
| <p>TBN, Early Learning Instructional Coaches (2 FTE), will be responsible for implementing the cross-sector practice-based coaching model and providing practice-based coaching. \$60,169 is requested to support each position</p> | |
| <p>Fringe Benefits</p> | <p>Total Requested Funds = \$181,953</p> |
| <p>The University’s fringe benefit rates are federally approved. The rates applicable to this application are: 35.7% for full fringe benefits, 8.1% for partial fringe benefits. The “partial fringe” rate applies to non-student hourly wages, faculty summer salaries.</p> | |
| <p>Travel</p> | <p>Total Requested Funds = \$50,000</p> |
| <p>Based on previous PDG experience, projected expenses for in-state travel (\$40,000) to accomplish project goals (e.g., coaching) include mileage reimbursement at the current federal rate and hotel stays as appropriate. Support (\$10,000) is also requested for travel to send four staff members to required Grantee Meetings in DC for three days each. Costs include airfare (Boston to DC), per diem at Federal rate, lodging (est. \$225/night), ground transportation (mileage to airport, parking, local taxi/mass transit in DC).</p> | |
| <p>Contractual</p> | <p>Total Requested Funds = \$2,585,000</p> |
| <p><i>TBN, Service providers for Needs Assessment.</i> Members of the Council’s Scientific Advisory Panel will be compensated for identifying and evaluating topic-specific research, and preparing Needs Assessment updates. A total of \$100,000 in stipends is requested.</p> | |
| <p><i>TBN, Service provider for Family-Community Quadrant Lead.</i> The lead organization of the Council’s Family-Community quadrant will be contracted to support family knowledge, voice, and leadership throughout proposed PDG projects. \$75,000 is requested for this work.</p> | |
| <p><i>TBN, Community School Grantees.</i> Awarded through RFP, grants will support local school districts in planning activities to coordinate and integrate services provided by community-based organizations, government agencies, etc. The request for up to \$850,000 will directly support school districts, or their proxies.</p> | |
| <p><i>TBN, Research, evaluation, convening firm.</i> A contractor will be hired to convene leaders to review initiatives to expand access to infant/toddler care and education by increasing the family child care workforce. Contractor will assess goals and funding mechanisms of initiatives, and develop long-term plan for sustainability. \$100,000 is requested for this work.</p> | |
| <p><i>Granite State College, Tuition Assistance Administration.</i> To support 510 courses for the early childhood workforce, \$500,000 is requested (\$439,645 in tuition assistance and \$60,355 (12.1%) in administrative costs). Per policy, UNH will not assess any overhead on this component of the University System of New Hampshire.</p> | |
| <p><i>TBN, Family Child Care Network Facilitator.</i> A contractor will be hired to build a pipeline of new family child care providers and proactively retain, support, and educate family child care providers. Contractor will maintain and stabilize current family child care workforce, operationalize plan to recruit new providers, and disburse stipends to network partners (e.g., start-up costs, retention grants). \$500,000 is requested for this work.</p> | |

| | |
|---|--|
| <i>TBN, Integrated Data Reporting Technical Assistance Provider.</i> A contractor with experience in NH’s EBI system will be hired to collaborate with DHHS staff to support data integration, training, governance, reporting, and other early childhood integrated data efforts across NH DHHS programs. \$210,000 is requested for this work. | |
| <i>TBN, Transition and operationalization firm.</i> A contractor will be hired to work with Council staff to support NHED/DHHS leadership and ECITs to develop a transition and operational workplan to execute a joint Office of Early Childhood. The contractor will facilitate and convene leaders across the early childhood governance structure and other stakeholders as needed. \$150,000 is requested for this work. | |
| <i>TBN, External evaluator.</i> A contractor will be hired to conduct program performance evaluation activities and continuous quality improvement for successful implementation of grant requirements. The contractor will monitor ongoing activities, metrics of outcomes, and progress towards project goals and objectives. \$100,000 is requested for this expertise. **5% of the total budget (\$3,948,367) = \$197,418. \$100,000 is budgeted for an external contractor; the remainder is reflected in faculty and staff salary, fringe, and F&A for positions substantially contributing to program performance evaluation activities and program reporting. | |
| Other Direct Costs | Total Requested Funds = \$20,000 |
| <i>Misc.</i> Modest teacher participant incentives (for participation in coaching activities/workshops outside of the normal workday) are estimated at \$20,000 (100 participants @ \$200 each). | |
| Facilities & Administrative | Total Requested Funds = \$584,859 |
| This application is requesting \$584,859 to support the facilities and administrative charges associated with this project, calculated at a composite rate of 53% of direct costs, the indirect cost rate approved by US DHHS (3/25/22). Per Uniform Guidance, UNH has waived collecting F&A on costs over \$25,000 on large vendor agreements, as listed above under Contractual. UNH’s rate agreement is on file. | |
| Cost Match: 30% of \$3,948,367 Federal Share | \$1,184,510 |
| Per letters in the Appendix, DHHS and NHED each pledge \$300,000 for Cost Match. UNH will meet the required balance of Cost Share (\$600,000) through foregone F&A (waived F&A on costs over \$25,000 on large vendor agreements) by the end of project period. | |