



Strategic Partnerships in Preschool Development Grant Birth to Five Renewal Applications

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Acknowledgments

We would like to thank leaders from the following states for sharing their experiences during the COVID-19 pandemic:

Alabama, California, Nebraska, Rhode Island, and Virginia.

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Executive Summary

This report analyzes the Preschool Development Grant Birth through Five (PDG B-5) renewal applications from 23 states that received federal funding to support state efforts to expand access to high-quality early learning experiences in a wide range of settings, including centers, family child care homes, Head Start and Early Head Start programs, state preschool programs, and home visiting services. This analysis specifically focuses on the role of partnerships in Grantee states' proposals. All 23 states proposed partnerships with a range of organizations, from advocacy organizations to institutions of higher education (IHEs), and for multiple purposes.

The most common state partnership goals included providing or enhancing professional development and training opportunities for members of the early childhood care and education (ECE) workforce, improving or expanding family engagement activities, providing early intervention and inclusion services, providing child health services or referrals, building new or connecting existing early childhood data systems, and supporting successful transitions from ECE to kindergarten.

COVID-19 shifted the landscape in many ways, including some of the partnerships that were proposed in the grant applications. This report describes the challenges and opportunities that five states navigated due to the pandemic.



Introduction

This report analyzes the 23 Preschool Development Grant Birth through Five (PDG B-5) renewal applications funded to explore the proposed role of strategic partnerships in achieving the goals of the PDG B-5 initiative across the country. The renewal grants were awarded in December 2019 and will end in December 2022.

The PDG B-5 is a competitive federal grant administered by the U.S. Department of Health and Human Services (HHS), Administration for Children and Families (ACF) in collaboration with the U.S. Department of Education (ED). Hereafter, when referring to HHS/ACF and ED together, we will speak of “the Departments”.

Before the renewal grants were a reality, PDG B-5 was initially designed to support states as they engaged in deep strategic planning to outline action steps for improving their early childhood systems. The initial grant required states to design a process for and conduct a comprehensive statewide birth through five needs assessment and develop a related strategic plan to address identified needs.

The initial planning grant encouraged states to incorporate partnerships into their strategic planning process and proposed activities. Specifically, the funding opportunity announcement (FOA) asked states to focus on five major activities as they developed their strategic plans to address state needs, fostering partnerships among stakeholders as integral aspects of each effort.

After the initial planning year, the ACF released a new FOA in September of 2019, and 23 states received funding to enhance, expand, and/or build on their planning activities and begin implementing their strategic plans.

The Departments clearly indicated an expectation for states to “establish new partnerships and enhance existing partnerships among Head Start and child care providers, home visiting and preschool programs, state and local governments, Indian tribes and tribal organizations, private entities (including faith and community-based entities), and local educational agencies”

By working in partnership with other entities throughout the renewal grant period, states hope to be more effective and efficient in coordinating a mixed delivery early childhood system to prepare children for success in school and life. As part of this expectation, the FOA required states to “recommend partnership opportunities that go beyond those previously identified” in their strategic plans to push states to leverage all their existing resources to optimize coordination, program quality, and access to needed services for all children.



Defining Strategic Partnerships

In recent years, partnerships have gained popularity among state and federal policymakers and practitioners based on the promise that partnering has the potential to improve efficiency, optimize effectiveness, and lead to better policy and practice solutions for families. In part, this popularity stems from the current economic climate, which has led to increased interest in accountability systems that minimize duplication of effort and facilitate continuous quality improvement.

The call to foster partnerships, as part of the planning process for the PDG B-5 Initiative, reflects the Departments' value of the potential for partnerships to enhance ECE direct services (such as those between school districts and child care providers and Head Start agencies) and ECE governance and systems building.

Strategic partnerships describe a union between two or more entities to better achieve an agreed-upon common goal and a shared vision for an early childhood mixed delivery system (MDS). Strategic partnerships are long-term relationships and a part of the MDS infrastructure.

Researchers have documented common characteristics of successful partnerships. Scholars highlight the need for partnerships to match organizational interests, share knowledge and information, and establish common terminology. Strong communication across partners is critical for creating and maintaining a shared vision and strong partner relationships. Successful partnerships also require stakeholder engagement to discuss shared solutions and determine appropriate roles and expectations. Finally, leveraging community resources and building organizational capacity is key to supporting ongoing collaboration and sustaining impact (Amey, 2015).

Proposed Partnerships

The PDG B-5 renewal grant applications required applicants to demonstrate how they will “support partner contributions to the overall system, amplifying the collective impact of existing partner activities,” and asked that states identify and expand on successful efforts “by creating strong partnerships, systems for communication, and evaluations of its projects and work.”

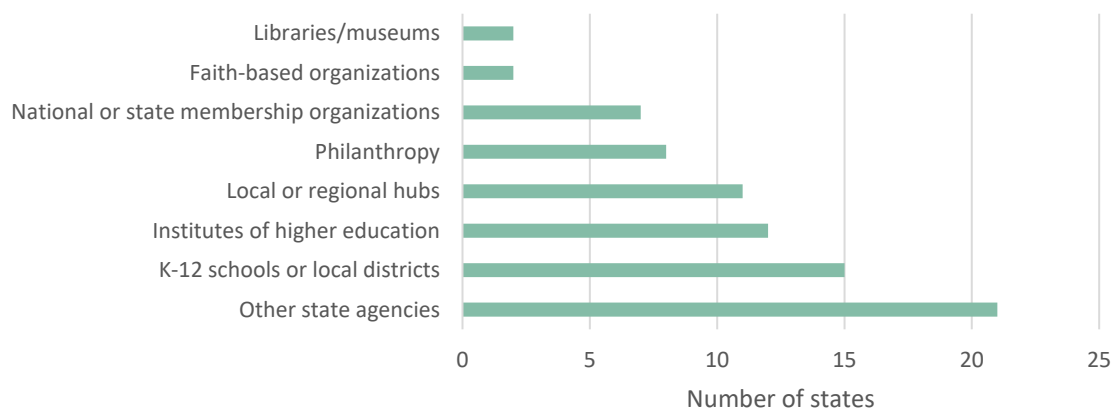
Every state proposed at least one key partnership and described how it was designed to help achieve their early childhood systems' goals. Many types of organizations were proposed as partners (See Exhibit 1). Across federally funded programs, all Grantees committed to partnering with their Head Start State Collaboration Directors and Child Care Development Fund (CCDF) administrators. Nineteen (19) of the 23 renewal grantees mentioned their Part C Coordinators and Early Childhood Special Education partners. Of the 23 renewal Grantees, 14 of the 17 Grantees with tribal populations mentioned their partnerships with tribal organizations in their PDG-5 renewal application. Home visiting programs are an important part of the mixed



delivery system. Nineteen (19) grantees described partnerships with their home visiting programs to carry out the PDG B-5 grant activities.

The most common proposed partnership was between multiple state agencies (21 states). Twelve (12) states proposed strategic partnerships with institutions of higher education. Other common partners included K-12 schools or districts (15 states), local or regional hubs (11 states), philanthropic foundations (8 states), and national or state membership organizations (7 states). A few states also proposed partnerships with faith-based organizations, libraries, and/or museums to integrate activities more thoroughly in communities across the state.

Exhibit 1. Proposed Partner Organizations

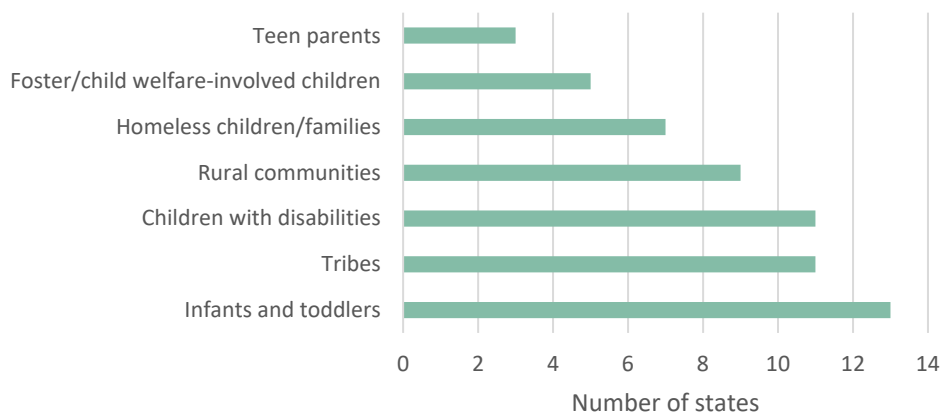


Partnering to Serve Special Populations

In addition to proposing a variety of partnership goals, many states proposed partnerships explicitly designed to support or enhance services for special populations of children and families. Exhibit 2 illustrates the distribution of these partnerships.



Exhibit 2. Partnerships to Provide or Enhance Services to Support Special Populations



Specifically, states proposed partnerships explicitly designed to enhance services for teen parents (3 states), foster and child welfare-involved children (5 states), homeless children and families (7 states), children and families living in rural communities (9 states), children with disabilities (11 states), tribal children and families (11 states), and infants and toddlers (13 states). These counts represent partnerships specifically directed at enhancing services to support these populations; states more frequently signaled intentions to connect data or engage leadership across state agencies for administering public programs related to these populations.

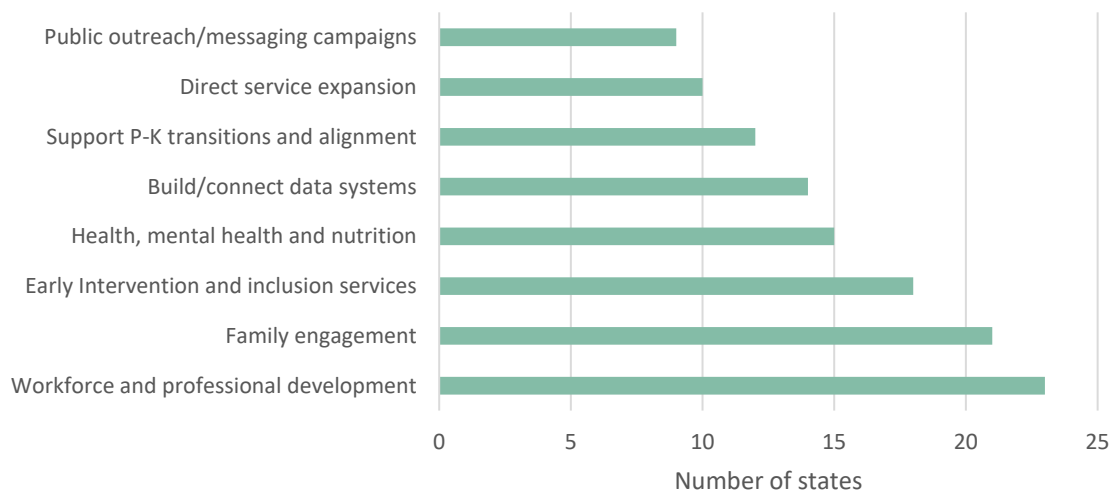
Partnering with a Purpose

Most PDG B-5 partnerships were established to strengthen a specific service or rally behind a certain goal. All 23 states proposed a partnership with an identified goal of providing new or enhancing existing professional development and training opportunities for members of the ECE workforce. Similarly, all but one state proposed a partnership to improve or expand family engagement activities. Four additional goals were identified by more than half of the states receiving renewal grant funding. Specifically, those common goals included: (1) providing early intervention and inclusion services (18 states); (2) providing child health services or referrals (15 states); (3) building new or connecting existing early childhood data systems (14 states); and (4) supporting successful transitions from ECE or preschool programs to kindergarten (12 states). Lastly, 10 states planned partnerships to expand direct early childhood services and 9 states wrote to improve public outreach.

State examples of the initiatives and the strategic partners are described in sections below based on the 8 categories in Exhibit 3.



Exhibit 3. Proposed State Partnership Goals



Increasing Public Outreach

Nine of the 23 states proposed public messaging campaigns to leverage text messaging, newsletters, public radio, and other broadcasting tools to share knowledge about early childhood development, early literacy, well-child health care visits, and the role of ECE programs in school readiness and success.

During **Nebraska’s** initial PDG B-5 grant dissemination, efforts focused on websites, newsletters, feature stories, and blog posts. With the renewal funding, they plan to engage a wider range of dissemination partners and inform policymakers of progress. This work will include a broader range of partners to leverage their networks, emphasizing partnerships with entities that have significant contact with vulnerable populations to target audiences using established contacts and their own messaging networks and platforms. This work will be carried out by a full-time communications coordinator acting as an interagency liaison among the key entities leading PDG B-5 funded projects. The coordinator will cultivate a wider range of communications partnerships, develop multiple types of messaging content and sequence its distribution, and coordinate a media engagement strategy throughout the duration of funded activities. Presentations and webinars will be used to update policy leaders, media, and other ECE stakeholders about the progress of the work.

New Jersey proposed to increase consumer awareness and increase service usage and availability of programs and services. Partners from some of NJ’s Councils for Young Children (county councils) recommended more resource links on state and local websites to increase consumer knowledge of ECE services. A partnership with Vital Villages for technical assistance (TA) was proposed to increase consumer awareness about available services and supports and cultivate stronger connections between residents and community agencies. The First Lady’s



statewide awareness campaign (NurtureNJ), committed to reducing infant and maternal mortality and morbidity and ensuring equitable care among women and children of all races and ethnicities, would be expanded to new state departments and agencies to develop a robust social media strategy to raise awareness.

Rhode Island state departments proposed partnering with advocate organizations, including RI Kids Count, on their public awareness campaigns to ensure that messaging is consistent and complementary and that families have clear, correct information about the B-5 system.

Expanding Direct Services

Ten states proposed expansions of direct services with various partnerships, including home visiting programs and collaborations with family child care home education networks or child care resource and referral agencies to incentivize licensed care and increase capacity or expand Early Head Start-Child Care Partnerships.

California will enhance a partnership between the state and the Tribal Child Care Association of California (TCCAC) by supporting a state staff position to serve as an equity consultant and to work, in part, with TCCAC as a tribal liaison to represent tribal interests and enhance coordination at the state level. In addition, the PDG B-5 funds will allow TCCAC to hire a dedicated, full-time employee to accelerate improvements to the tribal Quality Improvement System. TCCAC also proposes to support an expansion of high-quality programs in identified tribal communities (primarily rural and isolated), including low-income tribal families. To achieve this expansion, TCCAC will enhance infrastructure to improve the overall quality of tribal early learning and care programs through state-tribal partnerships, including revisions to their tribal Quality Improvement System to maximize equitable, culturally relevant parental choices and provide access to high-quality ELC. TCCAC will outreach to local education agencies (LEAs) through culture brokers to collaborate on aligning systems for improving transitions from tribal ELC programs to school districts.

Louisiana plans include increasing the number of three-year-olds served in child care centers in communities with demonstrated partnerships between the state's Pre-K program (LA 4) and child care programs for alignment in diverse settings. All programs will prioritize categorically eligible children, including families experiencing homelessness, children in the child welfare system, and eligible children with disabilities. In addition to immediately serving more economically disadvantaged children where there is the greatest need, this funding will seed multiple demonstrations of how communities can leverage local funds, address child care deserts, and leverage partnerships to expand access to quality early care and education. The lessons learned and promising practices will be shared across the state.

Virginia proposed to expand the number of local pilots to build, expand, and sustain responsive local early childhood systems. With PDG B-5 funding, the Virginia Department of Education and the Virginia Early Childhood Foundation are partnering to ensure the inclusion of the state's



most vulnerable families and children in the planned pilot projects: families experiencing financial hardship or homelessness and the special populations identified in the PDG B-5 initiative, such as infants and toddlers, children with disabilities, dual language learners, and children living in tribal and rural communities. More than 263,000 vulnerable children will be impacted through the grant funding. With PDG B-5, Virginia will specifically focus on including 11 tribal communities, since none were included in the 31 original pilots, by expanding outreach activities and using subgrants to scale their statewide vision with local leaders.

Supporting Preschool to Kindergarten Transitions and Alignment

Twelve (12) states highlighted activities that included partnerships to support smooth transitions and/or alignment of services for children and families from preschool into kindergarten and the early elementary grades.

California highlighted their intention to provide funds to quality local improvement hubs, QCC Consortia, that partner with local school districts, elementary schools, resource and referral agencies, and/or libraries to pilot strategies to ensure smooth transitions between ECE programs and kindergarten options in their communities. California pointed to a partnership in Los Angeles as part of the Occupation Health & Safety Transition Summit Demonstration Project between the Office of Head Start, the Los Angeles County Office of Education, and the Head Start-State Collaboration Office as a potential model for enhancing and supporting successful transitions for all children and their families.

Taking a different approach, **North Carolina** proposed to build on their ongoing efforts to improve transitions through a new partnership with the Exceptional Children's Assistance Center. This partnership will support North Carolina by providing resources, tools, and training to ease the transition from early intervention to preschool services including family-friendly fact sheets with tips to prepare parents for their children's transition to kindergarten, and suggesting questions parents can ask to build productive relationships with their children's teachers.

Missouri proposed a partnership with the Missouri Association of Elementary School Principals to offer a 1-year program to increase principals' knowledge and understanding of the state's early childhood system and identified "an emphasis on seamless transitions between [ECE] programs and schools."

Similarly, **New Hampshire** proposed to partner with the University of New Hampshire to work with local community collaboratives across the birth-to-third-grade workforce, including child care providers, Head Start staff, and early elementary teachers and administrators, to ensure successful transitions for children and families. They proposed to focus the initial efforts on best practices related to play-based learning, to work toward building "an infrastructure to bring [ECE] professionals together around the importance of developmentally appropriate practice."



Building and Connecting Data Systems

States describe their progress in developing integrated data systems to provide information that strengthens their early childhood mixed delivery systems and links data across ECE programs, including the ability to link to health programs. Fourteen (14) states proposed to build new statewide early childhood data systems or connect new data resources to their existing data systems. Some hired contractors to do the work, but partnerships were formed among various state agencies and other entities to connect data that will inform long-term policy decisions.

Maryland proposed to modernize its data system, MD THINK, to improve collaboration and coordination. Maryland has experienced success integrating the data systems of Maryland's Departments of Human Services, Health, Juvenile Services, and Health Benefit Exchange. These agencies plan to create a coordinated process for application, eligibility determination, and enrollment in ECE programs; create a unique child identifier for every child in the data system; and enable state leadership to engage in continuous quality improvement and better data-informed decision-making.

Michigan described the data governance process they developed under the initial PDG B-5 grant, including an Advisory Committee, Data Development Group, and pilot implementation groups devoted to individual project components. They proposed to leverage PDG B-5 renewal grant funds to expand their data partners to include tribes and the Michigan Department of Health and Human Services and to address privacy considerations as identified by the Health Insurance Portability and Accountability Act (HIPAA).

Four (4) states proposed to use PDG B-5 renewal funds to create portals (i.e., "one-stop-shop" or "no-wrong-door" programs) to harness the power of connected data to increase efficiency and ensure that parents are connected to all public programs available to meet their needs. For example, **Kansas** described their previous effort to pilot a multi-sector, network-building tool in partnership with the Maternal Infant and Early Childhood Home Visiting program. Their Integrated Referral and Intake System (IRIS) is a web-based bidirectional referral application to promote efficient access to services for families, which allows the state to track post-referral enrollment data. Under the PDG B-5 renewal grant, they proposed to expand their existing list of early childhood, health care, family support, public health, and behavioral health sector partners and scale IRIS across communities statewide.

Improving Child Health and Nutrition Referrals

Applicants were asked to describe their active partnerships to ensure all families, including tribal families, families with English as a second language, and families who have a young child with disabilities, are informed about and connected to other needed services including nutrition, health, and mental health services. In response to this requirement, 15 states described a variety of approaches and partnerships to support the overall health of young children.



Help Me Grow is the most common partnership proposed by one third of all states seeking to leverage partnerships to ensure the healthy development of young children and connect families to needed services.

Help Me Grow is a national model of a provider directory linking community resources able to connect service providers with families and each other through an interconnected network. Help Me Grow is comprised of four major components: centralized access points, family and community outreach, child health care provider outreach, and data collection and analysis. Families can access resources like parent classes, medical clinics, and foodbanks, as well as receive free development screenings for young children and referrals to other early intervention services.

For example, **Minnesota**, a state with a previously established Help Me Grow program, proposed to expand its program through a partnership with Minnesota state agencies (the Department of Human Services, the Department of Education, and the Department of Health) to provide a one-stop option (Help Me Connect) to help families and referring providers more easily find and connect to a wide range of prenatal and early childhood (birth through 8) services that support healthy child development and family well-being, including basic needs.

New York proposed to make infant and early childhood mental health consultations at the classroom level a reimbursable Medicaid service in all early childhood programs. The state first

explored this approach as part of the Department of Health's First 1,000 Days on Medicaid initiative. The state proposes to use PDG B-5 renewal funds to implement this innovative approach to ensure that infants and young children receive preventative health care services.

Alabama proposed to support a Comprehensive Care Partnership with the Alabama Child Health Improvement Alliance (ACHIA) using PDG B-5 renewal funding to develop new programs with pediatricians that would enable them to develop strategies to deliver comprehensive care to young children, refine early interventions and screening for children, and promote general health and well-being.

California, under the direction of the Surgeon General, the Center for Early Childhood Professional Development Innovation (CPDI), and Community Based Organizations (CBOs), proposed to develop training on implicit bias, trauma-informed care (TIC), the pyramid model, Adverse Childhood Experiences (ACEs), and early mental health. The cross-sector training was proposed for state staff working in six state departments and libraries that support home visiting, early learning and care (ELC), family support services, children with disabilities, foster care, and more. This would allow for a more family-focused approach to their work and support families as they access critical services across multiple programs through the expanded My Child Care Plan navigation system.



Florida plans to enhance mapping capacity with PDG B-5 renewal funding to include health care, nutrition, and mental health services to help encourage cross-disciplinary partnerships and create synergy across local agencies to serve families more holistically.

Providing Early Intervention and Preschool Special Education Services

States were encouraged to develop partnerships between Individuals with Disabilities Education Act (IDEA) service agencies and ECE programs to increase the number of high-quality inclusive ECE programs available to children with special needs and their families. Eighteen (18) states answered this call to action by proposing partnerships focused on supporting early identification of children with special needs and ensuring access to inclusive ECE experiences for those children.

Another example of partnerships between state agencies and ECE programs is evident in **Illinois'** proposal to use PDG B-5 renewal funds to partner the state's IDEA Part C and Part B 619 with Illinois' Early CHOICES program. Early CHOICES is an organization that advocates for the inclusion of children with disabilities in early childhood programs by supporting families with young children who have an existing disability or are at risk of a developmental delay by providing resources, community training, and coaching to families. Using PDG B-5 initial funds, this partnership developed new and updated resources, translated materials for public awareness around inclusion, and developed new strategies for public awareness. PDG B-5 renewal funding will allow the Early CHOICES program to expand these efforts. Early CHOICES drafted recommendations that were used to shape the scope of two Illinois PDG B-5 activities to support families with developmental screenings, explain their rights to inclusion in programs, and help them navigate the state's Quality Rating Improvement System (QRIS) to locate high-quality inclusive programs. Early CHOICES includes bilingual staff and interpretation services for families with English as a second language.

South Carolina proposed that the IDEA Part C and Part B 619 agencies will continue to partner with organizations that support families with concerns about their children's development and to build on existing work. In addition to Help Me Grow, a provider directory linking community resources to service providers, will work with Family Connection of SC to provide families with knowledge, service options, and transition support for their children with disabilities. Family Connection of SC's Parent Training and Information Center proposed to expand their peer-to-peer parent support model, Education Partners, to an underserved region of the state. This model trains experienced parents of children with disabilities to support less experienced parents of young children in understanding their rights and responsibilities and to help them develop advocacy skills as their children transition from Part C to Part B of IDEA and then into kindergarten. Renewal funds will also be used to increase the availability of evidence-based parent trainings targeting children with disabilities. The state will also partner with PASOs, an advocacy organization serving Latino communities. PASOs support Bilingual Community Health



Workers to conduct home visits to identify early developmental concerns through screenings and help parents find appropriate services.

Connecting Families to Services and Promoting Family Engagement

The renewal grant FOA explicitly asked applicants to “describe partnerships to ensure all parents are informed about and connected to other services needed, such as housing, food, training or employment programs, income supports, and efforts to support parents with related child care.” Twenty-two (22) states proposed partnerships to support better family engagement.

For example, with their PDG B-5 renewal grant, **Connecticut** proposed to expand and strengthen existing partnerships between community-based ECE programs and local elementary schools in six ECE communities of practice (COPs) that were established with the initial PDG B-5 funding. The state describes these partnerships as the mechanism to implement The Parent Teacher Home Visit Project, featured in a case study in the Dual Capacity Building Framework for Family and Community Partnerships commissioned by the U.S. Department of Education.

A new family council is planned in **Colorado** to provide authentic feedback on early childhood policies, strategies, and programs. The CO Head Start Association and the Head Start State Collaboration Office plan to recruit members from Head Start programs representing the full landscape of Colorado families to participate in the Family Voice Council. This partnership would ensure the integration of families of children with developmental delays or disabilities, families experiencing homelessness, families participating in the child welfare system, and families of children who are dual language learners (EHS/HS programs prioritize children whose families meet these requirements). Additional partners, including the CO Department of Human Services Tribal Liaison and Refugee Services Manager, will be engaged to recruit families from populations that are often underrepresented or hard to reach.

Rhode Island strongly believes that increasing family engagement in all aspects of the B-5 system will improve outcomes. They propose building on existing work to develop a Family Council that will include members from communities across the state from Early Intervention, child care, family home visiting, Early Head Start and Head Start, and recipients of child welfare. The state will request that early childhood programs and partners support continuous recruitment for potential members to the Family Council to ensure diverse representation. The Family Council will appoint representatives to serve on the Early Learning Council to advise and ensure parent voice is reflected in the B-5 governance structure. In addition, the state will ensure that translation services are available for families who want to participate but speak a language other than English. They will also evaluate the success of the initial PDG B-5 partnership with the RI Parent Information Network (RIPIN) that focused on facilitating family engagement as it related to strategic planning. If the Family Council proves successful, RI will expand the model.



With the PDG B-5 renewal award, communities across **Virginia** will dramatically improve the way they engage and respond to the needs of families and improve the quality of ECE settings. Intentional capacity building will ensure more families are engaged in local planning and development efforts. This increased capacity and additional modes of collaboration will be embedded by the time PDG B-5 is completed, resulting in better and more effective coordination and use of funding. In the last two years of PDG B-5, VA will support communities establishing more durable local governance, leverage communities' understanding of their B-5 systems, and will use new funding and resources to drive improvements in access, quality, and family engagement. As the key private partner and liaison to the communities, the Virginia Early Childhood Foundation will continue to support communities and provide technical assistance to strengthen public-private partnerships and encourage blending and/or braiding available funds; PDG-funded resources will continue to scale a community self-assessment resource and a toolkit for effectively integrating varied existing revenue streams to support the cost of ECE services.

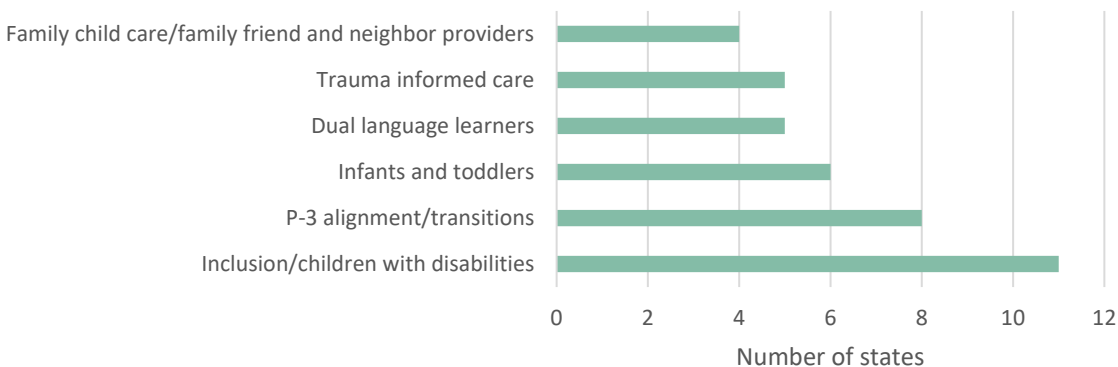
Enhancing Workforce and Professional Development

All 23 states proposed partnerships to expand the ECE workforce and achieve its professional learning goals. In some states, these partnerships involved resource and referral agencies or other groups with connections to ECE providers to help them access available training opportunities. In other states, the partnerships involved collaborating with IHEs or other organizations in developing and deploying professional learning content. Nine states proposed developing partnerships with credentialing organizations or IHEs to establish new degree programs or modularize existing course content to better support degree attainment among existing or potential ECE providers.

Furthermore, many states shared an intention to focus on supporting professional learning opportunities for ECE providers on specific topics. Exhibit 4 describes the most common professional learning topics: supporting family child care homes (FCCs) and family friend and neighbor (FFN) providers (4 states), trauma-informed care (5 states), supporting the development of dual language learners (5 states), meeting the needs of infants and toddlers (6 states), P-3 alignment and effective transitions (8 states), identification and inclusion of children with disabilities (11 states). Examples of partnerships and activities in several states follow.



Exhibit 4. Professional Learning Partnerships: Topics



Nebraska proposed that the Nebraska Children and Families Foundation (NCFE) partner with Midland Latino Community Development to implement a U.S. Department of Health and Human Services (DHHS) Office of Refugee Resettlement grant to bring training on early childhood development, business practices in family child care homes, and understanding licensing regulations to refugees providing family, friend, and neighbor care in four communities. In addition, an expanded outreach for training and coaching to Latinx FFN providers was proposed using PDG B-5 bilingual consultants to conduct outreach and provide quality improvement resources to informal caregivers.

The Department of Children, Youth and Families (DCYF) in **Washington** proposed plans to develop an option for educators to meet their role requirements through an experience-based competency demonstration, and to explore a secondary option designed in partnership with state training organizations and the higher education community to engage in community-based training with a built-in transition into Stackable Certificates. This approach decreases accessibility barriers and increases the diversity of the workforce, especially in rural and underserved areas.

The Department of Early Care and Learning (DECAL) in **Georgia** proposed to develop and pilot an apprenticeship program to build the supply of credentialed early educators in the state. This program would provide individuals with on-the-job training and supports that would lead to the attainment of a credential and accommodate non-traditional students who are also working. DECAL will work with the Technical College System of Georgia to identify a partnering technical college and early learning center to develop and implement the pilot. The goal would be to develop an alternate pathway for the early learning workforce and to understand what supports, funds, and partnerships would be needed to take the apprenticeship model to scale in the state.

To align credentials for the workforce, **Oregon** proposed to support a Higher Education Consortia. In Central Oregon and on the Southwest Coast of Oregon (both rural areas), community colleges, four-year institutions, and professional development providers created



consortia that allow providers to achieve degrees and credentials across regional institutions. These consortia are designed to support the existing early childhood workforce, with wrap-around academic, language, and other supports. Using PDG B-5 renewal funds, Oregon proposes to build on this work by modernizing their professional development registry to capture aligned credentials and revise their pathways “steps” for ECE professionals.

In some cases, states proposed to work with professional learning partners to provide coaching or other training opportunities for ECE professionals to improve their family engagement approach. **Alabama** proposed to expand a formal partnership with the state’s Department of Human Resources to provide coaching to child care programs with a focus on supporting those programs to exceed expectations in the family engagement section of the state’s Quality Rating Improvement System matrix. In addition, Alabama proposed a partnership with the Race Matters Institute to support ECE leadership and state staff in sorting through the drivers of inequities by developing a “back map” visualizing these drivers and their interactions as a first step toward addressing the role of race-based and other inequities in early childhood and their impacts on the children and families of Alabama.

Impact of COVID-19

Months after the PDG B-5 renewal grants were awarded, the COVID-19 pandemic dramatically shifted the landscape of early childhood programs and the work of those supporting them. Early childhood services, such as preschool, provider professional development, mental health services, and home visiting programs, were all forced to shift to virtual or hybrid offerings or pause entirely. Many state grant staff transitioned to working from home as they adapted planned grant activities and juggled competing pandemic-related demands.



Leaders from five of the 23 renewal states were interviewed to share the ways in which their states (Alabama, California, Nebraska, Rhode Island, and Virginia) responded to the COVID-19 pandemic and continued to best serve early childhood professionals, children, and families. Highlights from the interviews discussed major shifts in programming and opportunities to improve the planned initiatives. The major findings from the interviews are categorized in four areas below.

Partnerships Between State Agencies

Despite the novel challenges created by the pandemic, states with long-established partnerships were able to adapt smoothly to changes in their grant activities and pivot swiftly to respond to the needs of families and providers. States reported that existing structures,



personal relationships, and channels of communication were essential to navigating the challenges of the pandemic.

The **Virginia** Department of Education has worked closely with the University of Virginia (UVA) and the Virginia Early Childhood Foundation (VECF) for many years to support B-5 activities. These partners were heavily involved with writing the PDG B-5 renewal application and were responsible for many of the implementation activities. When the pandemic hit, these three partners continued to hold biweekly three-hour working meetings to discuss the states' pandemic response strategies. Virginia leaders site their open communication with UVA and VECF as crucial to the success of their work throughout the pandemic.

Rhode Island leveraged strong existing partnerships among the state's departments of education, human services, and health to fill gaps as each agency addressed specific components of pandemic relief. Rhode Island leaders noted that PDG B-5 provided a supportive structure for the collaboration of these agencies to address their early childhood mixed delivery system.

Leaders from **Alabama's** Department of Early Childhood Education (AL DECE) noted that the pandemic brought certain issues to the forefront of conversations regarding the state's early childhood mixed delivery system. Alabama's B-5 Steering Committee, which includes members from the Alabama departments of human resources, mental health, rehabilitation services; the AL House of Representatives; programs such as Medicaid, Early Intervention; and family services among others, shifted conversations to address the needs of Alabama's rural communities and the barriers to providing high quality child care.

Delays in Establishing New Partnerships and Activities

Some state leaders mentioned delays in executing contracts with their partner organizations due to state departments shifting to working from home and competing demands on the state agencies. In some cases, partners in health-related departments or organizations were required to support COVID-19 related priorities by supplying early care and education providers with personal protective equipment or vaccine rollout efforts and were unable to complete certain grant activities as planned. States experienced further delays in hiring new staff to start specific grant projects.

For example, **Virginia** had included a focus on creating new partnerships with tribal communities to establish tribal advisory bodies. However, because these partnerships were new and did not have existing infrastructure, this work has experienced delays.

Alabama had planned a collaboration between the Alabama Commission on Higher Education and the Alabama Office of Apprenticeship to create clearer pathways to ECE providers and align the Child Development Associate (CDA), Associate (AA) and Bachelor's (BA) degrees. programs. This work was delayed by many months as the Department of Early Childhood Education shifted priorities to respond to COVID-19 needs.



Shifting to Virtual Services

Providers, state staff, and partners were required to shift activities to virtual platforms. In some cases, early learning programs also switched to virtual activities. Partnerships which intended to provide direct services to children and providers also shifted.

All leaders we interviewed have worked with their teams and partners to adapt methods and to work with the teachers, family child care providers, families, and the children they serve. It seems that after a year of COVID-19 interruptions, renewal activities are getting back on track and the states are moving forward in positive ways to advance their work.

California convenes a State Stewardship Team (SST) quarterly to discuss implementation and sustainability of PDG B-5 activities. This body comprises 17 state agencies and includes many executive representatives such as the Department of Aging, the Commission on Teacher Credentialing, First 5 California, and State Board of Education. Because the state had established such strong collaborations among agencies and were accustomed to partnering virtually as a geographically large state, they experienced minimal friction when transitioning to an online environment. Instead, they modified their meeting space to host conversations relevant to the changing landscape and coordinated the state response to COVID-19.

Nebraska has a long-standing partnership with the Buffett Early Childhood Institute at the University of Nebraska. When in-person activities halted in March of 2020, the Buffett Institute continued with their data collection for the needs assessment by holding virtual family focus groups.

In **Alabama**, the Department of Early Childhood Education sustained a strong partnership with the Department of Mental Health to provide infant early childhood mental health consultation in all counties of the state. Despite program closures beginning in March of 2020, consultants switched their meetings, reflective practice, and weekly calls to a virtual or hybrid format. Additionally, the Alabama Department of Education partnered with the Department of Human Resources to administer statewide kindergarten entry assessments to all incoming kindergarteners this year. These data have already informed conversations about summer learning opportunities to address learning loss due to school closures and will be essential to teachers in the coming school year.

Partnerships for Outreach

Rhode Island shifted many family outreach efforts at the start of the school closures to hear directly from families about their needs. This work focused on engaging families through the Parent Caregiver Advisory Council at the Rhode Island Department of Health and directly through service delivery programs to identify and respond to family needs. Rhode Island found that their home visiting program became a strong lifeline for families during the pandemic. Instead of pausing visits, the state made a concerted effort to resume in-person visits. Some



home visiting specialists reported observing greater engagement, attributing greater flexibility to the combination of in-person and virtual activities.

Nebraska, in partnership with the Buffett Institute, included a provider survey in their program performance evaluation plan (PPEP) to learn about the financial, emotional, and mental impacts of COVID-19. This study found that many child care providers were forced to shut down. These data informed the state's response to providers during the program closures.

All states struggled to connect with providers, children, and their families during this time. However, **Alabama's** First Class Pre-K program and First Class Foundations classrooms require strong relationships with participating families and providers. The Alabama Department of Early Childhood Education relied on these existing channels to send clear, unified messaging to families and providers about how to best serve their children in a virtual environment. In some cases, families were able to adapt pieces of Teaching Strategies GOLD®, taking pictures of their children's learning opportunities, and participating in the statewide *#firstclasspreKcontinues* on social media.

Conclusion

The Departments called for the promotion of partnerships as a key component of the PDG B-5 grant initiative to reduce duplication of effort, improve ECE governance and systems building, and ultimately improve services to children and families. All 23 renewal grantees sought ways to build and sustain partnerships within their states to reduce the workload of the lead state agency, leverage expertise of other organizations, and improve direct services to children and families. While these partnerships looked different in each state due to varying state landscapes, governance, and existing relationships, they were all created or sustained to better coordinate a unified B-5 system, and deliver services and supports to providers, children, and families.



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