

Preschool Development Grant Birth through Five Renewal Grant Annual Performance Progress Report

Data Collection Instrument

The purpose of this information collection is to help the Administration for Children and Families (ACF) in consultation with the Department of Education (ED) assess the progress of PDG B-5 Renewal grant recipients. Public reporting burden for this collection of information is estimated to average 15 hours per grantee, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information. This is a mandatory collection of information and replaces the previous Preschool Development Grant Birth through Five (PDG B-5) Renewal Grant Annual Performance Progress Report (APPR). An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information subject to the requirements of the Paperwork Reduction Act of 1995, unless it displays a currently valid OMB control number. The OMB # is OMB #0970-0490 and the expiration date is March 31, 2026. If you have any comments on this collection of information, please contact Richard Gonzales, Richard.Gonzales@acf.hhs.gov.

This APPR is tailored to the specific goals and objectives of the PDG B-5 Renewal grants and will allow ACF to collect useful information from grantees in a uniform and systematic manner. This APPR will be collected annually and supplement the standard ACF-required Quarterly Program Performance Report.

This APPR includes both quantitative and qualitative (narrative) measures of your state's progress. Throughout the report, please use data from your comprehensive Needs Assessment (NA), Strategic Plan, Early Childhood Integrated Data System (ECIDS) (if applicable), Program Performance Evaluation Plan (PPEP) (if applicable), and other relevant data sources, to articulate your progress implementing the grant.

Section A. Strengthening the Early Childhood Care and Education (ECCE) Workforce

1. Describe how you used PDG B-5 funds to support local or statewide efforts to support ECCE educators and caregivers to earn a credential or degree, including but not limited to Child Development Associate (CDA), state certificate, or other 2- or 4-year degree in a field related to ECE (as defined by the state) earned at an accredited institution of higher education. Please include any efforts to make credential or degree attainment more accessible and affordable, such as through practice-based learning, registered apprenticeships, Grow Your Own initiatives, accessible coursework (e.g., online, location, multilingual), stackable credentials and articulation agreements, etc.
2. Describe how you used PDG B-5 funds to support local or statewide efforts to improve ECCE workforce compensation, including pay and benefits. Please include efforts to develop salary scales or wage ladders, conduct compensation studies, increase pay and benefits, provide access to or navigation support to take up public benefits, provide

recruitment or retention incentives, improve workplace conditions, or make other systems or program improvements to improve compensation.

3. What supports did you provide to ECCE educators and caregivers through PDG B-5 funds to improve compensation (pay and benefits) or help them progress in their education, professional development, and career pathway? **Check all that apply.** If available, specify how many people received each type of support.

- ☐ Scholarships (for formal education institutions) #_____
- ☐ Financial bonus/wage supplements tied to education levels #_____
- ☐ Financial bonus/wage supplements NOT tied to education levels #_____
- ☐ Career advisors, mentors, coaches, or consultants #_____
- ☐ Registered apprenticeships #_____
- ☐ Reimbursement for training #_____
- ☐ Loans #_____
- ☐ Substitutes, leave (paid or unpaid) for professional development #_____
- ☐ Insurance coverage (health and/or dental) #_____
- ☐ Retirement benefits #_____
- ☐ Loan forgiveness #_____
- ☐ Mental health/workplace wellness programs #_____
- ☐ Other. Describe: _____
- ☐ N/A. Describe: _____

4. How much and what percent of your state's total PDG B-5 funds are dedicated to initiatives supporting the ECCE workforce?
5. Describe how and to what extent you are using PDG B-5 funds to support ECCE educators and caregivers in traditionally marginalized or underserved communities, and across settings and age groups. Specify any specific underserved groups, populations, setting types, age groups served or areas to which you are targeting PDG B-5-funded supports. If available, use data to support your response and provide the number or percentage of people in these groups who received PDG B-5 support.

Section B. Expanding Access to High Quality ECCE through Subgrants

6. Describe how PDG B-5 funds have helped programs to serve more children and families and improve the overall participation of all children in a mixed delivery system. Please ensure your response includes specific mention of infants and toddlers, vulnerable, underserved, or unserved children and children with, or at risk for, disabilities.
7. Did you use PDG B-5 funds for subgrants/contracts to expand access to ECCE programs and/or improve the quality of existing programs?
- ☐ Yes.
 - If yes, total amount used for subgrants \$ _____

- If yes, what percent of your total grant award was used for subgrants (not including state match)? % _____
 - Complete **Table 1 (if data are available)**
- ☐ No.
- If no, please describe why your state decided not to use subgrants to increase access to high-quality ECCE services.
8. How did you use PDG B-5 funds to increase access to quality ECCE services?
- ☐ Create new slots in existing programs across the state # _____
 - Infant and toddler (birth to 3) slots # _____ (if available)
 - Preschool (ages 3-5) slots # _____ (if available)
 - ☐ Create new slots in new programs across the state # _____
 - Infant and toddler (birth to 3) slots # _____ (if available) _
 - Preschool (ages 3-5) slots # _____ (if available)
 - ☐ Improve quality of existing slots in programs across the state # _____
 - Describe your approach(es) to improving quality of any existing or new slots
 - ☐ Improve quality without direct impact on ECCE slots.
 - If your quality improvement efforts cannot be directly tied to a # of ECCE slots, describe your approach(es) to improving quality and anticipated impacts of those efforts.
9. Describe how and to what extent you are using PDG B-5 funds—both subgrants and non-subgrants—to expand access to quality ECCE programs in traditionally marginalized or underserved communities. Please share how your state identified underserved areas or communities and specify any specific underserved groups, populations, settings, or areas to which you are targeting PDG B-5-funded supports. If available, use data to support your response, and provide the number or percentage of people in these groups who received PDG B-5 support.

Table 1. Communities served through PDG B-5 Subgrants					
Local PDG-funded ECCE program/entity Name	Type of ECCE Programs Supported	Program Address (Address, City, State, Zip code)	County/ counties served by Program	Amount of funding by County	Brief description of how PDG funds were used

Section C. Improving ECCE Program Quality

10. What approaches have you used with PDG B-5 funds to improve program quality?

Check all that apply.

- ☐ Extending the duration of existing slots to support full-day/full-year. # slots _____ (if available)
- ☐ Improving class size and/or adult/child ratios.
- ☐ Expanding or revising program quality standards.
- ☐ Monitoring, or continuous quality improvement efforts.
- ☐ Developmental, social-emotional, health, and behavioral health supports.
- ☐ Inclusion of children with or at risk of disabilities.
- ☐ Implementing culturally and/or linguistically responsive practices for children, families, and/or providers.
- ☐ Addressing suspension, expulsion, and other exclusionary practices.
- ☐ Trauma-informed approaches for ECCE programs.
- ☐ Support transitions across early childhood programs and into the early elementary grades.
- ☐ Efforts to improve health and safety.
- ☐ Other comprehensive services. Describe: _____
- ☐ Other quality improvement efforts. Describe: _____

Section D. Engaging Families & Increasing Family Voice and Choice in Systems and Program Decisions

11. How have you used PDG B-5 funds to maximize family and parental choice, knowledge of ECCE programs, or engagement as leaders in programs within the state's mixed delivery system, including helping parents overcome barriers to participate in ECCE programs? **Check all that apply.**

- ☐ Coordinating application, eligibility, and enrollment of families in ECCE and other programs and services across a range of programs to help meet family needs.
- ☐ Compensating parents through stipends, gift cards or other supports for participation in the development or updating of your statewide Needs Assessment and/or Strategic Plan.
- ☐ Increasing parents' awareness of the availability and quality of early childhood programs in the mixed delivery system.
- ☐ Compensating parents and caregivers for participating in state/local-level advisory or policy development or implementation bodies.
- ☐ Offering language services, transportation, child care, and/or other supports to minimize barriers to meaningful engagement of families as leaders in policy and program decisions.

- ☐ Targeting family outreach and engagement strategies to families from historically underserved communities.
- ☐ Other strategies. Describe: _____

12. Describe how you have engaged family representatives as leaders in state-level early childhood initiatives, indicating which groups family representatives are engaged in and their role. Specifically address how you have engaged new and diverse family representatives in these efforts (e.g., racial-, cultural-, and geographic-diversity), and any successes realized in using their voices.

- ☐ How many family representatives have you engaged as leaders in state-level early childhood initiatives? # _____

Section E. PDG B-5 Program Implementation and Systems Coordination

13. Discuss how you used PDG B-5 funds to support the development or enhancement of your state B-5 early childhood care and education (ECCE) system, and not any significant barriers and challenges.

14. How have PDG B-5 funds helped you improve the coordination and delivery of early care and education services across program models and funding streams in the state's mixed delivery system? Include in your response any efforts to develop and implement coordinated application, eligibility, and enrollment systems across multiple ECCE programs in the mixed delivery system, as well as other efforts to engage and coordinate across programs. If available, use data to support your response. If available, provide the amount of PDG B-5 funds dedicated to developing and implementing coordinated application, eligibility, and enrollment systems.

15. How have PDG B-5 funds helped improve and expand use of your state's integrated data system, including connecting ECCE program and K-12 data? Include in your response any progress related to ECIDS, State Longitudinal Data Systems, and distinct (unduplicated) counts of children and families served across the mixed delivery system. Please clearly state if you are using PDG B-5 funds to link data across the key programs in the mixed delivery system, and the amount of PDG B-5 funds invested in data systems development.

16. Describe how PDG B-5 funds were used to improve the coordination and referral of programs across the state B-5 ECCE system serving children ages 0-5 children and their families and caregivers from traditionally underserved or marginalized groups, and/or those living in traditionally underserved communities or parts of the system.

MEASURE SPECIFICATIONS

<u>SECTION</u>	<u>MEASURE</u>	<u>SPECIFICATIONS</u>
A	3	In determining number of people who received each type of workforce support, include in your APPR those persons whose supports were funded wholly or in part by PDG B-5, including those funded with braided or layered funds.
B	7 – Table 1	Include in this table those programs/entities funded wholly or in part with PDG funds, including those funded with braided or layered funds.
B	8	In determining number of slots under each category (i.e., # of new slots in existing programs, # of new slots in new programs, etc.), include all slots funded either wholly or in part by PDG B-5, including those funded with braided or layered funds.
C	10	In determining number of slots with extended duration, include all slots funded either wholly or in part by PDG B-5, including those funded with braided or layered funds.
D	12	Family representative engaged as leaders in state-level early childhood initiatives include any parent or caregiver who meaningfully participates in a state governing or advisory body supporting implementation or coordination of the state B-5 ECCE system.

DEFINITIONS OF KEY TERMS

In addition to the terms defined here, please also refer back to the most recent PDG B-5 Renewal Grant Notice of Funding Opportunity for additional definitions of key terms and applicable program information and guidance.

<u>Key Term Definitions</u>
<p>Initiatives supporting the ECCE workforce – Includes but is not limited to, any of the following:</p> <ul style="list-style-type: none">• Compensation initiatives, studies (including workforce studies, cost of care studies, and salary/wage studies) and analysis to move early childhood staff, including center-based and family child care providers, to pay parity based on experience and credentials, including wages and benefits in line with elementary educators.• Provision of ongoing practice-based mentoring, coaching, and professional development to address the needs and improve the effectiveness of the PDG B-5 workforce, as the state works on developing its proposed approaches to improving outcomes for children and families.• Supporting access to scholarships and other resources, including substitute pools, transportation subsidies, child care, and place-based programs targeted to help providers and teachers access credentials and degrees.• Provision of health supports, including mental health, for ECCE workforce.
<p>Mixed delivery system—System of ECCE services that are delivered through a combination of programs, providers, and settings, such as Head Start, licensed family and center-based child care programs, public schools, and other community-based organizations, that is supported by a combination of public and private funds.</p>
<p>State B-5 Early Childhood Care and Education System – Core ECCE programs, including the CCDF and state child care, which may include center-based, family child care, and informal care providers; Early Head Start and Head Start programs, including State Head Start Collaboration Offices; the Maternal, Infant, and Early Childhood Home Visiting Program, and other state or locally funded home visiting services; Part C and section 619 of Part B of IDEA; state preschool programs; and programs funded by Title I of the ESEA. In addition, it also includes a wide range of ECCE services that strengthen, engage, and stabilize families and their infants and young children, including supports that target health and wellness, such as Medicaid; the Children's Health Insurance Program; Title V Maternal and Child Health Programs; Healthy Start; Child and Adult Care Food Program (CACFP); and WIC, and the infrastructure components that support these programs and services. When such a system functions well, core ECCE programs are integrated with the services that strengthen, engage, and stabilize families in support of the well-being of infants and young children.</p>
<p>Traditionally marginalized or underserved communities – Communities identified by your state with high concentrations of children and families identified by PDG B-5 grant recipients as those who would most benefit from early childhood programs and services who do not have access to them. These could include, but are not limited to, communities with large concentrations of people of color and others who have been historically underserved, marginalized and adversely affected by persistent poverty and inequality, such as Black,</p>

Latino, Indigenous and Native American persons, Asian Americans and Pacific Islanders and other persons of color; communities with large concentrations of members of religious minorities; rural areas; and child care deserts.

Traditionally marginalized or underserved populations - Children and families identified by applicants as those who would most benefit from early childhood programs and services who do not have access to them. States may wish to use tools such as the Social Vulnerability Index to identify such populations. These could include, but are not limited to, people of color and others who have been historically underserved, marginalized and adversely affected by persistent poverty and inequality, such as Black, Latino, Indigenous and Native American persons, Asian Americans and Pacific Islanders and other persons of color; members of religious minorities; lesbian, gay bisexual, transgender, and queer (LGBTQ+) persons; persons with disabilities; and persons who live in rural areas.

Early Childhood Care and Education (ECCE) programs -This term reflect the definition of the term “early childhood education program,” which is defined in section 103 of the Higher Education Act of 1965 (20 U.S.C. 1003) as (A) a Head Start program or an Early Head Start program carried out under the Head Start Act (42 U.S.C. 9831 et seq.), including a migrant or seasonal Head Start program, an AI/AN Head Start program, or a Head Start program or an Early Head Start program that also receives State funding; (B) a State licensed or regulated child care program; or (C) a program that—(i) serves children from birth through age six that addresses the children’s cognitive (including language, early literacy, and early mathematics), social, emotional, and physical development; and (ii) is—(I) a State pre-kindergarten program; (II) a program authorized under section 619 or part C of the IDEA; or (III) a program operated by a local educational agency.