



**State of Vermont**  
**Race to the Top - Early Learning Challenge**  
**Application for Initial Funding**  
CFDA Number: 84.412A

**APPLICATION FOR INITIAL FUNDING UNDER  
RACE TO THE TOP – EARLY LEARNING CHALLENGE**

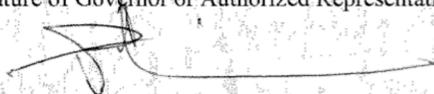
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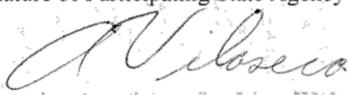
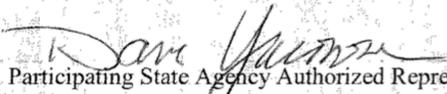
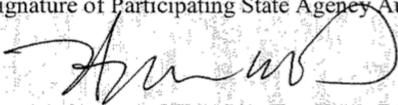
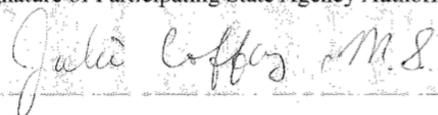
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**I. APPLICATION ASSURANCES AND CERTIFICATIONS**  
**Race to the Top – Early Learning Challenge**  
**(CFDA No. 84.412)**

Legal Name of Applicant (Office of the Governor):  Vermont Governor Peter Shumlin	Applicant's Mailing Address:  109 State Street, Pavilion  Montpelier, VT 05609
Employer Identification Number:  036000264	Organizational DUNS:  809376155
Lead Agency: VT Agency of Human Services  Contact Name: Alyson Richards  <i>(Single point of contact for communication)</i>	Lead Agency Contact Phone: 802-371-9750  Lead Agency Contact Email Address:  Alyson.Richards@state.vt.us
<p>Required Applicant Signatures <i>(Must include signatures from an authorized representative of each Participating State Agency. Insert additional signature blocks as needed below. To simplify the process, signatories may sign on separate Application Assurance forms.):</i></p> <p>To the best of my knowledge and belief, all of the information and data in this application are true and correct.          I further certify that I have read the application, am fully committed to it, and will support its implementation:</p>	
Governor or Authorized Representative of the Governor (Printed Name): Governor Peter Shumlin Signature of Governor or Authorized Representative of the Governor: 	Telephone: 802-828-6403 Date: 10/11/2013
Lead Agency Authorized Representative (Printed Name): Secretary Doug Racine Signature of Lead Agency Authorized Representative: 	Agency Name: VT Agency of Human Services Date: 10/11/2013
Participating State Agency Authorized Representative (Printed Name): Alyson Richards, Director of Special Projects Signature of Participating State Agency Authorized Representative: 	Agency Name: VT Governor's Office Date: 10/11/2013

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Participating State Agency Authorized Representative (Printed Name): Secretary Armando Vilaseca Signature of Participating State Agency Authorized Representative: 	Agency Name: VT Agency of Education Date: 10/11/2013
Participating State Agency Authorized Representative (Printed Name): Commissioner Dave Yacovone Signature of Participating State Agency Authorized Representative: 	Agency Name: VT Department for Children and Families Date: 10/11/2013
Participating State Agency Authorized Representative (Printed Name): Commissioner Harry Chen Signature of Participating State Agency Authorized Representative: 	Agency Name: VT Department of Health Date: 10/11/2013
Participating State Agency Authorized Representative (Printed Name): Julie Coffey, Executive Director Signature of Participating State Agency Authorized Representative: 	Agency Name: Building Bright Futures Council Date: 10/11/2013

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**Accountability, Transparency, and Reporting Assurances**

The Governor or his/her authorized representative assures that the State will comply with all applicable assurances in OMB Standard Forms 424B and D (Assurances for Non-Construction and Construction Programs), including the assurances relating to the legal authority to apply for assistance; access to records; conflict of interest; merit systems; nondiscrimination; Hatch Act provisions; labor standards, including Davis-Bacon prevailing wages; flood hazards; historic preservation; protection of human subjects; animal welfare; lead-based paint; Single Audit Act; and the general agreement to comply with all applicable Federal laws, executive orders, and regulations.

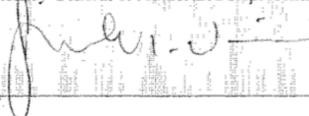
- With respect to the certification regarding lobbying in Department Form 80-0013, no Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the making or renewal of Federal grants under this program; the State will complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," when required (34 C.F.R. Part 82, Appendix B); and the State will require the full certification, as set forth in 34 C.F.R. Part 82, Appendix A, in the award documents for all subawards at all tiers.
- The State and other entities will comply with the following provisions of the Education Department General Administrative Regulations (EDGAR), as applicable: 34 CFR Part 74 -- Administration of Grants and Agreements with Institutions of Higher Education, Hospitals, and Other Non-Profit Organizations; 34 CFR Part 76 -- State-Administered Programs, including the construction requirements in section 75.600 through 75.617 that are incorporated by reference in section 76.600; 34 CFR Part 77 -- Definitions that Apply to Department Regulations; 34 CFR Part 80 -- Uniform Administrative Requirements for Grants and Cooperative Agreements to State and Local Governments, including the procurement provisions; 34 CFR Part 81 -- General Education Provisions Act—Enforcement; 34 CFR Part 82 -- New Restrictions on Lobbying; and with the debarment and suspension regulations found at 2 CFR Part 3485.

Governor or Authorized Representative of the Governor (Printed Name):	
Governor Peter Shumlin	
Signature: 	Date: 10/11/2013

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**State Attorney General Certification**

State Attorney General or Authorized Representative of the Attorney General Certification	
I certify that the State's description of, and statements and conclusions in its application concerning, State law, statute, and regulation are complete and accurate, and constitute a reasonable interpretation of State law, statute, and regulation: -	
State Attorney General or Authorized Representative of the Attorney General (Printed Name): Joseph L. Winn	Telephone: (802) 769-2175
Signature of the State Attorney General or Authorized Representative of the Attorney General : 	Date: 10/01/13

**V. ELIGIBILITY REQUIREMENTS**

*The State must meet the following requirements to be eligible to compete for funding under this program:*

(a) The State has not previously received an RTT-ELC grant.

(b) The Lead Agency must have executed with each Participating State Agency a Memorandum of Understanding (MOU) or other binding agreement that the State must attach to its application, describing the Participating State Agency’s level of participation in the grant. (See section XIII.) At a minimum, the MOU or other binding agreement must include an assurance that the Participating State Agency agrees to use, to the extent applicable--

- (1) A set of statewide Early Learning and Development Standards;
- (2) A set of statewide Program Standards;
- (3) A statewide Tiered Quality Rating and Improvement System; and
- (4) A statewide Workforce Knowledge and Competency Framework and progression of credentials.

List of Participating State Agencies:

*The applicant should list below all Participating State Agencies that administer public funds related to early learning and development, including at a minimum: the agencies that administer or supervise the administration of CCDF, the section 619 of part B of IDEA and part C of IDEA programs, State-funded preschool, home visiting, Title I of ESEA, the Head Start State Collaboration Grant, and the Title V Maternal and Child Care Block Grant, as well as the State Advisory Council on Early Childhood Education and Care, the State’s Child Care Licensing Agency, and the State Education Agency.*

*For each Participating State Agency, the applicant should provide a cross-reference to the place within the application where the MOU or other binding agreement can be found. Insert additional rows if necessary. The Departments will determine eligibility.*

<b>Participating State Agency Name (Indicate the Lead Agency)</b>	<b>MOU Location in Application</b>	<b>Funds/Program(s) administered by the Participating State Agency</b>
VT Agency of Education	Appendix III	State Education Agency, Section 619 of Part B of IDEA, Title 1 of ESEA, co-administrator State-funded preschool, CACFP.
VT Department for Children and Families, within the	Appendix III	CCDF, section 619 of Part C of IDEA, the Head Start State Collaboration Grant,

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<i>Agency of Human Services* (Lead Fiscal Agency)</i>		State’s Child Care Licensing Agency, co-administrator State-funded preschool, co-administrator Home Visiting, CBCAP.
VT Department of Health within the <i>Agency of Human Services * (Lead Fiscal Agency)</i>	Appendix III	Title V Maternal and Child Care Block Grant, MIECHV, LAUNCH.
Building Bright Futures Council	Appendix III	Designated State Advisory Council on Early Childhood Education and Care
Vermont Office of the Governor* (Lead Program Agency)	Appendix 3	No public funds or programs administered, serves as coordinator of VT RTTT ELC State Management Team and provides oversight for VT RTT ELC program grant management.

(c) There must be an active Maternal, Infant, and Early Childhood Home Visiting (MIECHV) program in the State, either through the State under section 511(c) of Title V of the Social Security Act, as added by section 2951 of the Affordable Care Act of 2010 (Pub. L. 111-148), or through an eligible non-profit organization under section 511(h)(2)(B).

*The State certifies that it has an active MIECHV program in the State, either through the State or through an eligible non-profit organization. The Departments will determine eligibility.*

Yes

No

## **VI. SELECTION CRITERIA**

*Selection criteria are the focal point of the application and peer review. A panel of peer reviewers will evaluate the applications based on the extent to which the selection criteria are addressed.*

### **Core Areas -- Sections (A) and (B)**

*States must address in their application all of the selection criteria in the Core Areas.*

#### **A. Successful State Systems**

(A)(1) Demonstrating past commitment to early learning and development. (20 points)

The extent to which the State has demonstrated past commitment to and investment in high-quality, accessible Early Learning and Development Programs and services for Children with High Needs, as evidenced by the State's—

(a) Financial investment, from five years ago to the present, in Early Learning and Development Programs, including the amount of these investments in relation to the size of the State's population of Children with High Needs during this time period;

(b) Increasing, from the previous five years to the present, the number of Children with High Needs participating in Early Learning and Development Programs;

(c) Existing early learning and development legislation, policies, or practices; and

(d) Current status in key areas that form the building blocks for a high-quality early learning and development system, including Early Learning and Development Standards, Comprehensive Assessment Systems, health promotion practices, family engagement strategies, the development of Early Childhood Educators, Kindergarten Entry Assessments, and effective data practices.

#### **Section A1: Past commitment to early learning and development**

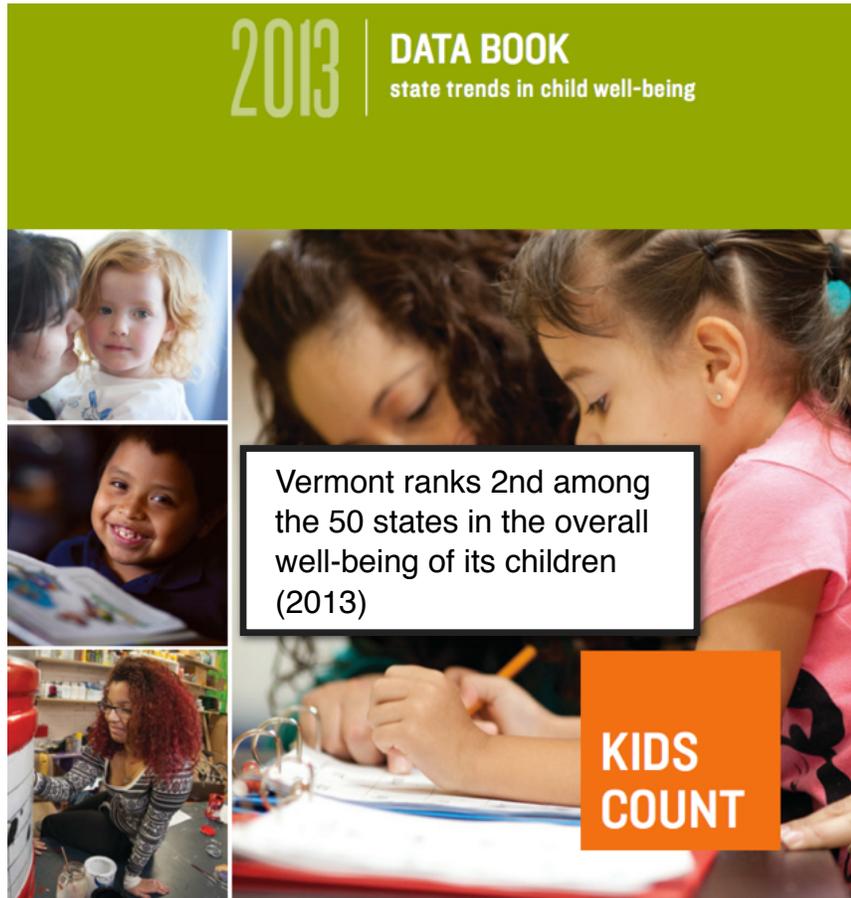
##### **The Vermont Early Childhood Story: Where We've Been, Where We Are, and Where We're Going**

The state of Vermont has demonstrated a strong and enduring commitment to the early learning and development of young children, particularly children with high needs, that encompasses all of the key reform areas articulated in the Race To The Top - Early Learning Challenge (RTT-ELC).

This commitment is ongoing. As evidenced throughout this application, Vermont's governors – particularly the current governor, Peter Shumlin – have made major commitments to

Vermont's children. Governor Shumlin stated this year in his Second Inaugural Address:

The evidence is overwhelming: the earlier we invest in our children, the healthier, more productive lives they will have. Taxpayers win too, since every dollar we invest in early childhood education saves seven dollars in the future.



**Figure 1: Vermont's Kids Count Ranking, 2013**

In this application, Vermont seeks to apply innovative thinking to developing productive people, starting in infancy. We believe that for a child to arrive at the schoolhouse door ready to succeed in school and in life she must enter that door with vibrant health, emotional security, social competence, curiosity and capability. We know from experience and from ever growing scientific evidence that, while this is the potential for all children, it is only realized when families, communities, public and private investors, and state policymakers collectively commit to assuring children's safety, health, optimal development and access to developmentally beneficial early learning and development programs and services.

Our work is informed by developmental science, evidence informed practice and on-going evaluation of results. We pay close attention to the real lives and experiences of families raising children in our predominantly rural communities – their needs and priorities are the focus and center of our legislation, policies, and practice. We have a strong history of commitment to building a high-quality early learning and development system for all Vermont children and believe that our most vulnerable, and often hardest to reach, high needs children are best served in this context.



Vermont is a good place to be a child.



Vermont became a good place to be a child because of longstanding political and financial investment in children.



Vermont is doing well for its children, but not all of Vermont's children are thriving.



The RTT-ELC grant can further Vermont's progress for children, particularly those with high needs.

**Figure 2: The Vermont Story**

Overall, the story Vermont seeks to tell is one of longstanding commitment to children, and ongoing initiatives to improve early learning and development programs and services, particularly for children with high needs. There are four key elements to this story:

- **Vermont is a good place to be a child.**
  - According to the Annie E. Casey Foundation's *Kids Count* report (2013), Vermont ranks 2 among 50 states in the overall well-being of its children. It

ranks 9<sup>th</sup> overall for economic well-being, 3<sup>rd</sup> overall for education, 4<sup>th</sup> overall for health, and 3<sup>rd</sup> overall for the strength of its families and communities.

- Children in Vermont live in a clean environment, have access to health care, benefit from a strong safety net, have low high school dropout rates, attend small neighborhood schools in classes with the lowest student-teacher ratio in the nation, and are among the nation's highest S.A.T. scores.
- **Vermont became a good place to be a child because of longstanding political and financial investment in children.**
  - As stated above, the political commitment to children in Vermont has been long and enduring. In addition, Vermont's philanthropic sector – as evidenced throughout this application – is actively engaged in the well-being of children.
  - Vermont has instituted a number of innovative strategies to support the learning and development of young children with high needs and their families. These include:
    - **In Health**
      - Dr. Dynasaur, Vermont's Medicaid plan that provides free or low-cost health coverage up to 300 % federal poverty level for eligible children and adolescents up to age 21
      - The American Academy of Pediatrics' Bright Futures, Guideline for Health Supervision of Infants, Children and Adolescents' is the Vermont standard that addresses children's health needs in the context of family and community. Bright Futures is a health promotion initiative that builds a trusting relationship between the health professional, the child, the family, and the community as partners in health practice.
      - A strong history of other innovations in health care over the last ten years – such as Blueprint for Health -- that have positively impacted all Vermonters including children (see Health Promotion Practices later this section). Blueprint for Health is a state-led initiative that transforms the way that health care and overall health

services are delivered in Vermont. The goal of the Blueprint is to provide the community with a continuum of seamless, effective, and preventive health services, while reducing medical costs.

▪ **In Education**

▪ Vermont's Early Childhood State Advisory Committee

- Beginning in 1992, the Vermont State Child Development Division established an early childhood workgroup to bring together sectors of the early childhood system to discuss how they could align. This work led to the establishment of common quality standards for all programs, the development of early learning standards, and the establishment of a professional development committee. Later, a set of recommendations emerged from this work that led to the establishment of Building Bright Futures (see later this section).

▪ IDEA Part B section 619 –Early Childhood Special Education services known in Vermont as Essential Early Education (EEE)

- Starting in the 1980s, Vermont has been a leader in integrating 3-5 year olds with high needs and disabilities into early learning and development programs.
- Vermont enacted legislation stipulating that as of July 1991, all children ages 3 through 5 with disabilities are entitled to receive Essential Early Education services.
- The Vermont legislature appropriates funding for EEE state grants annually. Additionally, local school funds augment the limited federal funding Vermont receives to serve children 3-5 with disabilities.
- There is a strong belief in Vermont that children with special needs learn best when they are in quality settings with typically developing peers. The Child Development Division (CDD), in collaboration with the Agency of Education (AOE), has a history

of committing resources to the successful inclusion of children with disabilities, developmental delays and challenging behaviors with typically developing peers in least restrictive environments. Over the past six years, in the development of Children's Integrated Services (CIS), the CDD has created a more defined and systemic approach to providing the supports children with high needs require to be successful through the development of Specialized Child Care Services (SCCS) as part of the core array of CIS delivered in every AHS region in Vermont.

▪ Early Education Initiative Grant Program

- In 1987, the Vermont Legislature established the Early Education Initiative grant program to provide free early education opportunities to at-risk 3-5 year old children. The definition of "at-risk" for EEI aligns with the definition of high needs in the RTT-ELC grant.
- The provisions of the law governing this state funded competitive grant program include: (1) prioritizing areas in the state with few opportunities for early education, (2) providing developmentally appropriate, experiential learning opportunities in home and/or group settings, (3) valuing parent involvement and input, and (4) developing programs that result from collaborations between school districts and community organizations. Since its enactment, the legislature has allocated an average of \$1.1M annually for EEI grants.

▪ Publicly Funded "Universal" Prekindergarten Education

- Starting in 1987, Vermont's public school funding laws allowed school districts to use their school funding to pay for early education for 3-5 year olds. Although this is not required, many school leaders and community members realize the importance of early education and have provided funding. By the time that Act 62

was signed into law in 2007, approximately 150 of Vermont's 250 towns voluntarily funded early education programs for 3-5 year olds. In 2011, the Budget Act was passed, lifting a 50% enrollment cap for PreK.

- After two failed campaigns to pass a law to establish publicly funded universal PreKindergarten education, House bill 534 (later known as Act 62) was passed and signed into law in 2007. Act 62 promotes partnerships between school districts and existing qualified community programs, requires community input prior to establishing or expanding PreK programs, and offers children between the ages of three and five and their families greater access to quality early learning experiences. For more detail, see the summary of Act 62 in A1.
- Vermont's Kindergartners Readiness Survey
  - Vermont began answering the question of how "ready" children were for kindergarten back in 2000 by developing, piloting, and institutionalizing the annual Kindergartners Readiness Survey (RKS).
  - The results from the KRS have been used to drive state policies such as passage of legislation to establish universal publicly funded PreKindergarten education in 2007.
- Home Visiting
  - In 2013, Act 66 was passed, requiring higher standards for home visiting programs. Regulations were drafted in consultation with the Vermont Home Visiting Alliance, a group of providers, business leaders, and agency personnel. The Alliance was convened by the Vermont Business Roundtable (VBR) and the VBR Research and Education Foundation in 2012, through a grant from The Pew Charitable Trusts.
- **Vermont is doing well with its early learning and development programs and**

**services, but not all of Vermont’s children are thriving and succeeding.**

- In Vermont, some children with high needs struggle. These include children who come from home with low incomes, children with physical disabilities or developmental delays, recent immigrants, and others.
- Although Vermont’s children do well on national and statewide assessments, there is a persistent achievement gap for children with high needs (See Table 1).
  - In eleventh grade science, students receiving free or reduced lunch (FRL) scored as “proficient” at less than half the rate of students who did not receive free or reduced lunch (15% FRL versus 37% non-FRL). (Vermont AOE, 2013).
  - In fourth grade math, 31% of students receiving FRL scored as proficient compared to 48% of students not receiving FRL. (Vermont AOE, 2011). Fourth grade reading is comparable.
- We need to do better so ALL children can succeed in today’s demanding world.
- **This RTT-ELC Grant represents an important opportunity to further Vermont’s progress for children, particularly those with high needs.**
  - A small state can be a testing ground for big ideas. Vermont is an accessible, inclusive, often visionary community; it is seen nationally as a place where innovative approaches to solving society’s challenges can start small, be tested and refined, then taken to scale. This application contains a range of initiatives to move Vermont’s children, particularly those with high needs, forward to success in school and in life.

**Table 1: Vermont NECAP Scores\* \*\***

	Free/Reduced Lunch		English Language Learner		Race/Ethnicity			Special Education	
	NO FRL	FRL	NOT ELL	ELL	White	Black	Hispanic	No Special Ed	Special Ed
READING: Total Proficient & Above	83%	59%	74%	41%	74%	58%	70%	81%	24%

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Total Below Proficient	17%	41%	26%	59%	26%	42%	30%	19%	76%
MATH: Total Proficient & Above	76%	51%	66%	36%	66%	44%	59%	72%	20%
Total Below Proficient	24%	49%	34%	64%	34%	56%	41%	28%	80%
SCIENCE: Total Proficient & Above	59%	32%	48%	19%	48%	28%	35%	52%	19%
Total Below Proficient	41%	68%	52%	81%	52%	72%	65%	48%	81%

\*Teaching Year: 2011-2012 – Grades 3-8

\*\*Teaching Year 2012-2013 – Grade 4

**A Portrait of Vermont and Vermont’s Children with High Needs**

Vermont is a small, rural state. It is the second least populous state in the U.S. (population 626,741), and the sixth smallest (9,349.94 square miles). The state capital, Montpelier, (population 7,855) is the least populous state capital in the country, and its largest city, Burlington, (population 42,417) is the least populous largest city within a state. (U.S. Census, 2010). The weather varies with the seasons but is often severe during the winter.

About 31,952 (5.1%) of Vermont’s population is age five or younger. Of these, an estimated 42% are children with high needs, primarily as the result of being low-income. Vermont has the second oldest population in the country (median age 42.7) and the second largest non-Hispanic white population (95.3%).

Median household income is comparable to the United States (\$53,422 versus \$52,762), and poverty rates are lower than the U.S. (7.1% versus 10.5%)(U.S. Census, 2010). The most recent U.S. Census estimates (2012) suggest that about 30% of the State’s population is at or below 200% of the Federal Poverty Level, lower than the national rate of about 35%. However, this does not reflect the pockets of poverty, particularly in the Northeast Kingdom, where the percentage of individuals in poverty is as high as 44% (U.S. Census, 2012):

Essex, Orleans and Caledonia counties in northeastern Vermont, known collectively as the Northeast Kingdom, contain some of the last remnants of a

rural, undeveloped New England. The forests provide income for loggers and serve as a resource for furniture and other wood product manufacturing—a critical part of the regional economy. Residents of the Kingdom report income levels among the lowest in the state and poverty rates among the highest.

(Vermont Department of Labor, 2013).

The fact that poverty in Vermont tends to be limited geographically does not make it less compelling. As Popkin, et al. (2010) point out, where children live matters:

...Where children live plays a central role in determining their life chances.

Children growing up in high-poverty [areas]...are at risk for a range of negative outcomes, including poor physical and mental health, cognitive delays, risky sexual behavior, and delinquency. The consequences for these children's life chances—and for society—are severe...

Children with high needs are not distributed evenly across the state. In Vermont schools, the rate of identification for special education varies from 5.22% to 23.38%. At least one school in the state has no students who receive free and reduced lunch while in other schools the percentage is 100%.

Outcomes for Vermont children also vary according to where they live and are educated. For example, while the overall graduation rate in Vermont is 87.6%, graduation rates from high school to high school range from 62.2% to 93.3%. This variation is even greater for students with high needs. English language learners have an overall graduation rate of 74.8%. The range is from 0% to 100%. Students with disabilities have an overall graduation rate of 70.8% with a range of 37.5% to 100%. For students in poverty the overall graduation rate is 77.2% but the range across high schools is 53.2% to 100%. Our high needs children are doing much better in some places than in others.

Vermont defines early childhood as a critical period of life beginning at birth but also with an emphasis on healthy pregnancy, and continuing through third grade. We view early childhood learning and development as multi-dimensional and understand these dimensions are intertwined. We prioritize a unified approach that addresses the relationship among all domains of development and strives to integrate the diversity of programs, services and supports that surround young children and their families in our communities. We target resources and

investments to promote resiliency, build protective factors and reduce achievement gaps for children with high needs.

We accept the RTT-ELC definition of “children with high needs” as:

Children from birth through kindergarten entry who are from Low-Income families or otherwise in need of special assistance and support, including children who have disabilities or developmental delays; who are English learners; who reside on “Indian lands” as that term is defined by section 8013(7) of the Elementary and Secondary Education Act of 1965, as amended (ESEA); who are migrant, homeless, or in foster care; and other children as identified by the State.

In the context of Vermont, a sparsely populated rural state with little racial and ethnic diversity overall, the primary though not exclusive focus within this definition is on children from low-income families and children with disabilities or developmental delays. Yet, Vermont’s English learners, and children who are migrant, homeless or in foster care, though relatively few in number, also have high needs. Vermont has no recognized tribes, and thus does not have any significant number of children from this population group. (See Table A1-2).

According to the National Center for Children in Poverty (2011), Vermont’s Early Childhood Profile (under age 6) tells us:

- About 42% of Vermont’s 21,419 children are low income – that is, at or below 200% of the Federal Poverty Level (FPL). Of these, 90% are white.
- About half (51%) face one or more risk factors including “poor, single parent, teen mother, low parental education, non-employed persons, residential mobility, households without English speakers, and large family size.” About 12% of Vermont’s children face 3 or more of these risk factors.
- Fourth grade math and reading scores are lower for children receiving a free or reduced price school lunch, a proxy measure for low-income.

Rates of food insecurity among rural households are generally lower than urban households, but slightly higher than the national average. The irony is that many of these food-insecure households are in the very rural and farm communities whose productivity feeds the world and provides low-cost wholesome food for American consumers.

In Vermont as in the rest of rural America, the challenges facing rural areas differ from

urban areas in several significant ways (USDA, 2003):

- Employment is more concentrated in low-wage industries;
- Unemployment and *underemployment* are greater;
- Education levels are lower;
- Work-support services, such as flexible and affordable child care and public transportation, are less available;
- The rural marketplace offers less access to communication and transportation networks (USDA, 2005); and
- Offers companies less access to activities that foster administration, research and development.

Between 2000 and 2008, most of Vermont's population growth rate of 2% came from international immigration to Vermont. Approximately 50% of the international immigrants came as refugees through the federal refugee resettlement program.

Between 2005 and 2013, over 2,400 refugees have moved into Vermont, particularly in and around Burlington, Vermont's largest town. These individuals and families came from a number of countries including Bhutan, Burma, Burundi, the Dominican Republic of Congo, Ethiopia, Iraq, Kenya, Somalia and Sudan (Office of Refugee Resettlement, 2011).

Vermont early childhood practitioners, primarily in Burlington, are serving children who speak languages other than English or Spanish (such as Maay Maay, Somali, Swahili, Arabic, Vietnamese, Congolese and others).

Vermont's English Learners face struggles similar to those of their peers in other parts of the country. English Learners are vulnerable for academic failure and are often considered to be "at risk" in today's schools. There is an alarming rate of "guesswork" occurring across our nation in the effort to provide services for these children (Lesaux, 2006). There is a critical need for attention to the growing number of children who speak a language other than English at home and receive early intervention services or special education (Buyssee, Blasco, Brown, Harbin et al., 2006; Hart, 2009). Fortunately, the Department of Education at the University of Vermont (UVM) works close with the Vermont Refugee Resettlement Program to provide services and train students to work with this population. They also jointly host an annual conference for students at UVM with a focus on collaboration with refugees and immigrants.

As Table A1-2 suggests, about 63 children in Vermont are migrant, and 269 are in foster care. The most recent State point-in-time survey suggests there are 329 homeless children in Vermont, but Voices for Vermont's Children, an advocacy group, estimates that the actual number is about 4 times greater and is growing. Further, "children who are homeless or insecurely housed suffer academically and are two to three times more likely to require special education classes."

The Vermont Migrant Education Program notes that because of their "transience and isolation" migrant children are among the least visible and highest need, and it is easy for them to "fall out of step socially and academically." Vermont's Department for Children and Families states that children in foster care are at-risk for lower achievement and not completing high school.

In a rural state with severe winters, a focus on family, neighborhood, and community is not merely a cultural affectation but a matter of survival. Vermont believes that families, neighborhoods, and communities must be involved and share in planning and decision making as we weave together and strengthen a statewide system of early learning and development. Though we are committed to local and family involvement, we also remain committed to setting common high standards and measuring shared outcomes to ensure consistency across communities so children's access to high-quality developmentally beneficial programs and services does not depend on where they live.

#### **A1a: Financial investment from five years ago to the present**

As Table A1-4 suggests, Vermont's financial investment in ELD programs from 2007 to the present has been substantial. Though there were some reductions during 2010 and 2011 in the trough of the economic downturn, funding levels in most categories are now well above their 2009 levels. State investment in ELD in 2013 was about 9% higher than in 2009.

Table A1-4 documents that despite serious budget constraints and reductions in the difficult economic environment of recent years, Vermont policymakers have not waived in their understanding of the importance of investments in early learning and development and have prioritized these investments in their budgets.

**A1b: Increasing, from the previous five years to the present, the number of children with high needs participating in ELDP**

Vermont’s continuing financial commitment to ELD has resulted in significant expansions of access for children with high needs (Table A1-5). Numbers are stable or increasing in all categories from 2009-2012, with year to date figures for 2013 on track to continue the pattern.

**A1c: Existing ELP legislation, policies and practices**

Vermont’s ELD system is firmly established in legislation, policy and practice.

Over the past 20 years, Vermont has sustained public commitment, investment, and leadership related to early learning and development. Through the past three administrations, shifting from a Democratic administration under Governor Howard Dean, to a Republican administration under Governor Jim Douglas and most recently back to Democratic administration under Governor Peter Shumlin, Vermont’s governors and legislature have been ahead of the national curve in supporting innovation and reform in early learning and development and have invested state funds accordingly (see Table 2 below). Support for early learning and development has become “a Vermont value”.

Taking this resolve to a new level, early in his administration Governor Shumlin announced a Strategic Plan that includes a priority to reinvest savings from significant reforms in the Department of Corrections system into early learning and development. One of his first policy initiatives was to lift the caps on the PreK programs to allow more young Vermonters to take advantage of PreK opportunities and he has continued to increase funding for early learning programs. Finally, in his second inaugural address, he announced an Early Childhood Summit to develop a statewide framework and action plan (see Table 2 below).

**Table 2: Summary of Example VT Legislation, Policies and Practices that Support ELD**

<b>Activity</b>	<b>Summary</b>
<i>Legislation</i>	
Act 62	Promotes partnerships between school districts and existing qualified community programs, requires community input prior to establishing or expanding PreK programs, and offers children between the ages of three and five and their families

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	greater access to quality early learning experiences.
H. 270	A bill that will provide access to 10 hours per week for 35 weeks per year of high-quality, publicly funded PreK to any PreK child that a parent or guardian wishes to enroll in an available, prequalified program.
Act 66	In 2013, Act 66 was passed, requiring higher standards for home visiting programs. Regulations were drafted in consultation with the Vermont Home Visiting Alliance, a group of providers, business leaders, and agency personnel.
<i>Policies and Practices</i>	
Governor's Early Childhood Summit	Governor Shumlin called for an early childhood summit as part of his platform to promote healthy early childhood development. The Summit will result in Vermont's first-ever Early Childhood Framework. This will propose goals for strengthening Vermont's network of child development services, and will be accompanied by an Action Plan.
Early Education Initiative (EEI)	Provides early education opportunities for three- and four-year-olds deemed to be at-risk.
Essential Early Education (EEE)	Early childhood special education services for children three to six years old with disabilities.
Children's Integrated Services (CIS)	Integrates early childhood health, mental health, Part C early intervention services and specialized child care services for pregnant women and children from birth to age six.
Child Care Financial Assistance Program (CC FAP)	Vermont's child care subsidy system.
Maternal, Infant, and Early Childhood Home Visiting	An evidence-based home visiting program for first-time mothers.
Pregnancy and Postpartum Care	A range of private and public systems providing care for women regardless of health insurance status or income.
Private Sector Investment	Private/public partnerships between the State and philanthropies improving and

expanding ELD.

**Legislation:**

Act 62

As early as the 1980's, approximately 150 of Vermont's 250 towns voluntarily offered early education programs to three- and four-year-olds. Initially these programs targeted children with high needs but eventually they expanded to include all children. In 2007, Act 62 was enacted to codify this long-standing practice and to set consistent and high program and personnel standards. This is a major step forward in integrating public PreK into the state's school funding laws.

Act 62 promotes partnerships between school districts and existing qualified community programs, requires community input prior to establishing or expanding public PreK programs, and offers children between the ages of three and five and their families greater access to quality early learning experiences. It requires that all public PreK programs as well as any programs eligible to provide PreK must be:

- Nationally accredited or participate in the state's TQRIS system (VT STARS) and have received 4 or 5 VT STARS (out of a maximum of 5); or
- Participate in the state's TQRIS system (VT STARS) and have a plan in place to achieve 4 or 5 VT STARS;
- Employ a licensed early childhood educator or early childhood special educator;
- Use curriculum that addresses the Vermont Early Learning Standards (VELS); and
- Be in good standing and abide by with Early Childhood Program Licensing Regulations.

Public PreK education looks different across Vermont. Various types of programs use different curricula and different philosophical approaches. In some cases, there are partnerships with Head Start programs in which a school funded early childhood special educator and a Head Start funded teacher work side by side. In others, districts fund children to participate in PreK education at a community child care center or family child care home. Community partners often offer assistance with transportation, a critical barrier to access in a rural state. Some children attend a school district operated PreK program in an elementary school.

Despite the different "looks" of public PreK education, under Act 62 all programs must

meet the same program standards, child care licensing regulations, staff qualifications, and ensure that their programs align with Vermont's Early Learning Standards (VELS).

School districts may use public education funding for PreK education, but it is not mandatory. Further, children are not required to attend public PreK. However, if a school district plans to begin or expand a public PreK program, Act 62 mandates that it must first implement a comprehensive community needs assessment to identify current PreK need, capacity and local providers. These plans must be open for public comment, and must be completed at least 90 days prior to the school year in which a public PreK program will be initiated or expanded.

Partnership is a key aspect of Vermont's public PreK programs. Of the 53 supervisory unions offering PreK education, more than half (33) contract with community providers, and 22 collaborate with Head Start. More than 80 community partners collaborate with school districts to offer pre-K. In addition to local partnerships there are state level partnerships: Act 62 authorized the commissioner of the Agency of Education and the Department for Children and Families commissioner to jointly implement Vermont's publicly funded pre-K education.

Act 62 requires all programs to gather information on children's developmental progress on an annual basis. All teachers, regardless of setting, use the Teaching Strategies Gold (see C2). These data have the dual purpose of measuring child outcomes as well as providing information teachers use to differentiate instruction and better meet the unique needs of all children.

Currently, 90% of all LEAs in Vermont offer public PreK, but a 100% participation rate is needed to reach all children. The Vermont Community Preschool Collaborative (VCPC), an organization funded by a consortium of philanthropists, has been working for eight years to promote public PreK in Vermont, especially promoting partnerships with qualified community programs. The VCPC director and staff facilitate public PreK conversations among LEAs, families, and community leaders; and they provide technical assistance to support the establishment and/or expansion of public PreK. Additionally, VCPC provides grants to communities to partially fund public PreK for two years until the new or expanded program is fully covered by the state's Education Fund (e.g., Vermont public school funding). This year AOE contributed \$400,000 towards VCPC grants.

VCPC has been invaluable to the state's effort to move towards universal public PreK. In

the coming years, VCPC will refocus some of its efforts and funds from pre-K to supporting infants and toddlers. However, VCPC has made a commitment to continue providing technical assistance to communities even after the grant monies it currently provides for public PreK are repurposed. (VCPC funds will likely be repurposed after the passage of H270, decreasing as Vermont moves closer to universal access to publicly supported public PreK). Therefore, resources to support new and expanded public PreK programs are needed to augment VCPC's efforts and enable Vermont to effectively meet its goal of universal PreK, giving all young children an opportunity to participate in a publicly funded high-quality early learning and development program. (See Appendix V).

#### H. 270

A bill that has passed the Vermont House, and which the Governor has pledged to sign. H. 270 is currently being considered by the Vermont Senate.

H. 270 would provide access to 10 hours per week for 35 weeks per year of high-quality, publicly funded PreK programs to any preschool age child whose parent or guardian wishes to enroll her in an available, prequalified program. To become qualified, programs would need to hold 4 or 5 VT STARS (out of a maximum of 5), as well as meet the same standards as required in Act 62.



**Figure 3: Vermont Public PreK**

Act 66

The purpose of Act 66, passed in 2013, is to recognize the significant positive contribution of home visiting with regard to enhancing family stability, family health, and child development; fostering parenting skills; reducing child maltreatment; promoting social and emotional health; improving school readiness; and promoting economic self-sufficiency. To do this, the Act assures that home visiting services in Vermont are of the highest quality by establishing standards for their administration, delivery, and utilization review.

**Policies and Practices:**

Governor’s Early Childhood Summit

In 2012, Governor Shumlin announced an Early Childhood Summit as part of his platform to promote healthy early childhood development. He charged the Secretaries of Vermont’s Agency of Human Services and Agency of Education to act as Co-Directors of the event, and to

enlist the assistance of staff, consultants, and a Summit Planning Committee of 17 community, business and industry leaders from the private and public sectors.

Early in 2013, a consultant widely known in Vermont for her decades of experience working in and with the State's early childhood system, was hired to lead the organization effort. Also, the Governor's only dedicated policy person was also directed by the Governor to work exclusively on early childhood projects, including the Summit, during 2013.

The Summit Planning Committee recommended that the Summit take place on October 29, 2013 to allow enough time for comprehensive planning to inform the event. On that date, Vermont's Early Childhood Framework (see below) will be formally presented to 250 early childhood stakeholders, including Early Childhood Summit Parents Advisory Council that has representation on the Planning Committee and has been assisting with planning.

The Early Childhood Framework will be one of the concrete outcomes of the Summit. This Framework will lay out goals for strengthening Vermont's network of child development services and craft recommendations and agreements about how this can be done. A statewide Action Plan will further articulate the Framework. Work on the Action Plan will begin at the Summit and will conclude by January 2014.

The Summit is built on a consideration of national and international trends, and extensive consultation with stakeholders throughout Vermont via focus groups and community meetings. Key activities have included:

- An Early Childhood Summit web page was established on the Governor's web site.
- The Summit Planning Team did a crosswalk of current Vermont actions plans related to early childhood (over 40 plans) and found a preponderance of convergence between them along with some areas of weakness.
  - Bright spots included:
    - Vision: We now have a unifying early childhood vision, which is a positive step forward. The next step is to promote incorporation and "internalization" of this vision statement into the work of specific agencies, organizations, etc. (see A1).
    - Professional development: Like other components of Vermont's early childhood system, there is a lot of activity in this area. There is a widely

recognized statewide structure in place responsible for planning, coordination and providing support to the early childhood workforce through the Northern Lights Career Development Center. (See D2).

- Data Reporting System: With support from NGA and leadership from Building Bright Futures, Vermont is on the cusp of having a state-of-the-art, statewide early childhood data collection system. (See E2).
  - Systems Integration: Many plans reflect a commitment to enhanced integration of ECH services and recognize the importance of collaboration in achieving this goal (throughout the application).
  - Family Engagement Framework: There is a growing trend statewide towards adopting the Strengthening Families framework as a guide to working with families. Practitioners who work with this framework are very enthusiastic about it (see B4).
  - Governance Structure: Although not fully implemented or widely recognized by the public, Vermont has a clear ECH governance structure through the Building Bright Futures statewide and regional councils (see A3).
  - Vermont Early Learning Standards (VELS): The Professional Preparation and Development Committee and the Agency of Education have led the way towards the development of widely-recognized standards for children birth to age eight (see C1).
  - Early Intervention: Children’s Integrated Services is a widely-recognized vehicle for coordinating early intervention services statewide and regionally (see A1).
- Areas for growth included:
    - Agreement on definition of what Vermont’s early childhood system is;
    - Clear goals for that system with a unifying plan;
    - Monitoring and evaluation; and
    - Systems integration.
      - Vermont’s RTT-ELC application addresses all of these matters in

multiple places.

- The consultant and Planning Team members subsequently held 12 regional “listening” meetings open to all stakeholders including the general public to solicit comments on, and ideas to resolve, these areas of weakness. Notes from these meetings were posted on the Early Childhood Summit page, and were incorporated into the Framework document.
- The consultant has facilitated regular Framework drafting meetings since March 2013 to develop the draft Framework document. The drafting team includes members representing broad stakeholders.
- A parent survey, created with the assistance of the Early Childhood Summit Parents Advisory Committee, was prepared and distributed both in hard copy and electronic form. Further, an online survey, posted on the Early Childhood web page, solicited comments from the general public.
  - A number of comments were received, of which the following are representative:
    - *“We do not get help paying for daycare/pre-school for our children and we do not make a lot of money. Childcare is so expensive.”*
    - *“The only childcare within 15-20 miles only takes age 6 weeks to 3 years old. Yes, my 3 year old will be starting Head Start, but that doesn't help me at all with our current needs.”*
    - *“We are a lower middle class family that makes too much to be able to receive help and not enough to make the ends meet month to month.”*
    - *“It took us a long time to find day care that worked for our family - we stayed in one for much longer than we wanted because it was the "least bad" of what was available.”*
- The draft RTT-ELC application and the Framework were posted online for public comments, and were sent out to a targeted constituency list for comments. Further, a series of online meetings are being held to solicit public comments.
- A joint all-day meeting of the Early Childhood Summit and RTT-ELC planning committees was held in September 2013 to assure consistency between the two processes.
- Vermont’s philanthropic community has been engaged in the Early Childhood Summit process. They have supported the Summit process financially, and have also agreed to

coordinate their priorities with the State Framework and Action Plan. In this way, they will assure that their philanthropic initiatives converge with the State Framework and Action Plan.

Early Education Initiative (EEI)

The Early Education Initiative (EEI) grant program was established by the Vermont Legislature in 1987 to provide early education opportunities for 3- and 4-year-olds deemed to be at-risk – but has been maintained even as Act 62 investments have risen dramatically (see Table A1-4).

The provisions of the law governing this state funded competitive grant program include: (1) prioritizing areas in the state with few opportunities for early education, (2) providing developmentally appropriate, experiential learning opportunities in home and/or group settings, (3) valuing parent involvement and input, and (4) developing programs that result from collaborations between school districts and community organizations. Since its enactment, the legislature has allocated an average of \$1.1M annually for EEI grants. The EEI definition of “at-risk” aligns with the definition of high risk in this proposal.

EEI grants support a variety of early learning and development opportunities. For example, among this fiscal year’s grantees, there are programs that: provide home visits to young children and families in remote areas, pay tuition for homeless children to attend a center-based child care program, support early literacy through a focused curriculum, support professional development and family activities, and provide transportation and tuition to enable at-risk children to attend an early learning and development program.

Essential Early Education (EEE) (IDEA Part B/619):

Essential Early Education (EEE), administered by the Agency of Education, is Vermont’s system of early childhood special education services for children 3 up to 6 years old with disabilities. EEE services include individualized specialized instruction in one or more developmental domains (social/emotional, adaptive, communication, cognitive and/or motor) and may include related services like speech and language therapy, occupational therapy and physical therapy. EEE services are provided by local school districts to children who have met eligibility criteria given a developmental delay or a medical condition that may result in significant delays by the time the child enrolls in elementary school. Services are delivered in a

variety of early learning and development programs such as public PreK classrooms, community-based early childhood programs, Head Start classrooms, children's homes and/or other settings depending on the unique needs of each child and his or her family.

Inclusion has been a reality in Vermont since the early 1980's. More than 80% of preschool children with disabilities participate in early learning and development environments with typically developing peers. EEE services are funded with a combination of federal, state and local funds. Between 2009 and 2013, state and local investments in EEE rose significantly contributing to an overall 11% increase in EEE expenditures. (See Appendix II).

#### Children's Integrated Services

CIS is Vermont's unique model for integrating early childhood health, mental health, Part C early intervention services and specialized child care services for pregnant women and children from birth to age six. The model is designed to improve child and family outcomes by providing family-centered, holistic, prevention, early intervention, and health promotion services, effective service coordination, and flexible funding to address gaps in services.

<p><b>A CONTINUUM OF CUSTOMIZED RESOURCES</b></p> <ul style="list-style-type: none"> <li>– <b>IDEA Part C - Early Intervention</b> Services for children from birth to age 3 with a developmental delay or medical condition that may lead to developmental delay.</li> <li>– <b>Early Childhood and Family Mental Health</b> Services for children and their families from birth to age 6 with behavioral health concerns.</li> <li>– <b>Home Visiting - Nursing and Family Support</b> Services for pregnant and postpartum women and young children who have concerns about conditions or risk situations that impact healthy family development.</li> <li>– <b>Specialized Child Care</b> Services to help children with high needs experience success in high quality childcare settings.</li> </ul>	<p><b>SERVICE DELIVERY REFORM</b></p> <ul style="list-style-type: none"> <li>– A multi-disciplinary team review of all referred families and children</li> <li>– A primary service coordinator as a single point of contact for families working with multiple service providers</li> <li>– A <b>One Plan</b> with information on family goals and services provided to facilitate collaboration among providers</li> </ul>
	<p><b>PAYMENT REFORM</b></p> <ul style="list-style-type: none"> <li>– Payment based on meeting performance measures</li> <li>– A bundled rate for each client served each month</li> <li>– Claims submitted and reimbursed <b>once per month</b> for each client served</li> </ul>
	<p><b>FINANCING REFORM</b></p> <ul style="list-style-type: none"> <li>– Regional allocations based on a <b>formula</b></li> <li>– One <b>fiscal agent</b> responsible for ensuring delivery of all services. Flexibility to re-allocate funds <b>based on community service needs</b></li> </ul>
	<p><b>MOVING CIS FORWARD</b></p> <p>Legislation enacted in 2010 enabled the Child Development Division (CDD) to move forward with fully integrating CIS in three regions. As of July 2013 11 or 12 regions in Vermont have moved into an integrated model of services.</p>

**Figure 4: Children's Integrated Services**

Ranges of services – grouped into four delivery categories – are available statewide through multi-disciplinary, cross-agency Children’s Integrated Services Teams in each of the twelve Agency of Human Services regions. Available services include coordination, health education, childbirth and parenting education, developmental education, specialized instruction, specialized therapies (e.g. speech, physical therapy, audiology, vision, and nutrition), and consultation with child care, medical evaluation, medical social work and family support.

*CIS Nursing and Family Support (NFS)* activities are focused on prevention and early intervention and include health education and counseling, screening and assessment, referral, advocacy, risk reduction and case management. Services are available to pregnant and postpartum women, and infants and children from birth to age five regardless in insurance status in 10 regions of the state, and for those who are eligible for Vermont’s Dr. Dynasaur insurance in the others. The CIS State Team at CDD works closely with VDH Maternal Child Health staff to

integrate the continuum of home visiting services available to pregnant women and very young children and their families in Vermont.

*CIS Early Childhood and Family Mental Health (ECFMH)* promotes healthy social and emotional development for children up to six years old, their families, and child care programs. These services include information and referral, direct services with children and families, parenting education, and training and consultation for early care, health and education providers.

*CIS Early Intervention (EI)*, (IDEA Part C), provides a comprehensive system of individualized early intervention services for families and their young children from birth to age three with, established developmental delays or medical conditions that may lead to developmental delays.

*Specialized Child Care Services (SCCS)* provide an array of customized supports that help high needs children experience success in early learning and development programs. The Child Care Coordinator on the local CIS Team works to increase the supply of high-quality, specialized early learning and development programs in centers and family child care homes prepared to serve high needs children and to ensure that when enrollment in center or family child care home is part of the child's coordinated plan of care, it's a good match that will support development.

Vermont also applies innovative funding strategies such as Vermont's Global Commitment to Health waiver (See A1d, Health Promotion Practices) to support blending and managing funds to support full integration of service delivery at the regional level (see Appendix II).

#### Child Care Financial Assistance Program (CC FAP)

The CC FAP is Vermont's child care subsidy program under the Child Care and Development Fund (CCDF). In December 2009, the National Center for Children in Poverty (NCCP) at Columbia University released *Work Supports in Vermont; An Analysis of the Effectiveness of State Policies Supporting Work*, a report prepared for the Vermont Department for Children and Families. The report identified child care as one of the largest expenses working families face and recommended reforms in both the CC FAP and in child care tax credits to begin to address this significant pressure for low-income working families struggling to achieve economic stability for their families. DCF took these recommendations seriously and in 2009, after extensive analysis and broad community input, embarked on a wide scale effort to initiate

reforms in the CC FAP.

Vermont invested \$4.8 M in this initiative in FY10 and subsequently invested an additional \$3.3 M in general funds and \$15.5 M in ARRA funds under CCDF to implement these reforms and increase funds available for subsidies.

As a result, in January 2010, a revised sliding fee scale increased the amount that a family could earn and still be eligible for subsidies and created slight increases in benefit levels for all families. Rates were increased for all providers and a new rate structure was implemented that significantly raised quality incentive rates for providers participating in VT STARS.

Nearly \$1M in funds were awarded in a new “Strengthening Families” grant program offered to 4 and 5 star centers serving at least 30% of subsidized children in their enrollment census. Strengthening Families grants were developed to ensure affordable access to high-quality comprehensive early care and education programs for children, particularly infants and toddlers, and families challenged by economic instability and other environmental risk factors. Vermont’s investment in these reforms has continued in subsequent fiscal years despite the sunset of federal ARRA funds.

VT STARS, Vermont’s TQRIS, rewards participating providers for achieving and maintaining high-quality (4 or 5 VT STARS out of a maximum of 5) by higher CC FAP reimbursement rates.

(For more information, please see B2b).

#### Maternal, Infant, and Early Childhood Home Visiting

##### Pregnancy and Postpartum Care

Pregnant women in Vermont access and receive first trimester care at a high rate (83% in 2012) through a range of private and publicly funded medical providers.

Through Green Mountain Care, Vermont’s Medicaid program, and its Dr. Dynasaur program, free or low-cost prenatal and postpartum care including primary and specialty care, dental and health screenings, nutrition, social services, education, and referral services, are available to women who meet income and other eligibility criteria. The literature shows that high-quality prenatal care improves birth outcomes including decreasing the incidence of premature births, infant mortality, low birth weight and other complications related to pregnancy and birth.

Several programs within Vermont's Agency for Health Services include a special focus on high-risk pregnancies including dedicated programs that target special populations such as low-income pregnant women, pregnant teens, pregnant women addicted to substances such as tobacco or opiates, and pregnant women with mental health disorders.

#### Private Sector Investment

In July 2013, Governor Shumlin announced a public-private partnership to enable communities across the state to launch or expand publicly funded pre-kindergarten programs. The state is providing \$400,000 from the Agency of Education to towns that want to create or expand their publically funded PreK programs. An additional \$400,000 is being provided by the Vermont Community Preschool Collaborative (VCPC), a fund created and supported by the nonprofit Permanent Fund for Vermont's Children, to ensure more children have access to high-quality programs.

The Funders Collaborative, a consortium of private philanthropists, has invested millions of private dollars both individually and collectively into early learning and development in Vermont. Collaborative projects include the Vermont Community Preschool Collaborative (VCPC), which has invested over \$2M in efforts to ensure universal access to high-quality PreK since 2005. The recently launched Birth – 3 Project has assembled over \$1M from a range of private and corporate foundations to impact developmentally beneficial services for younger children over the next several years.

The Vermont Business Roundtable, Vermont Businesses for Social Responsibility, Vermont Community Loan Fund, Vermont Community Foundation, Henderson Foundation, and the Turrell Foundation have all been highly supportive of early childhood matters. They have funded initiatives, advocated for change, and in some cases have lobbied for in support of early childhood legislation, such as Act 66.

In addition, a group of private funders, led by the Permanent Fund and the Turrell Fund, are about to announce the Campaign for Vermont's Youngest Children. This will be a multi-million dollar, multi-year investment to build awareness of the importance of strategic investments in the early years. This initiative is unprecedented in Vermont, and will assist the State in sustaining and expanding its early childhood initiatives moving forward.

**Ald: Current status in key areas that form the building blocks of a high quality early**

**learning and development system**

As Table 3 suggests, Vermont has a robust system of structures in place that collectively form a high-quality, early learning and development system.

**Table 3: Summary of Key Building Blocks in Vermont’s ELD System**

<b>System</b>	<b>Summary</b>
<i>Early Learning and Development Standards</i>	Vermont Early Learning Standards (VELS) articulates the expectations of what 3-5 year olds know and can do.
<i>Comprehensive Assessment Systems</i>	Effective comprehensive assessment system that provides information about the development and learning of children from infancy through kindergarten entry, and about the quality of the programs they attend.
<i>Health Promotion Practices</i>	Vermont’s innovative Medicaid waiver and other health-related structures and practices.
<i>Family Engagement Strategies</i>	Current progress on family engagement strategies.
<i>Development of Early Childhood Educators</i>	A range of existing and proposed strategies to provide professional development for Vermont’s early childhood educators. (See D2).
<i>Kindergarten Entry Assessments</i>	Vermont’s kindergarten entry assessments, conducted since 2000, plus related assessments.
<i>Effective Data Practices</i>	Vermont’s TQRIS and ECDRS.

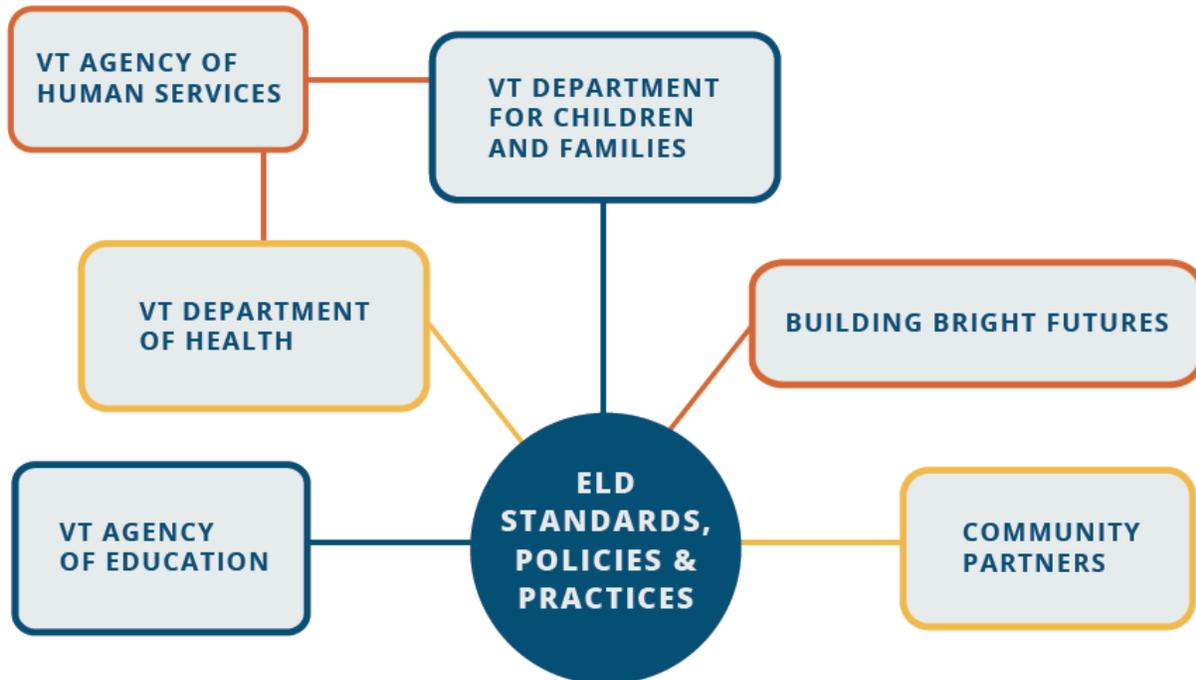
**Early Learning and Development Standards**

The Vermont Early Learning Standards: Guiding the Development and Learning of Children Entering Kindergarten (VELS) were developed and published in 2003. The task of developing a common set of child outcomes for the PreK years (three- to five-year-olds) was assigned to the Standards, Monitoring and Technical Assistance Sub-Committee of the Vermont Early Childhood Work Group. The sub-committee consisted of practitioners drawn from early care and education programs, Head Start, public schools, state agencies, higher education, and parents. The VELS were informed by and aligned with *Vermont’s Framework of Standards and Learning Opportunities* (i.e., learning standards for K-12) and the *Head Start Child Outcomes*

*Framework.* These learning standards are based on a set of principles that view the child holistically and developmentally, include readiness domains, and recognize the importance of play. (Full copy of VELs in Appendices IX and XXIII.)

“Train the trainer” sessions enabled qualified educators to provide consistent, high-quality VELs training to providers throughout the State. A parents guide to VELs, *Guiding Your Child’s Early Learning: A Parent’s Guide to the Vermont Early Learning Standards*, was published in 2006 and disseminated through a range of early childhood agencies and providers as well as online. VELs has been incorporated in various State policies, such as Act 62.

The following Vermont institutions are central to the establishment and administration of ELD standards, policies and practices. (Also, see C1).



**Figure 5: Key Vermont ELD Institutions**

Vermont’s Agency of Education (VT AOE) shares authority with DCF to oversee implementation of Act 62, administer the Readiness Kindergarteners Survey, and is a co-lead with AHS for IDEA Part C. VTAOE administers the Early Education Initiative Grants, IDEA Part B Essential Early Education services, Title I, Early Multi-Tiered System of Support and the Child Nutrition program. It also designed and implemented the Higher Education Collaborative-

Early Childhood/Early Childhood Special Education (ECE/ECSE) teacher licensure program that has enabled nearly 100 early educators to obtain an ECE or ECSE license. The VT AOE Secretary is a designated member of the Building Bright Futures State Advisory Council, and has representation on the state Part C Interagency Coordinating Council.

Agency of Human Services (AHS) is the umbrella agency for six health and human services related departments of Vermont state government. These include the Departments of Health (VDH), Children and Families (DCF), Corrections, Mental Health, Aging and Independent Living and Health Access (Medicaid & state health care programs).

The Agency has had a decade long focus on coordination and organization of services to provide a unified “one agency” approach to consumer services. The most recent and robust effort to bring agency services together is the integration of child and family services across the AHS into one seamless continuum of care for children & families prenatal to 22. These efforts are happening within the context of health care reform and comprehensive multi-disciplinary response to care across the health and human services spectrum.

As part of that effort, Integrated Family Services (IFS) is strongly committed to prenatal and early intervention for children and families. It is understood that giving families early support, education and necessary developmental intervention will produce more favorable and lasting outcomes at a lower cost than the current practice of waiting until circumstances are bad enough to access high end funding streams which often result in out of home or out of state placements or more intensive medical interventions. This leads naturally to a fundamental focus on early learning and development. Children’s Integrated Services (CIS) is a model of the IFS approach focused on children prenatal – age 6 and their families.

The Department for Children and Families (DCF) includes CDD, which administers the Child Care Financial Assistance Program (CC FAP) and related workforce and quality improvement initiatives under CCDF. CDD has responsibility for Child Care Licensing, the Head Start-State Collaboration Office and Children’s Integrated Services (CIS) that includes early intervention services under Part C of IDEA. The CDD and AOE also co-administer public PreK under Vermont Act 62. The CCD administers CBCAP.

The DCF also includes the Family Services Division (FSD), responsible for child protection and child welfare, and the Economic Services Division (ESD), responsible for Reach

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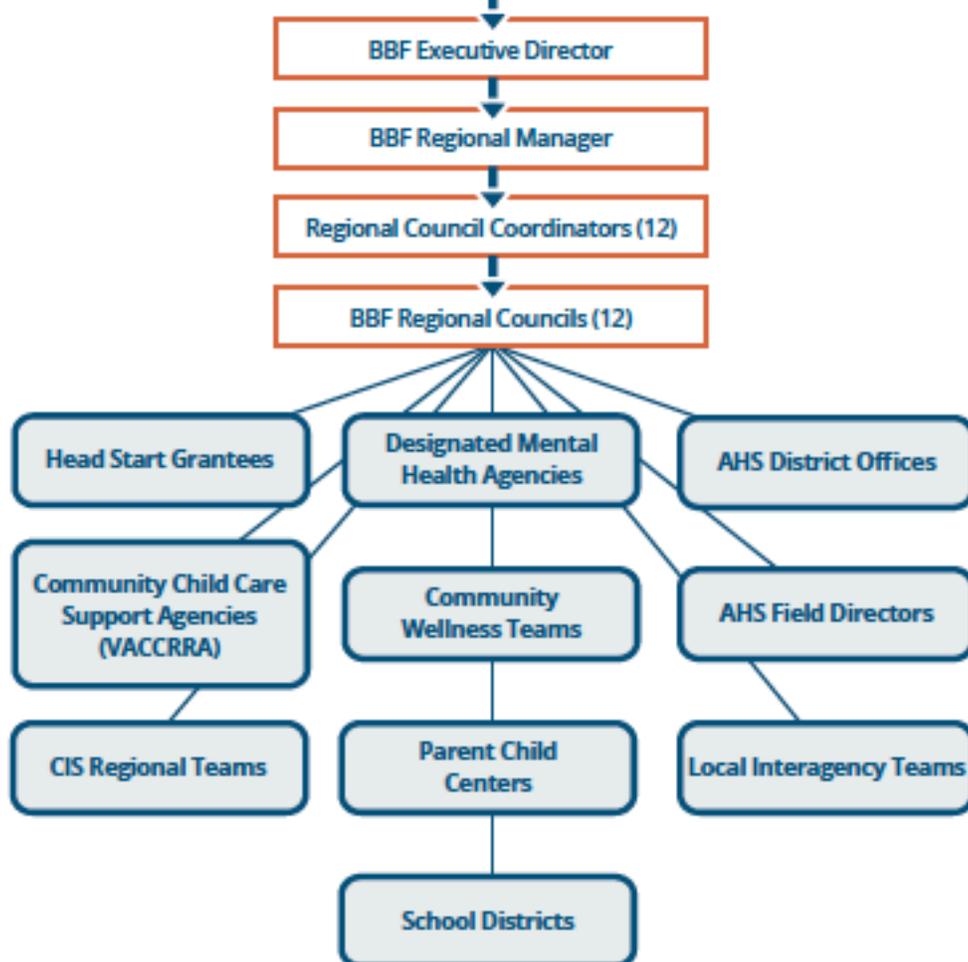
Up (TANF), 3 Squares VT (SNAP) and Dr. Dynasaur eligibility (SCHIP), the Office of Economic Opportunity, the Office of Child Support and the Office of Disability Determination Services. Deputy Commissioners in DCF work closely together on a collaborative leadership team working on a department wide strategic. The CDD within DCF works closely with and supports Building Bright Futures.

## VERMONT EARLY LEARNING CHALLENGE STATE PLAN: BUILDING BRIGHT FUTURES GOVERNANCE STRUCTURE

### BUILDING BRIGHT FUTURES COUNCIL

Secretary of Human Services	Secretary of Commerce and Community Development
Commissioner Vermont Department of Health	Legislators (4)
Commissioner Department of Children and Families	Head Start (1)
Commissioner Department of Mental Health	Interagency Coordinating Council (1)
Head Start Collaboration Director	School Boards (1)
Secretary of Education	Members at Large (11)

### ELC IMPLEMENTATION TEAM



**Figure 6: Building Bright Futures Governance Structure**

Building Bright Futures (BBF) is the governance structure for Vermont’s early care, health

and education system. The BBF has been established as a public-private partnership, operating as an independent 501(c)(3) organization.

A governing council of 23 members leads building Bright Futures statewide. These members are appointed by the Governor and include government leaders, legislators, and early care, health, and education representatives from various stakeholder groups including parents. The Council's chief tasks are: (1) to monitor and report on the quality, accessibility, and equity of services for families and young children through an integrated system for planning, coordinating, and developing of early childhood programs; and (2) to advise on early childhood policy, data collection, and resource allocation decisions at the State and regional levels. Current staffing includes an Executive Director, a Data Analyst, and a part-time Coordinator.

BBF serves an additional role as umbrella organization to 12 regional early childhood councils who monitor and improve their local systems of service delivery. These local councils contain broad local representation. Thus, between the Council and the Regional Councils, BBF has extensive reach throughout Vermont's early childhood infrastructure and stakeholders.

BBF is statutorily charged under Act 104 with assuring an accountable, results based, comprehensive and coherent system of high-quality early childhood services that are coordinated, aligned with established early learning and development standards, and are geographically and financially accessible to all families with young children. The BBF Regional Councils do not actually deliver direct services to children and families. Rather, they work with community partners to make sure that local services to young children are plentiful, of high-quality, and easily available to anyone who needs them. Under Act 104, early care, health and education are defined as "all services provided to families expecting a child and to children up to the age of six, including child care, family support, early education, mental and physical health services, nutrition services and disability services." (See Appendix 2).

BBF was a key driver of Vermont's Early Childhood Data Reporting System (see Effective Data Practices, later this section).

BBF is also currently engaged in a process in which they are compiling all the State funding in early childhood and related services into one global VT early childhood budget, so that expenditures across departments and programs can be readily identified.

In a rural environment, community partners operating local programs are critical to

bringing statewide standards, policies, innovations and investments to children and families in geographically remote and economically diverse communities. Vermont has a number of important community partners in the emerging system of early learning and development. Several primary partners are profiled here.

*Vermont Early Childhood Alliance* is a statewide coalition of individuals, organizations, businesses and agencies from the private and public sectors dedicated to advocating for all of Vermont's children during the early childhood years in the areas of learning, safety, health, and food and economic security.

*Early Head Start & Head Start.* Vermont has seven federally funded Head Start grantees serving children and families living in poverty across the state. Four of the 7 are also Early Head Start grantees. According to the 2012-2013 Head Start Program Information Report, 62% of Vermont Head Start & Early Head Start children are enrolled in center-based programs while 2% are enrolled in family child care programs (i.e., registered family child care) with Head Start supports. Twenty-seven percent of children are enrolled in the Head Start and Early Head Start home-based program option (i.e., home visiting) that provides services to children, primarily in the child's home, through intensive work with the child's parents and family. Nine percent of children are enrolled in a Head Start combination program option that provides services to children in both a center-based setting and through intensive work with the child's parents and family at home. All of Vermont's Head Start programs have STARS ratings (TQRIS) of 4 or 5 stars (out of a maximum of five). Six of the seven Head Start programs in Vermont participate in Act 62 preschool partnerships.

*Parent Child Centers (PCC)/Parent Child Centers Network (PCCN)* are funded by legislative appropriation since 1988 and are established in statute. Vermont's fifteen (15) Parent Child Centers form a network of community-based, non-profit organizations open to all families and children of Vermont, with a special focus on families with young children, young parents, and pregnant and parenting teens. Parent Child Centers are all independent nonprofit organizations, or programs within nonprofits. Parent Child Centers provide a range of services and supports, including for parents of children with high needs. These include:

- Serving as clearinghouses for general information about child and family issues;
- Providing home visits to families with young children who request home-based support;

- Offering playgroups;
- Providing opportunities for parent education; and
- Advocating for family-centered services in the community.

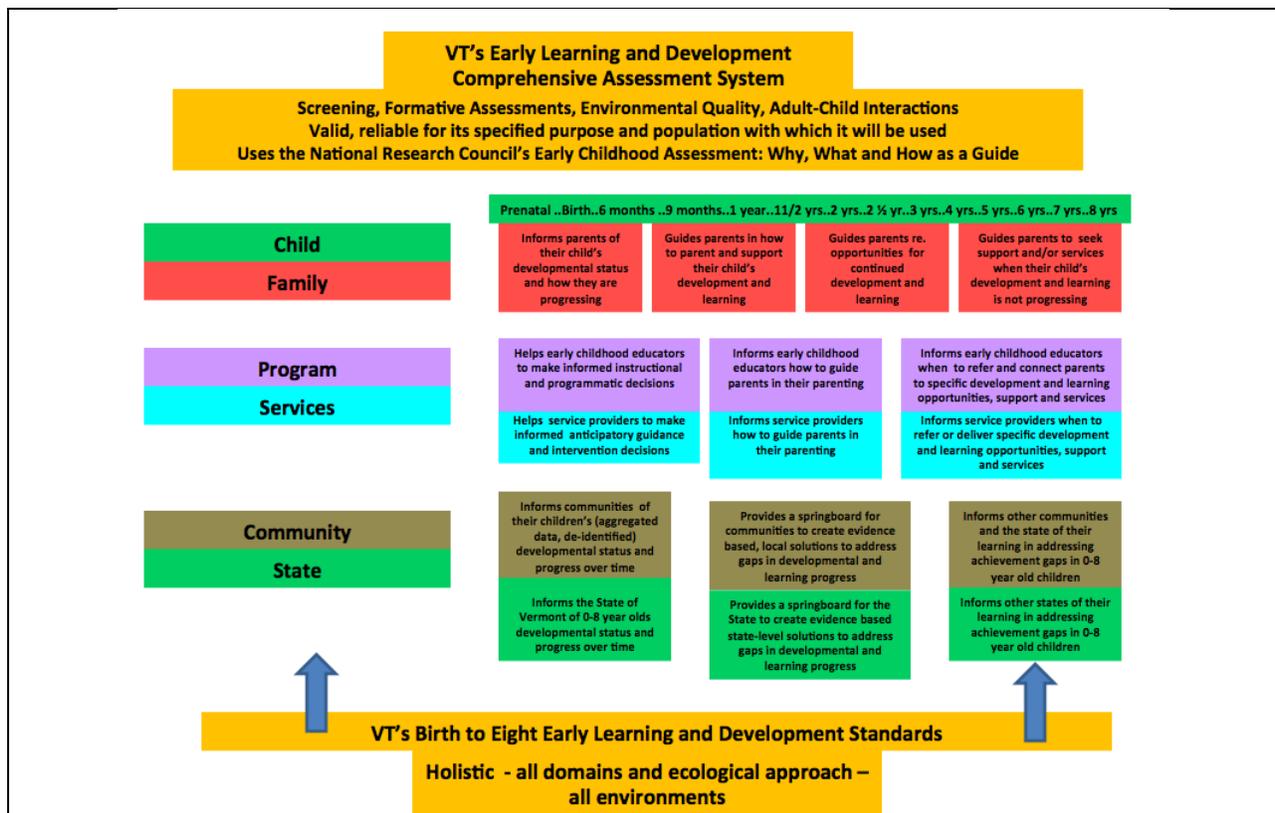
*Community Child Care Support Agencies (CCCSAs)* include 12 CCCSAs located throughout Vermont's fourteen counties. Each of these agencies is a member of Vermont Association for Child Care Resource and Referral (VACCRRA), Vermont's child care resource and referral network. Six of the CCCSAs are also Parent Child Centers.

VACCRRA member agencies share a common commitment to the development and support of quality child care options for all Vermont children and their families, including children with high needs. CDD within DCF contracts with Community Child Care Support Agencies to provide referral information and outreach related to child care quality, assistance in paying for child care for families, processing eligibility determination for the Child Care Financial Assistance Program (CC FAP), and providing professional development training and resources for child care providers.

The *Vermont Family Network (VFN)* promotes health, education and well-being for all children and families, with a focus on children and young adults with special needs. VFN offers support, services, and referrals for families with children with high needs and disabilities including ASD and high-tech medical concerns. VFN also provides training and support for the professionals who serve children (birth through 21 years of age) with high needs and disabilities.

Vermont Family Network is affiliated with a number of state and national programs and organizations focused on mutually meaningful family/professional partnerships and family leadership development: VFN is the state's federally-funded Family-to-Family Health Information Center (F2F-HIC) and Parent Training Information Center (PTIC), and is the national Family Voices Vermont chapter and Parent to Parent Program. Vermont Family Network is a core partner in the Vermont Early Childhood Alliance (formerly Kids Are Priority One) and a member of the Vermont Coalition for Disability Rights (VCDR).

Vermont has several innovative funding strategies related to systemic investments in early learning and development in Vermont. These include the Building Bright Futures Facilities Fund at the Vermont Community Loan Fund, the Vermont Children's Trust Foundation (VCTF) Tax Check Off and Vermont Child Care Tax Credits..



**Figure 7: Vermont's ELD Comprehensive Assessment System**

**Comprehensive Assessment Systems**

As Figure 7 illustrates, Vermont expects infant, toddler, and preschooler developmental progress to be monitored and assessed early and continuously utilizing valid and reliable measures that are developmentally, culturally and linguistically appropriate for each child. Key assessments include a newborn's health status, a 9-month-old's attachment status, a 3-year-old's social and emotional well-being, an assessment across all domains of learning and development at entry into kindergarten, and an 8-year-old's proficiency in reading. Tracking these key points in a child's early years creates a longitudinal and developmentally appropriate view of progress over time.

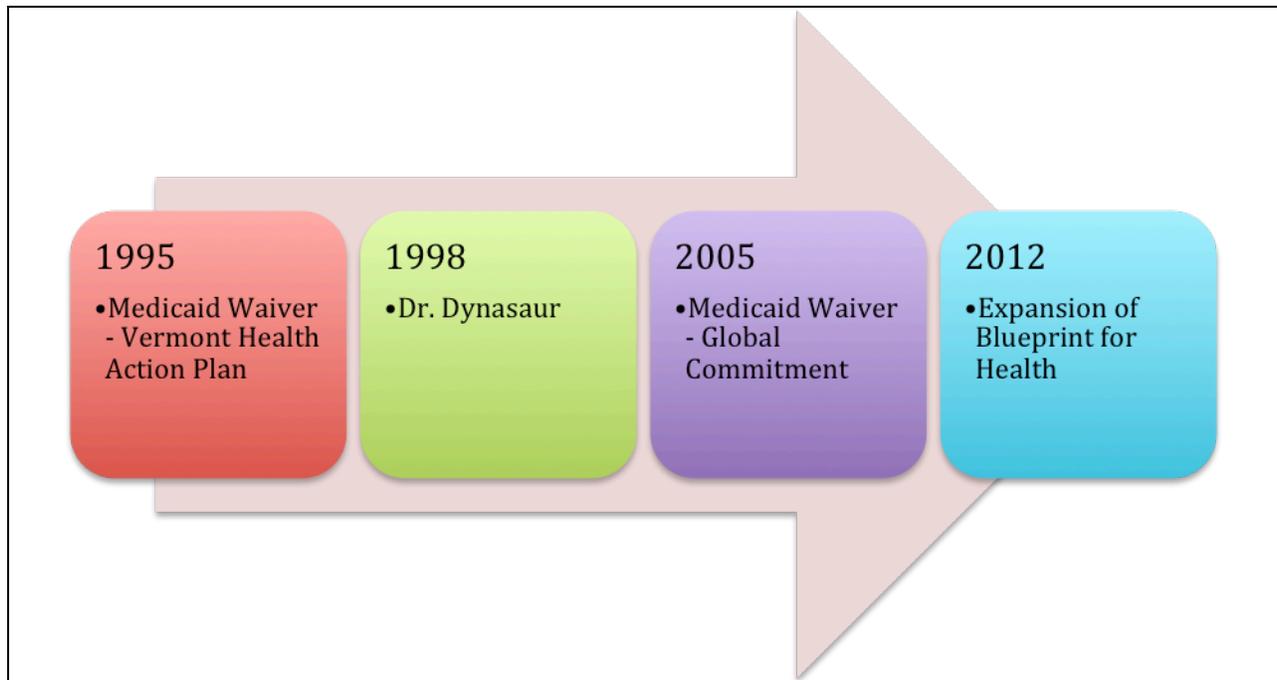
The Program Practices Arena of VT STARS embeds components of a comprehensive assessment system intended to help ECE make informed instructional and programmatic decisions about the process and context of young children's learning and development. Progression through VT STARS levels allows providers to begin accessing assessment where they are, and guides them upward toward greater reliability and rigor in assessment practices.

Several valid and reliable assessment tools are approved for use in VT STARS.

Formative Assessment: ELDP participating in VT STARS must provide verification that *“the program regularly uses observation and other forms of informal assessments to document children's strengths, needs, interests and growth. The program maintains records of this documentation and utilizes the results of this ongoing system of assessment to inform curriculum planning.”* In order to earn four or five points in this arena, programs must use the Agency of Education (AOE)/Child Development Division (CDD) approved child assessment system, which is TS GOLD. More details on TS GOLD and an HQP to improve practice in use of this instrument are in C2. TS GOLD has been aligned with current VELs.

Measures of Environmental Quality: The Environmental Rating Scales (ERS) are the predominant valid program assessment tool recognized and applied in the VT STARS. These include the Infant Toddler Environmental Rating Scale (ITERS), the Early Childhood Environmental Rating Scale (ECERS), the Family Child Care Environmental Rating Scale (FCCERS) and the School Age Care Environmental Rating Scale (SACERS). (See B3).

Measures of Quality of Adult Child Interactions: The Classroom Assessment Scoring System (CLASS) is also recognized as a valid program assessment tool in VT STARS; it is generally used by programs in higher tiers of VT STARS that have consistently high ERS ratings. (See C2).



**Figure 8: Vermont Healthcare Innovations**

### **Health Promotion Practices**

Vermont's early learning and development programs and system components incorporate elements of high-quality health promotion practices (see Table A1-9) but Vermont's strong commitment to health and mental health promotion and health care reform go much deeper.

In July 1995, Vermont's Medicaid 1115 Research and Demonstration Waiver application to create and implement the Vermont Health Access Plan (VHAP) was approved. The waiver allowed for a basic package of insurance coverage for previously uninsured adults with incomes up to 150 percent of the federal poverty level (FPL). In February 1999, eligibility for previously uninsured adults was expanded to include parents and caretaker relatives of Medicaid-eligible children up to 185% FPL.

In October 1998, the children's Medicaid program, Dr. Dynasaur, expanded eligibility for children birth to 18 years to include those with incomes up to 300% FPL, further reducing the percentage of Vermont children who are uninsured. (Vermont had been covering children with incomes up to 225% FPL since the early 1990's.)

In the Fall 2005, Vermont secured approval for Section 1115 Medicaid waiver, the "Global Commitment waiver," that allows Vermont to fundamentally restructure its Medicaid program.

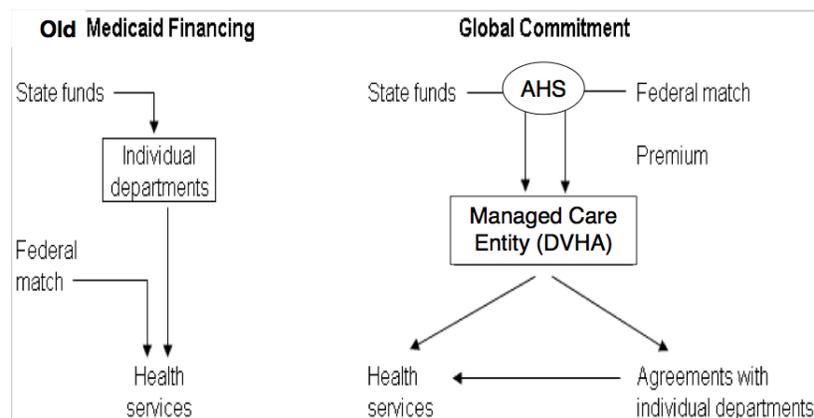
The waiver imposes a cap on the amount of federal Medicaid funding available to Vermont for nearly all Medicaid expenditures except for SCHIP and Nursing Homes. It also includes all Medicaid administrative expenses. In combination with a second, long-term care waiver, the Global Commitment waiver makes Vermont the first state in the nation agreeing to a fixed dollar limit on the amount of federal funding available for its Medicaid program. In exchange for taking on the risk of operating under a capped funding arrangement, the waiver allows Vermont to use federal Medicaid funds to refinance a broad array of its own, non-Medicaid health programs, and a greater level of program flexibility.

Such flexibility includes changes in cost-sharing, plan design, and possible caps on enrollment for "non-mandatory" Medicaid beneficiaries.

Rapid, targeted expansion of Blueprint for Health (see program description below) to pediatric practices occurred over the past year. A new emphasis was placed on customizing a Pediatric Community Health Team for the Fletcher Allen Health Care hospital service area (HSA) in Chittenden, Vermont's largest county.

Current work is focused upon the role of practice-based social workers, with emphasis on service to the families of children from birth to 6 months of age. Examples of these services include (1) assessing insurance coverage/Medicaid access; (2) understanding supports that are already in place; and (3) identifying family issues and needed social supports.

## Global Commitment: Medicaid Managed Care Structure

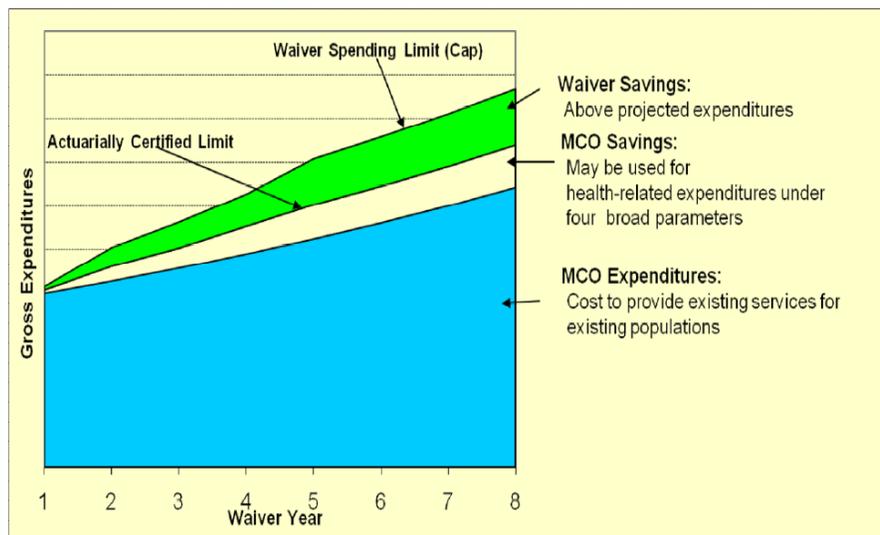


**Figure 9: Global Commitment: Medicaid Managed Care Structure**

About 1 in 4 Vermonters receive some benefits through Green Mountain Care. As Figure 10 demonstrates, Global Commitment has resulted in substantial cost savings to Vermont. Thus, while other states have reduced or eliminated coverage for optional Medicaid services and beneficiary groups over the past few years, the Global Commitment waiver has enabled Vermont to sustain and expand its Medicaid program. The waiver allows Vermont to:

- Use any excess capitation revenues to reduce the rate of uninsured and/or underinsured in Vermont;
- Increase the access of quality health care to uninsured, underinsured, and Medicaid beneficiaries;
- Provide public health approaches and other innovative programs to improve health outcomes, health status and quality of life for uninsured, underinsured and Medicaid eligible individuals in Vermont; and
- Encourage the formation and maintenance of public-private partnerships in health care, including initiatives to support and improve the health care delivery system.

Some of the additional health care investments Vermont has been able to make as a result of the waiver including expansions to school health, behavioral health, and Women, Infants and Children (WIC) services.



**Figure 10: Global Commitment Cost Savings**

The managed care model also encourages inter-departmental collaboration and consistency

across programs. Many of the innovative integration efforts brought together under Integrated Family Services in AHS, including Children's Integrated Services, apply the Global Commitment waiver to support fiscal models that promote coordinated service delivery.

The Vermont Child Health Improvement Program (VCHIP) is a population-based child and adolescent health services research and quality improvement program of the University of Vermont. VCHIP is also a key partner in Vermont's Early and Periodic Screening, Diagnostic and Treatment (EPSDT) implementation and in the continuous improvement of the Vermont's health system for children and families. (EPSDT provides comprehensive and preventive health care services for children under age 21 who are enrolled in Medicaid).

The Vermont Department of Health (VDH) and VCHIP have a longstanding collaboration, also involving the Department of Vermont Health Access, to promote and advance the State Medicaid Plan by increasing the efficiency, economy, and quality of care provided to Medicaid-eligible children and families in medical homes with appropriate and effective linkages among a community-based, coordinated, integrated system of care.

All VCHIP activities – such as Child Health Advances Measured in Practice (CHAMP) and Vermont Program for Evidence in Practice (VPEP) – seek to positively impact Vermont's children, including those with high needs. However, two current VCHIP initiatives specifically address children with high needs:

- Autism Spectrum Disorder Quality Improvement Project, which extends developmental and autism screening in primary care practice in Vermont by identifying practices in need of training and developing a training module to introduce the scientific and national guidelines that support age-appropriate developmental and autism screening.
- Child Psychiatric Phone and Email Consultation Project, which provides phone and email consultation to assist in the management of children's emotional and behavioral problems in primary care settings.

In addition, VCHIP recently completed a study of developmental and autism screening in primary care practices (Barry, et al. 2009). Key findings included:

- 88% indicated they have a specific approach to developmental surveillance;
- 87% perform developmental screenings, with 75% of family medicine practices and 100% of pediatric practices reporting developmental screenings; and

- 59% report performing autism screening.

The Fit and Healthy Vermonters plan encourages lifelong healthy eating and physical activity for all Vermonters. It includes goals; strategies and measurable outcomes for promoting these habits among children in schools, centers and family child care homes.

Blueprint for Health. The Vermont Blueprint for Health is a state-led initiative that transforms the way that health care and overall health services are delivered in Vermont. The goal of the Blueprint is to provide the community with a continuum of seamless, effective, and preventive health services, while reducing medical costs.

At the heart of the Vermont Blueprint for Health are:

- Patients – individual and unique receiving the personal attention and support they need to take charge of their own health;
- Doctors and their health care teams – available when needed;
- Community Health Teams that connect patients to resources beyond the doctor’s office;
- Workshops and support groups that help patients reach their own goals;
- Prevention and wellness services;
- Computerized health records; and
- Free services

The Commissioner of the Vermont Department of Health (VDH) establishes the schedule of services, or periodicity schedule; the Vermont state standard of care is now the *Bright Futures Guidelines for Health Supervision of Infants, Children & Adolescents*. Vermont is fortunate to have the national leadership team (Drs. Paula Duncan, Joseph Hagan, and Judith Shaw) for the current Bright Futures work as leaders of the collaborating organizations (Vermont chapter of the American Academy of Pediatrics and the Vermont Child Health Improvement Program) that are at the forefront of the improvement of our health care system for children and families.

In Vermont, Early Periodic Screening, Diagnosis, and Treatment (EPSDT) Program (the child health component of Medicaid) services are primarily delivered in the medical home, with selected services delivered in a variety of other public health and community settings, such as schools and WIC clinics. A historically strong collaboration between Vermont’s public health professionals and health care providers provides a platform to support a shared interest in

improving health outcomes with a particular focus on underserved populations. These partners also share the belief that that following mandated activities are critical to achieving core population-based health outcomes and thus form the basis of the collaboration between VDH and the required (by EPSDT) professional organizations such as the American Academy of Pediatrics (AAP):

- Health supervision, preventive care, counseling (safety, nutrition, psychosocial);
- Screenings (e.g., growth/development) (see C2 and C3);
- Immunizations; and
- Providing information regarding private insurance/public resources (such as SSI, SCHIP, Medicaid, Early Intervention programs, and Title V Programs for Children with Special Health Needs).

Mental Health. Research about children with severe problem behavior and behavior disorders has demonstrated that early childhood is a critical period for the onset of emotional and behavioral impairments. Also, accumulating evidence, such as the Adverse Childhood Experiences (ACE) study (Newlin, 2011), indicates that many adult problems are rooted in early childhood experience. The 2010 Vermont Behavioral Risk Factor Surveillance Survey revealed that 13% of Vermont adults had four or more ACEs. Adults with at least four ACEs generally experience higher rates of chronic disease and behaviors such as substance use compared to the general population.

In addition to assessment, referral and treatment services provided through Children's Integrated Services and other public and private entities, Vermont has several notable activities in the children's mental health area.

Project LAUNCH (see C3) is a pilot in Chittenden County (the State's most populous) of a strength-based, family-centered, culturally competent community system for promoting young child wellness in all developmental domains. This is a five-year grant that began in 2014.

The Vermont Federation of Families for Children's Mental Health (VFFCMH) is the first state chapter of the National Federation of Families for Children's Mental Health, and actively brings family/parent voice to Vermont's Coordination of Services, for families in complex situations with the disability process. The population served is families of children birth to 22 experiencing or at risk to experience emotional, behavioral or mental health challenges. Families

are supported to meet the needs of their children and family, to build leadership skills, use their voice of experience to impact service creation delivery and evaluation and to partner with schools and the child serving system partners. VFFCMH provides training for families and the professionals who assist them around parent professional partnerships.

VFFCMH's focus on the Multi Tiered System of Supports (MTSS) is for children and families at the top of the public health triangle, families with complex needs, and in multiple systems (see C3). The Federation collaborates with schools, communities, governmental, and private agencies, and other advocacy organizations to achieve its goals.

The Vermont Family Network (VFN) promotes better health, education, and well-being for all children and families, with a focus on children and young adults with special needs. Vermont Family Network began in July 2008, when Vermont Parent Information Center (VPIC) and Parent to Parent of Vermont merged. VFN has been implementing parent/consumer trainings since the inception of MTSS and continues to provide information & resources that reflect the K-12 special developmental goals plan, including MTSS for learning and behavior, enabling parents to be more fully informed about these instructional strategies and more engaged in their child's education.

### **Family Engagement Strategies**

Vermont has not yet committed to a common statewide set of family engagement standards. However, information in Table A1-9 documents a commitment to “family centered care”, “family engagement” and “family support,” all of which are embedded firmly in Vermont's components of the early learning and development system. Further, this will be addressed in the action plan resulting from the Governor's Early Childhood Summit.

Vermont believes in and supports parents as children's first and most consistent teachers and advocates. We strive to implement an array of strategies to provide culturally and linguistically appropriate information and support to all families, and in particular to those families with high needs children, to help them provide stability, nurture well-being and promote school readiness in the early years.

In 2010, Vermont's Governor, the Region I Office of Head Start, Regional Program Manager, the Secretary of the AHS, the Commissioner of the DCF, the Deputy Commissioner of CDD, the Chair of the Vermont Head Start Association, the Director of Integrated Support for

Learning in the DOE, the Director of Children's Integrated Services, and the Director of the Head Start-State Collaboration Office collectively developed and signed an interagency agreement titled, *Supporting Children with Disabilities and Their Families, An Interagency Agreement Among Early Care, Health and Education Programs and Agencies in Vermont* that serves as a guide and commitment to serving children with disabilities and their families. (See Appendix II).

Also, Vermont DCF has recently adopted the Strengthening Families Framework as a primary prevention strategy to support and strengthen families across all of its programs and services. In 2010, the Strengthening Families Centers grant program and the Strengthening Families Approach Learning Community, were implemented. A high rating in VT STARS is a requirement for access to these resources developed to provide support and incentives for ELDP serving children with high needs to continuously improve quality.

#### **Development of Early Childhood Educators**

Vermont's Higher Education Institutions and other professional development providers strive to strengthen the quality, alignment and accessibility of courses and programs for pre-service and in-service early childhood educators and early childhood special educators. Vermont seeks to increase more in-depth professional development opportunities that are focused on increasing early childhood educators' knowledge and skills in content areas that are especially needed when teaching young children with high needs.

The Northern Lights Career Development Center (NLCDC) (see D2) is a statewide center with both a physical and virtual presence for all early childhood and afterschool professionals in Vermont. It partners with educators and providers working in schools, child care centers and family child care homes, home visiting programs and other community settings to guide and enhance staff professional development opportunities. Its purpose is to support and enhance a comprehensive, accessible and integrated system of quality professional development in the state. NLCDC works with higher education institutions to establish professional development standards (Core Competencies) and maintain a career ladder-framework for early childhood and afterschool professionals. It provides course work toward credentials, and establishes and maintains an instructor registry and course calendar.

The NLDCD verifies professional development and related qualifications for practitioners

as part of an ECE workforce registry incorporated into CDD's Bright Futures Information System (BFIS). NLCDC is supported by an annual grant of approximately \$350,000 in CCDF quality funds from the CDD (see Appendices XII, XIII, XIV, XV, XVI, and XVII).

The Starting Points Networks are child care providers coming together in small groups/networks to participate in training, provide peer support and plan community activities that increase the quality of early learning and development services in and across their programs and regions. This strategy has been a part of the Vermont quality improvement system for over 15 years. Over these years, providers in these networks have achieved credentials, developed leadership skills and completed college courses. Starting Points has contributed to provider retention and thus the continuity of care. CDD supports Starting Points Networks with approximately \$90,000 annually in CCDF quality funds.

The Starting Points Networks and CDD are working in partnership with the Vermont Birth to Three project to connect providers who are serving infants and toddlers to resources, including professional development opportunities.

The VT Child Care Apprenticeship Program (VCCAP) is a training program that matches mentors (such as head teachers, assistant directors, program coordinators, and directors) with less experienced staff (such as assistant teachers, individual aids, paraprofessionals) for formal training in the field of early care and education. VCCAP follows the tradition of registered apprenticeship, which combines supervised on-the-job training with 297 hours of formal training hours over a two-year time period. These training hours include six tuition-free college credits in the field of early care and education along with 4,000 hours of formal on-the-job training.

The VCCAP is managed through the efforts of the VT Child Care Industry and Careers Council (VCCICC), a statewide, not for profit organization, working in partnership with the VT Departments of Labor. VCCICC blends state and federal funding, private foundation and community grants, to pay for the college courses that are offered to benefit the child care workforce. These courses are offered tuition-free, both in conventional classroom settings and online. Classroom courses are rotated around the state to provide access to higher education in various geographical areas. (Please see Appendices XV and D2).

A professional development opportunity with a targeted focus developed in Vermont is the now nationally disseminating Building Blocks for Literacy model. This has been widely shown

to assist children to develop essential foundational skills to help them learn to read and write upon entering kindergarten. It was developed in Vermont in 1997. Building Blocks for Literacy has reached an estimated 2,750 early care and education providers, 1,200 parents, and 55,000 preschool children in Vermont. Research on the effectiveness of Building Blocks for Literacy was cited 14 times in the federal Department of Education's recent *Toward the Identification of Features of Effective Professional Development for Early Childhood Educators, Literature Review* (2012).

### **Kindergarten Entry Assessments**

Readiness Kindergarteners Survey. The Readiness Kindergarteners Survey is one of the strengths of Vermont's early childhood system (see E1). Since 2000, Vermont has gathered information on the readiness of children entering kindergarten by annually surveying all kindergarten teachers about the "readiness" of their students within the first six to ten weeks of school. The Vermont Research Partnership, which includes the University of Vermont, the Agency of Human Services, and the Vermont Agency of Education, developed the *Ready Kindergartners Survey* in 1999-2000.

This survey is not a direct assessment of children, but relies on the accumulated observational knowledge the teacher has developed about the child during the first few weeks of kindergarten. Teachers complete a survey for each child. The *Ready Kindergartners Survey* consists of 28 items. These items are aligned with the Vermont Early Learning Standards.

### **Effective Data Practices**

Step Ahead Recognition System (VT STARS) is Vermont's Tiered Quality Rating and Improvement System (TQRIS). Vermont was one of the first 13 states to implement a QRIS. Initially implemented in 2003, VT STARS assesses and recognizes program quality with a 5-level graduated point system that awards a rating of between 1 and 5 VT STARS to ELD programs. VT STARS uses a combination of providers' self-reported evidence and third-party verified evidence in 5 arenas:

- Regulatory compliance history;
- Teaching staff qualifications and annual professional development;
- Families and community;
- Program practices; and

- Administration.

VT STARS incorporates all four components of a TQRIS as defined in the RTT-ELC Request for Proposals.

The Child Development Division expends about \$150,000 annually for administration of VT STARS by a subcontracting non-profit community agency, and about \$279,000 is awarded annually to participating providers in bonus payments for achieving higher levels in VT STARS. The Child Care Financial Assistance Program (CC FAP) pays substantially higher rates for increasing levels of quality as documented in VT STARS in order to support affordable access to high-quality programs for low income families. (Please see B-1, as well as Appendices VI, VII, and VIII).

**Table 4: Vermont CC FAP VT STARS Differential Payments**

1 STAR	2 VT STARS	3 VT STARS	4 VT STARS	5 VT STARS
5%	10%	20%	30%	40%

Early Childhood Data Reporting System (ECDRS). Vermont is one of the states that are developing similar reporting systems to acquire, connect and analyze data across the early childhood system and link with other child, family, workforce, program, and community databases.

ECDRS is a searchable web-based integrated public platform holding care, education, health, and program quality datasets to inform, shape, and improve efforts to promote the well-being of young children, their families and communities from birth, with a focus on prenatal care, through age 8 (third grade).

The Building Bright Futures State Advisory Council launched the ECDRS in September 2013 with partial functionality as a working prototype (version 1.3) using seven datasets, including STARS data (since 2007). Once ECDRS is fully developed (expected by the end of 2017), Vermont policymakers will be able instantly access, track and analyze state and local indicators of young child and family well-being and early childhood system strengths through visual depictions such as graphs, maps, and charts. This feature will allow for rapid recognition of the circumstances of Vermont families—data backed, zoned geographically by legislative and school districts—improving program planning and policies, and driving continuous improvement

and results accountability.

ECDRS is a product of Building Bright Futures State Advisory Council and is currently advised by its Data and Evaluation Committee (DEC) (See A1).

When it is completed, ECDRS will enable Vermont to effectively leverage its existing data-rich assets by housing them in one easily accessible and virtual public place. It will give state policymakers the concrete data they need to answer questions such as:

- Are Vermont's young children healthy, happy and developmentally on track?
- Where are the gaps in children's health, learning and achievement?
- Are we investing our resources wisely and achieving optimal outcomes for our children?

Our vision is that ECDRS will be an integrated online data repository and toolbox that provides a detailed profile of Vermont's early childhood data systems by key characteristics. Our work with the national Early Childhood Data Collaborative since 2010 and the current BBF sponsored ECDRS initiative (see E2) has provided opportunities for us to closely examine and build relationships between each of the stewards and stakeholders of the data systems in Table A-13. Over time, this has led to an increased understanding by stakeholders of the comprehensiveness and inter-connectedness of the early childhood system. Further, it reinforces that we all share a common goal: that longitudinal and comprehensive data are necessary to support children's health, development and learning in their early years, through their school years and onward. While our common commitment to this goal is exemplified through the ECDRS working prototype,<sup>1</sup> we lack the necessary infusion of time and resources to take it to

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<sup>1</sup> The ECDRS working prototype was developed to demonstrate that an integrated online system with meaningful data acquired from multiple sources (national, state and local) can be harnessed (data pushed out to other systems and pulled in from other systems) using a variety of tools (e.g., visualizations, reports, and stories) by a diverse group of end users to advance the well-being of Vermont's children. For the ECDRS working prototype (version 1.3), we used the policy question "Is the quality of regulated

the next level. This would include interoperability with VT’s K-12 SLDS, which is currently under development. (Please see E2).

In every significant area impacting early learning and development – health, education, and child and family support services – we believe Vermont has employed innovation, information, expertise, and collaboration to create and implement public policy that engenders systemic change. As a report from the Vermont Child Poverty Council states (2009), Vermont is becoming “a better place for low income children to grow, learn and live...because policy makers have made commitment to improving the lives of children.”

<b>Table (A)(1)-1: Children from Low-Income<sup>2</sup> families, by age</b>		
	<b>Number of children from Low-Income families in the State</b>	<b>Children from Low-Income families as a percentage of all children in the State</b>
<b>Infants under age 1</b>	1,995	32.9%
<b>Toddlers ages 1 through 2</b>	5,382	44.2%
<b>Preschoolers ages 3 to kindergarten entry</b>	5,847	44.4%
<b>Total number of children, birth to kindergarten entry, from low-income families</b>	13,355	42.5%
Population Data Source: US Census Bureau 2011 Annual Estimates of the Resident Population by Single Year of Age and Sex		

child care and education programs improving?” and furnished it with visuals and supporting socio-demographic data.

<sup>2</sup> Low-Income is defined as having an income of up to 200% of the Federal poverty rate.

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<b>Table (A)(1)-1: Children from Low-Income<sup>2</sup> families, by age</b>		
	<b>Number of children from Low-Income families in the State</b>	<b>Children from Low-Income families as a percentage of all children in the State</b>
<p>Low income Percentages: 2011 American Community Survey Public Use Microdata Sample (3 year estimates)</p> <p>Low income is defined as less than or equal to 200% of the Federal Poverty Level.</p> <p>Preschool ages 3 through 4 includes children 4 years of age.</p> <p>"Kindergarten entry" for the purposes of this grant application, is defined as 5 years of age. In Vermont, state law sets the parameters for kindergarten entry, but stipulates that kindergarten entry is determined by local school boards. The parameters for kindergarten entry are that the child must be 5 on or after August 31 but not after January 1 (Vermont Statutes 16 1073). Most local school boards have set the entrance date as September 1. The compulsory age for school is 6 years of age.</p>		

<b>Table (A)(1)-2: Special populations of Children with High Needs</b>		
<p><i>The State should use these data to guide its thinking about where specific activities may be required to address special populations' unique needs. The State will describe such activities throughout its application.</i></p>		
<b>Special populations: Children who . . .</b>	<b>Number of children (from birth to kindergarten entry) in the State who...</b>	<b>Percentage of children (from birth to kindergarten entry) in the State who...</b>
<b>Have disabilities or developmental delays<sup>3</sup></b>	2875*	9.2%
<b>Are English learners<sup>4</sup></b>	833**	2.65%

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<sup>3</sup> For purposes of this application, children with disabilities or developmental delays are defined as children birth through kindergarten entry that have an Individual Family Service Plan (IFSP) or an Individual Education Plan (IEP).

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<b>Table (A)(1)-2: Special populations of Children with High Needs</b>		
<i>The State should use these data to guide its thinking about where specific activities may be required to address special populations' unique needs. The State will describe such activities throughout its application.</i>		
<b>Special populations: Children who . . .</b>	<b>Number of children (from birth to kindergarten entry) in the State who...</b>	<b>Percentage of children (from birth to kindergarten entry) in the State who...</b>
<b>Reside on "Indian Lands"</b>	0	0
<b>Are migrant<sup>5</sup></b>	63 <sup>**</sup>	0.20%
<b>Are homeless<sup>6</sup></b>	329	1.0%
<b>Are in foster care</b>	269 <sup>***</sup>	0.86%
<b>Other as identified by the State</b> <b>Describe:</b>	290 <sup>***</sup>	0.92%
<p>*Developmental disabilities 3-5 year olds Data Sources December 1, 2012 Child Count; 0-3 year olds, Part C Annual Performance Report 2013</p> <p>** Estimated - Based on the average of children in K-3 who are identified as English Language Learners, Migrant, or Homeless; Data Source: School Census Reports, October 2012</p> <p>*** Data Source: DCF Family Services Division, SSMIS</p>		

<sup>4</sup> For purposes of this application, children who are English learners are children birth through kindergarten entry who have home languages other than English.

<sup>5</sup> For purposes of this application, children who are migrant are children birth through kindergarten entry who meet the definition of "migratory child" in ESEA section 1309(2).

<sup>6</sup> The term "homeless children" has the meaning given the term "homeless children and youths" in section 725(2) of the McKinney-Vento Homeless Assistance Act (425 U.S.C. 11434a(2)).

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<b>Table (A)(1)-3: Participation of Children with High Needs in different types of Early Learning and Development Programs, by age</b>				
<i>Note: A grand total is not included in this table since some children participate in multiple Early Learning and Development programs.</i>				
<b>Type of Early Learning and Development Program</b>	<b>Number of Children with High Needs participating in each type of Early Learning and Development Program, by age</b>			
	<b>Infants under age 1</b>	<b>Toddlers ages 1 through 2</b>	<b>Preschoolers ages 3 until kindergarten entry</b>	<b>Total</b>
<b>State-funded preschool</b>				
Publicly funded PreK* School Census, Oct. 2012	0	0	4,114	4,114
<b>Early Head Start and Head Start</b> <sup>7</sup> Head Start Program Information Report for the 2012-2013 Program Year; data as of 9/30/2013	179	398	1,313	1,890
<b>Programs and services funded by IDEA Part C and Part B, section 619</b> 2012 Kid Count Data Part B section 619= December 1, 2012 Child Count Report	75	673	1,337	2,085
<b>Programs funded under Title I of ESEA</b> <i>Data Source and Year:</i>	0	0	2,733	2,733
<b>Programs receiving funds from the State's CCDF program</b> ** <i>Data Source and Year:</i>	1,346	1,205	3,578	6,129
<b>Other</b> Early Education Initiative (EEI) Grants EEI Year End Report, July 2012	0	0	1,001	1,001
*PreK is universal and inclusive; except for age, it does not target specific populations. An estimate of the number of high needs children in PreK is based on % of low income children 3-5, children on				

<sup>7</sup> Including children participating in Migrant Head Start Programs and Tribal Head Start Programs.

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<b>Table (A)(1)-2: Special populations of Children with High Needs</b>		
<i>The State should use these data to guide its thinking about where specific activities may be required to address special populations' unique needs. The State will describe such activities throughout its application.</i>		
<b>Special populations: Children who . . .</b>	<b>Number of children (from birth to kindergarten entry) in the State who...</b>	<b>Percentage of children (from birth to kindergarten entry) in the State who...</b>
IEPs in LRE "regular education" category. **The data provided for the State's CCDF program participation represents the <b>monthly average number</b> of children served by age group using FY13 annual data. The data is from the Bright Futures Information System monthly payment/attendance extracts.		

<b>Table (A)(1)-3b: Participation of Children in Early Learning and Development Programs in the State, by Race/Ethnicity</b>							
Note: A grand total is not included in this table since some children participate in multiple Early Learning and Development programs.							
<b>Type of Early Learning and Development Program in the State</b>	<b>Number of Hispanic children</b>	<b>Number of Non-Hispanic American Indian or Alaska Native Children</b>	<b>Number of Non-Hispanic Asian Children</b>	<b>Number of Non-Hispanic Black or African American Children</b>	<b>Number of Non-Hispanic Native Hawaiian or Other Pacific Islander Children</b>	<b>Number of Non-Hispanic Children of Two or more races</b>	<b>Number of Non-Hispanic White Children</b>
State-funded preschool <i>Specify: Publicly Funded PreK</i>	65	15	139	201	17	Not Available	5051
Early Head Start and Head Start <sup>8</sup>	52*	Not	Not	Not	Not	Not	Not

<sup>8</sup> Including Migrant and Tribal Head Start located in the State. The number of Hispanic children comes from the Head Start Program Information Report for the 2012-2013 Program Year; data as of 9/30/2013. The Head Start

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<b>Table (A)(1)-3b: Participation of Children in Early Learning and Development Programs in the State, by Race/Ethnicity</b>							
Note: A grand total is not included in this table since some children participate in multiple Early Learning and Development programs.							
<b>Type of Early Learning and Development Program in the State</b>	<b>Number of Hispanic children</b>	<b>Number of Non-Hispanic American Indian or Alaska Native Children</b>	<b>Number of Non-Hispanic Asian Children</b>	<b>Number of Non-Hispanic Black or African American Children</b>	<b>Number of Non-Hispanic Native Hawaiian or Other Pacific Islander Children</b>	<b>Number of Non-Hispanic Children of Two or more races</b>	<b>Number of Non-Hispanic White Children</b>
		Available**	Available**	Available**	Available**	Available**	Available**
Early Learning and Development Programs funded by IDEA, Part C	22	0	30	45	0	63	1615
Early Learning and Development Programs funded by IDEA, Part B, section 619	9	0	13	31	1	8	1275
Early Learning and Development Programs funded	Not Available	Not Available	Not Available	Not Available	Not Available	Not Available	Not Available

Program Information Report for the 2012-2013 Program Year does not contain data on the numbers of Non-Hispanic American Indian or Alaska Native Children, Non-Hispanic Asian Children, Non-Hispanic Black or African American Children, Non-Hispanic Native Hawaiian or Other Pacific Islander Children, Non-Hispanic Children of Two or more races, and Non-Hispanic White Children. Instead, this report contains data on two ethnicity categories: the numbers of Hispanic and non-Hispanic children and data on eight racial categories: the numbers of American Indian or Alaska Native Children, Asian Children, Black or African American Children, Native Hawaiian or Pacific Islander Children, White Children, Biracial or Multi-Racial Children, Children of an Other Race, and Children of an Unspecified Race. In prior program years, the Head Start Program Information Reports did not contain data on the numbers of Non-Hispanic American Indian or Alaska Native Children, Non-Hispanic Asian Children, Non-Hispanic Black or African American Children, Non-Hispanic Native Hawaiian or Other Pacific Islander Children, Non-Hispanic Children of Two or more races, and Non-Hispanic White Children.

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<b>Table (A)(1)-3b: Participation of Children in Early Learning and Development Programs in the State, by Race/Ethnicity</b>							
Note: A grand total is not included in this table since some children participate in multiple Early Learning and Development programs.							
<b>Type of Early Learning and Development Program in the State</b>	<b>Number of Hispanic children</b>	<b>Number of Non-Hispanic American Indian or Alaska Native Children</b>	<b>Number of Non-Hispanic Asian Children</b>	<b>Number of Non-Hispanic Black or African American Children</b>	<b>Number of Non-Hispanic Native Hawaiian or Other Pacific Islander Children</b>	<b>Number of Non-Hispanic Children of Two or more races</b>	<b>Number of Non-Hispanic White Children</b>
under Title I of ESEA							
Early Learning and Development Programs receiving funds from the State's CCDF program	122	0	61	245	0	245	5454
Other <i>Describe:</i> Early Education Initiative Grant Programs	Not Available	Not Available	Not Available	Not Available	Not Available	Not Available	Not Available
<p>* Head Start Program Information Report for the 2012-2013 Program Year; data as of 9/30/2013.</p> <p>** The number of Hispanic children comes from the Head Start Program Information Report for the 2012-2013 Program Year; data as of 9/30/2013. The Head Start Program Information Report for the 2012-2013 Program. This report contains data on two ethnicity categories: the numbers of Hispanic and non-Hispanic children and data on eight racial categories.</p> <p>*** Part C children data as reported in annual APR performance report.</p> <p>**** Title 1 data not collected by race/ethnicity.</p> <p>***** The Bright Futures Information System gathers this data during the application process for CCFAP benefits. The data is captured in the system and reported in the monthly ACF-801 report. The data was used from the ACF FFY10 federal report.</p> <p>***** Data not broken down by race/ethnicity.</p>							

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<b>Table (A)(1)-4: Historical data on funding for Early Learning and Development</b>					
<b>Type of investment</b>	<b>Funding for each of the Past 5 Fiscal Years</b>				
	<b>2009</b>	<b>2010</b>	<b>2011</b>	<b>2012</b>	<b>2013</b>
<b>Supplemental State spending on Early Head Start and Head Start<sup>9</sup></b>	0	0	0	0	0
<b>State-funded preschool</b> <i>Publicly Funded PreK</i>	15,407,216	14,214,476	14,994,395	16,346,673	Data not available
<b>State contributions to IDEA Part C</b>	1,723,409	2,542,488	2,596,716	3,425,756	3,836,753
<b>State contributions for special education and related services for children with disabilities, ages 3 through kindergarten entry</b>	15,113,463	14,983,294	14,687,343	15,807,254	16,777,602
<b>Total State contributions to CCDF<sup>10</sup></b>	13,690,823	12,003,774	16,083,616	17,372,486	20,772,827
<b>State match to CCDF</b> <i>Exceeded/Met/Not Met (if exceeded, indicate amount by which match was exceeded)</i>	9,103,683	7,030,236	11,110,078	12,602,186	15,926,892
<b>TANF spending on Early Learning and Development Programs<sup>11</sup></b>	10,511,725	10,595,358	10,741,696	10,736,037	10,358,047

<sup>9</sup> Including children participating in Migrant Head Start Programs and Tribal Head Start Programs.

<sup>10</sup> Total State contributions to CCDF must include Maintenance of Effort (MOE), State Match, and any State contributions exceeding State MOE or Match.

<sup>11</sup> Include TANF transfers to CCDF as well as direct TANF spending on Early Learning and Development Programs.

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<b>Table (A)(1)-4: Historical data on funding for Early Learning and Development</b>					
<b>Type of investment</b>	<b>Funding for each of the Past 5 Fiscal Years</b>				
	<b>2009</b>	<b>2010</b>	<b>2011</b>	<b>2012</b>	<b>2013</b>
<b>Other State contributions</b> <i>Early Education Initiative Grants</i>	1,250,116	1,052,133	1,131,091	1,131,091	1,098,364
<b>Other State contributions</b> <i>Specify:</i>	6,418,004	5,023,288	4,080,126	5,548,825	3,572,135
<b>Total State contributions:</b>	73,218,439	67,445,047	75,425,061	82,970,308	72,342,620
<i>[Enter text here to indicate data source and clarify or explain any of these data, including the State's fiscal year end date. Include 2013 if data are available.]</i>					

<b>Table (A)(1)-5: Historical data on the participation of Children with High Needs in Early Learning and Development Programs in the State</b>					
<i>Note: A grand total is not included in this table since some children participate in multiple Early Learning and Development programs.</i>					
<b>Type of Early Learning and Development Program</b>	<b>Total number of Children with High Needs participating in each type of Early Learning and Development Program for each of the past 5 years<sup>12</sup></b>				
	<b>2009</b>	<b>2010</b>	<b>2011<sup>13</sup></b>	<b>2012<sup>17</sup></b>	<b>2013<sup>17</sup></b>
<b>State-funded preschool</b> <i>(annual census count; e.g., October 1 count)</i> <i>Specify:</i>	3,560	3,514	3,728	3,841	4,114
<b>Early Head Start and Head Start<sup>14</sup></b>	1,523	1,580	1,562	1,562	1,368

<sup>12</sup> Include all Children with High Needs served with both Federal dollars and State supplemental dollars.

<sup>13</sup> Note to Reviewers: The number of children served reflects a mix of Federal, State, and local spending. Head Start, IDEA, and CCDF all received additional Federal funding under the 2009 American Recovery and Reinvestment Act, which may be reflected in increased numbers of children served in 2009-2011.

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<b>Table (A)(1)-5: Historical data on the participation of Children with High Needs in Early Learning and Development Programs in the State</b>					
<i>Note: A grand total is not included in this table since some children participate in multiple Early Learning and Development programs.</i>					
<b>Type of Early Learning and Development Program</b>	<b>Total number of Children with High Needs participating in each type of Early Learning and Development Program for each of the past 5 years<sup>12</sup></b>				
	<b>2009</b>	<b>2010</b>	<b>2011<sup>13</sup></b>	<b>2012<sup>17</sup></b>	<b>2013<sup>17</sup></b>
<i>(funded enrollment)</i>					
<b>Head Start</b>	1,233	1,233	1,187	1,187	1,028
<b>Early Head Start</b>	290	347	375	375	340
<b>Programs and services funded by IDEA Part C and Part B, section 619</b> <i>(annual December 1 count)</i>	2,079	2,110	2,057	2,073	2,177
<b>Programs funded under Title I of ESEA</b> <i>(total number of children who receive Title I services annually, as reported in the Consolidated State Performance Report )</i>	1,726	2,016	2,451	2,055	2,733
<b>Programs receiving CCDF funds</b> <i>(average monthly served) *</i>	5,116	5,420	5,954	6,149	6,129
<b>Other</b> <i>Describe:</i>	979	681	682	1,001	Data Not Yet Available
* On September 24, 2013 Louise Eldridge, Program Manager, federal Region I Office of Head Start supplied us with the Head Start and Early Head Start funded enrollment data for Federal Fiscal Years 2009 through 2013.					
** The data is extracted from the Bright Futures Information System payment/attendance extracts.					

<sup>14</sup> Including children participating in Migrant Head Start Programs and Tribal Head Start Programs. On September 24, 2013 Louise Eldridge, Program Manager, federal Region I Office of Head Start supplied us with the Head Start and Early Head Start funded enrollment data for Federal Fiscal Years 2009 through 2013.

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<b>Table (A)(1)-6 : Current status of the State’s Early Learning and Development Standards</b>			
<i>Please place an “X” in the boxes to indicate where the State’s Early Learning and Development Standards address the different age groups by Essential Domain of School Readiness</i>			
<b>Essential Domains of School Readiness</b>	<b>Age Groups</b>		
	<b>Infants</b>	<b>Toddlers</b>	<b>Preschoolers</b>
<b>Language and literacy development</b>			✓
<b>Cognition and general knowledge (including early math and early scientific development)</b>			✓
<b>Approaches toward learning</b>			✓
<b>Physical well-being and motor development</b>			✓
<b>Social and emotional development</b>			✓
Vermont’s Early Learning Standards (VELS) are currently being revised. The new standards are from Birth through grade 3. Draft 1 of the new VELS is Appendix XXIII. (See section C1 for Vermont’s HQP for completing the revision process and providing professional development to early childhood educators.)			

<b>Table (A)(1)-7: Elements of a Comprehensive Assessment System currently required within the State</b>					
<i>Please place an “X” in the boxes to indicate where an element of a Comprehensive Assessment System is currently required.</i>					
<b>Types of programs or systems</b>	<b>Elements of a Comprehensive Assessment System</b>				
	<b>Screening Measures</b>	<b>Formative Assessments</b>	<b>Measures of Environmental Quality</b>	<b>Measures of the Quality of Adult-Child Interactions</b>	<b>Other</b>
<b>State-funded preschool</b> <i>Specify:</i>		✓	✓		
<b>Early Head Start and Head Start<sup>15</sup></b>	✓	✓	✓	✓	--

<sup>15</sup> Including Migrant and Tribal Head Start located in the State.

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<b>Table (A)(1)-7: Elements of a Comprehensive Assessment System currently required within the State</b>					
<i>Please place an "X" in the boxes to indicate where an element of a Comprehensive Assessment System is currently required.</i>					
<b>Types of programs or systems</b>	<b>Elements of a Comprehensive Assessment System</b>				
	<b>Screening Measures</b>	<b>Formative Assessments</b>	<b>Measures of Environmental Quality</b>	<b>Measures of the Quality of Adult-Child Interactions</b>	<b>Other</b>
<b>Programs funded under IDEA Part C</b>	✓	✓	✓		
<b>Programs funded under IDEA Part B, section 619</b>	✓	✓	✓	✓	
<b>Programs funded under Title I of ESEA</b>	✓	✓			
<b>Programs receiving CCDF funds</b>	✓	✓	✓		
<b>Current Quality Rating and Improvement System requirements</b> <i>Specify by tier (add rows if needed):</i>	✓	✓	✓		
<b>State licensing requirements</b>					
<b>Other</b> Early Education Initiative *		✓	✓		
*The progress of All children in EEI grant funded programs is tracked using formative assessment, TS GOLD. Only the EEI grants that include center-based programs complete environmental quality assessments of part of their Stars application.					

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<b>Table (A)(1)-8: Elements of high-quality health promotion practices currently required within the State</b>					
<i>Please place an "X" in the boxes to indicate where the elements of high-quality health promotion practices are currently required.</i>					
<b>Types of Programs or Systems</b>	<b>Elements of high-quality health promotion practices</b>				
	<b>Health and safety requirements</b>	<b>Developmental, behavioral, and sensory screening, referral, and follow-up</b>	<b>Health promotion, including physical activity and healthy eating habits</b>	<b>Health literacy</b>	<b>Other</b>
<b>State-funded preschool</b> <i>Specify</i>	✓	✓	✓		✓*
<b>Early Head Start and Head Start</b>	✓	✓	✓	✓	✓**
<b>Programs funded under IDEA Part C</b>	✓		✓		
<b>Programs funded under IDEA Part B, section 619</b>	✓	✓	✓		✓*
<b>Programs funded under Title I of ESEA</b>	✓	✓	✓		✓*
<b>Programs receiving CCDF funds</b>	✓		✓		
<b>Quality Rating and Improvement System requirements STARS Tiers 5 and 4 (Highest)</b>	✓	✓	✓		

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<b>Table (A)(1)-8: Elements of high-quality health promotion practices currently required within the State</b>					
<i>Please place an "X" in the boxes to indicate where the elements of high-quality health promotion practices are currently required.</i>					
Types of Programs or Systems	Elements of high-quality health promotion practices				
	Health and safety requirements	Developmental, behavioral, and sensory screening, referral, and follow-up	Health promotion, including physical activity and healthy eating habits	Health literacy	Other
Current Quality Rating and Improvement System requirements STARS Tiers 3 and 2	✓	✓***	✓		
Current Quality Rating and Improvement System requirements STARS Tier 1	✓		✓		
State licensing requirements					

All Head Start and Early Head Start programs must be licensed by the Child Development Division and abide by all of the health and safety licensing regulations.

<b>Table (A)(1)-9: Elements of a high-quality family engagement strategy currently required within the State</b>
<i>Please describe the types of high-quality family engagement strategies required in the State. Types of strategies may, for example, include parent access to the program, ongoing two-way communication with families, parent education in child development, outreach to fathers and other family members, training and support for families as children move to preschool and kindergarten, social networks of support, intergenerational activities, linkages with community supports and family literacy programs, parent involvement in decision making, and parent leadership development.</i>

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Types of Programs or Systems	Describe Family Engagement Strategies Required Today
<b>State-funded preschool</b> <i>Specify:</i>	
<b>State-funded preschool</b>  <b>Publicly Funded PreK</b>	<p>Act 62, which established publicly funded PreK, requires that families be actively engaged in their child’s education regardless of the type of setting in which publicly funded PreKindergarten education (PreK) occurs (i.e., center-based child care, public school-based, family child care, Head Start partnership). The following sections of the Act 62 PreKindergarten Rules specify the requirements (references to the rules are in brackets) all PreK programs must follow.</p> <ul style="list-style-type: none"> <li>• Families are required members of the team conducting the Community Needs Assessment, a prerequisite prior to an LEA establishing or expanding PreK [2603§(2)]</li> <li>• Two Family-Teacher conferences to discuss children’s progress towards meeting early learning and development goals required annually. [2604§(1)(a)(6) and 2605§2(f)]</li> <li>• PreK programs must provide opportunities for families to participate in their child’s learning. [2604§(1)(a)(7) and 2605§2(g)]</li> <li>• Families may request a specific PreK program for their child when families decide that what the LEA suggests is not well suited to their child or family needs. [2604§(2) and (3)]</li> </ul> <p>Families have the right to appeal the decisions of an LEA on the expansion or establishment of PreK [2610§(2)] and on their decisions regarding which PreK program their child may attend [2610§(3)]</p>
<b>Early Head Start and Head Start</b>	<p>Head Start and Early Head Start programs are required to implement high-quality family engagement strategies by promoting active parental involvement and forming partnerships with each family, which has a child enrolled in these programs. The Head Start Act and Sections 1304.40 of the Head Start Program Performance Standards address these requirements. In addition, all Head Start and Early Head Start programs are implementing <i>The Head Start Parent, Family, and Community Engagement Framework Promoting Family Engagement and School Readiness, from Prenatal to Age 8</i>.</p>
<b>Programs funded under IDEA Part B, section 619</b>	<p>The vast majority of children who receive IDEA Part B 619 services attend publicly funded PreK. Hence, the requirements of Act 62 regarding family engagement and rights apply.</p> <p>Additionally, all of the federal and state regulations related to family engagement and rights in the education of their child with special needs apply as well. For example, families are a required part of their child’s Individualized Education Plan (IEP) Team.</p> <p>In the most recent Family Engagement Parent Survey required for IDEA</p>

<b>Table (A)(1)-9: Elements of a high-quality family engagement strategy currently required within the State</b>	
<p><i>Please describe the types of high-quality family engagement strategies required in the State. Types of strategies may, for example, include parent access to the program, ongoing two-way communication with families, parent education in child development, outreach to fathers and other family members, training and support for families as children move to preschool and kindergarten, social networks of support, intergenerational activities, linkages with community supports and family literacy programs, parent involvement in decision making, and parent leadership development.</i></p>	
<b>Types of Programs or Systems</b>	<b>Describe Family Engagement Strategies Required Today</b>
	<p>Annual Performance Reporting, 50% of 230 respondents reported positively to the questions on engagement.</p>
<b>Programs funded under IDEA Part C</b>	<ul style="list-style-type: none"> <li>• Families are informed at the initial meeting what to expect from Early Intervention, that it is a partnership that they and their child’s service providers will work together to support and promote their child’s development.</li> <li>• Informed consent is a significant strategy used to ensure families understand what is being asked of them as well as gaining written permission for activities and services throughout a child enrollment in Part C.</li> <li>• Early Interventionist uses a routine based interview approach to identify times and strategies to incorporate a child’s developmental therapies into the daily routines as the family spends the majority of time with their child.</li> <li>• Families participate in the development of the evaluation plan and ensuing IFSP/One Plan. It is reviewed every 6 months with the family and child’s team.</li> <li>• Meetings are conducted at the convenience and request of the family and typically are in the home or in childcare. A prior written notice is sent out to all members of the child’s team to ensure participation.</li> <li>• At the consent of the family, a family assessment is conducted to identify any other services or resources the family may need to support an environment that will support the family’s ability to promote positive developmental outcomes for their child. The Service Coordinator works with the family in providing information, referrals and also can provide general family support</li> <li>• Transition planning conference is held at least 90 days prior to a child exiting Part C to provide information and referrals to other community based supports such as Child Care support agencies, Head Start and other CIS services as appropriate. Families work with early interventionist to develop strategies to support and prepare them and their child for the transition</li> </ul> <p>A written transition plan needs to be in place and is developed with the</p>

<b>Table (A)(1)-9: Elements of a high-quality family engagement strategy currently required within the State</b>	
<p><i>Please describe the types of high-quality family engagement strategies required in the State. Types of strategies may, for example, include parent access to the program, ongoing two-way communication with families, parent education in child development, outreach to fathers and other family members, training and support for families as children move to preschool and kindergarten, social networks of support, intergenerational activities, linkages with community supports and family literacy programs, parent involvement in decision making, and parent leadership development.</i></p>	
<b>Types of Programs or Systems</b>	<b>Describe Family Engagement Strategies Required Today</b>
	family
<b>Programs receiving CCDF funds</b>	Parent orientation to the program, parent access to the program, ongoing two-way communication with families, opportunities to volunteer and participate in the program, support for breast feeding, offer parent education in child development and parenting skills, linkages with community supports.
<b>Current Quality Rating and Improvement System requirements</b> STARS Tiers 5 and 4 (Highest)	a. Use the Center for the Study of Social Policy - Strengthening Families Child Care Program Assessment tool, Document the process and submit a program improvement plan. b. Conduct a Family Satisfaction survey at least once a year that includes, but is not limited to, the following types of questions: daily routines/curriculum, the environment and program policies including communication with families and program policies. Document numbers of surveys distributed and returned and summarize what was learned as a result of the survey and the actions taken. c. Describe 3 strategies the program uses to share resources/information with families and which are most successful and why. d. Have a written philosophy statement defining the relationship between families and the program. e. Document opportunities for families to meet with program staff and with other parents that occur annually at two social events and document one family group event designed to discuss specific content of interest to families. f. Document three ways families are encouraged to be involved in the program throughout the year. g. Attain specialized Child Care Status. h. Document that the program maintains connections with the community to support and advocate for children, families or the profession (24 hours annually).
<b>Current Quality Rating and Improvement System requirements</b> STARS Tiers 3 and 2	b through h standards as described above

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<b>Table (A)(1)-9: Elements of a high-quality family engagement strategy currently required within the State</b>	
<i>Please describe the types of high-quality family engagement strategies required in the State. Types of strategies may, for example, include parent access to the program, ongoing two-way communication with families, parent education in child development, outreach to fathers and other family members, training and support for families as children move to preschool and kindergarten, social networks of support, intergenerational activities, linkages with community supports and family literacy programs, parent involvement in decision making, and parent leadership development.</i>	
<b>Types of Programs or Systems</b>	<b>Describe Family Engagement Strategies Required Today</b>
<b>Current Quality Rating and Improvement System requirements</b> STARS Tier 1	b through d standards as described above
<b>State licensing requirements</b>	Parent orientation to the program, parent access to the program, ongoing two-way communication with families, opportunities to volunteer and participate in the program, support for breast feeding, offer parent education in child development and parenting skills, linkages with community supports.
<b>Other</b> Early Education Initiative	The law that established the Early Education Initiative grant program stipulates that grantees must provide opportunities for families to actively engaged in their children’s learning, and to have opportunities to make decision regarding the children’s program and proposed grant funded activities. Policies require that grantees offer at least two parent conferences to discuss children’s learning and development. Grant activities may also include parent education

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<b>Table (A)(1)-10: Status of all early learning and development workforce credentials<sup>16</sup> currently available in the State</b>				
<b>List the early learning and development workforce credentials in the State</b>	<b>If State has a workforce knowledge and competency framework, is the credential aligned to it?</b>  <i>(Yes/No/Not Available)</i>	<b>Number and percentage of Early Childhood Educators who have the credential</b>		<b>Notes (if needed)</b>
		<b>#</b>	<b>%</b>	
Vermont Educator License-Early Childhood Educator (Birth-Grade 3)	YES	1,593	20%	Percent of all individuals working in state licensed programs (7,983)
Vermont Educator License-Early Childhood Educator (Birth through age 5)	YES	469	6%	Percent of all individuals working in state licensed programs (7,983)
Level I	YES	118	1.3%	Level 1 % (and subsequent Level percentages) represents a percentage of the <u>entire</u> workforce in both licensed centers and homes (9,027) that have verified information in BFIS) All certificates require a current professional development plan.  Level I requires successful Completion of “ <u>Fundamentals for Early Childhood Professionals</u> ” A 45 hour course that includes an on-site observation (or equivalent education/observation)
Level II	YES	203	2.24%	Child Development Associate

<sup>16</sup> Includes both credentials awarded and degrees attained.

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<b>Table (A)(1)-10: Status of all early learning and development workforce credentials<sup>16</sup> currently available in the State</b>				
<b>List the early learning and development workforce credentials in the State</b>	<b>If State has a workforce knowledge and competency framework, is the credential aligned to it?</b>  <i>(Yes/No/Not Available)</i>	<b>Number and percentage of Early Childhood Educators who have the credential</b>		<b>Notes (if needed)</b>
		<b>#</b>	<b>%</b>	
				(CDA) Credential or Northern Lights approved Level II Portfolio with documentation, 125 hours of verified professional development and two approved observations of the practitioner or 3. Northern Lights approved 12 related college credits in at least 2 VT Core Knowledge areas and two approved observations of the practitioner
Level III A	YES	72	.79%	<u>Completed Vermont Child Care Registered Apprentice</u> or <u>Community College of Vermont Child Care Certificate program</u> or <u>Highly Qualified Paraprofessional</u> or Northern Lights approved equivalent: 21 related college credits in at least 3 of the VT Core Knowledge areas and <u>two approved observations of the practitioner</u>
Level III B	YES	87	.96%	<u>Associate degree in early childhood education</u> or related field or Associates degree with 21 related college credits in at least 3 VT Core Knowledge areas
Level IVA	YES	151	1.66%	Bachelor's degree in early childhood education or related field or

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<b>Table (A)(1)-10: Status of all early learning and development workforce credentials<sup>16</sup> currently available in the State</b>				
<b>List the early learning and development workforce credentials in the State</b>	<b>If State has a workforce knowledge and competency framework, is the credential aligned to it?</b>  <i>(Yes/No/Not Available)</i>	<b>Number and percentage of Early Childhood Educators who have the credential</b>		<b>Notes (if needed)</b>
		<b>#</b>	<b>%</b>	
				Bachelor's Degree with NL approved 30 related college credits within at least 3 of the VT Core Knowledge Areas
Level IVB	YES	40 Level	.44%	Level IVA is a BA with VT Agency of Education teaching license with endorsement in early childhood, early childhood special education or elementary education. Not all individuals with this degree and endorsement have requested an IVB Certificate. Some indications of the actual numbers with these qualifications are noted in the first two rows of this chart.
Level VA	YES	40	.44%	<u>Master's degree in early childhood education or related field</u>
Level VB	YES	10	.11%	Level IVA with VT Agency of Education teaching license with endorsement in early childhood, early childhood special education or elementary education
Program Director Credential	YES	17	.19%	This credential started in 2007. The Early Childhood and Afterschool Program Director Credential offers a three-step sequence of 21 credits of college-level courses for directors in the field or those interested in becoming a new director. The first two steps consist of 3, 3-credit hour courses. Step 3 is a culminating seminar. Currently there are 79 recipients with Step 1 Certificate and 20 recipients of Step 2 Certificate.
Early Childhood and	YES	3	.04%	This credential is newly

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<b>Table (A)(1)-10: Status of all early learning and development workforce credentials<sup>16</sup> currently available in the State</b>				
<b>List the early learning and development workforce credentials in the State</b>	<b>If State has a workforce knowledge and competency framework, is the credential aligned to it?</b>  <i>(Yes/No/Not Available)</i>	<b>Number and percentage of Early Childhood Educators who have the credential</b>		<b>Notes (if needed)</b>
		<b>#</b>	<b>%</b>	
Family Mental Health Credential				implemented after a comprehensive pilot. The Credential includes coursework and intensive professional consulting and mentoring.

<b>Table (A)(1)-11: Summary of current postsecondary institutions and other professional development providers in the State that issue credentials or degrees to Early Childhood Educators</b>		
<b>List postsecondary institutions and other professional development providers in the State that issue credentials or degrees to Early Childhood Educators</b>	<b>Number of Early Childhood Educators that received an early learning credential or degree from this entity in the previous year</b>	<b>Does the entity align its programs with the State’s current Workforce Knowledge and Competency Framework and progression of credentials?</b>  <i>(Yes/No/Not Available)</i>
Springfield College, BA Degree Early Childhood Concentration	11	Yes
Community College of Vermont –Associate Degree	45	Yes
Community College of Vermont – Child Care Certificate	8	Yes
Lyndon State College BA Degree	5	Yes
Champlain College BA and M.Ed. Degrees	14	Yes
Union Institute and University, BA Degree	1	Yes
University of Vermont, BA	25	Yes

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<b>List postsecondary institutions and other professional development providers in the State that issue credentials or degrees to Early Childhood Educators</b>	<b>Number of Early Childhood Educators that received an early learning credential or degree from this entity in the previous year</b>	<b>Does the entity align its programs with the State’s current Workforce Knowledge and Competency Framework and progression of credentials?</b>  <i>(Yes/No/ Not Available)</i>
Degree		
Goddard College BA Degree	1	Yes
AOE Teacher Licensure Endorsement in Early Childhood Education	14	Yes
Northern Lights Career Development Center Program Director Credential	3	Yes
Northern Lights Career Development Center Early Childhood Family Mental	5	Yes
UVM Graduates were recommended for licensure in Early Childhood PreK to Third Grade and Early Childhood Special Education Champlain College graduates were recommended for Early Childhood and Elementary Education licensure		

<b>State’s Kindergarten Entry Assessment</b>	<b>Essential Domains of School Readiness</b>				
	<b>Language and literacy</b>	<b>Cognition and general knowledge (including early mathematics and early scientific development)</b>	<b>Approaches toward learning</b>	<b>Physical well-being and motor development</b>	<b>Social and emotional development</b>
Domain covered? <i>(Y/N)</i>	Y	Y	Y	Y	Y
Domain aligned to Early Learning and Development Standards? <i>(Y/N)</i>	Y	Y	Y	Y	Y
Instrument(s) used? <i>(Specify)</i>	Vermont’s Ready Kindergartners Survey				
Evidence of validity and reliability? <i>(Y/N)</i>	N	N	N	N	N
Evidence of validity for English learners? <i>(Y/N)</i>	N	N	N	N	N

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<b>Table (A)(1)-12: Current status of the State’s Kindergarten Entry Assessment</b>					
<b>State’s Kindergarten Entry Assessment</b>	<b>Essential Domains of School Readiness</b>				
	<b>Language and literacy</b>	<b>Cognition and general knowledge (including early mathematics and early scientific development)</b>	<b>Approaches toward learning</b>	<b>Physical well-being and motor development</b>	<b>Social and emotional development</b>
Evidence of validity for children with disabilities? (Y/N)	N	N	N	N	N
How broadly administered? (If not administered statewide, include date for reaching statewide administration)	Vermont’s Ready Kindergartners Survey has been administered statewide since 2000				
Results included in Statewide Longitudinal Data System? (Y/N)	N	N	N	N	N

<b>Table (A)(1)-13: Profile of all early learning and development data systems<sup>1</sup> currently used in the State</b>							
<b>List each data system currently in use in the State that includes early learning and development data</b>	<b>Essential Data Elements</b>						
	<i>Place an “X” for each Essential Data Element (refer to the definition) included in each of the State’s data systems</i>						
	Unique child identifier	Unique Early Childhood Educator identifier	Unique program site identifier	Child and family demographic information	Early Childhood Educator demographic information	Data on program structure and quality	Child-level program participation and attendance
<b>BBF: Early Childhood Data Reporting System (ECDRS)<sup>2</sup></b>			✓			✓	
<b>Building Bright Futures Information System (BFIS)<sup>3</sup></b>	✓	✓	✓	✓	✓	✓	✓
<b>Children’s Integrated Service EI-Part C of IDEA Database<sup>4</sup></b>	✓			✓			✓
<b>Children’s Integrated</b>	✓		✓	✓			✓

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<b>Table (A)(1)-13: Profile of all early learning and development data systems<sup>1</sup> currently used in the State</b>							
<b>List each data system currently in use in the State that includes early learning and development data</b>	<b>Essential Data Elements</b>						
	<i>Place an "X" for each Essential Data Element (refer to the definition) included in each of the State's data systems</i>						
	Unique child identifier	Unique Early Childhood Educator identifier	Unique program site identifier	Child and family demographic information	Early Childhood Educator demographic information	Data on program structure and quality	Child-level program participation and attendance
<b>Services Database<sup>5</sup></b>							
<b>Head Start Agency Data Systems</b>	✓	✓	✓	✓	✓	✓	✓
<b>Education Data Warehouse (EDW) at AOE: Part B of 619 (EEE) Database</b>	✓		✓	✓		✓	✓
<b>Teacher Licensure Database</b>		✓			✓		
<b>EDW Publicly Funded PreK Datasets<sup>6</sup></b>	✓		✓			✓	✓
<b>Kindergartener Readiness Survey</b>	✓		✓				
<b>Teaching Strategies© for Early Childhood GOLD Assessment Database<sup>7</sup></b>	✓		✓	✓			
<b>COLYAR Child Nutrition Program (CNP) web program: CNP Data also on EDW</b>	✓			✓			
<b>MIECHV Nurse Family Partnership</b>	✓			✓			

**Table (A)(1)-13: Profile of all early learning and development data systems<sup>1</sup> currently used in the State**

List each data system currently in use in the State that includes early learning and development data	Essential Data Elements						
	<i>Place an "X" for each Essential Data Element (refer to the definition) included in each of the State's data systems</i>						
	Unique child identifier	Unique Early Childhood Educator identifier	Unique program site identifier	Child and family demographic information	Early Childhood Educator demographic information	Data on program structure and quality	Child-level program participation and attendance
<b>Database</b>							
<b>Child Health Profile SPHINX<sup>8</sup></b>	✓			✓			
<b>WIC Database</b>	✓			✓			
<b>Child Abuse and Neglect Database<sup>9</sup></b>	✓			✓			
<b>ESD Economic Services Database<sup>10</sup></b>	✓			✓			

<sup>1</sup> Sources: VT Response to 50-State Survey on Early Childhood Care & Education Data Systems, Early Childhood Data Collaborative, December 2010 and March 2013; Email correspondence with Kathleen Paterson, BBF contract employee, on September 26, 2013; Danielle Howes, Program Administrator, CIS in CDD on September 30, 2013; Email correspondence with Danielle Howes, Program Administrator, CIS in CDD on September 30, 2013. Email correspondence with Peggy Brozicevic, Research and Statistics Section Chief, VDH and with Manuela Fonseca, Early Education Coordinator, AOE on October 1, 2013.

<sup>2</sup> The ECDRS working prototype currently has program level data and uses the BFIS Program Unique ID (UID) as the authoritative program UID and uses a matching algorithm if that UID is unavailable. It will have all the remaining essential data elements at the end of Year 2 of this grant.

<sup>3</sup> The BFIS is an integrated child care information system that includes child care licensing, child care subsidy, TQRIS, referral, professional development, education attainment and professional development. BFIS has unique identifiers at the child, family, program, educator level that are used to link across the system to generate integrated data reports. The Bright Futures Information System has the capacity to capture non-subsidy child-level and program-level enrollment in all licensed programs through a probabilistic matching approach using data elements (child's initials, date of birth, town, and gender.) This functionality of BFIS has not been used to date. All early learning and development programs are required to be licensed and thus have a unique program identifier. This means all school or community based care and education programs are included in BFIS. AHS is currently enhancing BFIS by expanding its program type option set (e.g., center, family home, after school program) to include Publicly

<b>Table (A)(1)-13: Profile of all early learning and development data systems<sup>1</sup> currently used in the State</b>							
<b>List each data system currently in use in the State that includes early learning and development data</b>	<b>Essential Data Elements</b>						
	<i>Place an "X" for each Essential Data Element (refer to the definition) included in each of the State's data systems</i>						
	Unique child identifier	Unique Early Childhood Educator identifier	Unique program site identifier	Child and family demographic information	Early Childhood Educator demographic information	Data on program structure and quality	Child-level program participation and attendance
<p>Funded PreK programs and Early Head Start or Head Start programs or partnerships. Programs that serve children enrolled in Part C of IDEA or Part B of 619 children will be added to program type. Once this is complete, all early learning and development programs will have a unique ID.</p> <p><sup>4</sup> This applies only to Part C of IDEA children entering Part B, Section 619, which is administered in AOE. Part B of 619 assigns a State Education Unique ID upon transition. The information from Part C is shared with Part B of 619, but only by transfer of hard copy data, not electronically.</p> <p><sup>5</sup> CIS is a resource for pregnant or postpartum women and families with children from birth to age six, and specialized child care providers. It integrates services that include Part C of IDEA (EI), nursing and family support, early childhood and family mental health and specialized care. All data is submitted manually at this time. Comprehensive data is collected regionally and analyzed for reporting. Data includes service-specific data such as: custody status of child clients, referral source, services provided, payer, environment where services are provided, outcomes, timelines for completion of case elements (evaluations, development of a plan, plan reviews, etc.), transition/exit data for all clients served.</p> <p><sup>6</sup> Publicly Funded PreK data is collected at the Supervisory Union level (61 datasets) but is not reported at the state level, or at the school or program level.</p> <p><sup>7</sup> The AOE is working with the TS Gold vendor to match the State Education Unique ID with the child-level portfolios. Once this is done, we will be able to link it to the K-12 SLDS.</p> <p><sup>8</sup> The Child Health Profile Data SPHINX includes a person ID number across these VT's universal programs (referred to as tabs): newborn vision and hearing screening and tracking; lead screening, immunization registry and birth certificates.</p> <p><sup>9</sup> This data system has an interface with BFIS using an AHS Integration server and processes.</p> <p><sup>10</sup> This data system has an interface with BFIS using an AHS Integration server and processes.</p>							

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(A)(2) Articulating the State’s rationale for its early learning and development reform agenda and goals. (20 points)

The extent to which the State clearly articulates a comprehensive early learning and development reform agenda that is ambitious yet achievable, builds on the State’s progress to date (as demonstrated in selection criterion (A)(1)), is likely to result in improved school readiness for Children with High Needs, and includes—

(a) Ambitious yet achievable goals for improving program quality, improving outcomes for Children with High Needs statewide, and closing the educational gaps between Children with High Needs and their peers;

(b) An overall summary of the State Plan that clearly articulates how the High-Quality Plans proposed under each selection criterion, when taken together, constitute an effective reform agenda that establishes a clear and credible path toward achieving these goals; and

(c) A specific rationale that justifies the State’s choice to address the selected criteria in each Focused Investment Area (C), (D), and (E), including why these selected criteria will best achieve these goals.

*In the text box below, the State shall write its full response to this selection criterion. The State shall include the evidence listed below and describe in its narrative how each piece of evidence demonstrates the State’s success in meeting the criterion; the State may also include any additional information it believes will be helpful to peer reviewers. If the State has included relevant attachments in the Appendix, these should be described in the narrative below and clearly cross-referenced to allow the reviewers to locate them easily.*

Evidence for (A)(2):

- The State’s goals for improving program quality statewide over the period of this grant.
- The State’s goals for improving child outcomes statewide over the period of this grant.
- The State’s goals for closing the readiness gap between Children with High Needs and their peers at kindergarten entry.
- Identification of the two or more selection criteria that the State has chosen to address in Focused Investment Area (C).
- Identification of the one or more selection criteria that the State has chosen to address in Focused Investment Area (D).
- Identification of the one or more selection criteria that the State has chosen to address in Focused Investment Area (E).
- For each Focused Investment Area (C), (D), and (E), a description of the State’s rationale for choosing to address the selected criteria in that Focused Investment Area, including how the State’s choices build on its progress to date in each Focused Investment Area (as outlined in Tables (A)(1) 6-13 and in the narrative under (A)(1) in the application) and why these selected criteria will best achieve the State’s ambitious yet achievable goals for

improving program quality, improving outcomes for Children with High Needs statewide, and closing the educational gap between Children with High Needs and their peers.

**Section A2: Articulating the State’s rationale for its early learning and development reform agenda and goals.**

**Abstract:** As noted in A1, Vermont’s longstanding commitment to children has resulted in a range of excellent outcomes. In 2013, the Kids Count’s Data Book ranks Vermont second overall among states for children’s well-being. Vermont is a good place to be a child, but even in Vermont, more work needs to be done to make sure that all of the State’s children thrive. Vermont’s State Plan builds on and leverages the State’s success in its ELD programs by proposing innovations to expand existing programs and services, particularly for children with high needs.

**Introduction:**

As described in A1, Vermont’s story in this application is compelling:

- Vermont is a good place to be a child.
- Vermont became a good place to be a child because of longstanding political and financial investment in children.
- Vermont is doing well with its early learning and development programs and services, but not all of Vermont’s children are thriving and succeeding.
- This RTT-ELC Grant represents an important opportunity to further Vermont’s progress for children, particularly those with high needs.

Vermont plans to use RTT-ELC to thoughtfully move its existing ELD systems, programs and services forward in a robust, integrated manner. At the core of its reform agenda are four over-arching strategies:

- Capitalize on the broad and deep professional linkages and relationships in a small, rural state to maximize service reach and effectiveness, and the efficient and effective implementation of the State Plan.
  - In particular, Building Bright Futures, Vermont’s governance structure for Vermont’s early care, health and education system, has extensive reach and

capacity throughout the State with key early childhood stakeholders, and is a core implementation vehicle for a number of strategies.

- Invest in people through expanded personal and professional development to drive effectiveness and where needed, change.
  - The effectiveness of individuals within any system is central to the overall success of the work. Funds will be used to expand a range of professional development opportunities to assure an educated, trained early childhood work force. We will also invest in and empower families by providing additional information and strengthening programs.
- Improve standards, assessment and data integration to drive increased program quality and improvement.
  - RTT-ELC funds will be used to improve Vermont’s already strong TQRIS, revise early learning standards, assure broader use of assessments and improve reliability, and expand and better integrate early childhood data systems.
- Expand supports and services to improve outcomes for children in our highest need rural areas.
  - Almost all of Vermont is rural, and the systems of service delivery reflect this reality. However, in some particularly rural pockets of the state, such as the Northeast Kingdom, there are pockets of particularly underserved children with high needs. By building on existing community partnerships including those affiliated with Building Bright Futures, plus adding a new initiative, Vermont Promise Communities, we will improve service delivery to these children.

**A2a: Ambitious yet achievable goals for improving program quality, outcomes for children with high needs statewide, and closing the educational gaps between children with high needs and their peers.**

Vermont has identified key goals that will be achieved by the end of the funding period (2017) or sooner. These will move Vermont closer to meeting the needs of every child in the State, particularly those with high needs, and greatly strengthen the infrastructure that supports

Vermont's early learning and development systems. These key goals build on Vermont's longstanding demonstrated commitment to children (see A1), and reflect ambitious yet achievable targets that move the State forward significantly from the baseline data provided in Tables A1-1 through A1-13.

- By the end of the funding period, raise public awareness by 35% from baseline (2013) about the importance of children's social emotional well-being and early identification and intervention of children with high needs inclusive of children with disabilities.
- By the end of the funding period (2017), the number of Vermont ELDP participating in VT STARS is increased to at least 95% across all settings.
- By the end of the funding period (2017), 100% of Specialized Child Care Services approved providers will participate in VT STARS;
- By the end of the funding period (2017), 100% of families, particularly families with children with high needs, living in Promise Communities in rural Vermont (see Competitive Priority 5), will be able to find ELDP rated as high-quality in VT STARS in their communities; further, enrollment will be affordable.
- By the end of the funding period (2017), families report using VT STARS ratings as important information when deciding which early learning and development program is best for their children.
- By the end of the funding period (2017), 100 % of licensed ELDP serving a concentrated population of children participating in CC FAP (30% or more of enrolled census) have achieved a three to five star rating in VT STARS.
- By 2016, a rigorous, independent third party evaluation of VT STARS will be conducted.
- During the funding period, 100 leaders including local leaders in Vermont Promise Communities (see Competitive Priority 5) and state partners in health, education and human services, participate in and successfully complete the basic Vermont Early Childhood Leadership Institute program.
- During each funding year, there will be a 15% increase in availability and accessibility of advanced training and coursework.

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- During each funding year, there will be a 20% increase use of documented mentoring and coaching as a model to inform and support evidence based practices.
- By 2015, complete the new Vermont Early Learning Standards (VELS) that extend from infancy through grade 3 disseminate the standards to providers and families, and align with Vermont's Ready Kindergarteners' Survey (RKS).
- By 2015, demonstrate that the Ready Kindergartners Survey (RKS) is a valid and reliable measure of children's learning and development upon entering kindergarten.
- By 2016, Vermont will have a statewide plan for a Comprehensive Assessment System that aligns screenings and assessments, coordinates the implementation of assessments, describes data sharing procedures, and sets forth a professional development plan for early childhood educators, especially those programs supporting young children with high needs.
- By 2017, assure that 90% of all children with high needs have had a developmental screening for any developmental and behavioral concerns, followed by appropriate referrals.
- For each funding year, increase the number of high needs children in early learning and development programs that utilize child care health consultation services by 20% from baseline (2013);
- During each funding year, increase the number of high needs children receiving home visiting services by 20% from baseline (2013);
- By 2017, increase by 10% the percentage of children with high needs who are up-to-date in a schedule of well child care;
- By 2015, implement a health and safety platform via Help Me Grow and make it available to all Vermonters;
- During each funding year, increase the number of families equipped with the knowledge, skills and support to access community-based services through a statewide system by 25% from baseline (2013).
- By 2016, expand and strengthen Vermont's current Early Multi-tiered System of Supports (Early MTSS) statewide. During the funding period, build capacity and

effectiveness of 12 regional Building Bright Futures Councils to support targeted early learning and development programs within each region to implement program-wide Pyramid model evidence based practices to fidelity and ensure sustainability.

- By the end of 2017, ECDRS is completed and fully functional.
- By 2015, a PreK through Grade 12 Data Governance Council is appointed and meets monthly during the first funding year, then quarterly during the rest of the funding period.
- By March 2017, the CIS Data System is developed and fully implemented.
- By the end of 2017, key data from five datasets (State-funded PreK, Readiness Kindergarten Survey, IDEA Part B, Teaching Strategies Gold, and Head Start/Early Head Start) are linked and integrated with SLDS
- By the end of 2014, the Promise Communities program is beginning its implementation.

**A2b: An overall summary of the State Plan that articulates how the HQPs in this application, when taken together, constitute an effective reform agenda.**

As previously stated, Vermont's reform agenda has four over-arching goals. The State Plan builds an effective reform agenda through the following activities tied to one or more of the reform agenda planks:

- **Capitalize on the broad and deep professional linkages and relationships in a small, rural state to maximize service reach and effectiveness, and the efficient and effective implementation of the State Plan.**
  - Assure effective governance through broad stakeholder participation (See A3).
  - Provide capacity building to Building Bright Futures, to assure its ability to play an appropriate role in the management and implementation of the RTT-ELC State Plan (See A3).
  - Building Bright Futures will participate in the implementation of children's health and safety standards via its Project LAUNCH grant, and support targeted programs to implement the Pyramid model and MTSS (See C3).

- Work with existing rural partners to assure provision of services to children with high needs in rural areas (See Competitive Priority 5).
- **Invest in people through expanded personal and professional development to drive effectiveness and where needed, change.**
  - Expand professional development for early childhood educators through assessment training, particularly those who serve children with high needs (See C2 and D2).
  - Increase the involvement of early childhood mental health professionals as practice coaches through the Early MTSS professional development system (See C3).
  - Increase the number of parents who (a) participate in trainings at regional and local levels; and (b) parents who report positive change and increase in social skills based on a parent satisfaction survey (See C3).
  - Provide training to support the implementation of a range of activities to improve standards, assessments and data integration (See A3, C1, C2, C3, D2, E1, E2, Competitive Priority 4).
  - Develop a Vermont Early Childhood Leadership Institute program to expand leadership skills among early childhood stakeholders statewide (see D2 and Competitive Priority 5).
  - Provide training to support the implementation of Promise Communities (See Competitive Priority 5).
- **Improve standards, assessment and data integration to drive increased program quality and improvement.**
  - Revise Vermont's Early Learning Standards to assure they are developmentally, culturally, and linguistically for all children, including those with high needs, and reflect the latest research. (See C1).
  - Develop of a statewide plan for a Comprehensive Assessment System that aligns and expands screenings and assessments and promotes data sharing. (See C2).

- Implement an evidence-based statewide home visiting system (See C3).
  - Enhance and expand child care health consultation services (See C3).
  - Implement the Help Me Grow (HMG) framework that promotes early detection of children at-risk for developmental and behavioral problems and their linkage to programs and services (See C3).
  - Promote the use of the FEL Pyramid model and Early Multi-Tiered Systems of Support (MTSS) to support social and emotional well-being and competence (See C3).
  - Assure Vermont's Ready Kindergarten Survey is appropriate across groups, reliable, and aligned with the State's early learning standards (See E1).
  - Engage in four related data activities to assure better data functionality and integration: (a) complete the construction of Vermont's ECDRS; (b) establish a Prenatal to Grade 12 Data Governance Council; (c) develop a web-based Children's Integrated Services data system; and (d) link and integrate additional essential datasets with Vermont's SLDS (See E2).
  - Vermont will build a Birth through Grade 3 system for supporting our children's early learning and development that integrates and coordinates the early childhood 0-5 system with our K-12 system (See Competitive Preference Priority 4).
- **Expand supports and services to improve outcomes for children in our highest need rural areas.**
- Implement Vermont Promise Communities, an initiative to provide high intensity services for children with high needs in rural areas (See Competitive Priority 5).

**A2c: A specific rationale that justifies the State's choice to address the selected criteria in each focused investment area.**

The State of Vermont is responding to all but two subsections of sections C, D and E. In order to adequately address the early learning needs of our children, particularly those with

high needs, and to appropriately respond to the requirements of this application, we believe such a comprehensive approach is required.

C. Promoting Early Learning and Development Outcomes for Children

➤ C1. Developing and using statewide, high-quality Early Learning and Development Standards

The Vermont Early Learning Standards (VELS) are based on a set of principles that view the child holistically and developmentally, include readiness domains, and recognize the importance of play. These standards are foundational to our early learning activities, and thus must be addressed in any comprehensive approach to improving early learning and development outcomes for children, particularly those with high needs. In this application, we seek to further strengthen these standards by assuring they reflect current research on early learning, are aligned with the Head Start Child Development and Early Learning Framework, include infants and toddlers, and are aligned with the Common Core State Standards (CCSS) for K-12.

➤ C2. Supporting the effective uses of Comprehensive Assessment Systems

The effective implementation of clear, appropriate standards is integrally linked to assessment. Over the last few years, Vermont has put in place aspects of a comprehensive assessment system; however, these efforts have not been as aligned, coordinated, nor as widely and reliably implemented as is necessary for improving outcomes for young children, especially for those with high needs. In this application, we seek to improve our capacity and quality. By 2016, Vermont will have a statewide plan for a Comprehensive Assessment System that aligns screenings and assessments, coordinates the implementation of assessments, describes data sharing procedures, and sets forth a professional development plan for early childhood educators across the various types of early learning and development programs, especially those programs supporting young children with high needs. This system will include developmental screenings, formative assessments, and measures of environmental quality and adult-child interactions.

➤ C3. Identifying and addressing the health, behavioral, and developmental needs of Children with High Needs to improve school readiness

Vermont is committed to helping all its children, particularly those with high needs, achieve success in school and life. In this application, we build upon our existing robust systems to create additional supports to improve school readiness. These include implementing an evidence-based home visiting system; offering child care health consultation services; implementing the Help Me Grow framework, which offers a population-based approach to the early detection of children at-risk for developmental and behavioral problems and their linkage to programs and services; and multiple strategies to strengthen the capacity of early care and education programs to improve the social and emotional outcomes of young children and address challenging behavior.

#### D. A Great Early Childhood Education Workforce

➤ D2. Supporting Early Childhood Educators in improving their knowledge, skills, and abilities

Vermont has developed and implemented a comprehensive system of professional development for early child educators over the past 30 years designed to support those that work in all regulated settings. During the last few years, a robust survey and study by John Snow, Inc. have informed current practices. In 2013, Vermont is ready to create an even more robust system of professional development by implementing a statewide framework to identify, support and effectively integrate mentoring, coaching and other similar services. It also proposes to develop and implement an Early Childhood Leadership Institute, which will provide training to 100 early childhood stakeholders during the funding period.

#### E. Measuring Outcomes and Progress

➤ E1. Understanding the status of children’s learning and development at kindergarten entry.

One of Vermont’s strengths in this application is its Ready Kindergarteners Survey (RKS). Since 2000, Vermont has gathered information on the readiness of children entering kindergarten by annually surveying all kindergarten teachers about the “readiness” of their students within the first six to ten weeks of school. Teachers complete a survey for each child in her or his kindergarten class. Although the RKS has served the state well, there is some work to be done to ensure that it reflects the latest research on predictors of school success and

to verify that it is appropriate for all subgroups of kindergartners. This application represents an opportunity for Vermont to make this strong system even stronger.

- E2. Building or enhancing an early learning data system to improve instruction, practices, services, and policies.

Vermont’s existing early learning data system (ELDS) is robust but fragmented. For the purposes of improving instruction, practices, services, and policies that support the health, development and learning of children and families, including children with high needs, Vermont seeks to enhance its early learning data capacity via a coordinated, integrated 21st Century early learning data system that enhances, is aligned with, and is interoperable with the State of Vermont’s Statewide Longitudinal Data System (SLDS). Under this application, the State proposes a series of integration initiatives that will ensure that both systems (a) contain all essential data elements; (b) enable uniform data collection and easy entry of essential data elements; (c) facilitate the exchange of data between participating State agencies; (d) generate information that is timely, relevant, accessible, and easy for early learning and childhood programs and providers to use; and (e) meets regulatory and best practice data oversight requirements, as defined in the RTT-ELC application.

**Identification of the two or more selection criteria that the State has chosen to address in Focused Investment Area (C):**

*Please check the box to indicate which selection criterion or criteria in Focused Investment Area (D) the State is choosing to address*

- (C)(1) Developing and using statewide, high-quality Early Learning and Development Standards.
- (C)(2) Supporting effective uses of Comprehensive Assessment Systems.
- (C)(3) Identifying and addressing the health, behavioral, and developmental needs of Children with High Needs to improve school readiness.
- (C)(4) Engaging and supporting families.

**Identification of the one or more selection criteria that the State has chosen to address in Focused Investment Area (D):**

*Please check the box to indicate which selection criterion or criteria in Focused Investment Area (D) the State is choosing to address*

- (D)(1) Developing Workforce Knowledge and Competency Framework and a progression of

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credentials.

- (D)(2) Supporting Early Childhood Educators in improving their knowledge, skills, and abilities.

**Identification of the one or more selection criteria that the State has chosen to address in Focused Investment Area (E):**

*Please check the box to indicate which selection criterion or criteria in Focused Investment Area (E) the State is choosing to address*

- (E)(1) Understanding the status of children's learning and development at kindergarten entry.
- (E)(2) Building or enhancing an early learning data system to improve instruction, practices, services, and policies.

**(A)(3) Aligning and coordinating early learning and development across the State. (10 points)**

The extent to which the State has established, or has a High-Quality Plan to establish, strong participation in and commitment to the State Plan by Participating State Agencies and other early learning and development stakeholders by--

(a) Demonstrating how the Participating State Agencies and other partners, if any, will identify a governance structure for working together that will facilitate interagency coordination, streamline decision making, effectively allocate resources, and create long-term sustainability, and describing--

(1) The organizational structure for managing the grant and how it builds upon existing interagency governance structures such as children's cabinets, councils, and commissions, if any already exist and are effective;

(2) The governance-related roles and responsibilities of the Lead Agency, the State Advisory Council on Early Childhood Education and Care, each Participating State Agency, and the State's Interagency Coordinating Council for Part C of IDEA, and other partners, if any;

(3) The method and process for making different types of decisions (e.g., policy, operational) and resolving disputes; and

(4) The plan for when and how the State will involve representatives from Participating Programs, Early Childhood Educators or their representatives, parents and families, including parents and families of Children with High Needs, and other key stakeholders in the planning and implementation of the activities carried out under the grant;

(b) Demonstrating that the Participating State Agencies are strongly committed to the State Plan, to the governance structure of the grant, and to effective implementation of the State

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Plan, by including in the MOUs or other binding agreements between the State and each Participating State Agency--

(1) Terms and conditions that reflect a strong commitment to the State Plan by each Participating State Agency, including terms and conditions designed to align and leverage the Participating State Agencies' existing funding to support the State Plan;

(2) "Scope-of-work" descriptions that require each Participating State Agency to implement all applicable portions of the State Plan and a description of efforts to maximize the number of Early Learning and Development Programs that become Participating Programs; and

(3) A signature from an authorized representative of each Participating State Agency; and

(c) Demonstrating commitment to the State Plan from a broad group of stakeholders that will assist the State in reaching the ambitious yet achievable goals outlined in response to selection criterion (A)(2)(a), including by obtaining--

(1) Detailed and persuasive letters of intent or support from Early Learning Intermediary Organizations, and, if applicable, local early learning councils; and

(2) Letters of intent or support from such other stakeholders as Early Childhood Educators or their representatives; the State's legislators; local community leaders; State or local school boards; representatives of private and faith-based early learning programs; other State and local leaders (e.g., business, community, tribal, civil rights, education association leaders); adult education and family literacy State and local leaders; family and community organizations; representatives from the disability community, the English learner community, and entities representing other Children with High Needs (e.g., parent councils, nonprofit organizations, local foundations, tribal organizations, and community-based organizations); libraries and children's museums; health providers; public television stations, and postsecondary institutions.

*In the text box below, the State shall write its full response to this selection criterion. The State shall include the evidence listed below and describe in its narrative how each piece of evidence demonstrates the State's success in meeting the criterion; the State may also include any additional information it believes will be helpful to peer reviewers. If the State has included relevant attachments in the Appendix, these should be described in the narrative below and clearly cross-referenced to allow the reviewers to locate them easily.*

*In scoring the selection criterion, peer reviewers will determine, based on the evidence the State submits, whether each element of the selection criterion is implemented or planned; the quality of the implementation or plan (see the definition of a High-Quality Plan for the components reviewers will be judging); the extent to which the different types of Early Learning and Development Programs in the State are included and addressed; and the extent to which the unique needs of the State's special populations of Children with High Needs are considered and*

*addressed. The State is responsible for providing clear and detailed information to assist the peer reviewers in making these determinations.*

Evidence for (A)(3)(a) and (b):

- For (A)(3)(a)(1): An organizational chart that shows how the grant will be governed and managed.
- The completed table that lists Governance-related roles and responsibilities (see Table (A)(3)-1).
- A copy of all fully executed MOUs or other binding agreements that cover each Participating State Agency. (MOUs or other binding agreements should be referenced in the narrative but must be included in the Appendix to the application).

Evidence for (A)(3)(c)(1):

- The completed table that includes a list of every Early Learning Intermediary Organization and local early learning council (if applicable) in the State that indicates which organizations and councils have submitted letters of intent or support (see Table (A)(3)-2).
- A copy of every letter of intent or support from Early Learning Intermediary Organizations and local early learning councils. (Letters should be referenced in the narrative but must be included in the Appendix with a table.)

Evidence for (A)(3)(c)(2):

- A copy of every letter of intent or support from other stakeholders. (Letters should be referenced in the narrative but must be included in the Appendix with a table.)

### **Section A3: Aligning and coordinating early learning and development across the State.**

#### **Abstract:**

Vermont has established a high-quality plan to assure the strong participation in and commitment to the State Plan by participating State agencies and other early learning and development stakeholders. In A3a below, we document this participation and commitment through a description of the organizational structure for managing the grant, governance-related roles and responsibilities, the method and process for different types of decisions and resolving disputes, and how the State will involve stakeholders in the planning and implementation of activities carried out under this grant. Tables A3-1 and A3-2 include detailed lists of participating stakeholders. In A3b and A3c, we provide Memoranda of Understanding and Letters of Support to demonstrate the depth and breadth of stakeholder commitment.

Vermont has a well-established network of early childhood public and private structures, partnerships, policies, and procedures in place upon which a governance body can be established to manage the State Plan proposed in this RTT-ELC application. However, the core community

partner – Building Bright Futures – will require some capacity building to expand in scope.

Project A3 includes Project Budget #1 and #2.

**High-quality Plan Summary**

**Goal:**

To build on Vermont’s existing network of early childhood public and private partnerships to develop an effective governance structure for the State Plan.

**Outcomes:**

- Within 90 days of notification of grant award, establish a RTT-ELC State Plan Management Team consisting of broad public and private stakeholders (see Figure 12 and subsequent discussion).
- During the first year of grant funding, hire additional staff and consultants to add capacity to Building Bright Futures, to assure its ability to play an appropriate role in the management and implementation of the RTT-ELC State Plan.

**Strategies:**

- Draw on existing structures, relationships, policies, and procedures to assure effective grant management, decision-making and dispute resolution, and stakeholder involvement (see A3a1-4, A3b, and A3c)
- Expand the existing capacity of Building Bright Futures to assume expanded responsibilities under the State Plan (see A3a2).

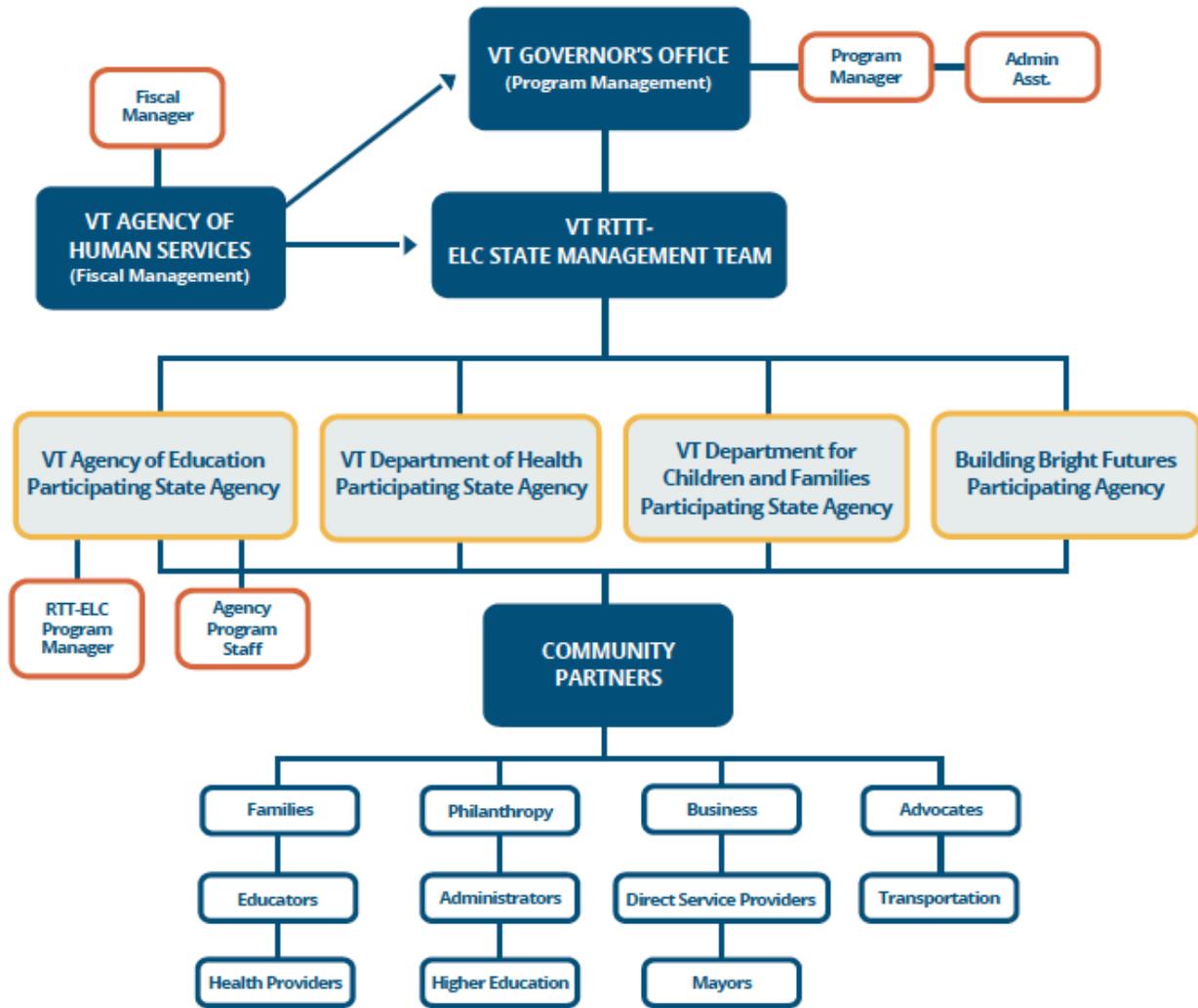
**Timeline:**

**Table 5: Timeline and Parties Responsible**

Key Activity	Year				Parties Responsible
	2014	2015	2016	2017	
Establish RTT-ELC State Plan Management Team	✓				Governor; Senior Staff
Procure and hire consultants to provide capacity building and related to BBF	✓				BBF Council, Executive Director
Hire additional BBF staff to manage RTT-ELC activities.	✓				BBF Council, Executive Director

**Metrics:** Monitoring of achievement of process measures.

**A3a1: Organizational structure for managing the grant.**



**Figure 11: VT RTT-ELC State Plan Governance Structure**

**Rationale:**

In Vermont, as is typical in New England, broad collaboration is the norm. For many years, Vermont has moved towards increasing coordination and integration of early learning and development (ELD) programs. This has involved shared decision-making, resources, accountability and data collection across State agencies, as well as the ongoing involvement of institutional and community stakeholders, including parents, in the design and delivery of

services as well as quality improvement. One key example of this is Children’s Integrated Services (see A1), a range of services – grouped into four delivery categories – are available statewide through multi-disciplinary, cross-agency Children’s Integrated Services Teams in each of the twelve Vermont Agency of Human Services regions. Available services include coordination, health education, childbirth and parenting education, specialized therapies (e.g. speech, physical therapy, audiology, vision, and nutrition), and consultation with child care, medical evaluation, medical social work and family support. Another example is the mature Building Bright Futures statewide and regional council network, which will serve as the State Advisory Council on Early Childhood Education and Care under this application (see A3a2).

A similarly collaborative approach, including public and private stakeholders in early learning and child development, will serve as the basis for the governance of Vermont’s RTT-ELC grant, if awarded.

As Figure 12 (above) suggests, the core components of Vermont’s RTT-ELC governance structure will include a robust range of public and private stakeholders. These are summarized below. For their roles and responsibilities, please see Table A3-1 and section A3a2.

State agencies involved (with staff to the grant) will include:

- Vermont Governor’s Office (Lead Program Agency), with a full-time Program Manager and Administrative Assistant.
- A Vermont RTT-ELC State Plan Management Team, consisting of representations from the public and private stakeholders including:
  - Vermont Agency of Human Services (Lead Fiscal Agency), with a full-time Fiscal Manager.
  - Vermont Agency of Education (Participating Agency), with a full-time Agency Program Manager.
  - Vermont Department for Children and Families (Participating Agency).
  - Vermont Department of Health (Participating Agency).
- Core community partners including:
  - Building Bright Futures (BBF) (State Advisory Council on Early Childhood Education and Care)
    - The State’s Interagency Coordinating Council for Part C of IDEA is

part of BBF.

- Philanthropy (Other Partners)
- Parents (Other Partners)
- Other community partners include:
  - Businesses;
  - Higher Education;
  - Public Education Administrators;
  - Direct service providers;
  - Health services providers;
  - Transportation;
  - Public safety;
  - Planning commissions;
  - Criminal justice;
  - Family courts;
  - Advocacy organizations; and
  - Faith-based institutions, among others.

**A3a2: Governance-related roles and responsibilities.**

Governance-related roles and responsibilities are detailed in Table A3-1. A summary follows.

**Vermont Governor’s Office (Lead Program Agency).** Their role will be to provide overall leadership and management of the State Plan, appoint members to, and host the VT RTT-ELC State Plan Management Team (Management Team), and to serve as the final arbiter of disputes, should it be necessary. Early Childhood Education is one of Governor Shumlin’s top policy priorities and he has designated a member of his small senior staff to work exclusively on this issue over the past year, which has included coordination of the Governor’s Early Childhood Summit and the planning, engagement and drafting of this RTTT ELC State Plan.

**Vermont Agency of Human Services (Lead Fiscal Agency).** Vermont’s state government is scaled to meet the needs of one of the smallest states in the country. The Agency for Human Services is the only agency in state government with the financial infrastructure and expertise to

serve as fiscal agent for a grant of this size. Thus, they have been designated as the fiscal agency. A staff person will be hired to provide financial management of the RTT-ELC grant, if awarded.

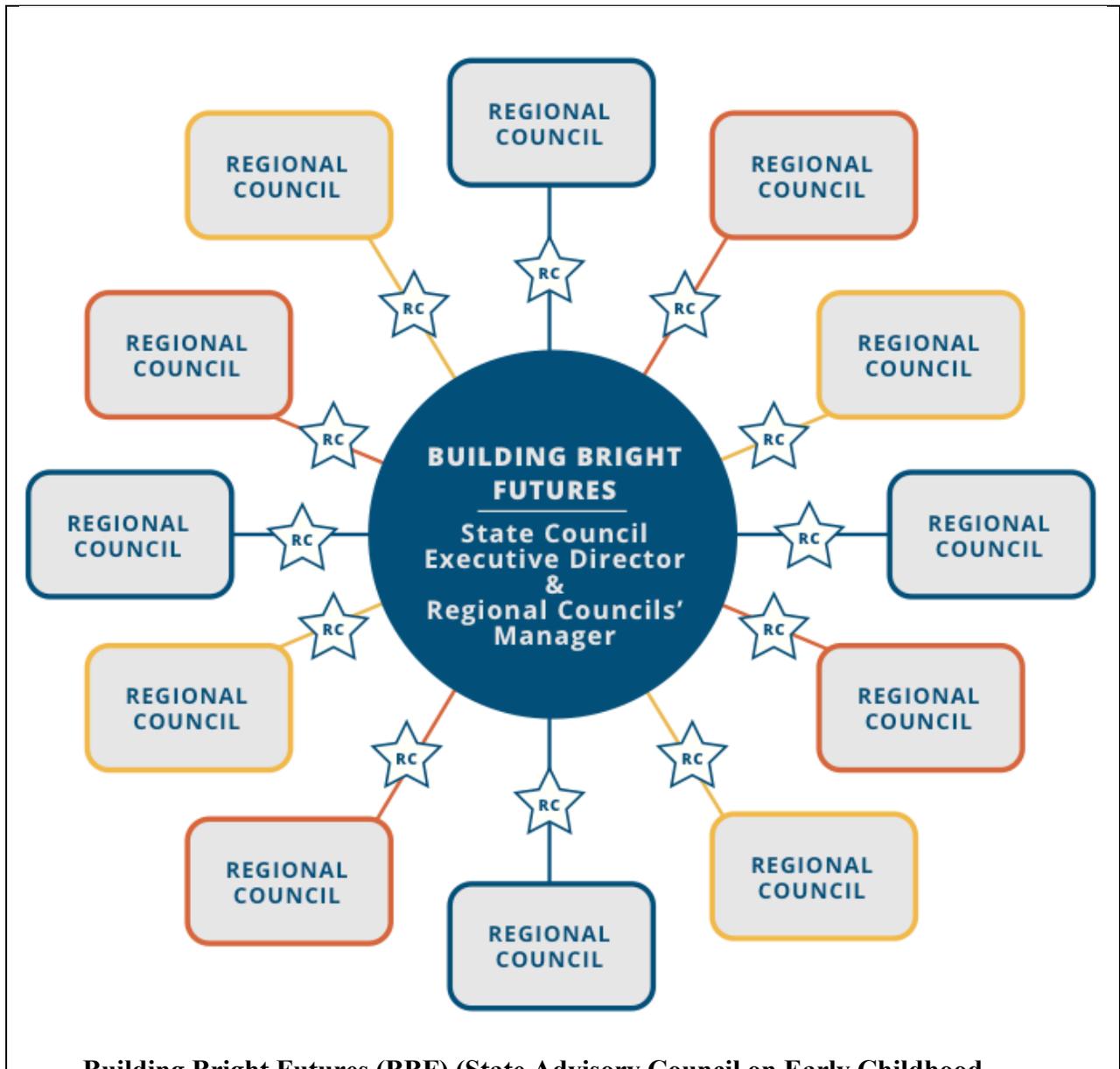
Vermont's State Innovation Model (SIM) grant for healthcare reform has set the precedent for successful implementation under this exact shared-leadership management model, with the programmatic lead housed in the Agency of Administration and the fiscal lead housed in the Agency of Human Services.

**Vermont Agency of Education (Participating Agency).** Their roles will be to participate on the Management Team, and to manage and implement all components of the State Plan that fall under the purview of their agency.

**Vermont Department for Children and Families (Participating Agency).** Their roles will be to participate on the Management Team, and to manage and implement all components of the State Plan that fall under the purview of their agency.

**Vermont Department of Health (Participating Agency).** Their roles will be to participate on the Management Team, and to manage and implement all components of the State Plan that fall under the purview of their agency.

Core community partners will include:



**Building Bright Futures (BBF) (State Advisory Council on Early Childhood Education and Care and Participating Agency)** is the governance structure for Vermont’s early care, health and education system. The BBF has been established as a public-private partnership, operating as an independent 501(c)(3) organization. Their roles will be to participate on the Management Team, and as both the State Advisory Council on Early Childhood Education and Care and as the key community partner, to build community capacity, manage aspects of implementation such as through its Building Bright Futures Information System, and provide ongoing feedback on the implementation from the community.

A statewide governing council of 23 members leads Building Bright Futures. These members are appointed by the Governor and include government leaders, legislators, and early care, health, and education representatives from various stakeholder groups including parents. The Council's chief tasks are: (1) to monitor and report on the quality, accessibility, and equity of services for families and young children through an integrated system for planning, coordinating, and developing of early childhood programs; and (2) to advise on early childhood policy, data collection, and resource allocation decisions at the State and regional levels. Current staffing includes an Executive Director, a Data Analyst, and a part-time Coordinator.

BBF serves an additional role as umbrella organization to 12 regional early childhood councils who monitor and improve their local systems of service delivery. These local councils contain broad local representation. Thus, between the Council and the Regional Councils, BBF has extensive reach throughout Vermont's early childhood infrastructure and stakeholders.

BBF is statutorily charged under Act 104 with assuring an accountable, results based, comprehensive and coherent system of high-quality early childhood services that are coordinated, aligned with established early learning and development standards, and are geographically and financially accessible to all families with young children. The BBF Regional Councils do not actually deliver direct services to children and families. Rather, they work with community partners to make sure that local services to young children are plentiful, of high-quality, and easily available to anyone who needs them. Under Act 104, early care, health and education are defined as "all services provided to families expecting a child and to children up to the age of six, including child care, family support, early education, mental and physical health services, nutrition services and disability services."

Because of its legislative mandate, long experience working with Vermont's early childhood infrastructure, and because its statewide Council and Regional Councils give it deep and broad relationships throughout the State with key early childhood stakeholders, Building Bright Futures will be play a central role in the governance of the RTT-ELC State Plan.

As is common in small, rural states, although BBF and its regional councils have been in existence for over two decades, much of the work has been done on a volunteer basis or, at best, through piecemeal funding to maintain part-time Regional Council coordination. The deep commitment and expertise of the BBF members and partners has been sufficient to enable this

structure to work effectively. However, with the increased demands of the RTT-ELC State Plan, effort will be needed to expand the existing BBF infrastructure to take on added responsibilities. These will include additional coordination, training, data collection and management, assessments, and enhanced quality improvement. BBF will be assisted to take on these tasks through (a) funds to hire additional staff and (b) consulting to assist with capacity building including financial sustainability.

Staff will be added as follows:

- A Regional Manager will serve as program manager at the state BBF office. This person will coordinate BBF RTT-ELC State Plan activities across Vermont.
- Each Regional Council Coordinator, except for one which already such a staff person, will hire a Regional Council Coordinator to provide local coordination (11 total).
- Regional Council Coordinator priority in Leadership Institute (see D2)

Through funding associated with this application, BBF proposes to hire consultants to provide extensive “train the trainer” services to the newly hired Regional Council Coordinators. They will, in turn, support the implementation of regional council structural and financial growth including long-term plans for financial sustainability; build foundations of each local system of early care, health and education; and impact quality, accessibility, and equity of services within local systems of early care, health, and education. They will manage and assure capacity building that conforms to statewide standards but also reflect the unique characteristics of each region of Vermont. This capacity building will be initiated in the first year of the funding cycle, with the goal of assuring expanded capacity and long-term financial stability before the end of the four-year funding period.

To further enhance the BBF Regional Councils, beginning in 2014 an annual statewide conference will be held to review progress, share lessons learned, and identify unmet needs that hamper progress toward shared goals in the State Plan. Further, during the RTT-ELC funding period, every Regional Council Coordinator and a selected Regional Council Steering Team member, along with the BBF Executive Director and a selected statewide Council Executive Team member, will attend the National Smart State Technical Assistance Conference held in North Carolina.

Finally, Vermont proposes an Early Childhood Leadership Initiative under this application

(see D2). Regional Coordinators will be prioritized for participation in this Leadership Initiative.

Each Regional Coordinator (RC) will provide services of differing intensities based on an assessment of each Regional Council's existing capacity:

*Tier 1* Regional Councils, judged to have very limited infrastructure and capacity, will benefit from *building internal capacity*. The RCC will bring together local stakeholders to assess and develop a plan to improve the availability, accessibility, capacity and quality of local services. This may include collaborative communication, strategic planning, evaluation, resource development, and fiscal management.

*Tier 2* Regional Councils, judged to have more mature infrastructure and capacity, will benefit from *expanding internal capacity*. The RCC will support the Regional Council to continue building and supporting partnerships within and across the service continuum; making joint funding and investment decisions, improving policies that affect all aspects of the early childhood system, engaging the public and stakeholders in collaborative efforts to improve local early childhood services, sharing responsibility for the effectiveness of joint decisions, and building local leadership within the system.

*Tier 3* Regional Councils, judged to have very mature infrastructure and capacity, will benefit from *maximizing capacity and quality*. The RCC will assist Regional Councils improve the availability, accessibility, capacity and quality of services.

These interventions will enable the Regional Councils to assume their full responsibility as an active part of the governance of the RTT-ELC State Plan.

- **Philanthropy (Other Partners).** Their role will be to serve on the Management Team, and to private fund initiatives that support the implementation of the RTT-ELC State Plan. As previously mentioned (see A1), they will assure that their philanthropic initiatives converge with the State Framework and Action Plan, which is fully aligned with the RTT-ELC State Plan. Thus, private and public funding will dovetail together to support the RTT-ELC State Plan.
- **Parents (Other Partners).** The active participation of parents will be assured through the presence of the BFF and other community partners on the Management Team.

**Other Community Partners** will include:

- A range of sectors as previously described, such as educators and criminal justice. These institutions will participate on the Management Team directly in some cases and as part of BBF in others; they will provide advice and feedback on the implementation as it progresses.

**A3a3: Decision-making methods and processes; dispute resolution.**

Vermont’s ELD system is built on longstanding formal and informal interpersonal and institutional relationships. These include established networks such as Building Bright Futures Regional Councils (see above) and the VT STARS Oversight Committee (see B1), and longstanding informal relationships among individuals linked by mutual professional interests. In a small, rural state like Vermont, where professional networks are smaller, these relationships are particularly strong.

Operational decisions will be made by the appropriate State agency, and where appropriate, initiatives will be managed jointly by the Governor’s Office and the Management Team. Should any disputes arise, they will be discussed and resolved by the Management Team. Should disputes remain unresolved at that point, the Governor’s Office, as the lead agency, will be responsible for final decision-making.

**A3a4: How stakeholders will be involved in planning and implementation.**

Vermont is small, with a population of only 626,741 (U.S. Census, 2010). It ranks 49<sup>th</sup> among states in population. Its smallness is a great advantage in assuring robust outreach and diverse stakeholder participation. With a smaller number of players, individuals tend to be extensively networked -- particularly in the context of professional and other affinity relationships.

As previously described, Vermont is fortunate to have a well-developed and longstanding ELD network, Building Bright Futures (BBF), that has statutory responsibility for oversight of Vermont’s ELD programs and, through its statewide Council and 12 Regional Councils, includes the broad participation of ELD stakeholders throughout Vermont. BBF will serve as a core component of the governance of the State Plan, thus assuring that community stakeholders – such as service providers and parents – have a place at the table equal to that of the large public

agencies that will oversee the implementation. As part of its capacity building activities (see A3a2), Building Bright Futures will strengthen local leadership capacity and build local stakeholder ownership, thus further promoting successful implementation and sustainability.

Throughout the drafting of this RTTT – ELC State Plan, the drafting team, led by the Governor’s Office, sent weekly updates to a broad list of stakeholders and solicited input both online and in person through a series of meetings around the state, a public statewide online forum using Vermont Interactive Technologies, and a series of public conference calls. Hundreds of Vermonters representing a myriad of backgrounds and organizations participated in these sessions and provided input for this RTTT – ELC State Plan.

**A3b (including A3b1, 2, and 3): Memoranda of Understanding (MOUs).**

Please see Appendix III for MOUs from all key participating institutions in the State Plan.

**A3c (including A3c1, and 2): Letters of Intent and Support.**

Please see Appendix IV for Letters of Intent and Support from all key participating institutions in the State Plan, as well as other stakeholders.

<b>Table (A)(3)-1: Governance-related roles and responsibilities</b>	
<b>Participating State Agency</b>	<b>Governance-related roles and responsibilities</b>
Vermont Governor’s Office (Lead Program Agency)	<ul style="list-style-type: none"> <li>• No public funds or programs administered</li> <li>• Provides program oversight for the RTT-ELC grant</li> <li>• Assures non-financial reporting for the RTT-ELC grant</li> <li>• Appoints and hosts the RTT-ELC Management Team (Management Team)</li> <li>• Final arbiter of disputes, if required</li> </ul>
Vermont Agency of Human Services (Lead Fiscal Agency)	<ul style="list-style-type: none"> <li>• Sits on the Management Team</li> <li>• Provides fiscal oversight for the RTT-ELC grant</li> <li>• Assures financial reporting for RTT-ELC grant</li> <li>• Oversees Department for Children and Families and Department of Health</li> </ul>
Vermont Agency of Education	<ul style="list-style-type: none"> <li>• Sits on the Management Team</li> <li>• Manages and implements all components of the State Plan that fall under the purview of their agency including the state longitudinal data system (SLDS); Vermont Early Learning Standards (VELS); IDEA Part</li> </ul>

<b>Table (A)(3)-1: Governance-related roles and responsibilities</b>	
<b>Participating State Agency</b>	<b>Governance-related roles and responsibilities</b>
	B, Section 619; Title 1, ESEA; co-administrator state-funded preschool, CACFP; Readiness Kindergarteners Survey; and others.
Vermont Department for Children and Families	<ul style="list-style-type: none"> <li>• Sits on the Management Team</li> <li>• Manages and implements all components of the State Plan that fall under the purview of their agency, including IDEA Part C; Head Start Collaboration Grant; Early Intervention; VT STARS (Vermont’s TQRIS); ELD licensing; child care subsidies; CBCAP; and others.</li> </ul>
Vermont Department of Health	<ul style="list-style-type: none"> <li>• Sits on the Management Team</li> <li>• Manages and implements all components of the State Plan that fall under the purview of their agency including programs and services to finance children’s health; developmental and behavioral screenings financed with public funds; the promotion of models and best practices related to high-quality health care for children, including medical, behavioral, and oral care; Title V Maternal and Child Care Block Grant, MIECHA, Launch.</li> </ul>
<b>Other Entities</b>	
Building Bright Futures (State advisory council on early childhood education and care and participating agency)	<ul style="list-style-type: none"> <li>• Provides oversight and accountability for the early childhood system</li> <li>• Sits on the Management Team</li> <li>• Manages and implements all aspects of the State Plan that fall under its purview including capacity building for BBF Regional Councils; Building Bright Futures Information System; and others.</li> </ul>
State Interagency Coordinating Council for Part C of IDEA	<ul style="list-style-type: none"> <li>• Participates as a member of Building Bright Futures (see above)</li> </ul>
Philanthropy	<ul style="list-style-type: none"> <li>• Sits on the Management Team</li> <li>• Privately funds initiatives that support the implementation of the State Plan, and will fund projects that converge with the State Plan and Early Childhood Framework</li> </ul>
Parents	<ul style="list-style-type: none"> <li>• Sits directly on the Management Team or participates as a member of Building Bright Futures (see above).</li> <li>• Advises on the implementation of the State Plan</li> <li>• Provides consumer feedback on the implementation of the State Plan</li> </ul>

<b>Table (A)(3)-1: Governance-related roles and responsibilities</b>	
<b>Participating State Agency</b>	<b>Governance-related roles and responsibilities</b>
Other Community Partners, including faith-based institutions; business; public safety; planning commissions; criminal justice; family courts; and advocacy organizations, among others.	<ul style="list-style-type: none"> <li>• In some cases, sits directly on the Management Council; in other cases, participates as a member of Building Bright Futures (see above).</li> <li>• Advises on the implementation of the State Plan</li> <li>• Provides community feedback on the implementation of the State Plan</li> </ul>

<b>Table (A)(3)-2: Early Learning Intermediary Organizations and local early learning councils (if applicable)</b>	
<b>List every Intermediary Organization and local early learning council (if applicable) in the State</b>	<b>Did this entity provide a letter of intent or support which is included in the Appendix (Y/N)?</b>
Building Bright Futures – Bennington Regional Council	Y
Building Bright Futures – Burlington Regional Council	Y
Building Bright Futures – Caledonia/South Essex Council	Y
Building Bright Futures – Central Vermont Regional Council	Y
Building Bright Futures – Franklin/Grand Isle Regional Council	Y
Building Bright Futures – Hartford Regional Council	Y
Building Bright Futures – Middlebury Regional Council	Y
Building Bright Futures – Morrisville Regional Council	Y
Building Bright Futures – Newport Regional Council	Y
Building Bright Futures – Rutland Regional Council	Y
Building Bright Futures – Springfield Regional Council	Y
Building Bright Futures – Southeastern Vermont Regional Council	Y

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<b>Table (A)(3)-2: Early Learning Intermediary Organizations and local early learning councils (if applicable)</b>	
<b>List every Intermediary Organization and local early learning council (if applicable) in the State</b>	<b>Did this entity provide a letter of intent or support which is included in the Appendix (Y/N)?</b>
Building Bright Futures – State Advisory Council	Y
First Schools	Y
Vermont Head Start Association	Y
Hunger Free VT	Y
Northern Lights Career Center	Y
Parent Child Center Network	Y
Prevent Child Abuse VT	Y
VT Association of Child Care Resource and Referral Agencies	Y
VT Association for the Education of Young Children	Y
Additional Non-Required Letters of Support	
U.S. Senator Patrick Leahy	Y
U.S. Senator Bernard Sanders	Y
U.S. Representative Peter Welch	Y
PreK-16 Council	Y
St. Johnsbury School District	Y
VT State Board of Education	Y
VT Principals Association	Y
VT Council for Special Educators	Y

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<b>Table (A)(3)-2: Early Learning Intermediary Organizations and local early learning councils (if applicable)</b>	
<b>List every Intermediary Organization and local early learning council (if applicable) in the State</b>	<b>Did this entity provide a letter of intent or support which is included in the Appendix (Y/N)?</b>
VT School Boards Association	Y
VT National Education Association	Y
VT Superintendents Association	Y
Burlington City Mayor Miro Weinberger	Y
State Senator John Campbell	Y
Vermont House Speaker Shap Smith	Y
Vermont Representative Sarah Buxton	Y
Snelling Center for Government	Y
Stern Center	Y
University of Vermont	Y
Vermont State Colleges	Y
VT Center for the Book	Y
VT Early Childhood Division	Y
VT Child Health Improvement Program	Y
VT Academy of Pediatrics	Y
VT Business for Social Responsibility	Y
VT Business Roundtable	Y
A.D. Henderson Foundation	Y

<b>Table (A)(3)-2: Early Learning Intermediary Organizations and local early learning councils (if applicable)</b>	
<b>List every Intermediary Organization and local early learning council (if applicable) in the State</b>	<b>Did this entity provide a letter of intent or support which is included in the Appendix (Y/N)?</b>
The Permanent Fund	Y
The Turrell Fund	Y
VT Children's Trust	Y
VT Community Foundation	Y
VT Community Loan Fund	Y
VT Early Childhood Alliance	Y
VT Head Start State Collaboration Office	Y
Results Based Accountability	Y
VT Afterschool, Inc.	Y
VT Commission on Women	Y

(A)(4) Developing a budget to implement and sustain the work of this grant. (15 points)

The extent to which the State Plan--

(a) Demonstrates how the State will use existing funds that support early learning and development from Federal, State, private, and local sources (e.g., CCDF; Title I and II of ESEA; IDEA; Striving Readers Comprehensive Literacy Program; State preschool; Head Start Collaboration funding; MIECHV program; Title V MCH Block Grant; TANF; Medicaid; child welfare services under Title IV (B) and (E) of the Social Security Act; Statewide Longitudinal Data System; foundation; other private funding sources) for activities and services that help achieve the outcomes in the State Plan, including how the quality set-asides in CCDF will be used;

(b) Describes, in both the budget tables and budget narratives, how the State will effectively and efficiently use funding from this grant to achieve the outcomes in the State Plan, in a manner that--

(1) Is adequate to support the activities described in the State Plan;

(2) Includes costs that are reasonable and necessary in relation to the objectives, design, and significance of the activities described in the State Plan and the number of children to be served; and

(3) Details the amount of funds budgeted for Participating State Agencies, localities, Early Learning Intermediary Organizations, Participating Programs, or other partners, and the specific activities to be implemented with these funds consistent with the State Plan, and demonstrates that a significant amount of funding will be devoted to the local implementation of the State Plan; and

(c) Demonstrates that it can be sustained after the grant period ends to ensure that the number and percentage of Children with High Needs served by Early Learning and Development Programs in the State will be maintained or expanded.

*The State's response to (A)(4)(b) will be addressed in the Budget Section (section VIII of the application) and reviewers will evaluate the State's Budget Section response when scoring (A)(4). In the text box below, the State shall write its full response to (A)(4)(a) and (A)(4)(c) and may also include any additional information it believes will be helpful to peer reviewers. If the State has included relevant attachments in the Appendix, these should be described in the narrative below and clearly cross-referenced to allow the reviewers to locate them easily.*

Evidence for (A)(4)(a):

- The completed table listing the existing funds to be used to achieve the outcomes in the State Plan (see Table (A)(4)-1).
- Description of how these existing funds will be used for activities and services that help achieve the outcomes in the State Plan.

Evidence for (A)(4)(b):

- The State's budget (completed in section VIII).
- The narratives that accompany and explain the budget, and describe how it connects to the State Plan (also completed in section VIII).

**Section A4: Developing a budget to implement and sustain the work of this grant**

**A4a: How the State will use existing funds that support early learning and development from Federal, State, private and local sources to leverage the State Plan including CCDF set-asides**

A range of Federal, State and private funding streams will support our RTT-ELC State Plan. These leveraged funds will bring financial power to our State Plan. In addition, we are fortunate that our philanthropic community has pledged to fund projects that support our State Plan, thus adding extra strategic power (see A1). This congruence between public and private funders will be of considerable benefit in moving the State Plan forward in a unified way.

This section briefly highlights the use of example existing funding sources to support our State Plan. All of these efforts will help Vermont improve the quality of ELDP, and particularly assist children with high needs. For more funding details, please see Table A4-1.

Early Childhood Advisory Council: In Vermont, this entity is Building Bright Futures (BBF), a public-private partnership that is largely funded through a contract using existing State funds. BBF is the governance structure for Vermont's early care, health and education system. The BBF operates as an independent 501(c)(3) organization. A governing council of 23 members leads building Bright Futures statewide. These members are appointed by the Governor and include government leaders, legislators, and early care, health, and education representatives from various stakeholder groups including parents. The Council's chief tasks are: (1) to monitor and report on the quality, accessibility, and equity of services for families and young children through an integrated system for planning, coordinating, and developing of early childhood programs; and (2) to advise on early childhood policy, data collection, and resource allocation decisions at the State and regional levels.

BBF serves an additional role as umbrella organization to 12 regional early childhood councils who monitor and improve their local systems of service delivery. These local councils contain broad local representation. Thus, between the Council and the Regional Councils, BBF has extensive reach throughout Vermont's early childhood infrastructure and stakeholders.

BBF is statutorily charged under Act 104 with assuring an accountable, results based, comprehensive and coherent system of high-quality early childhood services that are coordinated, aligned with established early learning and development standards, and are geographically and financially accessible to all families with young children.

BBF is a key driver of Vermont's Early Childhood Data Reporting System, and is a key player in the management and implementation of State Plan (see A3).

CCDF: The CC FAP is Vermont's child care subsidy program under the Child Care and Development Fund (CCDF). Vermont invested \$4.8 M in this initiative in FY10 and subsequently invested an additional \$3.3 M in general funds and \$15.5 M in ARRA funds under CCDF to implement these reforms and increase funds available for subsidies. This funding continued even after ARRA funds became unavailable. This demonstrates Vermont's commitment to funding in early childhood.

State-Funded PreK: In 2007, Act 62 was enacted to set consistent and high program and personnel standards for PreK in Vermont. Act 62 promotes partnerships between school districts and existing qualified community programs, requires community input prior to establishing or expanding public PreK programs, and offers children between the ages of three and five and their families greater access to quality early learning experiences. In addition, earlier this year Governor Shumlin announced a public-private partnership to enable communities across the state to launch or expand publicly funded pre-kindergarten programs. The state is providing \$400,000 from the Agency of Education to towns that want to create or expand their publically funded PreK programs. An additional \$400,000 is being provided by the Vermont Community Preschool Collaborative (VCPC), a fund created and supported by the nonprofit Permanent Fund for Vermont's Children, to ensure more children have access to high-quality programs.

Head Start and Early Head Start: Federal and State funds will continue to support Early Head Start and Head Start services to ensure that children with high needs participate in high quality ELDP that support their kindergarten entry skills.

Title I of ESEA: Title I funds will be used by Vermont to assure that all children meet challenging state academic standards. A portion of these funds support programs for children from age 3 to kindergarten entry.

Part B of IDEA, Section 619: These funds will support a free appropriate education in the least restrictive environment for young children with disabilities.

Part C of IDEA, Early Intervention: These funds will continue to provide a comprehensive system of individualized early intervention services for families and their young children from birth to age three with, established developmental delays or medical conditions that may lead to developmental delays.

State Longitudinal Data System (SLDS): Vermont’s SLDS will become fully operational in 2016, supported by existing funding. Its robustness will be expanded through funding under the RTT-ELC State Plan.

Strengthening Families Direct Services Grants: Nearly \$1M in funds have been awarded in a new “Strengthening Families” grant program offered to ELDP with 4 and 5 VT STARS star ratings that serve at least 30% of CC FAP subsidized children in their enrollment census. Strengthening Families grants were developed to ensure affordable access to high-quality comprehensive early care and education programs for children, particularly infants and toddlers, and families challenged by economic instability and other environmental risk factors.

**A4b: Describe, in both budget tables and budget narratives, how the State will effectively and efficiently use funding from this grant to achieve the outcomes in the State Plan in a manner that is (1) adequate; (2) has reasonable and necessary costs; and (3) details the amount of funds budgeted by participating agencies and organizations**

Detailed information on the use of RTT-ELC funds is provided in the Budget Summary Tables and Budget Narrative (in section V). The information is detailed in Budget Tables I-1, I-2, and I-3, Budget Part I – Narrative, and Budget Tables II-1, II-2, and Budget Narrative Part II.

**A4c: How the State Plan will be sustained after the grant period ends**

Vermont is deeply committed to assuring that the number of children with high needs who are served by high quality ELDP in Vermont are not only maintained but expanded. In today’s political and fiscal environment, sustainability is a significant challenge. However, Vermont offers the following strategies as assurance of the high probability of sustainability:

- **Vermont has a longstanding commitment to early childhood.** The political commitment to children in Vermont has been long and enduring. Vermont has instituted a number of innovative strategies to support the learning and development of young children with high needs and their families. These include, among others: Dr. Dynasaur, Vermont’s Medicaid plan that provides free or low-cost health coverage up to 300 % federal poverty level for eligible children and adolescents up to age 21; publicly funded PreK under Act 62; Vermont’s 13-year-

old Kindergartners Readiness Survey (RKS); and Act 66, which establishes high standards for home visiting.

- **Sustained and expanded funding, even in these difficult times.** As Table A1-4 shows, Vermont’s financial commitment to children between 2009 and 2013 has been consistent, particularly given the overall sharp economic decline during the period. While there has been some variance, 2013 funding levels in many categories are up from 2009, in some cases markedly so.
- **Repurposing current investments to support what succeeds.** Vermont is pragmatic; it recognizes that ongoing evaluation provides information to reallocate resources, as appropriate, to maximize outcomes.
- **Building Bright Futures capacity building initiative.** One of the core elements of Vermont’s early childhood system, Building Bright Futures, will receive extensive capacity building under the RTT-ELC grant including financial capacity building (see A3).
- **The Campaign for Vermont’s Youngest Children.** As noted in A1, Vermont’s philanthropic community is committed to early childhood and to moving ahead with funding that supports the State Plan. In addition, a group of private funders, led by the Permanent Fund and the Turrell Fund, are about to announce the Campaign for Vermont’s Youngest Children. This will be a multi-million dollar, multi-year investment to build awareness of the importance of strategic investments in the early years. This initiative is unprecedented in Vermont, and will assist the State in sustaining and expanding its early childhood initiatives moving forward.

**Table (A)(4) – 1 Existing other Federal, State, private, and local funds to be used to achieve the outcomes in the State Plan.**

Source of Funds	Fiscal Year 2012	Fiscal Year 2013	Fiscal Year 2014	Fiscal Year 2015	Total
Affordable Care Act: MIECHV*	\$1,450,000	\$450,000	\$0	\$0	\$1,900,000

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<b>Table (A)(4) – 1 Existing other Federal, State, private, and local funds to be used to achieve the outcomes in the State Plan.</b>					
<b>Source of Funds</b>	<b>Fiscal Year 2012</b>	<b>Fiscal Year 2013</b>	<b>Fiscal Year 2014</b>	<b>Fiscal Year 2015</b>	<b>Total</b>
VT Department of Health Grant	\$29,112	\$29,112	\$29,112	\$29,112	\$116,448
Managed Care Organization Investment**	\$883,537	\$883,537	\$883,537	\$883,537	\$3,534,148
CCDF Quality Funds	\$570,632	\$592,012	\$614,009	\$792,233	\$2,568,886
In-kind by CDD and SAMHSA (Substance Abuse and Mental Health Services Association).	\$399,000	\$399,000	\$399,000	\$399,000	\$1,596,000
TANF direct funds; Part C; MCO***	\$2,859,580	\$2,962,144	\$3,064,708	\$3,167,272	\$12,053,704
MCO and Part C****	\$9,590,968	\$9,590,968	\$9,590,968	\$9,590,968	\$38,363,872
CDD*****	\$35,680	\$35,680	\$35,680	\$35,680	\$142,720
A.D. Henderson Foundation	\$99,320	\$0	\$0	\$0	\$99,320
US DOE Office of Special Education	\$32,000	\$32,000	\$32,000	\$32,000	\$128,000
Agency of Education Operating Budget	\$351,166	\$227,874	\$293,741	\$262,824	\$1,036,285
Governor's Office Operating Budget	\$15,000	\$15,000	\$15,000	\$15,000	\$60,000
*One (formal) grant expires in 2014 and the other (discretionary) expires in 2015					
**In 2011, VT Child Development Divisions (CDD) was able to make state funds available to purchase almost \$900,000 in Medicaid funds as a Managed Care Organization Investment					

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<b>Table (A)(4) – 1 Existing other Federal, State, private, and local funds to be used to achieve the outcomes in the State Plan.</b>					
<b>Source of Funds</b>	<b>Fiscal Year 2012</b>	<b>Fiscal Year 2013</b>	<b>Fiscal Year 2014</b>	<b>Fiscal Year 2015</b>	<b>Total</b>
<p>(MCOI) under the Medicaid waiver. Using a competitive granting process (criteria described in section B4) CDD awards grants to high quality licensed ELDP centers to provide comprehensive services to high needs children and apply the Strengthening Families Framework to build protective factors in families of high needs children.</p> <p>*** CDD uses several different funding streams to support the successful inclusion of high needs children in high quality ELDP as part of Specialized Child Care Services (SCCS) in CIS.</p> <p>**** CDD spends more than \$9.5 million annually in MCO and IDEA Part C administration funds to support Children’s Integrated Services (CIS) in the AHS regions in Vermont. CIS is described in sections A1 and B4.</p> <p>***** CDD currently provides up to \$1,000 per semester to ECE taking college course work.</p>					

**B. High-Quality, Accountable Programs**

(B)(1) Developing and adopting a common, statewide Tiered Quality Rating and Improvement System. (10 points)

The extent to which the State and its Participating State Agencies have developed and adopted, or have a High-Quality Plan to develop and adopt, a Tiered Quality Rating and Improvement System that--

(a) Is based on a statewide set of tiered Program Standards that include--

- (1) Early Learning and Development Standards;
- (2) A Comprehensive Assessment System;
- (3) Early Childhood Educator qualifications;
- (4) Family engagement strategies;
- (5) Health promotion practices; and
- (6) Effective data practices;

(b) Is clear and has standards that are measurable, meaningfully differentiate program quality levels, and reflect high expectations of program excellence commensurate with nationally recognized standards that lead to improved learning outcomes for children; and

(c) Is linked to the State licensing system for Early Learning and Development Programs.

Evidence for (B)(1):

- The completed table that lists each set of existing Program Standards currently used in the State and the elements that are included in those Program Standards (Early Learning and Development Standards, Comprehensive Assessment Systems, Qualified Workforce, Family Engagement, Health Promotion, Effective Data Practices, and Other), (see Table (B)(1)-1).
- To the extent the State has developed and adopted a Tiered Quality Rating and Improvement System based on a common set of tiered Program Standards that meet the elements in selection criterion (B)(1)(a), submit--
  - A copy of the tiered Program Standards;
  - Documentation that the Program Standards address all areas outlined in the definition of Program Standards, demonstrate high expectations of program excellence commensurate with nationally recognized standards, and are linked to the States licensing system; and
  - Documentation of how the tiers meaningfully differentiate levels of quality.

**B1: Developing and adopting a common, statewide Tiered Quality Rating and Improvement System (TQRIS)**

**Abstract:**

Following is an overview of VT STARS, the State's TQRIS. High Quality Plans follow in subsequent sections and are referenced herein.

The projects discussed in Section B relate to Project Budget #4 – #8.

Vermont has developed and adopted a common, statewide TQRIS, which has been in operation since 2003. Vermont Step Ahead Recognition System (VT STARS) is a state-wide TQRIS used to assess, improve and communicate quality levels for all early learning development programs (ELDP) in Vermont.

The VT STARS Oversight Committee is a group of 15 diverse experts and stakeholders, including state agency representatives, VT STARS Coordinators, technical assistance providers and VT STARS rated ELDP, who have met monthly for the past 7 years to advise the Child Development Division (CDD) and the Agency of Education (AOE) on how to improve and support VT STARS. They apply what is known about the elements of a high-functioning standards based system, as defined by the QRIS National Learning Network (<http://www.qrisnetwork.org/our-framework>) (See Figure 1 below), as well as feedback from experiences in the VT STARS System to continually improve our TQRIS. As part of that ongoing process, we will use resources from the RTT-ELC award to fill in identified gaps and advance VT STARS to an even more robust level. Our ambition is to implement strategies that maintain VT STARS among the most effective, inclusive and well-managed TQRIS in the country.

Vermont was one of only thirteen states to launch a Quality Rating System (QRS) prior to 2004 (ACF OPE, 2010). A team of local experts in the field examined the research on ELDP quality, examined the work and experiences of other early adopter states, consulted with national experts involved with QRS development, and met with focus groups of early childhood educators (ECE) and parents in Vermont.

VT STARS was developed to increase the number of programs intentionally addressing and documenting quality in their programs in order to close the “quality gap” between the 5% of regulated programs that were then nationally accredited and the 95% who were simply operating

legally. Our goal has been to turn the pyramid of program quality upside down so that the majority of programs in Vermont are engaged in continuous quality improvement. Ten years later, we are almost halfway there. VT STARS and the levels of quality it describes were also developed to provide a resource to parents to help guide them in selecting a high-quality program for their child.

VT STARS is a tiered, voluntary, point-based system. It requires participants to meet one threshold requirement, State licensing or registration<sup>17</sup>, and then awards a star rating (1 to 5 VT STARS) based on points acquired for meeting additional criteria in five arenas:

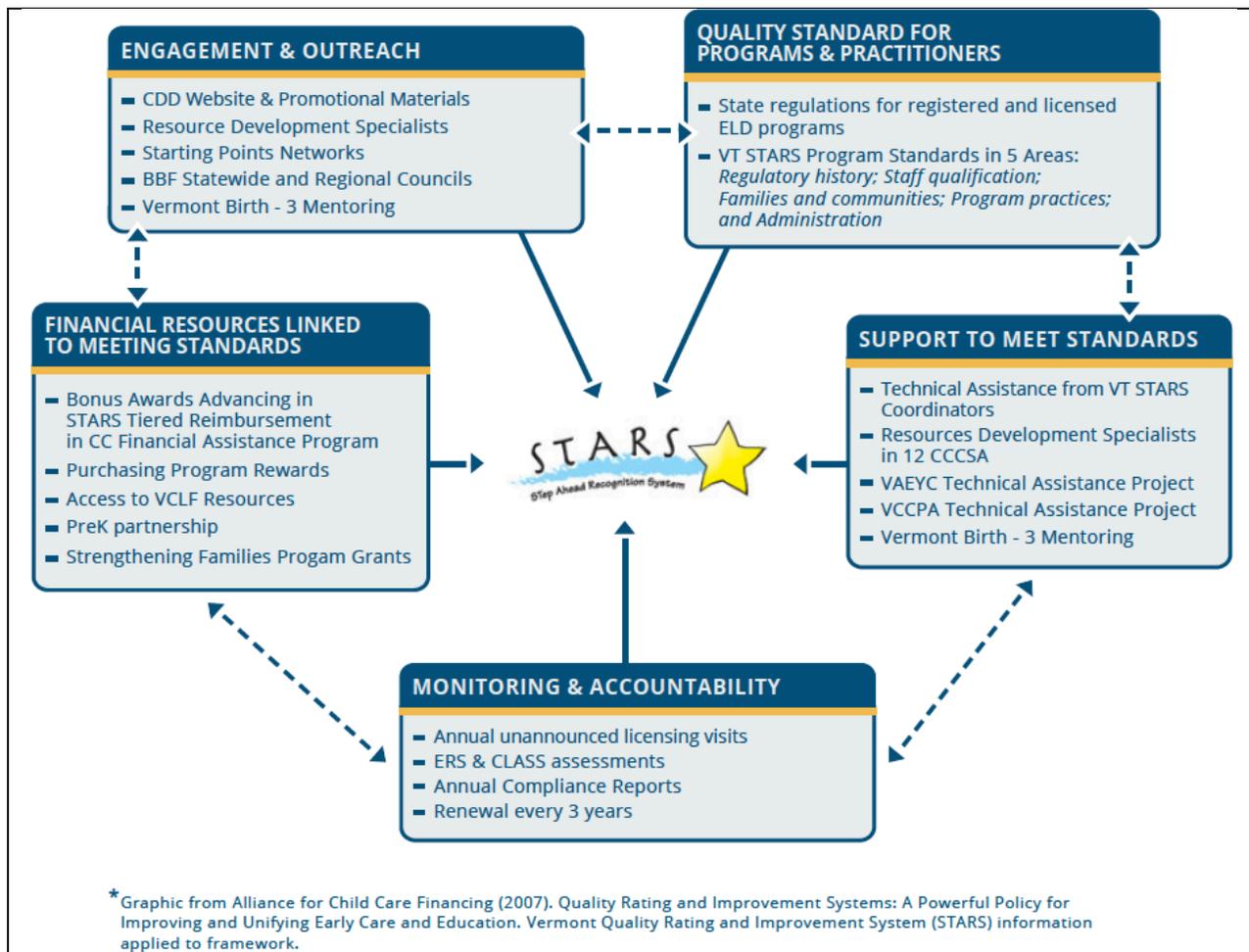
- Regulatory history;
- Staff qualifications and annual professional development;
- Families and communities;
- Program practices; and
- Administration.

A maximum of three or five points is possible in each arena. Programs identify the points their program is eligible to earn based on tier-specific achievements that are verified through the application process. The point total determines their number of stars.

This tiered, point-based model creates a dynamic interaction between programs and VT STARS progress, accommodates the wide variety of ELDP included in VT STARS and promotes a strengths based approach to continuous quality improvement. VT STARS ratings are valid for three years from the date of the assessment, with an annual reporting requirement. Any program can request an additional assessment within that time period in order to attain a higher star level.

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<sup>17</sup> In Vermont, all full-time child care providers providing care for more than two families must be licensed to operate a child care facility or be registered with the State to run a family child care home. See more information about child care licensing in section B3.



**Figure 12: Elements of a High-Functioning Standards-Based System in Vermont STARS**

VT STARS includes the following elements:

➤ **Quality Standards for Programs and Practitioners**

VT STARS is based on a statewide set of comprehensive tiered program standards (see Table 6 below).

➤ **Early Learning and Development Standards**

Vermont Early Learning Standards (VELS) are Vermont’s statewide early learning and development standards for 3-5 year olds (see C1). VELS cover all essential domains of school readiness and are universally designed and developmentally, culturally and linguistically appropriate. These are embedded into the tiered program standards in VT STARS.

Newly proposed licensing standards will require all regulated programs to implement developmentally appropriate learning experiences for children based on VELS (see B3).

In the Program Practice Arena of the VT STARS application (included in Appendix VI, VII, and VIII), the following statement is included: *“The Vermont Early Learning Standards (VELS) inform educators in the development of curriculum and educational strategies, and should be used as a framework for developing curriculum and program changes.”*

➤ **Comprehensive Assessment**

The Program Practices Arena of VT STARS embeds components of a comprehensive assessment system intended to help ECE make informed instructional and programmatic decisions about the process and context of young children’s learning and development. Progression through VT STARS levels allows providers to begin accessing assessment where they are, and guides them upward toward greater reliability and rigor in assessment practices. Several valid and reliable assessment tools are approved for use in VT STARS.

Formative Assessment: ELDP participating in VT STARS must provide verification that *“the program regularly uses observation and other forms of informal assessments to document children's strengths, needs, interests and growth. The program maintains records of this documentation and utilizes the results of this ongoing system of assessment to inform curriculum planning.”* In order to earn four or five points in this arena, programs must use the Agency of Education (AOE)/Child Development Division (CDD) approved child assessment system, which is TS GOLD. More details on TS GOLD and an HQP to improve practice in use of this instrument is in C2. TS GOLD has been aligned with current VELs.

Measures of Environmental Quality: The Environmental Rating Scales (ERS) are the predominant valid program assessment tool recognized and applied in the VT STARS. These include the Infant Toddler Environmental Rating Scale (ITERS), the Early Childhood Environmental Rating Scale (ECERS), the Family Child Care Environmental Rating Scale (FCCERS) and the School Age Care Environmental Rating Scale (SACERS). (See B3).

Measures of Quality of Adult Child Interactions: The Classroom Assessment Scoring System (CLASS) is also recognized as a valid program assessment tool in VT STARS; it is generally used by programs in higher tiers of VT STARS that have consistently high ERS ratings. (See C2).

➤ **Early Childhood Educator Qualifications**

In the Staff Qualification and annual Professional Development Arena of VT STARS,

participating ELDP complete an AOE/CDD approved worksheet that assigns a numerical value to educational level, experience in the field and annual hours of participation in relevant professional development for every staff member working directly with children. Detailed definitions of relevant course work, credentials and degrees are described in the VT STARS application (see Appendix VI). The program's average score across all staff working directly with children determines how many points may be awarded in this arena.

All staff members are also required to have a current Individual Professional Development Plans (IPDP) or a statement of annual professional development goals. VT STARS requirements in this arena are aligned with, and reference, AOE Early Childhood Licensure and the Northern Lights Career Development Center (NLCDC) Career Ladder (see D2).

➤ **Family Engagement Strategies**

The Families and Communities Arena of VT STARS awards points to programs for implementing strategies that promote two-way communication between the ELDP and families; invite families to participate actively in the ELDP; link families to community resources; and enhance the capacity of families to support their children's education and development. To earn 3 points in this arena, ELDP must apply the Strengthening Families Framework (SFF) to program practices (see B4).

➤ **Health Promotion Practice**

The Regulatory History Arena of VT STARS embeds health promotion practices and related nutrition policies in state regulations. For more details on Vermont's innovative health care system and how it impacts children, see A1. For how Vermont is increasing the regulatory foundation for health promotion using the American Academy of Pediatrics' Caring for Our Children standards, see B4 and C3. ERS assessments also evaluate aspects of health promotion and raise the bar above licensing regulation in addressing increasing levels of environmental quality in ELDP.

➤ **Effective Data Practices**

The Bright Futures Information System (BFIS) developed and maintained by the CDD contains extensive programmatic, regulatory and quality rating data on ELDP in Vermont including STAR level, program type, bonuses paid for level achieved, enrollment of Child Care Financial Assistance Program (CC FAP) eligible children and quality differentials paid on behalf

of children eligible for CC FAP. BFIS also contains verified information about staff qualifications and professional development that is becoming more robust and allows the VT STARS Coordinators, who have permission to view information in BFIS, to confirm the accuracy of information in the Staff Qualifications arena (see D2).

These VT STARS Coordinators, employed by a community contractor responsible for VT STARS administration (Building Bright Futures – see A1), also maintain a collection of process and program data related to applications received and processed, points awarded, ERS scores, and progression of programs through VT STARS. They have established standard data collection and recording practices that allow them to evaluate system outcomes and submit detailed quarterly reports to the CDD in order to track trends in VT STARS.

The VT STARS data set from BFIS is incorporated into the Vermont Early Childhood Data and Reporting System (ECDRS)(See E2). The VT STARS Oversight Committee advises the CDD on improving data collection and expanding the capacity of BFIS to collect and report information on VT STARS participation.

**Table 6: How ELD Programs Meet VT STARS Standards**

<b>Regulatory History Arena</b>					
<b>No Points Requested</b>	<b>1 point</b>	<b>2 points</b>	<b>3 points</b>	<b>4 points</b>	<b>5 points</b>
In regulatory compliance	Operated as a regulated program for 12 months to 35 months with no serious or reoccurring violations	Operated as a regulated program for 36 months to 59 months with no serious or reoccurring violations	Operated as a regulated program for 60 months or more with no serious or reoccurring violations		
<b>Staff Qualifications and Annual Professional Development Arena</b>					
<b>No Points Requested</b>	<b>1 point</b>	<b>2 points</b>	<b>3 points</b>	<b>4 points</b>	<b>5 points</b>
In compliance with Vermont Child Care Licensing Regulations for staff training and qualifications	Have an individual professional development plan AND Score based on achievements in course work, experience, annual training.	Have an individual professional development plan AND Score based on achievements in course work, experience, annual training.	Have an individual professional development plan AND Score based on achievements in course work, experience, and annual training.		

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<b>Families and Communities Arena</b>					
<b>No Points Requested</b>	<b>1 point</b>	<b>2 points</b>	<b>3 points</b>	<b>4 points</b>	<b>5 points</b>
In compliance with Vermont Child Care Licensing Regulations for working with families.	Conduct a family satisfaction survey  Create a plan based on what was learned from the family satisfaction survey  Have a written philosophy on relationships with families  Share community information & resources with families  Do some professional networking activities	Criteria for one point  Have social & education events for families  Have opportunities for families to be involved in the program  Be an approved Specialized Child Care Provider  Refer families to community supports as needed	Criteria for one and two points  Use the Strengthening Families Child Care Assessment Tool  Develop a Strengthening Families program improvement plan  Have a leadership statement  Do leadership activities  Professional reference about your leadership role		
<b>Program Practices Arena</b>					
<b>No Points Requested</b>	<b>1 point</b>	<b>2 points</b>	<b>3 points</b>	<b>4 points</b>	<b>5 points</b>
In compliance with Vermont Child Care Licensing Regulations for program practices	Do an evaluation of the program using an approved tool  Develop a program improvement plan	With a trained mentor do an evaluation of the program using an approved tool  Develop a program improvement plan  Do child observations  Use child observations to plan curriculum	Have an independent assessor evaluate the program using an approved tool. Achieve a specific score  Develop a program improvement plan  Do child observations  Use child	Have an independent assessor evaluate the program using an approved tool. Achieve a specific score  Develop a program improvement plan  Do child observations  Use child	Have national accreditation Program improvement plan  Do child observations Use child observations to plan curriculum

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			observations to plan curriculum	observations to plan curriculum	
<b>Administration Arena</b>					
<b>No Points Requested</b>	<b>1 point</b>	<b>2 points</b>	<b>3 points</b>	<b>4 points</b>	<b>5 points</b>
In compliance with Vermont Child Care Licensing Regulations for administrating a child care program.	Family Homes: Have written agreement or contract  Licensed Centers: Policy about planning individual professional development and benefits and salary scale	Family Homes: Criteria for one point: policy on program closures; professional membership  Licensed Centers: Criteria for one point: staff breaks policy	Family Homes: Criteria for one & two points: parent handbook; liability insurance; written budget  Licensed Centers: Criteria for one & two points: wages at least 85% of the livable wage		

➤ **Support to Meet Standards**

The VT STARS data set from BFIS is incorporated into the Vermont Early Childhood Data and Reporting System (ECDRS)(see E2). The VT STARS Oversight Committee advises the CDD and supports twelve Resource Development Specialists in Community Child Care Support Agencies (CCCSA), Vermont Association of Resource and Referral Agencies (VACCRRRA). There is 1 Resource Development Specialist in each of the 12 regions which both the Agency of Human Services (AHS) and Building Bright Futures (see A1) use to parse Vermont geographically.

A key deliverable in CCCSA contracts is to effect strategies to increase participation and upward movement in VT STARS. A number of additional technical assistance and mentoring (TAM) projects are supported by the CDD. CDD makes grants to the Vermont Child Care Provider Association (VCCPA) and the Vermont Association for the Education of Young Children (VAEYC) for the purpose of mentoring staff and programs into and upward in VT STARS. These projects are focused on implementation of program quality standards and moving on to achieve appropriate national accreditation.

Vermont's philanthropies have been highly supportive of early childhood programs, and are working closely with the State (see A3). VAEYC's work to promote VT STARS is supported by the A.D. Henderson Foundation, which made a grant to significantly enhance their capacity and outreach (see E1). A coalition of private funders including the Permanent Fund, the Turrell Fund, the Vermont Children's Fund, and the A.D. Henderson Foundation also support the Vermont Birth-3 (VB3) Project. This has had significant success in recruiting registered Family Child Care Providers into VT STARS through peer-to-peer mentoring.

The Starting Points Networks, a grass roots network of provider-driven peer groups supported jointly by the CDD and the VB3 Project in a public-private partnership, also provides peer support toward VT STARS participation and facilitates training from the VT STARS Coordinators and others for their group members.

➤ **Monitoring and Accountability**

State licensing regulations and practices are a foundation for VT STARS participation. ELDP participating in VT STARS receive unannounced annual visits from Licensing Field Specialist to ensure that Regulatory History is based on recent site visits. ELDP at higher STAR levels are also required to work with third party assessors using an ERS or CLASS and the assessment scores impact points earned. Each participating program is also required to submit annual compliance reports.

Much of the information required to document certain VT STARS arenas – regulatory history, staff qualifications and annual professional development in particular – is independently verified in BFIS by VT STARS Coordinators. Other verifications are required and provided as part of the application or annual reporting process.

Complaints about ELDP with VT STARS ratings are addressed by CDD Licensing staff or VT STARS Coordinators. Processes have been established to address non-compliance with standards during an active award period. These include appeal processes for participating ELDP. The VT STARS Oversight Committee has worked hard to assess and maintain the balance between a streamlined, user- friendly approach to encourage participation and catalyze quality improvement and sufficient, measurable and meaningful monitoring to ensure accountability for quality that is known to impact child outcomes (see B3 for monitoring, and B5 for evaluation efficacy).

**Table 7: Rates Paid to ELDP Above Baseline Based on STAR Levels**

<b>One star</b>	<b>Two VT STARS</b>	<b>Three VT STARS</b>	<b>Four VT STARS</b>	<b>Five VT STARS</b>
5%	10%	20%	30%	40%

**Table 8: One-time Bonuses Paid to ELDP for Attaining Each STAR Level**

<b>One star</b>	<b>Two VT STARS</b>	<b>Three VT STARS</b>	<b>Four VT STARS</b>	<b>Five VT STARS</b>
\$250	\$500	\$1,000	\$1,150	\$1,500

➤ **Financial Standards**

The VT STARS system includes financial incentives and rewards:

- A tiered reimbursement structure in the Child Care Financial Assistance Program (CC FAP) (see Table 7 above and B2).
- A one-time quality award/bonus for achieving a higher star level (see Table 8 above).
- Bonuses for Early Childhood Educators (ECE) for earning credentials and attaining degrees on the Northern Lights Career Development Ladder (NLCDL) and financial assistance for attending college course (see D2).
- Access to opportunities for certain types of public and private funding open only to programs that are nationally accredited or have achieved high star levels; for example, participation in publicly funded preschool and preschool partnerships (see A1 and B2), and Strengthening Families Center grants (see B4). Also, the Community Loan Fund uses state funds and funds for Building Bright Futures license plate sales to award grants and/or low interest loans to programs to improve or expand facilities. VT STARS participating programs are prioritized.
- Negotiated discounts with local and national vendors commonly used by ELDP for VT STARS participants.

For details on CC FAP policies related to increasing access to high-quality programs for children with high needs, see B4. An HQP for using RTT-ELC funds to increase financial rewards in VT STARS is described in B2.

➤ **Engagement and Outreach (Selling the Vision)**

VT STARS is widely accepted in Vermont as our system to assess, improve and communicate quality levels for ELDP. CDD and AOE require VT STARS ratings for ELDP applying for participation in funding opportunities, as do most philanthropic organizations. The Vermont Legislature and the Building Bright Futures Early Childhood Council recognize VT STARS as the quality standard for ELDP in Vermont. Vermont’s child care tax credit for low-income families (income less than \$30,000 for single filers and \$40,000 for married filers) allows families using a VT STARS ELDP a refundable tax credit that is 50% of the federal Child and Dependent Care Tax Credit. Community Child Care Support Agencies throughout Vermont talk about VT STARS to families calling for child care referral services and applying for child care assistance. More information about VT STARS information provided to families is in section B3.

**Development and codifying of standards that are clear, aligned with nationally recognized and evidence-based standards that support developmentally beneficial quality for young children, and meaningfully differentiate program quality level.**

VT STARS was designed to encourage programs to “step ahead.” This means stepping above licensing standards and also stepping ahead within a clearly differentiated framework of progressively higher quality standards in each arena.

The team that developed VT STARS program standards in 2002–2003 reviewed early learning and development literature and applied evidence related to program structures and processes strongly associated with improved outcomes for young children. Point assignments in each arena reflect the intention to differentiate program quality levels in meaningful ways. Overall point accumulation requires participating ELDP to increase quality within each arena and expand across arenas to develop a holistic approach to global program quality at higher STAR levels (see Table 9).

**Table 9: Meaningful Differentiation Between Program Quality Levels**

<b>One star</b>	Achieved when the program obtains one to four points. One-star programs may be just starting on a path to improvement or may be stronger in one area
<b>Two VT STARS</b>	Achieved when the program obtains a total of five to eight points. Two-star programs may have made some progress in many areas or more progress in one or two areas.

<b>Three VT STARS</b>	Achieved when the program obtains a total of nine to 11 points. Three-star programs have either made substantial progress in two or three areas or some improvements in all five.
<b>Four VT STARS</b>	Achieved when the program obtains a total of 12 to 14 points including at least two points in the Program Practices Arena. Four-star programs have documented quality in all five areas. May also be nationally accredited.
<b>Five VT STARS</b>	Achieved when the program obtains a total of 15 to 17 points. Five-star programs are outstanding in all five areas. May also be nationally accredited.

In 2005, key experts and stakeholders in Vermont gathered to crosswalk VT STARS standards with nationally recognized accreditation (National Association for the Education of Young Children, National Association for Family Child Care, and National Afterschool Association) and Early Head Start/Head Start (EHS/HS) standards related to program excellence. This process led the group, which evolved into the standing VT STARS Oversight Committee, to improve the rigor of VT STARS program standards. It also created a streamlined process for accredited programs to enter VT STARS, as well as to use accreditation or good standing in the HS program review process to verify excellence in the Program Practices arena.

As previously discussed, the VT STARS Oversight Committee provides ongoing, informal participatory evaluation of VT STARS. Members of the committee participate regularly in the QRIS National Learning Network and apply emerging evidence about the relationship between program practice and children’s learning and development to improve VT STARS standards and practices. Vermont has had programs participating at all 5 STAR levels since launch in 2003. This also suggests VT STARS is effectively differentiating between levels of program quality. For more information about differing participation and advancement in VT STARS, see B2. For more information about differentiating between levels of program quality, see B5.

Although Vermont has approached the development of TQRIS standards and differentiation with intention and care, we have not yet verified that we have achieved this goal through a third party evaluation. RTT-ELC resources will allow us to do this and adjust and improve VT STARS standards and processes in accord with evaluation results (see B5).

The use of well-trained independent assessors using valid program assessment tools (ERS and CLASS) should give us the capacity to monitor differentiation and validity with internal data, however, our level of confidence in inter-rater reliability has impeded those efforts (see

B3).

In 2008, as part of Act 132, which requires common standards across settings providing publicly funded preschool services, VT STARS rules were codified and legislatively approved (see Appendix VI).

**B1a: Assure TQRIS is based on a statewide set of tiered program standards**

As documented above under “Quality Standards for Programs and Practitioners” (also, see Figure 11 and Table B1-1) VT STARS is based on a statewide set of tiered program standards.

**B1b: Assure TQRIS is clear and has standards that are measurable, meaningfully differentiate program quality levels, and reflect high expectations of excellence**

As discussed above in “Development and Codifying of Standards,” (also, see Tables 6 and 9) VT STARS is clear, includes standards that are measurable, and meaningfully differentiates program quality levels. Our standards reflect high expectations of excellence commensurate with nationally recognized standards that lead to improved learning outcomes for children, particularly those with high needs.

**B1c: The TQRIS is linked to the State licensing system for ELDP**

VT STARS rests squarely on the foundation of Vermont’s state regulatory (licensing) system. Registration or licensing is a threshold requirement for entry into the VT STARS system and regulatory history is one of five arenas of quality in which participating ELD programs earn one – three points (see Figure 11, and Tables 6 and 9).

Vermont takes pride in the strong TQRIS that it has developed and expanded since 2003. However, we also recognize that there is more work to do if we are to maximize the positive impact on children’s outcomes. We envision realizing this promise in our small, rural state to create a context in every community where young children thrive in ELDP of the highest quality recognized, invigorated and supported by a vibrant, effective, and known TQRIS, the VT STARS System.

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<b>Table (B)(1)-1: Status of all Program Standards currently used in the State</b>							
	<b>Program Standards Elements<sup>18</sup></b>						
	<i>If the Program Standards address the element, place an "X" in that box</i>						
<b>List each set of existing Program Standards currently used in the State; specify which programs in the State use the standards</b>	Early Learning and Development Standards	Comprehensive Assessment Systems	Qualified workforce	Family engagement	Health promotion	Effective data practices	Other
<b>Current state regulations for ELDP</b>			✓				
<b>Proposed state regulations for ELDP</b>	✓		✓	✓	✓		
<b>Accreditation by the National Association for Family Child Care (NAFCC)</b>			✓	✓	✓		
<b>Accreditation by the National Association for the Education of Young Children (NAEYC)</b>	✓	✓	✓	✓	✓		
<b>VT STARS program</b>	✓	✓	✓	✓	✓	✓	

<sup>18</sup> Please refer to the definition of Program Standards for more information on the elements.

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<b>Table (B)(1)-1: Status of all Program Standards currently used in the State</b>							
	<b>Program Standards Elements<sup>18</sup></b>						
	<i>If the Program Standards address the element, place an "X" in that box</i>						
<b>List each set of existing Program Standards currently used in the State; specify which programs in the State use the standards</b>	Early Learning and Development Standards	Comprehensive Assessment Systems	Qualified workforce	Family engagement	Health promotion	Effective data practices	Other
<b>standards</b>							
<b>Publicly Funded Preschool Approval</b>	✓	✓	✓	✓	✓	✓	
<b>EHS/HS Program Standards</b>	✓	✓	✓	✓	✓	✓	
<i>[Add additional rows as needed and enter text here to clarify or explain any of the data, if necessary.]</i>							

**(B)(2) Promoting participation in the State’s Tiered Quality Rating and Improvement System.**  
*(15 points)*

The extent to which the State has maximized, or has a High-Quality Plan to maximize, program participation in the State’s Tiered Quality Rating and Improvement System by--

(a) Implementing effective policies and practices to reach the goal of having all publicly funded Early Learning and Development Programs participate in such a system, including programs in each of the following categories--

- (1) State-funded preschool programs;
  - (2) Early Head Start and Head Start programs;
  - (3) Early Learning and Development Programs funded under section 619 of Part B of IDEA and Part C of IDEA;
  - (4) Early Learning and Development Programs funded under Title I of ESEA;
- and
- (5) Early Learning and Development Programs receiving funds from the State’s CCDF program;

(b) Implementing effective policies and practices designed to help more families afford high-quality child care and maintain the supply of high-quality child care in areas with high concentrations of Children with High Needs (*e.g.*, maintaining or increasing subsidy reimbursement rates, taking actions to ensure affordable co-payments, providing incentives to high-quality providers to participate in the subsidy program); and

(c) Setting ambitious yet achievable targets for the numbers and percentages of Early Learning and Development Programs that will participate in the Tiered Quality Rating and Improvement System by type of Early Learning and Development Program (as listed in (B)(2)(a)(1) through (5) above).

Evidence for (B)(2):

- Any supporting evidence the State believes will be helpful to peer reviewers.

## **B2: Promoting participation in the Vermont's TQRIS**

### **Abstract:**

As detailed in B1, Vermont has developed and adopted a common, statewide, high functioning, standards-based TQRIS, VT STARS. As a result of the commitment of public and private partners with a vision for improving quality early learning and development for Vermont's children, participation and improvement in VT STARS has grown steadily over the past 10 years. Yet, we can still do better.

We need to maximize ELDP participation in VT STARS so that all of the options Vermont families have are good choices for their children, particularly for children with high needs. We need to ensure that every child in every setting experiences a level of quality that is beneficial to his or her healthy development in every domain, and we need to guarantee that children with high needs receive the excellent early childhood education that will help avert the achievement gap.

### **High Quality Plan Summary**

**Goal:** Vermont's goal is to maximize participation and upward progression in VT STARS in order to ensure that families with children with high needs can find and afford to choose ELDP that are recognized as high-quality, and that all Vermont children, particularly children with high needs, have access to high level VT STARS ELDP in their communities.

### **Outcomes:**

- By the end of the funding period, the number of Vermont ELDP participating in VT

STARS is increased to at least 95% across all settings. Currently this varies from 25% (registered Family CC Homes) to 100% (publicly funded preschool programs) depending on the setting.

- By the end of the funding period, increased public investment in high-quality ELDP for children with high needs expands publicly funded preschool opportunities and provides adequate market rates and increased benefits in the Child Care Financial Assistance Program (CC FAP).
- By the end of the funding period, 100% of families, particularly families with children with high needs, living in Promise Communities in rural Vermont (see Competitive Priority 5), will be able to find ELDP rated as high-quality in VT STARS in their communities; further, enrollment will be affordable.
- By the end of the funding period, increase the percent of ELDP in Vermont who provide nutritious snacks and meals as part of comprehensive programs for young children from 40% to 90% (see C3).

**Strategies:**

- Maintain Vermont's commitment to innovative tiered reimbursement policies in the Child Care Financial Assistance Program (CC FAP) that make high-quality ELDP more affordable for low income families and other families with children with high needs.
- Continue to propose and support increased public investments in higher payment rates and increased benefits in CC FAP.
- Continue to support expansion of publicly funded preschool to cover all children who wish to enroll.
- Provide annual financial rewards for sustaining high-quality to ELDP participating in VT STARS; base the amount of the annual incentive on the provider's star level calculated as a percentage of the current one-time bonus for achieving that star level (see Table 10 below).
- Provide additional bonuses for ELDP participating in VT STARS that provide healthy meals and snacks to children and participate in the Child and Adult Care Food Program (CACFP) as part of a comprehensive high-quality program. Base this annual nutrition

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bonus on program size and how many meals and snacks are provided during the program day (see Table 11 below).

- Coordinate, focus, and advance the VT STARS technical assistance and mentoring (TAM) system, which ensures timely provision of clear guidance to programs about the standards they need to meet to enter VT STARS and progress upward to higher levels of quality.

**Timeline:**

Key Activity	Year				Parties Responsible
	2014	2015	2016	2017	
Request annual increases in CC FAP budget as needed to pay for increasing number of high needs children with CC FAP subsidies attending higher quality programs rated by VT STARS	✓	✓	✓	✓	CDD/DCF
Propose and support public policy, investment and legislation to increase investments in publicly funded preschool and CC FAP subsidies (S 2&3)	✓	✓	✓	✓	Governor's Office BBF Council AHS/DCF/VDH AOE EC Alliance
Propose and approve a menu to guide ELDP in the use of annual bonuses (S4)	✓				CDD/DCF VT STARS Oversight Committee
Propose and confirm sliding fee scales for annual bonuses (S4&5)	✓				CDD/DCF VT STARS Oversight Committee
Establish payment processes to pay provider bonuses out of BFIS (S4&5)	✓				CDD/DCF
Pay provider bonuses according to the established sliding fee scale to all ELDP participating in VT STARS through the BFIS in the same manner that CC FAP payments are made (S 4&5)	✓	✓	✓	✓	CDD/DCF VT STARS Administrators
Identify specific outcomes related to investment in annual bonus programs. (S4&5)	✓				CDD/DCF VT STARS Oversight Committee
Collect data & analyze from ELDP participating in VT STARS to assess impact and, if the impact is positive,	✓	✓	✓	✓	CDD/DCF VT STARS Oversight Committee

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make a case for sustaining annual bonuses. (S4&5)					VT STARS Administrators
Bring together public and private funders to examine impacts of annual bonus programs and identify resources for sustaining annual bonuses. (S4&5)			✓	✓	BBF Council
Continue to coordinate, align and focus TAM resources in promoting participation in VT STARS and assisting providers to enter and advance in the system. Accomplish this through: collaboration across funders and with community providers; supporting a Community of Practice for TAM providers and VT STARS Administrators; and through applying Results Based Accountability (RBA) to contract and grant development and management. (More information about RBA in Section A1 and Competitive Priority 5)	✓	✓	✓	✓	CDD/DCF VT STARS Coordinators TA Providers
Develop and implement an interactive on-line VT STARS application in the Bright Futures Information System (BFIS)	✓	✓			CDD/DCF VT STARS Administrators

**Metrics:** Semi-annual monitoring of success in meeting Outcomes targets.

**Rationale:**

➤ **All ELDP are included and advanced in VT STARS**

All types of ELDP in Vermont are eligible and encouraged to participate in VT STARS – no regulated setting is excluded. Mandates and incentives to achieve certain quality levels apply to some settings. Program standards and application materials are consistent but also customized to accommodate particular settings.

➤ **State-Funded Preschool Programs**

All publicly funded preschool programs operated either in public schools or in community based ELDP through partnerships with schools must meet standards established in state statute under Act 62 in 2007. Rules related to publicly funded preschool education were originally approved by State Board of Education and the Legislative Committee on Administrative Rules in 2008 and amended in 2011. Since 2008 these rules establish a strong collaborative partnership

between CDD/DCF and AOE in co-administering publicly funded Preschool. They provide a foundation for full engagement of public schools in the VT STAR System, and establish one more step in the quality continuum for ELDP in Vermont by providing specific criteria beyond a high star rating to qualify as a preschool program eligible to receive public preschool funding.

The evidence-based high-quality standards for publicly funded preschool approval are:

- Either national accreditation through the National Association for the Education of Young Children, OR participation in VT STARS with a minimum rating of 4 VT STARS and at least 2 points in each of the five arenas OR a rating of 3 VT STARS with an Agency of Education (AOE)/Child Development Division (CDD) approved plan to achieve 4 or more VT STARS within 3 years, including at least 2 points in each arena;
- State licensure or registration and in good regulatory standing (this applies equally to school operated programs);
- Curricula aligned with Vermont Early Learning Standards (VELS);
- Opportunities for parental involvement and participation; and
- Active participation of at least one teacher who is licensed and endorsed in either early childhood education or early childhood special education. In school operated programs there must be a licensed teacher in every classroom. In community based programs there must be at least one licensed teacher in the program overseeing preschool programming, In Family CC settings where the provider is not a licensed teacher; there must be regular and active supervision from a licensed teacher.

Vermont's innovative approach to ensuring a mixed delivery system of public and private ELDP and employing TQRIS across all settings is innovative. According to the TQRIS National Learning Network (Stoney, 2013):

Engaging schools in TQRIS in a meaningful way is difficult...It is clear that states will need to think strategically about how to craft TQRIS systems, supports and incentives that can successfully engage ELD programs sponsored by public schools.

Vermont's approach has resulted in 100% of publicly funded preschool programs participating in VT STARS at high levels of quality.

➤ **Early Head Start (EHS) and Head Start (HS) Programs**

VT STARS has created a streamlined application process for HS and center-based EHS programs in Vermont. Through a longstanding Memorandum of Understanding between Vermont HS grantees, the Region I Office of HS and the Vermont CDD, HS and EHS programs that have demonstrated strong compliance with HS program requirements in HS Program Performance Reviews are awarded 5 points in the Program Practices arena of VT STARS and are exempted from requirements to undergo additional Measures of Environmental Quality (such as ERS or CLASS) though some do use such measures voluntarily. Since HS and EHS programs serve many CC FAP assisted families in full day, full year settings the tiered reimbursement rates in CC FAP are a strong incentive to attain and sustain four or five stars. Sustaining high star ratings also allows HS programs to enter into mutually beneficial publicly funded preschool partnerships with local education agencies (LEAs). The result of these policies and practices is that all of the Head Start and Early Head Start programs in Vermont are participating in VT STARS at the high levels of quality (either four or five STAR levels) and that 93% of their licensed sites in Vermont are participating in VT STARS.

➤ **ELDP Funded Under IDEA, Part B, Section 619 and Title 1 of ESEA**

Both of these funding streams are administered by Vermont Agency of Education (AOE) and managed at the local level by LEAs. In Vermont communities these funds are braided with one another and public preschool funds to create high-quality inclusive programs where children with special needs participate in least restrictive environments, as often as feasible with typically developing peers. It would be impossible to separate the programs supported by these funds from publicly funded preschools in school and community settings. Given, however, that all of the ELDP that access these funds also meet publicly funded preschool criteria, they are *de facto* included in VT STARS and recognized at high levels of quality.

➤ **ELDP funded under IDEA, Part B**

IDEA, Part C is administered by the CDD in the Vermont Department for Children and Families (DCF) as part of Children Integrated Services (CIS) (see section A1 for a description of CIS). CIS does not fund ELDP or program participation for Part B eligible children per se but many of these children may access ELDP with support from the CC FAP as high needs children with a categorical eligibility for assistance. In those cases, matching children with special needs to the right high-quality programs is the role of the Specialized Child Care Services Coordinator

on the CIS Regional Services team. Until we build an effective data system for administering CIS, we do not have definitive information on which specific ELDP these children attend (RTT-ELC resources will help us remedy that gap – see an HQP in section E2 describing a proposed CIS Data System). In the absence of hard data we may assume that enrollment of these children in ELDP rated as high-quality in VT STARS occurs at about the same rate as that of other children assisted by CC FAP – that is 44% (see Table B4c2). We think this is an area where we can make significant progress with RTT-ELC resources (see B4).

➤ **ELDP receiving funds from CCDF - in Vermont this is the Child Care Financial Assistance Program (CC FAP)**

Eighty-one percent (81%) of regulated ELDP in Vermont have signed rate agreements with CDD to accept subsidized children in families eligible for CC FAP. Publicly funded preschool programs operated by Local Education Agencies (LEAs) count in the total number of regulated ELDP but do not usually submit rate agreements to the CDD because they do not charge for services. This means that in actuality more than 90% of community-based programs have agreements to accept CC FAP. Approximately 11% of all children assisted by CC FAP are enrolled in informal, legally exempt care as opposed to regulated care – this is a lower than the national average for subsidized children (19%) (ACF, 2010).

ELDP receiving CC FAP funds are not required to participate in VT STARS but an innovative tiered reimbursement structure in CC FAP provides a strong incentive for providers to enter and progress in VT STARS and for subsidized families to choose higher quality providers. This is described more fully in the ‘Effective Policies and Practices’ section that follows.

➤ **ELDP accredited by the National Association for the Education of Young Children (NAEYC) and the National Association for Family Child Care (NAFCC)**

Vermont recognizes national accreditation as another important strategy for recognizing and improving quality in ELDP. VT STARS has created a streamlined application process for nationally accredited programs in Vermont and provides financial resources to support accreditation fees and provide one time bonuses for programs achieving accreditation. Similar to EHS/HS programs, accredited programs are awarded five points in the Program Practices arena of VT STARS and are exempted from requirements to undergo additional Measures of Environmental Quality (such as ERS or CLASS) though some do use such measures voluntarily.

➤ **Effective policies and practices**

The High-quality Plan (HQP) described above specifically addresses targeting resources, both human and financial, and implementing policies and practices to intentionally build the supply of high-quality ELDP in Vermont communities by increasing participation and progression in VT STARS and to help families afford to choose high-quality ELDP for their children. The six strategies in the plan come together by focusing on VT STARS as a framework for intentional system reform, and build on Vermont's history of enduring commitment to children and families, particularly those impacted by trauma and socio-economic or developmental challenges.

➤ **Maintain innovative tiered reimbursement policies in Vermont's Child Care Financial Assistance Program (CC FAP) and propose and support increased public investments in higher rates and increased benefits in CC FAP**

Vermont's Department for Children and Families (DCF) offers financial assistance (child care subsidies) through its Child Care Financial Assistance Program (CC FAP) to eligible families to help pay for child care. Payments are made directly to child care providers. Eligibility criteria include an income test and a need for service.

Income eligible families must have incomes under 200% of the Federal Poverty Levels (FPL). The needs for service include employment, looking for employment, training and education, or a disability or special health need that limits parental capacity to care for a child. Certain populations of high needs children are not subject to income criteria such as children involved with protective services, both those in foster care and those with open cases with DCF's Family Services Division, and children with special health needs including disability or developmental delay.

Families experiencing significant stress such as critical illness, homelessness, domestic violence or sudden significant changes in family structure are also eligible for short-term assistance as part of Vermont's definition of protective services in our CCDF State Plan. Thus, all of the children receiving subsidies from CC FAP may be defined as children with high needs within the RTT-ELC definition.

The two critical policy levers in CC FAP that impact ELDP quality and parental access to quality services are the payment rates (rates), and how much financial assistance a family

receives for child care (benefit level).

In December 2009, the National Center for Children in Poverty (NCCP) at Columbia University released *Work Supports in Vermont; An Analysis of the Effectiveness of State Policies Supporting Work*, a report prepared for Vermont DCF. The report identified child care costs as a critical barrier to work for low income families and recommended reforms in the CC FAP intended to help make work pay for parents working for low wages. In Vermont we understand child care assistance as a two generation strategy – it is important for the stability of families to provide enough child care assistance to make work pay and it is also critical to the healthy development and future success of children that there is enough assistance to allow families to access high-quality ELDP for child care. After extensive analysis and broad community input, DCF embarked on a wide scale effort to initiate reforms in both rates and benefits in the CC FAP.

In January 2010, the outdated FPL used in the sliding fee scale was updated. This increased the amount that a family could earn and still be eligible for subsidies and created slight increases in benefit levels for all participating families.

As a commitment to investing in high-quality ELD services for children with high needs, a new tiered reimbursement rate structure was implemented that significantly increased quality differentials for ELDP participating in VT STARS (see B1 and Table 7).

Rates were also increased for the first time since 2007 and adjusted to conform to the results of a 2008 Market Rate Survey conducted by CDD. In 2010 and 2011, Vermont invested \$4.8M in new funds to achieve these gains. This included \$3.3M in general funds and \$1.5M in ARRA funds. These increases have been sustained, in spite of the disappearance of ARRA funds. In Vermont FY13, 51% of expenditures for CC FAP subsidies were state funds and 49% were federal funds.

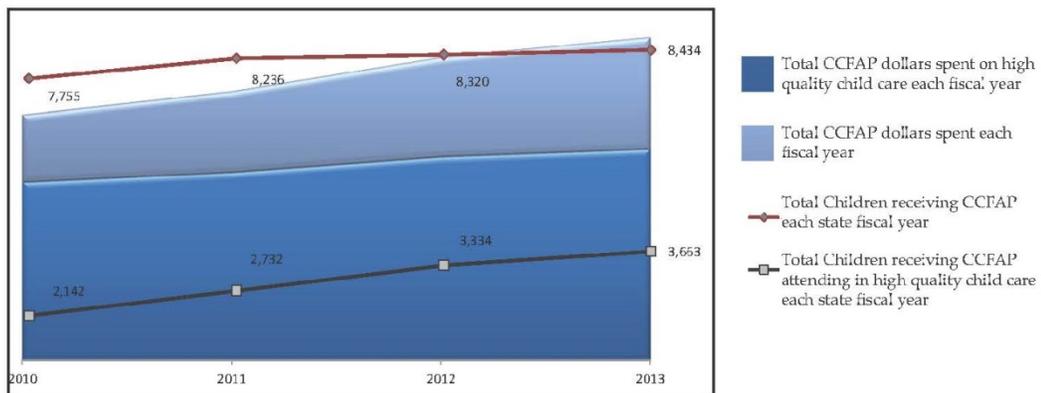
As shown in Figure 12 below, these important changes led to increased investment in ELDP rated as high-quality in VT STARS, and to increasing number of high needs children enrolled in high-quality programs. This commitment to quality ELDP for high needs children creates an upward pressure in the CC FAP budget every year as more children enroll in higher levels of quality. The DCF estimates this growth annually and requests annual increases between \$1M and \$3M to support the current rate structure and the intended movement toward better quality

services for children with high needs. The Vermont legislature approves these annual budget increase requests (see Table A41).

Currently, 50 % of spending in the CC FAP is supported by state funds. Few states in the country have sustained this level of commitment to families with high needs children struggling to access high-quality child care services. The National Women’s Law Center (Schulman and Blank, 2012) report that many states are reducing support for families in these challenging times:

Despite the importance of child care assistance, families in 27 states were worse off in February 2012 than in February 2011 under one or more of the child care policies covered in this report and families in seventeen states were better off under one or more of these policies... This was the second year in a row in which the situation worsened for families in more states than it improved.

**Increasing CC FAP investments in tiered reimbursement yield growing numbers of high needs children in high quality ELD programs**



\* Data is state fiscal year average for 2010, 2011, 2012 and 2013 as report from Vermont’s Bright Futures Information System.

**Figure 13: Vermont's CC FAP Investment**

In child care subsidy programs like the CC FAP, families usually pay some part of child care costs. On Vermont’s sliding fee scale, the benefit level ranges from 100% of the state established rate for families with income at or below 100% FPL to 10% of the state established rate for families with income at 200% FPL. Participating families have to pay the rest of the state rate to providers.

When the state rates fall below what providers charge in the marketplace, providers may also charge parents the difference between the state's rate and their usual rate for services. This can yield co-payments that low-income families simply can't afford. The combined impact of Vermont's sliding fee scale and the tiered rates introduced in 2010 create a unique subsidy structure that actually reduces co-payments for families enrolled with providers at higher levels of VT STARS.

However, the NCCP study indicated that any benefit less than 50% of the state rate does not provide sufficient support to make work pay for a family. Despite increased investments in CC FAP to maintain the status quo, rates have stalled at 2008 levels. Over 90% of the families participating in CC FAP have incomes below 110% FPL because the copayments at that point begin to exceed what families can pay even though eligibility extends to 200% FPL.

In 2013, the legislature approved a requested increase of \$3.85M in the DCF budget to update FPL on the sliding fee scale to 2012 and support increasing enrollment of eligible children in higher quality programs. It also appropriated approximately \$2M more to adjust the FPL on the sliding fee scale to 2013 and increase payment rates by 3% in November of 2013. The Governor has expressed a resolve to press for greater increased investments to help families with high needs children access high-quality ELDP through CC FAP policies and resources.

➤ **Support expansion of publicly funded preschool to cover all children who wish to enroll**

In the 2012-2013 school year, 5,493 3-year-old and 4-year-olds, approximately 15 % of whom receive IDEA, Part B, section 619 services (called Essential Early Education or EEE in Vermont), attended publicly funded preschool in Vermont. Two hundred and twenty-five (225) of Vermont's towns offered preschool as an option for children; only 25, most of these very small towns with few preschool children in residence, did not. We estimate these programs serve a total of about 46% of all 3- and 4-year-olds in Vermont, an increase from 32% participating in 2007. The National Institute for Early Education Research (NIEER) ranks Vermont third in the country for access to preschool for both 3- and 4-year-olds.

In the 2012-2013 school year, Vermont spent \$19.2M from the state Education Fund supporting preschool, approximately \$3,658 per child. Qualified community-based programs in publicly funded preschool partnerships in Vermont are permitted to braid public preschool and

CC FAP funds for high needs children eligible for CC FAP. Public preschool funds are important to high-quality ELDP serving high needs children because they add to the resources necessary to sustain high-quality services for preschool children, particularly highly qualified staff. Gaining access to public preschool funds requires programs to raise the bar on quality over and above the VT STARS standards. Publicly funded preschool is a critical support for families not participating in CC FAP as well, allowing their children to attend a high-quality preschool program in their local school at no cost or, because preschool partnership tuitions offset what families pay to community-based programs, allows families of modest means to afford a level of quality that would otherwise be out of their reach financially.

A bill is currently being considered by the Vermont House of Representatives to transform publicly funded preschool in Vermont, expanding access, increasing investment and helping more families afford high-quality ELDP for their preschool aged children. H.270 seeks to create universal access to publicly funded preschool for all three and four year old children in Vermont meaning that every Local Education Agency (LEA) would have to fund services for any family in their district who wishes to enroll a preschool age child. See A1 for more details.

➤ **Provide annual financial rewards for sustaining high-quality to ELDP participating in VT STARS**

VT STARS provides a range of financial incentives to ELDP to increase participation and support quality improvement efforts (see B1). These include: tiered reimbursement in CC FAP, a onetime incentive payment when a higher star level is awarded; and access to funding opportunities including improvement grants and low interest loans through the Vermont Community Loan Fund.

The VT STARS Oversight Committee and ELDP participating in VT STARS have long recommended annual bonuses to help ELDP improve quality and progress upward and to reward ELDP in higher levels for sustaining high-quality. The HQP described in this section will address that issue and catalyze an annual bonus system recommended by the VT STARS Oversight Committee wherein ELDP receive 80% of the current onetime bonus every year that they maintain a star level (see Table 10 below).

The VT STARS Oversight Committee will develop a menu to guide ELDP in the use of annual bonuses to improve and sustain quality such as purchasing equipment and supplies,

accessing services or professional development, and/or rewarding highly qualified staff. Over the period of the grant we will collect data on the value of the annual bonus in increasing participation in VT STARS and helping ELDP improve and sustain program quality. We intend to use the data to make a case that catalyzes a public–private partnership between state, philanthropic and business investors to sustain the annual bonus programs described here.

**Table 10: Proposed Annual Bonuses to Reward & Sustain Quality**

<b>One star</b>	<b>Two VT STARS</b>	<b>Three VT STARS</b>	<b>Four VT STARS</b>	<b>Five VT STARS</b>
\$200	\$400	\$800	\$920	\$1,250

- **Provide additional bonuses for ELDP participating in VT STARS that provide healthy meals and snacks to children and participate in the Child and Adult Care Food Program (CACFP)**

In Vermont, about 23% of household with children under 6 lack enough access to food. (U.S. Census, 2011). Lack of adequate food affects a child’s health, growth, learning, and development immediately and for the long term. Children with high needs, especially those in households with income under 200% of FPL, are particularly vulnerable to food insecurity and thus at a greater risk for poor quality diet, development delays, and increased aggressive or hyperactive behaviors that negatively impact learning outcomes.

Vermont has worked hard to feed children in our state who are experiencing hunger and had significant success for children in grades K-12. About 97% of Vermont schools provide school breakfast and lunch to school-age children. Vermont ranks 4<sup>th</sup> in the nation in the percent of low-income students reached with school breakfast and summer food.

However, there is work to be done to ensure that our youngest and most vulnerable children have access to quality, nutritious meals where they learn and play. Vermont ranks in the bottom five states in child care centers participating in the Child and Adult Care Food Program (CACFP) – a federal program that provides reimbursement for healthy meals and snacks served to children in regulated ELDP. Currently, only 23% of licensed child care centers and 54% of registered Family Child Care Homes participate in CACFP.

This is because CACFP participation is challenging for small scale ELDP in rural communities. The administrative burden is high and Vermont’s dispersed poverty keeps meal

reimbursements low. The Building Bright Futures (BBF) Early Childhood Council has convened a work group to address this grave concern. Additional strategies to improve nutrition and physical activity are described in C3.

**Table 11: Proposed Annual Nutrition Bonuses**

	<b>Bonus for nutritious snacks daily</b>	<b>Bonus per nutritious meals daily (up to 2)</b>	<b>Administrative support bonus for CACFP participation</b>	<b>Maximum Annual Total*</b>
<b>Registered Family Child Care Provider</b>	\$50	\$100	\$50	\$300
<b>Licensed for under 65 children</b>	\$75	\$200	\$100	\$575
<b>Licensed for 65 children or more</b>	\$100	\$250	\$150	\$750

\*CACFP guidelines allow payments for up to two meals and a snack

➤ **Coordinate, focus and advance the VT STARS technical assistance and mentoring (TAM) system**

Technical Assistance and Mentoring are built into the VT STAR System. The Program Practices arena establishes a relationship between participating ELDP and a trained and approved mentor at STARS Level 2. Support to improve program quality in section B1 describes the various Technical Assistance and Mentoring (TAM) resources available to ELDP participating in VT STARS. We will continue to provide this support and take action to coordinate, align and focus TAM resources so that ELDP have the customized relationship-based assistance they need to commit to continuous quality improvement and to enter and advance in VT STARS. The AOE, CDD and private funder will continue to collaborate to improve the support system.

Working together and applying a Results Based Accountability process, they will develop clear, shared outcomes and performance measures to assess performance of TAM providers and progress of the system. The CDD will support a statewide Community of Practice that helps TAM providers and VT STARS Administrators learn from one another and share best practice

➤ **Ambitious but achievable targets**

As Table B2c demonstrates, VT STARS participation levels vary across ELDP types; however, there has been a steady cumulative increase in participation over time.

Licensed program participation has grown from 4% in 2006 to 69% in 2013. This includes publicly funded programs as a subset where 100% are participating and recognized as high-quality in VT STARS. Registered home provider participation has increased more slowly, from 4% in 2006 to 25% in 2013, but appears to be picking up momentum.

Growth is widespread geographically across rural Vermont with some regional variation. A 2013 GIS map revealed that a 3-5 STAR provider was within 5 miles of most Vermont families, though some notable gaps occur in remote areas across mountain ranges and in more sparsely populated locales. We also know that although a high-quality provider may be nearby, there may not be sufficient supply to meet demand.

Table B2c documents our ambitious but achievable targets for increasing participation of all ELDP of all types in VT STARS by 2017. While maintaining publicly funded preschool and HS/EHS participation at 100%, we will to increase overall participation and specifically participation by programs receiving subsidy funds, from 42% to 95%. We believe that the strategies described in this application will help us to increase our rate of growth and achieve nearly full participation over the next four years.

**B2a: Implement effective policies and practices to maximum participation in the TQRIS by special categories of early childhood providers**

Vermont implements effective policies and practices to maximize program participation in our statewide TQRIS – VT STARS. All publicly funded ELDP participate in the system including: State funded preschool programs which incorporate children funded under section 619 of Part B of IDEA and Title I of ESEA; Early Head Start and Head Start programs; and ELDP receiving funds from CC FAP, our state’s CCDF program which incorporates children funded under Part C of IDEA. All regulated ELDP are included in VT STARS and participation is increasing steadily. (See data in above narrative.)

**B2b: Help more families afford high-quality child care and maintain the supply of high-quality child care in areas with high concentrations of children with high needs**

Vermont has a long standing commitment to helping families afford high-quality child care and to maintaining a supply of high-quality child care in Vermont communities, particularly

those that have a high concentration of children with high needs. In this section, we have described policies and practices already in place that illustrate that commitment and propose a High-quality Plan to sustain and increase the supply of high-quality ELDP by maintaining and building on policies and practices that work and incorporating on-going rewards for programs participating in VT STARS and providing nutritious food for children.

**B2c: Set ambitious yet achievable targets for the numbers and percentages of ELDP that participate in the TQRIS**

Vermont is about halfway to an early ambitious goal to have most programs participating in and progressing upward in a TQRIS. We believe that RTT-ELC resources will help us to become one of the first states in the country to have 95% of all regulated and publicly funded ELDP participating in TQRIS.

**Performance Measures for (B)(2)(c): Increasing the number and percentage of Early Learning and Development Programs participating in the statewide Tiered Quality Rating and Improvement System**

Type of Early Learning and Development Program in the State	Number of programs in the State	<i>Baseline and Annual Targets -- Number and percentage of Early Learning and Development Programs in the Tiered Quality Rating and Improvement System</i>									
		Baseline (Today)		Target-end of calendar year 2014		Target - end of calendar year 2015		Target- end of calendar year 2016		Target- end of calendar year 2017	
		#	%	#	%	#	%	#	%	#	%
State-funded preschool <i>Specify:</i>	268	268	100	273	100	278	100	283	100	288	100

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<b>Performance Measures for (B)(2)(c): Increasing the number and percentage of Early Learning and Development Programs participating in the statewide Tiered Quality Rating and Improvement System</b>											
<b>Type of Early Learning and Development Program in the State</b>	<b>Number of programs in the State</b>	<i>Baseline and Annual Targets -- Number and percentage of Early Learning and Development Programs in the Tiered Quality Rating and Improvement System</i>									
		<b>Baseline (Today)</b>		<b>Target-end of calendar year 2014</b>		<b>Target - end of calendar year 2015</b>		<b>Target-end of calendar year 2016</b>		<b>Target- end of calendar year 2017</b>	
		<b>#</b>	<b>%</b>	<b>#</b>	<b>%</b>	<b>#</b>	<b>%</b>	<b>#</b>	<b>%</b>	<b>#</b>	<b>%</b>
Early Head Start and Head Start <sup>19</sup>	45	42	93	44	98	44	98	45	100	45	100
Programs funded by IDEA, Part C	NA <sup>***</sup>										
Programs funded by IDEA, Part B, section 619	NA <sup>****</sup>										
Programs funded under Title I of ESEA	NA <sup>****</sup>										
Programs receiving from CCDF funds	1435	597	42	851	59	993	68	1156	80	1372	95
Other <i>Describe:</i>	530	367	69	398	75	450	85	477	90	504	95
*Data on State funded preschool is from the STARS data base of programs. All state funded preschool programs are required to participate in STARS or be nationally accredited.											

<sup>19</sup> Including Migrant and Tribal Head Start located in the State. Forty-two of the forty-five (93%) licensed sites operated by Head Start and Early Head Start programs in Vermont participate currently in STARS. For the purposes of this chart, we define “Head Start and Early Head Start” as one program because “Head Start and Early Head Start” is defined as an “Early Learning and Development Program” in the grant application instructions.

<b>Performance Measures for (B)(2)(c): Increasing the number and percentage of Early Learning and Development Programs participating in the statewide Tiered Quality Rating and Improvement System</b>											
<b>Type of Early Learning and Development Program in the State</b>	<b>Number of programs in the State</b>	<i>Baseline and Annual Targets -- Number and percentage of Early Learning and Development Programs in the Tiered Quality Rating and Improvement System</i>									
		<b>Baseline (Today)</b>		<b>Target-end of calendar year 2014</b>		<b>Target - end of calendar year 2015</b>		<b>Target-end of calendar year 2016</b>		<b>Target- end of calendar year 2017</b>	
		#	%	#	%	#	%	#	%	#	%
<p>** Data on Head Start and programs receiving CCDF funds is from Bright Futures Information System (BFIS) and is an average of programs in state fiscal year 2013 (June 2012 to July 2013) These are actual program data.</p> <p>*** Vermont’s children eligible for IDEA, Part C attend inclusive regulated programs with typically developing peers. We do not fund separate programs under this funding source. See explanation in Section B (2)(a)(3)&amp;(4) for a more detailed explanation.</p> <p>**** Vermont’s children eligible for IDEA, Part B, section 619 attend inclusive publicly funded preschool programs with typically developing peers. We do not fund separate programs under this funding source. See explanation in Section B(2)(a)(3)&amp;(4) for a more detailed explanation. The same is true for Title I under ESEA.</p>											

- Data on State funded preschool is from the VT STARS database of programs. All state funded preschool programs are required to participate in VT STARS or be nationally accredited.
- Data on Head Start and programs receiving CCDF funds is from Bright Futures Information System (BFIS) and is an average of programs in state fiscal year 2013 (June 2012 to July 2013) These are actual program data.

**(B)(3) Rating and monitoring Early Learning and Development Programs. (15 points)**

The extent to which the State and its Participating State Agencies have developed and implemented, or have a High-Quality Plan to develop and implement, a system for rating and monitoring the quality of Early Learning and Development Programs participating in the Tiered Quality Rating and Improvement System by--

(a) Using a valid and reliable tool for monitoring such programs, having trained monitors whose ratings have an acceptable level of inter-rater reliability, and monitoring and rating the Early Learning and Development Programs with appropriate frequency; and

(b) Providing quality rating and licensing information to parents with children enrolled in Early Learning and Development Programs (e.g., displaying quality rating information at the

program site) and making program quality rating data, information, and licensing history (including any health and safety violations) publicly available in formats that are written in plain language, and are easy to understand and use for decision making by families selecting Early Learning and Development Programs and families whose children are enrolled in such programs.

Evidence for (B)(3):

- Any supporting evidence the State believes will be helpful to peer reviewers.

### **Section B3: Rating and monitoring ELDP**

#### **Abstract:**

Vermont has developed, implemented, and continually refines a system for rating and monitoring the quality of ELDP participating in VT STARS. Highly qualified VT STARS Coordinators, who accept and review VT STARS applications, verify information about structural aspects of program quality using evidence submitted by the ELDP applicant or verified in the Bright Futures Information System (BFIS). Process quality is assessed at higher levels of the system using valid and reliable tools and scores are factored into the rating decisions. We believe the plan for monitoring and rating levels of quality in VT STARS is a good one but quality control in implementation is a concern. RTT-ELC resources will help us to correct this and to add the dimension of increased monitoring of publicly funded preschool to our system.

#### **High-quality Plan Summary**

##### **Goal:**

Vermont's goal is to increase the frequency and quality of monitoring in our system for rating early learning development programs (ELDP) participating in VT STARS and publicly funded preschool by increasing capacity, improving inter-rater reliability and creating integrated monitoring and rating processes across child care licensing, VT STARS, and publicly funded preschool.

##### **Outcomes:**

- By the end of the funding period (2017), 100% of ELDP participating in VT STARS and rated as 3, 4 or 5 VT STARS have had at least one appropriate and reliable ERS or CLASS within the last 18 months. Scores are maintained in a VT STARS Administration data system for use in internal validity evaluation;
- By the end of the funding period (2017), 100% of publicly funded preschool programs

receive on-site monitoring visits at least every three years;

- By the end of the funding period (2017), performance accountability data on publicly funded preschool programs is collected, summarized and reported annually to the Vermont Legislature and the public; and
- By the end of the funding period (2017), families report using VT STARS ratings as important information when deciding which early learning and development program is best for their children.

**Strategies:**

- Develop and implement capacity to deliver timely and reliable ERS observations as part of VT STARS administrative functions;
- Develop and establish the necessary capacity to systematically and effectively monitor state investment in publicly funded preschool programs; and
- Increase the visibility of VT STARS as a tool for families to use in making decisions about enrolling their children in ELDP.

**Table 12: Timeline and Parties Responsible**

Activity	Year				Parties Responsible
	2014	2015	2016	2017	
Recruit and hire two full time (FT) assessors in VT STARS administrative contract.	✓				CDD/DCF VT STARS Administrators
Provide training to ensure both assessors are trained to reliability on all ERS. Ensure that at least one of the FT assessors is designated as a “state anchor” in ERS for Vermont	✓				CDD/DCF VT STARS Administrators
Procure tablet technology to support efficient and consistent observation, data collection and reporting – two for FT assessors and two to loan to contractual assessors	✓				CDD/DCF VT STARS Administrators
Train assessors on use of technology	✓				VT STARS Administrators
Establish clear job duties and performance expectations for assessors	✓				VT STARS Administrators VT STARS Oversight Committee

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Assess and document availability of additional reliable observers in VT that may be used when demand exceeds capacity of 2 FT assessors	✓				VT STARS Administrators VT STARS Oversight Committee
Establish written referral protocols and processes for programs requesting ERS observations	✓				VT STARS Administrators VT STARS Oversight Committee
Establish and maintain quality control processes to maintain inter-rater reliability in accord with recommendations of the ERS Institute (see Appendix XI)	✓	✓	✓	✓	VT STARS Administrators VT STARS Oversight Committee
Provide timely and appropriate classroom assessment services to VT STARS participants	✓	✓	✓	✓	VT STARS Administrators
Monitor inter-rater reliability, observer performance, capacity to meet demand and experience of ELDP providers	✓	✓	✓	✓	CDD/DCF VT STARS Oversight Committee
Develop VT STARS policies and regulations regarding program quality fluctuations indicated by ERS monitoring scores during the three year period that a VT STARS rating is valid		✓			CDD/DCF VT STARS Oversight Committee
Evaluate effectiveness of this strategy. Make recommendations for efficiently and effectively sustaining activities that work best to achieve goals			✓		CDD/DCF VT STARS Oversight Committee
If outcomes have been achieved, repurpose quality investments to support permanent expansion of VT STARS administrative contract to support this function.			✓	✓	CDD/DCF
Contract with a national expert to help design and pilot a monitoring system for publicly funded preschool in Vermont based on what evidence indicates is the most effective means of measuring quality in ELDP for preschool children	✓	✓			AOE CDD
Contract with an in-state consultant with expertise in early childhood education to manage the design and piloting of a monitoring system for	✓	✓	✓	✓	AOE

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publicly funded preschool. In the implementation phase, this consultant will also participate actively as a monitor collecting baseline data					
Create and facilitate a preschool monitoring work group comprised of staff from state agencies, monitoring project consultants, Early Childhood Educators from both LEA-based and community-based ELDP, legislators and a small group of interested stakeholders and experts to advise the design and piloting processes	✓	✓	✓	✓	AOE Monitoring Project Consultant CDD BBF Council
Propose and pilot a plan for monitoring publicly funded preschool that includes monitoring goals, program performance measures and processes that are coordinated with child care licensing and VT STARS assessment		✓			AOE Monitoring Project Consultant CDD VT STARS Administrators
Establish inter-agency protocols and processes to coordinate and integrate preschool monitoring, child care licensing and VT STARS assessments. Provide clarity on differentiated roles for staff and for programs. Promote effective communication and information sharing among licensing staff, VT STARS assessors and preschool monitors assigned to the same ELDP		✓	✓		AOE Monitoring Project Consultant CDD VT STARS Administrators
Evaluate the pilot and revise the system design as warranted		✓			AOE Monitoring Project Consultant CDD
Summarize and analyze data to produce a report to the legislature on the development, piloting and initial implementation the preschool monitoring system		✓			AOE Monitoring Project Consultant
Contract with a second in-state consultant with expertise in early childhood education to conduct baseline visits to publicly funded preschool programs			✓	✓	AOE

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Communicate details of the monitoring plan and performance measures to all ELDP operating publicly funded preschool programs in LEA or community-based settings		✓	✓		AOE Monitoring Project Consultant CDD
Conduct monitoring visits, complete monitoring tasks, collect and organize baseline data related to agreed-upon performance measures. Provide technical assistance on compliance with publicly funded preschool requirements			✓	✓	AOE Monitoring Project Consultants
Summarize and analyze baseline data to produce a report to the legislature on the performance of publicly funded preschool programs in Vermont				✓	AOE Monitoring Project Consultants
Assess the efficacy of the system for monitoring publicly funded preschool and make recommendations for sustaining the system with the intention to ensure on-site visits to publicly funded preschool programs at least once every three years with bi-annual reports to the legislature on the performance of publicly funded preschool programs and the return on preschool investments in terms of school readiness and impact on the achievement gap between high needs children and their peers				✓	AOE Monitoring Project Consultant CDD
Build on the existing communication and community engagement strategy to share information about the importance of high-quality experiences in the early years and the quality of ELDP in Vermont with families and the general public on-line, in the media and through referral services provided by community based organizations serving children with high needs.	✓	✓	✓	✓	CDD: the Bright Futures Information System (BFIS) BBF Council Community Child Care Support Agencies (Child Care Resource and Referral Agencies) Vermont Association for the Education of Young Children (VAEYC) Vermont Child Care

					Providers Association (VCCPA) Vermont Child Care Industry and Careers Council (VCCIC)
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**Metrics:** Semi-annual monitoring of success in meeting Outcomes targets.

**Rationale:**

This rationale addresses both B3a, using a valid and reliable tool for monitoring ELDP, and B3b, providing quality rating and licensing information to parents with children enrolled in ELDP.

All early learning and development programs (ELDP) caring for children in more than two families are subject to licensing regulation and monitoring in Vermont. This includes Family Child Care Providers (FCCP), Community based Centers (Centers), center based Early Head Start (EHS) and Head Start (HS), and publically funded Preschool programs delivered by the local education agency (LEA) or in partnership with a community-based setting. No type of ELDP is exempt.

There are essentially three levels of regulated approval. Registration of FCCP, Licensure of FCCP or Centers (which includes HS programs), and Preschool approval.

Registration and Licensure is the under the jurisdiction of the Department for Children and Families. Four Licensing Technicians manage paperwork and processes from a central office and nine Licensing Field Specialists (LFS) complete monitoring and complaint site visits and impose licensing actions from home offices in their caseload areas. These staff work under three Senior Licensing Supervisors in the Child Development Division (CDD) of the Department for Children and Families (DCF).

Over the past 18 months, CDD has worked with a group of over 100 ELDP providers, state agency staff, including Agency of Education (AOE), Maternal Child Health (MCH), and Department of Mental Health (DMH), and other local experts and stakeholders to thoroughly review and revise Vermont’s adequate but outdated registration and licensing standards. The CDD contracted with the National Association of Regulatory Administrators (NARA) to support this work. Significant improvements in Health and Safety are proposed based on the most recent

edition of *Caring for Our Children*, the American Academy of Pediatrics (AAP) definitive standards on health and safety in child care (2011).

Alignment is embedded in the proposed regulations between the Northern Lights Career Development Center (NLCDC) Career Ladder, Vermont Early Learning Standards (VELS) and VT STARS and coordination with public school requirements for publicly funded preschool programs operated by LEAs. The proposed regulation is under final internal review. The proposed regulations will be moving into the promulgation phase this fall and will be implemented in 2014 with extensive training and technical assistance for licensing staff and ELDP.

During the 2012 legislative session, the Vermont legislature approved two new licensing field specialists LFS in CDD (from formerly seven to current nine LFS) with the intent to reduce caseloads and increase frequency of monitoring visits. The Division is working toward a goal of visiting each regulated ELDP at least once annually. In 2012, prior to the addition of the two new Licensing Field Specialists, 39% of registered Family Child Care Programs and 90 % of all licensed programs were visited by licensing staff – about 60% of all ELDP across settings. By 2014, we intend to reach our goal of 100% of all regulated ELDP having at least one unannounced monitoring visit in a 12-month period. Current registration or licensure is a threshold requirement for VT STARS. All ELDP applying to enter or move up in VT STARS must have been visited within the past 12 months. Ensuring that VT STARS applicants and participants have current monitoring visits is a priority of CDD licensing staff. Licensing staff may conduct announced and unannounced visits to program at any time to check for routine compliance or respond to complaints. Information about compliance with regulations is routinely exchanged between CDD Licensing staff and VT STARS Coordinators.

Regulatory compliance is managed as part of a comprehensive data system in CDD called the Bright Futures Information System (BFIS). This searchable database of all regulated providers is available on-line to families and the public. Providers can update program information about services they offer in the system and this is available to families. Regulatory compliance information including when site visits occur and a record of violations is also posted on-line. Quality ratings and accreditation status is displayed. Recently the system was updated to provide information about preschool approval.

As noted in B1, participation in VT STARS is open to all programs but voluntary for most. The regulatory history arena ensures that the quality improvement system rests squarely on the foundation of compliance with state regulations. Administration of VT STARS is managed by a community-based agency through a competitive contract awarded by the CDD. Two full-time VT STARS Coordinators are employed by the agency to accept applications, review evidence, verify points and award approval and ratings in the VT STARS. Both VT STARS Coordinators are highly qualified with Masters degrees in Early Childhood Development and 25 years of experience in the field.

VT STARS Coordinators have access to licensing and professional development information in BFIS to validate evidence submitted in applications. They work closely with the VT STARS Oversight Committee and with staff from CDD and AOE. VT STARS ratings are valid for three years. ELDP participating in VT STARS must submit annual reports affirming ongoing compliance and may submit additional evidence and request a review to improve ratings at any time.

ELDP can earn up to five points in the program practices arena of the VT STARS (see Table 6). This is the arena where reliable program assessments are an important tool in monitoring and improving quality. Applicants earn points in this arena moving from awareness of global quality via training and informed self-assessment through coaching with a knowledgeable coach from outside their program to readiness for a more formal, and rigorous third party program assessment where “high stakes” scores impact how many points are earned toward a VT STARS rating.

➤ **Strengthening reliable use of ERS in VT STARS**

The Environmental Rating Scales (ERS) (University of North Carolina-Chapel Hill, no date) are the predominant valid program assessment tool recognized and applied in the VT STARS. These include the Infant Toddler Environmental Rating Scale (ITERS), the Early Childhood Environmental Rating Scale (ECERS), the Family Child Care Environmental Rating Scale (FCCERS) and the School Age Care Environmental Rating Scale (SACERS). The ERS have been proven as valid tools for program assessment, monitoring and improvement. The Classroom Assessment Scoring System (CLASS) is also recognized as a valid program assessment tool in VT STARS. CLASS is generally used by programs in higher tiers of VT

STARS who have consistently high ERS ratings. See C2 for a discussion of Vermont's Comprehensive Assessment System.

Vermont has already put plans in place to improve understanding of global quality measures and use of the ERS at the entry levels of the quality continuum. In 2012, CDD received a Workforce Education and Training grant from Vermont's Department of Labor. \$12,000 of those funds was awarded to the VT STARS Administration contractor to increase effectiveness in use of the ERS as a means for improving environmental quality for ELDP in VT STARS. Four well qualified and experienced early childhood professionals, ERS trained and approved as Level four trainers in the VT Northern Lights Instructor Registry, are now in place to provide consistent and coordinated training experiences for all types of programs throughout Vermont. They will provide group trainings and individual consultation to support growth upward in VT STARS through improved program practices.

Prior to 2011, Vermont applied a training of trainers model to developing ERS observers in VT STARS. Though the core trainers had received training from the ERS Institute in North Carolina at one time and used training materials approved by the Institute, fidelity to the rigorous protocol required to ensure valid use of the tool for high stakes purposes and inter-rater reliability was lacking. In 2011 and 2012, CDD sought to remedy this concern by sponsoring training to reliability by ERS Institute staff in the ECERS and the ITERS for a core group of well qualified and experienced early childhood professionals in Vermont.

Fifty-five potential assessors were trained in this effort but only a few were trained to 85% reliability at that time. Individuals from this group continue to conduct most of the ERS assessments in the VT STARS for a daily stipend. A system for maintaining inter-rater reliability was not established. ERS program assessment improved but not sufficiently to deliver the level of confidence we need to support high stakes use for the growing number of programs entering the higher levels of VT STARS at this time and to use ERS scores to measure internal validity in the system.

The first strategy detailed in the HQP above is based on recommendations from the ERS Institute for achieving and maintaining inter-rater reliability in the ERS (see Appendix XI). Through the VT STARS administration contract, we will recruit, train and deploy two well-qualified and experienced early childhood professionals as state anchors in the valid and reliable

use of all relevant ERS. VT STARS ERS Assessors will work out of home offices and be responsible for regions where they will conduct or coordinate and oversee all ERS assessments in VT STARS. We will continue to support a small group of reliable assessors as consultants, increasing the stipends, support and oversight for these activities, to assure that demand for assessments is met in a timely manner for all programs participating in VT STARS. As part of this process, three to five star programs will be assessed, using an appropriate ERS, when applying for approval or renewal and at least once more during the three-year approval period. We believe this will resolve weaknesses related to both present and future validity and reliability of ERS assessments in VT STARS and increase the rigor and usefulness of consistent program assessments in assessing and improving quality.

➤ **Beyond VT STARS: Monitoring publically funded preschool programs in Vermont**

PreK administration is a shared responsibility of Agency of Education (AOE) and CDD/DCF. Publicly funded preschool programs must be licensed by CDD and must also meet higher standards to be approved. These are:

- National accreditation or a rating of at least 4 VT STARS in the VT STARS. Three STAR programs may be provisionally approved with an approved plan to increase to at least 4 VT STARS within 12 months;
- Engagement of a teacher with an early childhood or early childhood special education license; and
- Assessing and reporting children’s progress using TS Gold.

Currently, AOE collects and maintains information about publicly funded preschool programs but there is no formal monitoring process. In H.270 (see A1), the House Committee on Education specifically assigns AOE and CDD/DCF with responsibility to more proactively monitor publicly funded PreK in Vermont, a function both agencies enthusiastically support but lack current resources to conduct in a robust manner. The House Committee on Education used the Results Based Accountability (RBA) model referred to elsewhere in this application as a basis for the language regarding a monitoring system in this bill.

In the second strategy described in the HQP above, Vermont will use RTT-ELC resources to design and develop a system to monitor current and expanding publicly funded preschool programs. The system will focus specifically on promoting optimal outcomes for children,

especially high needs children, and informing future policy decisions. Vermont will partner with a nationally recognized organization or individual with expertise in early childhood education and program evaluation to help design and pilot a preschool monitoring system. AOE and CDD will convene a work group comprised of staff from state agencies, monitoring project consultants, Early Childhood Educators from both LEA and community based ELDP, legislators and a small group of interested stakeholders and experts to advise the design and piloting processes.

AOE will recruit a highly qualified early childhood educator as the Monitoring Project Consultant to manage the development and piloting processes in the first two years of the grant period and then actively monitor preschool programs as the monitoring system is implemented in the third and fourth years. A second preschool monitoring consultant will be brought on in the third year to assist in implementation. Preschool monitors will collect and organize data and information about how each publicly funded preschool program is offered locally and will provide on-site technical assistance to programs regarding program rules, services for children and families and coordination with other local ELDP and other services for children and families. They will have full access to all program information available in BFIS and to all VT STARS program assessment data. Preschool monitoring will be intentionally coordinated with child care licensing and VT STARS assessment activities.

In 2015, year two of the grant period, the Monitoring Project Consultant will summarize and analyze data to produce a report to the legislature on the development, piloting and initial implementation of the proposed preschool monitoring system. In 2017, year four of the grant period, the Monitoring Project Consultant will summarize and analyze baseline data to produce a report to the legislature on the performance of publicly funded preschool programs in Vermont. Some questions the report may address are: how much is invested in publicly funded Preschool; how local communities structure publicly funded Preschool services and coordinate with other services for children with high needs such as IDEA services, Title I funding, Head Start and CC FAP subsidies; the quality of publicly funded ELDP as documented in valid and reliable assessments conducted by VT STARS assessors; and information about the children who participate and how those children are learning and developing.

The AOE and CDD/DCF will use the data and anecdotal evidence accumulated during

piloting and implementation to assess the efficacy of the system for monitoring publicly funded preschool and make recommendations for sustaining the system with the intention to ensure on-site visits to publicly funded preschool programs at least once every three years with bi-annual reports to the legislature on the performance of publicly funded preschool programs and the return on preschool investments in terms of school readiness and impact on the achievement gap between high needs children and their peers

➤ **Providing quality rating and licensing information to parents and the public**

Vermont CDD dedicates part of its website to providing family friendly information about VT STARS and about programs participating in VT STARS (see Figure 14). The website has a link to the Bright Futures Information System (BFIS) which contains a searchable data base of all ELDP in Vermont which a family can access and search by location and provider characteristics or by provider name. In a survey conducted in December of 2010, 26% of the 1124 parents responding said they used BFIS on-line and found it helpful in getting information on choosing a program for their children. Parents can also access regulatory compliance history and details of violations as part of their search process in BFIS.



**Figure 14: VT STARS Online Parent Resources**

Disseminating information about VT STARS to parents ELDP and the general public is an expectation of CDD for community partners with grants or contracts related to early learning and

development. CDD contracts with 12 Community Child Care Support Agencies (also members of the Vermont Association for Child Care Resources and Referral - VACCRRRA) to manage eligibility determination for CC FAP, provide referral services to applicants and the general public, and provide professional development resources to ELDP in their regions. A deliverable in their contract is to increase the number of ELDP entering and progressing upward in VT STARS. They are also responsible to educate families about the importance of choosing high-quality ELDP for their children and how VT STARS ratings can assist in making that choice. In addition to this focused resource, a number of other key partners help to increase visibility and understanding of VT STARS including Vermont Association for the Education of Young Children (VAEYC), the Vermont Child Care Providers Association (VCCPA), the Vermont Child Care Industry and Careers Council (VCCIC) and the Building Bright Futures Early Childhood Councils – both statewide and in 12 AHS regions throughout the state. The participation and buy in from local community-based partners is critical in a rural state like Vermont where families get most of their trusted information from family members, neighbors and providers in their community.

ELDP with VT STARS rating receive attractive certificates identifying their star rating to display in their programs and are recognized in annual celebrations of accomplishments in their communities. CDD publishes and disseminates print materials related to VT STARS and licensing including a VT STARS brochure for parents and providers (see Appendix VII), A VT STARS ‘placemat’ for policymakers (see Appendix VIII) and a booklet on the importance of using regulated child care (see Appendix X)

Private funders will implement Campaign for Vermont’s Youngest Children, a multi-million dollar multi-year campaign to raise public awareness, education, and engagement that will create statewide support for early childhood. One of the targeted consumer groups will be parents to increase their understanding of why it matters to choose programs of the highest quality for their youngest children and what tools, including VT STARS, are available to help them make that choice.

**B3a: Valid and reliable tools for monitoring ELDP**

As described in the rationale above, Vermont has identified valid and reliable tools and a

consistent system for rating and monitoring ELDP participating in our statewide TQRIS. This is closely coordinated with child care licensing. We presented a high quality plan to use RTT-ELC resources to improve inter-rater reliability and add an additional dimension of monitoring publicly funded preschool programs to our array of oversight activities. More information on improving the use of program assessment tools is included in section C2.

**B3b: Providing quality rating and licensing information to parents with children enrolled in ELDP.**

Vermont has developed a diverse set of strategies to provide quality rating and licensing information to parents with children enrolled in ELDP and to the general public. These include on-line resources, print materials and community partners who spread the word out to rural communities. The CDD uses publication guides to ensure that materials are presented in plain language at reasonable reading levels and are easy to understand and access for use in decision making by families enrolling children in ELDP.

**(B)(4) Promoting access to high-quality Early Learning and Development Programs for Children with High Needs. (20 points)**

The extent to which the State and its Participating State Agencies have developed and implemented, or have a High-Quality Plan to develop and implement, a system for improving the quality of the Early Learning and Development Programs participating in the Tiered Quality Rating and Improvement System by--

(a) Developing and implementing policies and practices that provide support and incentives for Early Learning and Development Programs to continuously improve (e.g., through training, technical assistance, financial rewards or incentives, higher subsidy reimbursement rates, compensation);

(b) Providing supports to help working families who have Children with High Needs access high-quality Early Learning and Development Programs that meet those needs (e.g., providing full-day, full-year programs; transportation; meals; family support services); and

(c) Setting ambitious yet achievable targets for increasing--

(1) The number of Early Learning and Development Programs in the top tiers of the Tiered Quality Rating and Improvement System; and

(2) The number and percentage of Children with High Needs who are enrolled in Early Learning and Development Programs that are in the top tiers of the Tiered Quality Rating and Improvement System.

Additionally, the State must provide baseline data and set targets for the performance measures under (B)(4)(c)(1) and (B)(4)(c)(2).

Evidence for (B)(4):

- Any supporting evidence the State believes will be helpful to peer reviewers.

**Section B4: Promoting Access to high-quality ELDP for Children with High Needs**

**Abstract:**

Vermont STARS has become a crucial element of Vermont’s approach to improving outcomes for children and narrowing the achievement gap between children with high needs and their peers. Our goal is to ensure that all programs serving a concentration of children with high needs are of high quality and offering comprehensive services that address the array of challenges facing these children and families. In 2010 the CDD implemented the Strengthening Families Centers grant program and the Strengthening Families Approach Learning Community. A high rating in VT STARS is requirement for access to these resources developed to provide support and incentives for ELDP serving children with high needs to continuously improve quality. At the same time, we’re helping high quality ELDP support high needs children by building protective factors in families using the Strengthening Families Framework (SFF) developed by the Center for the Study of Social Policy. Expanding and evaluating that program is the focus of one of the two High Quality Plans (HQP) presented in this section.

The Child Development Division (CDD), in collaboration with the Agency of Education (AOE), has a history of committing resources to the successful inclusion of children with disabilities, developmental delays and challenging behaviors with typically developing peers in least restrictive environments. Over the past six years, in the development of Children’s Integrated Services (CIS), the CDD has created a more defined and systemic approach to providing the supports children with high needs require to be successful through the development of Specialized Child Care Services (SCCS) as part of the core array of CIS delivered in every AHS region in Vermont. CIS is described in more detail in section A1. The second HQP in this section strengthens SCCS and intentionally links SCCS to VT STARS to

increase the number of children with high needs participating in programs approved for specialized child care and rated as high quality in VT STARS.

**B4a: Developing and implementing policies and practices that provide support and incentives for ELDP to continuously improve**

**High Quality Plan Summary**

**Abstract:**

The policies and practices described in the HQP in this subsection are linked to specific professional development opportunities described in D2 and provide technical assistance and financial incentives to support providers, particularly those providers who serve concentrated populations of high needs children, in continuous quality improvement. In rural communities the children these providers serve are living in poverty, sometimes homeless or involved with protective services, facing a daunting achievement gap in comparison to more affluent peers before they even enter the school house door. In more populous Burlington, providers are serving those children and also new Americans who may be learning English and recovering from trauma. Since Vermont is thoroughly committed to inclusion, many of these same programs also work with children with identified disabilities or developmental delays. Raising the bar on these programs raises the prospects for improved outcomes for these children.

**Goal:**

Vermont's goal is to increase participation of children with high needs in high quality ELDP using the Strengthening Families Framework (SFF) logic model to build protective factors in families and to increase the number of ELDP, particularly registered Family Child Care Programs, that are rated as high quality in VT STARS and focused on building protective factors in families with children with high needs.

**Outcomes:**

- By the end of the funding period (2017), 100 % of licensed ELDP serving a concentrated population of children participating in CC FAP (30% or more of enrolled census) have achieved a three to five star rating in VT STARS.
- By the end of the funding period (2017), 100% of licensed ELDP serving a concentrated population of children participating in CC FAP (30% or more of enrolled census) have

committed to using the Strengthening Families Framework (SFF) logic model to build protective factors in families they serve.

- By the end of the funding period (2017), 95% of registered FCCP serving a concentrated population of children participating in CC FAP (3 or more children) have achieved a three to five star rating in VT STARS.
- By the end of the funding period (2017), 95% of registered FCCP serving a concentrated population of children participating in CC FAP (3 or more children) have committed to using the Strengthening Families Framework (SFF) logic model to build protective factors in families they serve.
- By the end of the funding period (2017), connected networks of diverse ELDP rated as high quality in VT STARS and committed to the Strengthening Families Framework (SFF) logic model to build protective factors in families they serve are available in Promise Communities and other areas of Vermont where there are concentrated populations of children with high needs.

**Strategies:**

- Provide targeted MATCH (mentoring, advising, teaching, coaching, consulting, helping) services to all licensed and registered programs serving concentrated populations of high needs children (CC FAP participation as 30% or more of enrolled census for licensed programs and three or more children in registered FCCP) to support them in moving into and upward in VT STARS to achieve high ratings through improved quality. This strategy is resourced in D2 but provides a foundation to the work supported here. The two efforts are linked through this strategy.
- Expand Vermont's Strengthening Families Child Care grants program to all licensed programs rated as four or five stars serving concentrated populations of high needs children (CC FAP participation as 30% or more of enrolled census)
- Provide significantly expanded grants to Strengthening Families Centers to provide comprehensive services and supports to high quality registered Family Child Care Programs (FCCP) in their communities that serve concentrated populations of high needs children (three or more CC FAP assisted children in a registered FCCP)
- Support an expanded Strengthening Families Approach Learning Community

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- Conduct a third party evaluation to assess and improve this approach and measure the impact of Strengthening Families Grants on family strengths and child outcomes.

**Timeline and Parties Responsible:**

Key Activity	Year				Parties Responsible
	2014	2015	2016	2017	
Analyze census data and CCFAP data to identify ELDP and regions of the state where there are concentrated enrollment/population of high needs children	✓				CDD/DCF
Deploy VT STARS relationship based professional development resources (including MATCH) in a targeted way to assist ELDP serving concentrated populations of CC FAP children to enter into and progress through VT STARS to high levels.	✓	✓	✓		CDD/DCF VT STARS MATCH providers
Develop and release competitive grant opportunities to expand Strengthening Families grants to targeted high quality licensed ELDP serving concentrated populations of high needs children	✓		✓		CDD/DCF
Develop and release competitive grant opportunities to support Strengthening Families centers provision of comprehensive services and supports to high quality registered FCCP in their communities that serve concentrated populations of high needs children	✓		✓		CDD/DCF
Award 2 year grants and execute agreements	✓				CDD/DCF
Contract with an evaluation vendor to develop and implement an evaluation for all Strengthening Families grantees to determine the impact of the program on family strengths and child outcomes	✓	✓	✓	✓	CDD/DCF
Grantees receive funding, comply with grant criteria, participate in the Strengthening Families Approach	✓	✓	✓	✓	Grantees CDD/DCF

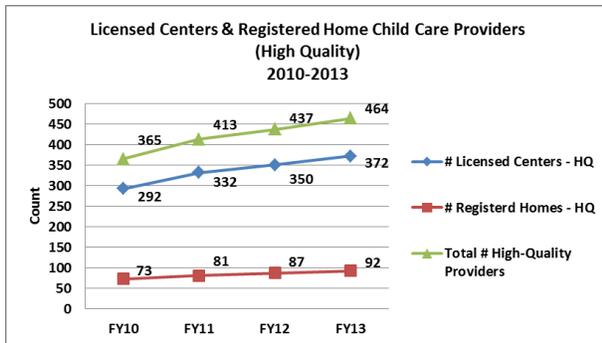
Learning Community and report data on progress toward outcomes as required					
Provide enhanced supports and professional development opportunities to grantees through the Strengthening Families Approach Learning Community	✓	✓	✓	✓	CDD/DCF
Evaluate current grantees and extend funding if there are positive results or reallocate /re-compete as warranted			✓		CDD/DCF
Seek to leverage appropriate state expenditures to purchase additional Managed Care Organization Investments to sustain expanded grant program			✓	✓	CDD/DCF

**Metrics:** Semi-annual monitoring of success in meeting Outcomes targets.

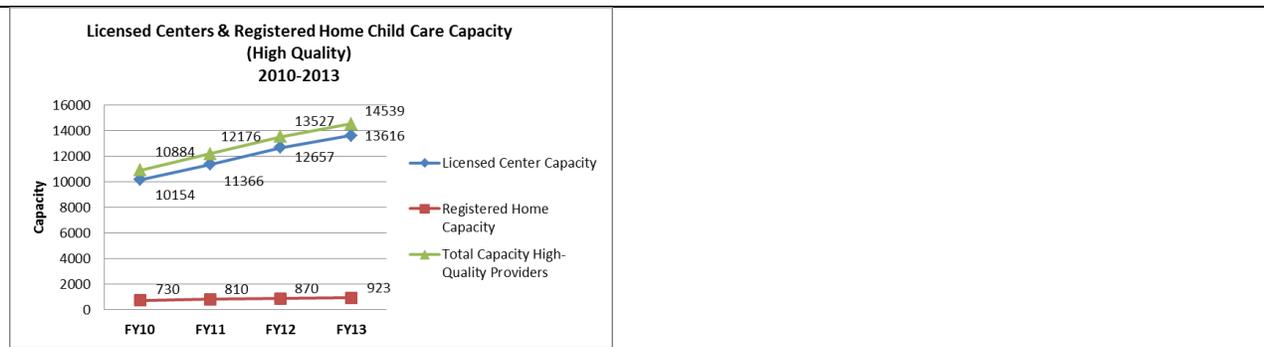
**Rationale:**

**Improving the quality of ELDP serving high needs children**

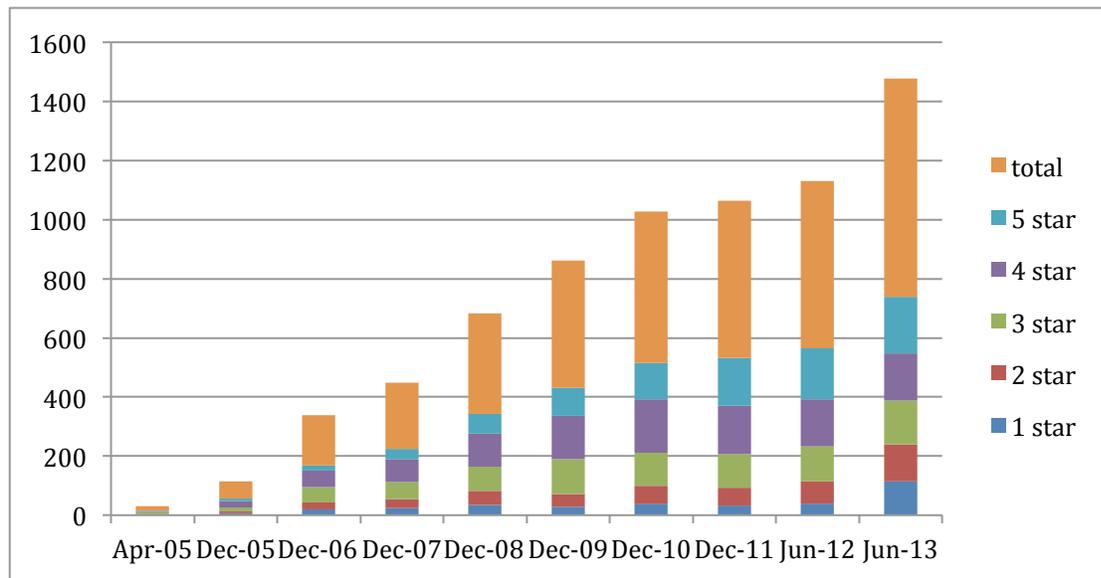
Despite an overall slight decrease in the total number of regulated ELDP in Vermont, the quality of ELDP has been steadily increasing as evidenced by participation and progression upward in VT STARS since it was fully implemented in 2004. (See Figures 16 and 17 below).



**Figure 15: Licensed Centers & Home Care Providers - Quality**



**Figure 16: Licensed Centers & Home Care Providers - Capacity**



**Figure 17: Number of Programs Annually at Each Star Level**

At the same time, participation of children with high needs receiving subsidies in the Child Care Financial Assistance Program (CC FAP) in VT STARS programs and in programs with 3-5 STAR ratings has increased exponentially. For fiscal year 2013, 45% of children participating in CC FAP were enrolled in three, four or five star programs. An additional 12% were enrolled with providers who had entered the system at the one or two star levels. 57% of all CCFAP assisted children attended a VT STARS rated program in SFY13. Growth of participation in high quality programs for CC FAP subsidized children is seen in Figure 14 in section B2. We believe this indicates that policies and practices described in B2 to increase program participation in VT STARS are having a positive effect.

The Strengthening Families (SF) Approach (Center for the Study of Social Policy, no date)

is a systems reform effort seeking to protect and nurture young children while promoting their development. It includes helping their parents to be the best they can be, even under stress. We value this approach because we believe it has significant potential to promote positive outcomes for children with high needs, especially those most prevalent in rural communities in Vermont, children impacted by poverty and instability and those at risk for neglect and abuse.

The SF Approach can be summarized as follows: We know families thrive when protective factors are robust in their lives and communities. SF is research-based, cost-effective strategies to increase family strengths, enhance child development and reduce child abuse and neglect. It focuses on building five Protective Factors that also promote healthy outcomes. Those five protective factors are parental resilience, social connections, and knowledge of parenting and child development, concrete support in times of need and social and emotional competence of children. In Vermont we are shifting policy, funding and training to help ELDP build Protective Factors with families and give children with high needs a running start at success.

Strengthening Families Child Care grants were developed by the CDD in 2010 with the goal of maintaining quality and increasing comprehensiveness in ELDP that recruit and retain enrollment of children with high needs as part of their core mission and focus or because they operate in areas where there are high concentrations of children with high needs. These programs provide affordable access to high quality comprehensive early care and education for children, particularly infants and toddlers, and their families challenged by economic instability and other environmental risk factors.

Since 2010, \$850,000-\$900,000 has been awarded annually to four and five star licensed ELDP serving at least 30% of subsidized children in their enrollment census and willing to commit to a SF Approach. Currently, there are 39 licensed centers funded as Strengthening Families Centers. Together, they serve an average of 679 CC FAP assisted families in any given month; 265 of these include infants and toddlers. Individual program grants range from \$8,000-\$75,000 annually depending on the size of the program, the number of CC FAP children served (some serve almost exclusively CC FAP children) and the quality and intensity of services they committed to in their grant applications. Grantees include non-profit and for-profit programs, Parent Child Centers and Head Start programs.

The criteria for designation as a Strengthening Families ELDP eligible to receive grants is:

- Participation in the Child Care Financial Assistance Program (CC FAP);
- Enrollment in STARS with rating of four or five stars;
- Committed to an enrollment of CC FAP subsidized children as 30% of enrollment census;
- Approved as Specialized Child Care Services Providers (SCCS) (additional information follows on this later in this section);
- Provide full day/full year services;
- Participate in a Strengthening Families Approach Learning Community; and
- Conduct a Strengthening Families Program Assessment annually and create and implement a Program Strategies Improvement Plan reflective of assessment results.

Strengthening Families ELDP agree to accept 100% CC FAP subsidy as full payment for services with no co-payment required by families. They also agree to provide the following enhanced program services:

- Implement program strategies that build Protective Factors as described in the Strengthening Families Logic Model;
- Support continuity of care and regular attendance for enrolled children;
- Engage families as active participants in early care and education and school age programs;
- Empower families as informed caregivers and advocates for their children;
- Support children's health (including ensuring a medical home for every child) and mental health;
- Provide healthy snacks and meals and nutrition education services;
- Engage in collaborative community relationships such as Building Bright Futures Regional Councils;
- Collaborate with local Children's Integrated Services Teams and service providers; and
- Provide inclusive early care and education.

The HQP will expand this level of service into all programs serving concentrated populations of children with high needs thereby increasing access and also increasing quality in programs that typically serve children with high needs.

Registered FCCP are an integral part of ELDP supply in small rural communities and so the plan to engage those providers in this program to improve quality and increase the comprehensive nature of services they offer using centers already steeped in the model as a support system for enhanced services is especially important in making sure that children with high needs enrolled in registered FCCP are accessing high quality comprehensive services. This plan will help us to reach our goal of 95% of all children with high needs subsidized by the CC FAP in programs rated as high quality in VT STARS by 2017.

**B4b: Providing supports to help working families with children with high needs access high-quality ELDP**

**High Quality Plan Summary**

**Abstract:**

Both of the programs described in this section – Strengthening Families (SF) Centers and Specialized Child Care Services (SCCS) – have been intentionally developed in Vermont to help families with children with high needs, both working families and those in situations that are less stable and supported, build Protective Factors that impact the healthy growth and development of their children. SF ELDP provides full-day, full-year services, healthy nutrition, family support services, relief from co-payments and a welcoming learning environment for children and families. Through SCCS families with high needs children gain access to enhanced referral services, transportation, and program consultation and supports that help their child succeed in the program they’ve chosen. RTT-ELC resources will help us take these important assets to greater breadth, depth and intensity in order to reach more families with children with high needs and do an even better job meeting those needs.

**Goal:**

Vermont’s goal is to strengthen and improve Specialized Child Care Services (SCCS) that support access to and successful participation in ELDP for children with high needs by improving the quality of approved SCCS providers, increasing the financial incentive linked to provision of SCCS and increasing capacity of SCCS Coordinators in regions to improve local service delivery and recruit, retain and support SCCS approved providers as a critical local resource for children with high needs and their families.

**Outcomes:**

- By the end of the funding period (2017), 100% of SCCS approved providers will participate in VT STARS;
- By the end of the funding period (2017), 100% of SCCS are rated as three, four or five stars;
- By the end of the funding period (2017), there is sufficient capacity of approved SCCS providers in each region to provide services to all children with high needs; and
- By the end of the funding period (2017), 75% of children participating in CC FAP are enrolled in an approved SCCS provider.

**Strategies:**

- Expand capacity of SCCS in each region so that every CIS Regional Team has designated resources to hire a full time SCCS Coordinator
- Review and revise criteria for SCCS provider approval to apply an incremental approach to requiring all approved SCCS providers enter VT STARS and progress to higher levels of quality
- Recruit high quality ELDP who are not yet approved as SCCS providers to become approved and provide services to children with high needs
- Increase the payment differential for providing SCCS from 7% to 10% for all approved SCCS providers rated at three stars or higher
- Provide targeted MATCH (mentoring, advising, teaching, coaching, consulting, helping) services to SCCS providers to support them in moving into and upward in VT STARS to achieve high ratings through improved quality and to help them develop competencies and knowledge appropriate to addressing the particular challenges of high needs children. This strategy is resourced in D2 but provides a foundation to the work supported here. The two efforts are linked through this strategy.

**Timeline and Parties Responsible:**

Key Activity	Year				Parties Responsible
	2014	2015	2016	2017	
Revise CIS contracts to increase SCCS Coordination to 1 FTE in four regions where this is funded	✓				CDD/DCF

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as PT					
Convene inter-agency and community partner work group to review and revise criteria for SCCS provider approval. Create an incremental approach to	✓				CDD/DCF
Create an inventory of approved SCCS providers and other high quality providers that might be recruited to seek approval in each AHS regions. Report data on children with high needs for each region.	✓				CDD/DCF SCCS Coordinators CIS Teams
SCCS Coordinators create a strategic plan to increase quality and expand capacity of SCCS providers in their regions. Develop metrics and targeted benchmarks.	✓				CDD/DCF SCCS Coordinators CIS Teams
Increase CC FAP differential for SCCS from 7% - 10% for all approved SCCS providers who are at or achieve the new higher standards (including VT STARS participation at 3-5 stars). Communicate this to SCCS providers		✓	✓	✓	CDD/DCF
SCCS Coordinators implement recruitment activities and report data on progress		✓	✓	✓	SCCS Coordinators
Set deadlines for meeting new quality criteria for SCCS approval and do not renew approval for those who do not meet criteria			✓	✓	CDD/DCF
Provide targeted MATCH activities related to the knowledge and skills related to meeting the individualized needs of children with high needs and their families to approved SCCS providers and high quality ELDP seeking SCCS approval	✓	✓	✓	✓	SCCS Coordinators MATCH professionals

**Metrics:** Semi-annual monitoring of success in meeting Outcomes targets.

**Rationale:**

Specialized Child Care Services (SCCS) is a menu of available supports for particular populations of children with high needs and their families. It is intended to increase access to and enhance success in high quality ELDP for these children, so that progress on children’s safety, family stability, and optimal wholesome development is achieved.

The particular populations identified for these services include: foster children and children with open cases with the Family Services Division (FSD) of the Department for Children and Families (DCF); children assessed with special physical or developmental needs; and families experiencing significant, short term stress (such as recent emigration, homelessness, domestic violence, or health or substance abuse issues).

The range of services includes: short term (6–12 months) child care subsidy if not otherwise eligible; enhanced referral services from SCCS Coordinators; access to specially trained SCCS approved providers; transportation services; and access to accommodation grants that support special equipment or an additional staff person.

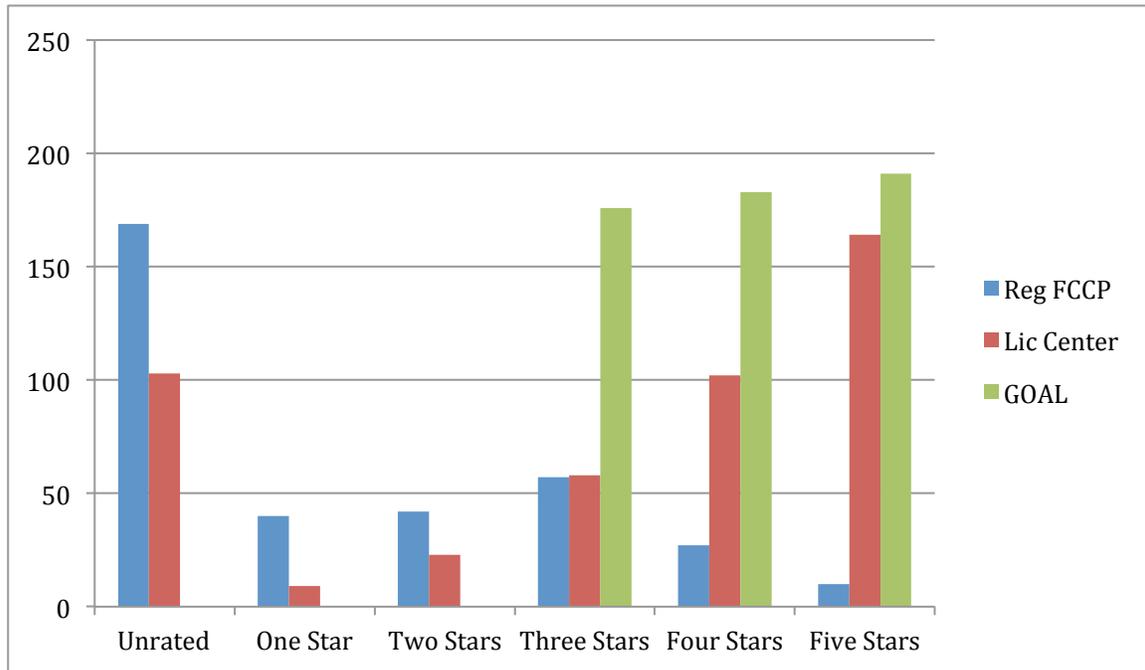
SCCS providers receive a seven percent differential payment on CC FAP rates for these children that is over and above the tiered reimbursement structure and they receive consultation and support from the CIS Team.

There are currently 804 ELDP in Vermont that approved by the CDD to provide SCCS. These must be regulated providers who participate in six hours annually of professional development experiences related to providing services to children with special needs and their families. (See Appendix II).

Although Specialized Child Care Service (SCCS) providers earn points in the “Families and Communities” arena of STARS for achieving that status, they are not currently required to participate in STARS and only about 60% of SCCS providers voluntarily participate. Licensed centers are significantly more likely to be rated, and rated at high levels, than Family Child Care Providers.

The role of the SCCS Coordinator on the CIS Team is to ensure that there is a sufficient supply of approved SCCS providers in their region, that there is a good match between a SCCS provider and the children with high needs and their families that they serve, and SCCS providers are getting the support they need to support children’s success.

In order to achieve improve services for children with high needs, Vermont is proposing that all Specialized Child Care Services (SCCS) providers participate in VT STARS and achieve a rating of 3 or more stars. In the HQP, a work group will review and revise criteria for approval as a SCCS provider to ensure ELDP with the SCCS designation have the knowledge and skills they need to provide high quality individualized services for children. Enhanced support by MATCH professionals (see D2) including newly available and accessible trainings on pertinent topics, will all contribute to the building SCCS provider skills and knowledge. Increasing the differential rate from 7% to 10% will reward providers who have already achieved high quality status and incentivize others to do so. In this gradual transition, SCCS Coordinators will seek to manage the supply of SCCS in their communities to ensure that every child who needs access to a SCCS program can find one and be enrolled.



**Figure 18: VT STARS Ratings of Specialized Child Care Providers**

**B4c: Setting ambitious but achievable targets for increasing (1) the number of ELDP in the top tiers of the TQRIS; and (2) the number and percentage of children with high needs who are enrolled in ELDP in the top tiers of the TQRIS**

**Rationale:**

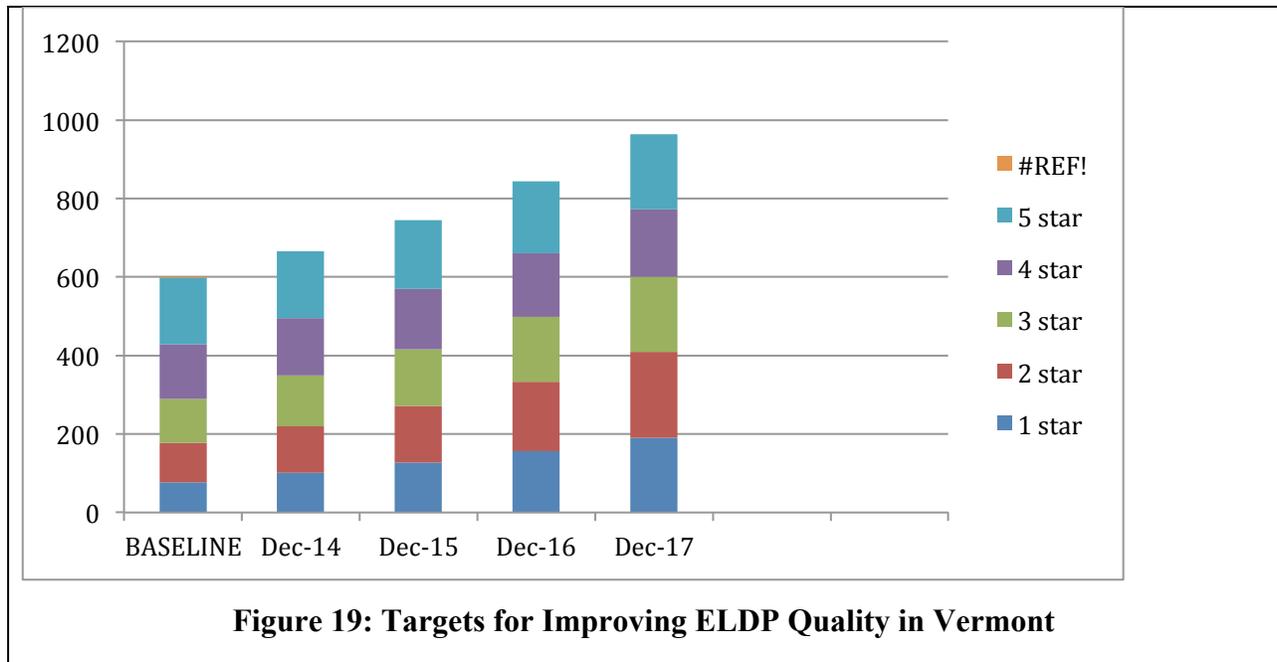
Vermont has set ambitious goals for increasing both the number of ELDP participating in the top tiers of VT STARS and the number of high needs children who are enrolled in those programs. 100% of three and four year old children attending publicly funded preschool programs, including children eligible for IDEA, Part B, section 619 and children attending Head Start or center based Early Head Start are in programs with three to five stars. Given Vermont's strong and ongoing commitment to expanding publicly funded preschool, the new public-private partnership to invest in expansion (see A1) and especially if the bill (H.270) requiring universal access for all three and four years olds passes in the next legislative session, we believe that we will see steady increases in children participating in these high quality ELDP.

Increased investments in CC FAP – more families of children with high needs with more funds to pay for quality child care - proposed last year and likely to come up again this year, will provide the financial resources providers need to reach higher quality standards. These policy advances that show Vermont's strong commitment to both children with high needs and to high quality services that meet their needs are complemented and accelerated by the high quality plans proposed in section B2 and this section.

Regulatory changes at the base of Vermont's TQRIS, proposed to take effect in 2015, will raise the bar for ELDP and pave the way for a natural progression into and upward in VT STARS. We believe the combination of incentives, supports and incrementally imposed mandates that our overall RTT-ELC reform agenda delivers will allow us to accelerate quality improvement in ELDP so that we will rapidly expand the number of programs participating at high levels by the end of the grant period.

Table B4c1 shows that we anticipate 38% of ELDP to have achieved a four or five star rating by 2017. We will focus our efforts to ensure that this increased capacity is targeted toward children with high needs. As we bring systems together to strongly support young learners from infancy right through completion of second grade, we believe we will turn the curve on the achievement gap between high needs children and their peers in Vermont and begin to make the significant difference for their future that these reforms envision.

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<b>Performance Measure for (B)(4)(c)(1): Increasing the number of Early Learning and Development Programs in the top tiers of the Tiered Quality Rating and Improvement System.</b>					
	<b>Baseline (Today)</b>	<b>Target- end of calendar year 2014</b>	<b>Target- end of calendar 2015</b>	<b>Target- end of calendar year 2016</b>	<b>Target- end of calendar year 2017</b>
<b>Total number of programs covered by the Tiered Quality Rating and Improvement System</b>	<b>596</b>	<b>668</b>	<b>825</b>	<b>975</b>	<b>1220</b>
Total Home Based programs	230	283	421	551	775
Total Center Based Programs	366	384	404	424	445
<b>Total Number of programs in Tier 1</b>	<b>77</b>	<b>104</b>	<b>142</b>	<b>191</b>	<b>251</b>
Total Home Based programs in Tier 1	65	88	120	165	220
Total Center Based Programs in Tier 1	12	16	22	26	31
<b>Total Number of programs in Tier 2</b>	<b>100</b>	<b>119</b>	<b>169</b>	<b>202</b>	<b>282</b>
Total Home Based programs in Tier 2	72	86	130	155	225
Total Center Based	28	33	39	47	57

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Programs in Tier 2					
<b>Total Number of programs in Tier 3</b>	<b>112</b>	<b>129</b>	<b>189</b>	<b>234</b>	<b>305</b>
Total Home Based programs in Tier 3	55	64	119	159	225
Total Center Based Programs in Tier 3	57	65	70	75	80
<b>Total Number of programs in Tier 4</b>	<b>139</b>	<b>146</b>	<b>158</b>	<b>182</b>	<b>220</b>
Total Home Based programs in Tier 4	29	32	40	57	85
Total Center Based Programs in Tier 4	110	114	118	125	135
<b>Total Number of programs in Tier 5</b>	<b>169</b>	<b>170</b>	<b>177</b>	<b>195</b>	<b>244</b>
Total Home Based programs in Tier 5	9	10	12	15	20
Total Center Based Programs in Tier 5	160	160	165	170	175
<p>The base line data includes the actual number of regulated centers and registered home programs that provide care for infants, toddlers and preschoolers in Vermont. The data is collecting through Vermont's Bright Futures Information System (BFIS). This system collects data in real time. The data is an average number of programs from State Fiscal Year 2013 (July 2012 through June 2013). This data excludes school age programs.</p>					

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<b>Performance Measures for (B)(4)(c)(2): Increasing the number and percentage of Children with High Needs who are enrolled in Early Learning and Development Programs that are in the top tiers of the Tiered Quality Rating and Improvement System.</b>											
<b>Type of Early Learning and Development Program in the State</b>	<b>Number of Children with High Needs served by programs in the State</b>	<i>Baseline and Annual Targets -- Number and percent of Children with High Needs Participating in Programs that are in the top tiers of the Tiered Quality Rating and Improvement System</i>									
		<b>Baseline (Today)</b>		<b>Target-end of calendar year 2014</b>		<b>Target - end of calendar year 2015</b>		<b>Target-end of calendar year 2016</b>		<b>Target-end of calendar year 2017</b>	
		<b>#</b>	<b>%</b>	<b>#</b>	<b>%</b>	<b>#</b>	<b>%</b>	<b>#</b>	<b>%</b>	<b>#</b>	<b>%</b>
State-funded preschool <i>Specify: Publicly Funded PreK</i>	4114	4114	100	4155	100	4196	100	4238	100	4281	100
Early Head Start and Head Start <sup>20</sup>	1890	1890	100	1890*	100	1890*	100	1890*	100	1890*	100
Early Learning and Development Programs funded by IDEA, Part C	1836	808	44	1010	55	1377	75	1836	100	1836	100
Early Learning and Development Programs funded by IDEA, Part B, section 619	1337	1337	100	1350	100	1364	100	1378	100	1391	100
Early Learning and Development Programs funded under Title I of ESEA	2733	2733	100	2760	100	2788	100	2816	100	2844	100
Early Learning and Development Programs receiving funds from the State's	2721	2721	44	3064	50	3677	60	4167	68	4597	75

<sup>20</sup> Including Migrant and Tribal Head Start located in the State.

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<b>Performance Measures for (B)(4)(c)(2): Increasing the number and percentage of Children with High Needs who are enrolled in Early Learning and Development Programs that are in the top tiers of the Tiered Quality Rating and Improvement System.</b>											
<b>Type of Early Learning and Development Program in the State</b>	<b>Number of Children with High Needs served by programs in the State</b>	<i>Baseline and Annual Targets -- Number and percent of Children with High Needs Participating in Programs that are in the top tiers of the Tiered Quality Rating and Improvement System</i>									
		<b>Baseline (Today)</b>		<b>Target-end of calendar year 2014</b>		<b>Target - end of calendar year 2015</b>		<b>Target-end of calendar year 2016</b>		<b>Target-end of calendar year 2017</b>	
		<b>#</b>	<b>%</b>	<b>#</b>	<b>%</b>	<b>#</b>	<b>%</b>	<b>#</b>	<b>%</b>	<b>#</b>	<b>%</b>
CCDF program											
Other Early Education Initiative (EEI)	1001	1001	100	1011	100	1021	100	1031	100	1042	100
<p>The VT Child Development Division refers to programs rated as 3-5 stars as high quality, therefore 3-5 are considered as “top tiers.” Tier 3,4 and 5 have been included in this data selection, the numbers are the actual monthly average for FY13 as extracted from Bright Futures Information System (BFIS).</p> <p>*Federal sequestration cuts to Head Start and Early Head Start Programs adds a layer of uncertainty regarding the number of children in Head Start and Early Head Start in the target years.</p>											

Tier 3,4 and 5 have been included in this data selection, the numbers are the actual monthly average for FY13 as extracted from Bright Futures Information System (BFIS) The breakdown reflects L= licensed early learning and Development programs, R= registered family early learning and development programs.

(B)(5) Validating the effectiveness of State Tiered Quality Rating and Improvement Systems.  
(15 points)

The extent to which the State has a High-Quality Plan to design and implement evaluations--working with an independent evaluator and, when warranted, as part of a cross-State evaluation consortium--of the relationship between the ratings generated by the State's Tiered Quality Rating and Improvement System and the learning outcomes of children served by the State's Early Learning and Development Programs by--

(a) Validating, using research-based measures, as described in the State Plan (which also describes the criteria that the State used or will use to determine those measures), that the tiers in the State's Tiered Quality Rating and Improvement System accurately reflect differential levels of program quality; and

(b) Assessing, using appropriate research designs and measures of progress (as identified in the State Plan), the extent to which changes in quality ratings are related to progress in children's learning, development, and school readiness.

Evidence for (B)(5):

- Any supporting evidence the State believes will be helpful to peer reviewers.

**Section B5: Validating the effectiveness of State TQRIS**

**Abstract:**

In B1, we describe a mature, high-functioning, standards-based TQRIS that includes all of the elements identified by the QRIS National Learning Network. Having applied research, evidence and best practice in developing and improving program standards and rating practices over the past 10 years, we have anecdotal confidence that VT STARS ratings meaningfully differentiate quality and that our system provides clear and significant steps for continuous quality improvement in participating ELDP.

We are eager to test this confidence level and have long planned and prepared for a rigorous third party evaluation to assess our system and guide us in making improvements. However, it is difficult to direct resources from direct services to children or quality improvement activities for ELDP or professional development activities for Early Childhood Educators (ECE) to fund research and evaluation – a dilemma for many small states. RTT-ELC resources will help us to measure and improve the effectiveness of VT STARS.

B5a, validating that the TQRIS accurately reflects differential levels of program

quality, and B5b, the extent to which quality ratings are related to children's progress, are both addressed in this section.

### **High Quality Plan Summary**

#### **Goal:**

Vermont's goal is to design and implement an independent and rigorous evaluation of VT STARS, to use the results of that evaluation to improve the effectiveness of our system, and, in combination with efforts to improve rating and monitoring, create an internal administrative process for using monitoring data to regularly assess the validity of our ratings.

#### **Outcomes:**

- By 2016, conduct a rigorous, independent third party evaluation of VT STARS;
  - The results of the evaluation will be applied to validate or refute our understanding that differentiated tiers in VT STARS ratings represent a meaningful differentiation related to ELDP characteristics and practices that have been proven to impact child early learning experiences and developmental outcomes;
  - Design and implementation successes and problems in VT STARS will be identified in order to assess and what needs to be done to improve the system;
  - The results of the evaluation will increase understanding of the extent to which changes in quality ratings predict progress in children's learning, development and school readiness; and
- By 2017, develop and implement a plan to utilize valid and reliable monitoring data in regular and on-going validation of the ability of VT STARS point system and ratings to meaningfully differentiate quality.

#### **Strategies:**

- Engage an independent, experienced, nationally recognized research partner to systemically examine the program standards, point system and quality tiers established in VT STARS in an effort to understand the ability of the quality ratings in the system to effectively differentiate the quality of ELDP in diverse

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settings;

- Ensure a rigorous research design methodology that employs multiple measures with demonstrated reliability and validity, sophisticated evaluation strategies and quasi-experimental designs as appropriate;
- Convene an Evaluation Committee that includes STARS Administrators, funders, state and local systems leaders, advocates, parents, policymakers, ELDP providers from diverse settings, MATCH providers and local research partners to advise evaluation process, review and help interpret preliminary findings and results, create a plan to communicate and disseminate results and develop a plan to apply results to improve VT STARS;
- Build connectivity between formative and summative evaluation and validation activities to develop and implement internal capacity to assure data quality and provide on-going and regular assessment of the system’s effectiveness in fulfilling its intended purposes; and
- Apply the results of the evaluation to improve the effectiveness and communicative power of VT STARS as a TQRIS.

**Timeline:**

Key Activity	Year				Parties Responsible
	2014	2015	2016	2017	
Develop a Request for Proposals (RFP) describing Vermont’s questions and priorities for a third party evaluation of VT STARS	✓				CDD/DCF AOE STARS Oversight Committee
Evaluate proposals and select an experienced, nationally known research partner or partners to conduct the evaluation	✓				CDD/DCF AOE STARS Oversight Committee
Develop and execute a contract for services	✓				CDD/DCF

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Convene an Evaluation Committee that includes local research partners to develop in-state capacity to support further investigations	✓				CDD/DCF AOE STARS Oversight Committee BBF Council
Finalize evaluation plan, questions, methodology and measurements and responsibilities	✓				
Conduct assessments, Collect data evaluation, analyze results		✓	✓		Research partner Principal Investigators
Share preliminary findings			✓		Research partner Principal Investigators
Evaluation Committee meets regularly to advise evaluation, review preliminary findings and discuss dissemination and application of results	✓	✓	✓	✓	CDD/DCF AOE STARS Oversight Committee BBF Council
Review, finalize and publish results and Evaluation Report			✓		Research partner Principal Investigators CDD/DCF AOE STARS Oversight Committee BBF Council
Apply results of evaluation to propose, analyze, and assess changes to VT STARS				✓	CDD/DCF AOE STARS Oversight Committee BBF Council QRIS National Learning Network
Develop, document and implement process for using monitoring data, particularly reliable ERS and CLASS scores, to regularly assess the validity of VT STARS ratings			✓	✓	Research partner Principal Investigators CDD/DCF AOE Evaluation Committee STARS Oversight Committee
Implement changes in VT STARS as warranted and necessary to ensure effective differentiation of quality levels, maintain a streamlined user-				✓	CDD/DCF AOE STARS Oversight Committee

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friendly process for participating ELDP, and reflect Vermont’s values related to high quality programming for young children and their families					
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**Metrics:** Semi-annual monitoring of success in meeting Outcomes targets.

**Rationale:**

As described in B1, VT STARS has been informally examined and incrementally improved by the STARS Oversight Committee since 2007. The Committee is interested in the predictive capacity of valid ratings and systems integrity and also in how VT STARS effectively contributes to an integrated and cohesive early learning and development system in Vermont. The Committee works closely with the Professional Preparation and Development Committee of the Building Bright Futures (BBF) Council to ensure Vermont’s career ladder and professional development opportunities are aligned with quality tiers in the VT STARS. The Committee advises the CDD in addressing data quality and gaps in the Bright Futures Information System (BFIS) where regulatory and quality rating data is collected and stored. Vermont is committed to pursuing a rigorous third party evaluation process as VT STARS enters its tenth year of improving and communicating the quality of ELD programs in our state.

In 2011, acknowledging this commitment and in preparation of the first RTT-ELC opportunity, the CDD, the Stars Oversight Committee and Building Bright Futures Council leveraged Office of Child Care (OCC) technical assistance from Region I to invite Dr. Donna Bryant, a national expert in QRIS evaluations from Frank Porter Graham Center and the University of North Carolina, to assist Vermont in drafting evaluation research questions. Over the past two years, CDD staff, STARS Coordinators and members of the STARS Oversight Committee have participated in OCC Region I Roundtables and technical assistance opportunities to gain knowledge about TQRIS evaluation and refine a plan for VT STARS. This work has recently been reinvigorated by an evaluation work group of the STARS Oversight Committee with the intent to move forward on a formal evaluation process for VT STARS. The research questions designed with Dr. Bryant’s assistance have been cross-referenced with current TQRIS evaluation

information from recent research and scholarly papers as well as experiences of first round RTT-ELC grantees to assist Vermont in plotting an effective and efficient evaluation course.

In developing a Request for Proposals to engage an independent evaluator, Vermont experts, participants and stakeholders will apply a relevant a logic model to guide the investigation and refine our questions. We include in this proposal for funding a list of the most compelling research questions drafted by those working on this in Vermont to date and organize these with relevance to the selection criteria identified in the RTT-ELC application:

- **Validating that the tiered ratings in VT STARS accurately reflect differential levels of program quality:**
  - Do the quality components across the five VT STARS arenas predict program quality? What are their differential contributions?
  - Do the quality components within VT STARS standards reflect current research on the characteristics of program quality that impact child development and learning?
  - Do differential patterns of quality point allocation emerge that are identifiable and related to distinctive program characteristics and overall program quality? If patterns exist, do they predict progress toward higher quality?
  - What is the relationship between program characteristics (size, setting type, auspice, geographical location, etc.) and program quality as reflected in star ratings? As reflected in observed classroom quality scores?
  - Does approval as a publicly funded preschool have a meaningful and discernible impact on program quality that can be differentiated from the program's star rating? In other words, are ELDP approved as publicly funded preschools of better quality than a program rated as four or five stars but not approved for public preschool funding? What is the relative contribution of publicly funded preschool quality standards (over and above star ratings) to changes in star ratings and observed classroom quality scores?
- **Assessing the extent to which changes in quality ratings in VT STARS are**

**related to progress in children’s learning, development and school readiness:**

- Do VT STARS program standards promote both structural and process characteristics of ELDP programs that are most strongly associated with improved child outcomes?
- Do children participating in higher rated ELDP in VT STARS show greater gains than peers who attend lower rated or unrated ELDP?
- Do children participating in higher rated ELDP in VT STARS do better on Vermont’s Ready Kindergarteners Survey (RKS) than peers who attend lower rated or unrated ELDP? Are there certain components of quality or program characteristics that are more strongly associated with school readiness than others?
- Do children with high needs differentially benefit from ELDP with higher ratings in VT STARS? Do program characteristics mediate this relationship?
- What dimensions of VT STARS program standards are most vital to child learning and developmental outcomes?
- **Other questions of interest related to TQRIS policies, practices and investments in Vermont**
- What supports and resources are needed to promote program improvements in these critical areas?
- How has the quality of care provided for the most at-risk children changed over time?
- Are families impacted differentially by program quality? Do families of children with high needs in ELDP with high ratings report more significant levels of family engagement than those with children in ELDP with lower ratings or no ratings?
- Do program quality incentives and MATCH activities impact STARS participation and progression? Are some incentives, rewards and supports more strongly associated with upward progress through ratings than others

**Focused Investment Areas -- Sections (C), (D), and (E)**

*The State must address in its application--*

- (1) Two or more of the selection criteria in Focused Investment Area (C);*
- (2) One or more of the selection criteria in Focused Investment Area (D); and*
- (3) One or more of the selection criteria in Focused Investment Area (E).*

**C. Promoting Early Learning and Development Outcomes for Children**

*Note: The total available points for (C)(1) through (C)(4) = 60. The 60 available points will be divided by the number of selection criteria that the applicant chooses to address so that each selection criterion is worth the same number of points. For example, if the applicant chooses to address all four selection criteria in the Focused Investment Area, each criterion will be worth up to 15 points*

*The applicant must address two or more selection criteria within Focused Investment Area (C), which are as follows.*

**(C)(1) Developing and using statewide, high-quality Early Learning and Development Standards.**

The extent to which the State has a High-Quality Plan to put in place high-quality Early Learning and Development Standards that are used statewide by Early Learning and Development Programs and that--

- (a) Includes evidence that the Early Learning and Development Standards are developmentally, culturally, and linguistically appropriate across each age group of infants, toddlers, and preschoolers, and that they cover all Essential Domains of School Readiness;
- (b) Includes evidence that the Early Learning and Development Standards are aligned with the State's K-3 academic standards in, at a minimum, early literacy and mathematics;
- (c) Includes evidence that the Early Learning and Development Standards are incorporated in Program Standards, curricula and activities, Comprehensive Assessment Systems, the State's Workforce Knowledge and Competency Framework, and professional development activities; and that they are shared with parents and families along with suggestions for appropriate strategies they can use at home to support their children's learning and development; and
- (d) Includes evidence that the State has supports in place to promote understanding of and commitment to the Early Learning and Development Standards across Early Learning and Development Programs.

*If the State chooses to respond to this selection criterion, the State shall write its full response in the text box below. The State shall include the evidence listed below and describe in its narrative how each piece of evidence demonstrates the State's success in meeting the criterion; the State may also include any additional information it believes will be helpful to peer reviewers. If the*

*State has included relevant attachments in the Appendix, these should be described in the narrative below and clearly cross-referenced to allow the reviewers to locate them easily. In scoring the selection criterion, peer reviewers will determine, based on the evidence the State submits, whether each element of the selection criterion is implemented or planned; the quality of the implementation or plan (see the definition of a High-Quality Plan for the components reviewers will be judging); the extent to which the different types of Early Learning and Development Programs in the State are included and addressed; and the extent to which the unique needs of the State's special populations of Children with High Needs are considered and addressed. The State is responsible for providing clear and detailed information to assist the peer reviewers in making these determinations.*

Evidence for (C)(1)(a) and (b):

- To the extent the State has implemented Early Learning and Development Standards that meet the elements in selection criteria (C)(1)(a) and (b), submit--
  - Proof of use by all types of Early Learning and Development Programs in the State;
  - The State's Early Learning and Development Standards for:
    - Infants and toddlers
    - Preschoolers
  - Documentation that the standards are developmentally, linguistically, and culturally appropriate for all children, including children with disabilities and developmental delays and English learners;
  - Documentation that the standards address all Essential Domains of School Readiness and that they are of high-quality; and
  - Documentation of the alignment between the State's Early Learning and Development Standards and the State's K-3 standards.

**Section C1: Developing and using statewide, high-quality ELD standards.**

**Abstract:**

The current Vermont Early Learning Standards (VELS) was published in 2003. The VELS are central to all of Vermont's early learning and development programs, and have been incorporated into various state policies guiding early learning and development programs.

There is widespread knowledge and use of the VELS. However, the VELS are now ten years old, and in need of revision to assure they reflect current research on early learning, include infants and toddlers, are aligned with the Head Start Child Development and Early Learning Framework and Head Start's Revised Framework for Programs Serving Infants and Toddlers and Their Families, and are aligned with the Common Core State Standards (CCSS) for K-12 which Vermont has adopted.

This work is reflected in Project Budget #9.

### **High-quality Plan Summary**

**Goal:** Vermont seeks to complete a revision of its Vermont Early Learning Standards (VELS) to reflect a continuum of learning and development from infancy through third grade. These new learning standards will be developmentally, linguistically, and culturally appropriate for all children, including those with high needs. Educators in all types of early learning and development programs as well as K-3 will know and use the standards to guide their planning, instruction, and assessments. Families will know and use the VELS to understand appropriate expectations and support the learning and development of their infants, toddlers, and young children.

#### **Outcomes:**

- The proposed VELS are shown to be developmentally, linguistically, and culturally appropriate for all children, including those with high needs.
- External verification that the proposed VELS incorporate all of the Essential Domains of School Readiness is obtained.
- By 2017, the new VELS is firmly established as the state's new early learning standards.
- The percentage of early childhood educators who demonstrate they understand the VELS and know how to incorporate them in their curriculum planning increases by 20% at the end of each year of the grant (i.e., 20% by 2015, 40% by 2016, and 60% by 2017).
- By 2017, 100% of Vermont's teacher preparation programs require pre-service early childhood educators and early childhood special educator to use the new VELS in their curriculum planning, assessments, and reflections.
- By 2017, 100% of in-service professional development opportunities (e.g., Fundamentals I and II courses, workshops) have incorporated the new VELS.
- By 2017, the new VELS are reflected in the competencies for licensure as an Early Childhood Educator (Birth-Grade 3) and Early Childhood Special Educator license (0-5 years old).
- By 2017, the new VELS have a prominent role in Vermont's TQRIS, early childhood

licensing regulations, and in the monitoring system for publicly funded PreK programs.

- At the conclusion of the grant period, at least 30% of families with young children participating in early learning and development programs report that they are aware of the new VELs and understand how these standards guide the learning opportunities provided to their children.

**Strategies:**

- Contract with national expert(s) to review Draft 1 of the proposed VELs (see Appendix XXIII) to determine if the proposed standards are developmentally, linguistically, and culturally appropriate for all children.
- Reconvene the VELs Revision Committee to begin an iterative process of revision, feedback, and consultation with national expert(s).
- Contract with a VELs consultant to create a final draft for public comment and eventual adoption as State policy during 2014.
- Publish the new VELs online and print VELs booklets to distribute to educators teaching in various types of early learning and development programs, including Head Start and K-3 classes.
- Conduct an analysis to determine the alignment of the new VELs with Teaching Strategies GOLD, the statewide formative assessment required in publicly funded PreK and Head Start programs, and encouraged in other early learning and development programs, especially those that include children with high needs.
- Develop various formats to deliver professional development on the VELs: self-paced online interactive learning modules, face-to-face workshops, and credit-bearing courses.
- Develop a VELs webinar series to inform various audiences: administrators of early learning and development programs, public school administrators, and policy makers.
- Through a Train the Trainer model, create a cadre of VELs Experts who have in-depth knowledge of the new VELs as a whole and experiences with specific age cohorts, who can provide trainings, coaching and/or mentoring to educators in early learning and development settings across the Birth through Grade 3 continuum.

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- Incorporate the new VELs and standards-based curriculum planning into existing, ongoing professional development activities that currently include coaching and mentoring (e.g., Starting Points Networks, Vermont Birth to Three Project, Early and K-3 Multi-Tiered Support Systems sites, current K-3 Common Core State Standards and New Generation Science Standards workshops and coaching/mentoring).
- Create a set of new family guides to the VELs that present standards-based, family-oriented activities for each age cohort; publish the Guides online and in booklet form.
- Develop an online family-friendly introduction to the new VELs and Family Guides.
- Create an annual calendar of family-oriented activities that are based on the new VELs. Distribute through early learning and development programs and elementary schools.
- Encourage and support early learning and development programs and elementary schools to host Family Nights for families to become aware of the new VELs and have facilitated conversations about the new VELs.

**Table 13: Timeline and Parties Responsible**

Key Activity	Year				Parties Responsible
	2014	2015	2016	2017	
Contract with national expert(s) on early learning standards to review the proposed VELs in terms of its developmental, linguistic, and cultural appropriateness for all children.	✓				VT Agency of Education (AOE), VT Department for Children and Families (DCF), Head Start-State Collaboration Office (HSSCO)
VELs Revision Committee and consultant revise proposed VELs to address results of expert review, and create draft for Public Comment	✓				AOE/DCF/HSCO VELs Revision Committee, consultant
Finalize the new VELs and submit for adoption by the State Board of Education	✓				AOE/DCF/HSCO
Publish new VELs online and as a booklet	✓				AOE as lead
Crosswalk of new VELs with Teaching Strategies GOLD assessments	✓				AOE and Teaching Strategies

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Develop various types of VELs professional development activities for Infant-Grade 3 educators (e.g., self-paced online learning modules, course syllabus, workshops)	✓	✓			AOE/DCF/HSCO, VELs Revision Committee and consultant(s)
Implement a Train the Trainer model to create a cadre of VELs Experts	✓	✓			AOE as lead
Deliver professional development on the new VELs and standards-based learning opportunities.	✓	✓	✓	✓	VELs Experts AOE as lead
Incorporate the new VELs into current ongoing professional development activities and projects that include coaching/mentoring		✓	✓	✓	AOE/DCF/HSCO and partners (e.g., VT Birth to 3 Project)
Invite early childhood educators across the state to submit examples of learning opportunities that integrate the new VELs standards; recognize and post the best submitted on VE <sup>2</sup> , a free resource website all of VT's early childhood educators		✓	✓	✓	VE <sup>2</sup> website administrator, panel of reviewers AOE as lead
Develop a set of Family Guides to the new VELs to be published as a booklet, calendar, and online		✓			AOE/DCF/HSCO, VELs Revision Committee, and consultants
Develop and present a series of webinars on the new VELs targeting administrators and policy makers		✓			AOE/DCF/HSCO, VELs Revision Committee, and consultants
Create an online family-friendly introduction to the new VELs		✓	✓		AOE/DCF/HSSCO, VELs Revision Committee, consultants, families
Support early learning and development programs, and elementary schools to host VELs Family Nights conversations		✓	✓	✓	AOE as lead

**Metrics:** Semi-annual monitoring of success in meeting Outcomes targets.

The current *Vermont Early Learning Standards: Guiding the Development and Learning of*

*Children Entering Kindergarten* (VELS) was published in 2003 (see Appendix IX). The VELS are based on a set of principles that view the child holistically and developmentally, view families as valued partners, and recognize the importance of play. As indicated in the title, these standards were intended to articulate expectations of what children should know and be able to do prior to entering kindergarten. The VELS were aligned with the Vermont Framework of Standards and Learning Opportunities for K-12 and with the Head Start Child Outcomes Framework that was in effect back in 2003.

The VELS are central to all of Vermont’s early learning and development programs. The VELS have been incorporated into various state policies guiding early learning and development programs (such as Act 62 for public PreK and licensing regulations). They are used to guide the development of goals in the Individualized Education Plan (IEP) of children receiving Part B section 619 services, have informed the early educator core competencies, and are used in teacher preparation programs. In 2008, when an advisory committee debated which assessment tool would be required to assess the progress of children in publicly funded PreK programs statewide, the potential of an assessment tool’s alignment with the VELS was a major criterion in the selection process.

There is widespread knowledge and use of the VELS. Despite the fact that the VELS are now ten years old, early childhood educators have continued to use the VELS to plan for intentional teaching and learning. Further, posters that summarize the VELS can be spotted hanging up on walls of many early childhood centers. Although the VELS are now posted on Vermont’s Agency of Education’s (AOE) website, requests from current and prospective early childhood educators for the VELS booklets continue to pour in. The number of requests for the parent’s guide far exceeds requests for the educator’s version. This is further evidence of the ubiquitous nature of the current VELS.

The current VELS consists of eight domains that closely align with the essential domains of school readiness as defined in *Getting Ready* (National School Readiness Initiative, 2005). Each domain has several “Learning Goals & Definitions”, provides an example of what the goal would look like in practice, and includes sections on how Adults and the Environment can support children in achieving the standards in each domain.

**Table 14: Alignment of VELS & School Readiness, Current VELS**

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<b>Domains of the current Vermont Early Learning Standards</b>	<b>Alignment</b>	<b>Essential Domains of School Readiness</b>
Language, Literacy and Communication	→	Language and Literacy
Mathematics	→	Cognition and General Knowledge
Science		
Social Studies		
Approaches to Learning	→	Approaches toward Learning
Physical Development and Health	→	Physical Well-Being and Motor Development
Social and Emotional Development	→	Social and Emotional Development
Creative Expression		

Despite the prevalent use and acceptance of the VELs by educators, these standards needed to be revised to ensure they reflect current research on early learning, are aligned with the Head Start Child Development and Early Learning Framework, include infants and toddlers, and are aligned with the Common Core State Standards (CCSS) for K-12 which Vermont has adopted.

In February 2012, a VELs Revision Committee was formed to begin the process of researching, conceptualizing, and drafting revised VELs. The Committee included administrators, early childhood educators, consultants, and higher education faculty. The Committee first reviewed a recent draft of proposed Vermont early learning standards for infants and toddlers but decided not to add these new standards to the current VELs. Rather, they recommended creating early learning standards that would represent the full early childhood developmental continuum, from infancy through grade 3. In addition, the Committee has decided to incorporate K-3 Common Core State Standards (CCSS) and Next Generation Science Standards (NGSS), and include K-3 standards in the other learning and developmental areas, in the revised VELs. (Please see Appendix XXIII for a draft version of the revised VELs).

As with the current VELs, these proposed new standards are aligned with the Essential Domains of School Readiness (see Table 15 below).

**Table 15: Alignment of VELs & School Readiness Domains, Proposed Revised VELs**

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<b>Domains of the proposed Vermont Early Learning Standards</b>	<b>Alignment</b>	<b>Essential Domains of School Readiness</b>
Communication: Language Literacy (Creative Expression)	→	Language and Literacy
Learning About the World: Mathematics Science Social Studies	→	Cognition and General Knowledge
Belonging, Social and Emotional Development and Learning	→	Approaches toward Learning
Growing, Moving and Being Healthy	→	Physical Well-Being and Motor Development
Belonging, Social and Emotional Development and Learning	→	Social and Emotional Development

The proposed VELs includes seven age groupings: Infants and Young Toddlers (birth to 18 months), Older Toddlers and Twos (18 to 36 months), Preschoolers (3 to 5 year olds), Kindergartners (5 and 6 years), First Graders (6 and 7 year olds), Second Graders (7 and 8 year olds), and Third Graders (8 and 9 year olds). The VELs domains and subdomains remain consistent throughout the full Birth through Grade 3 continuum.

The Common Core State Standards (CCSS) and the New Generation Science Standards (NGSS) are incorporated into the new VELs and serve as the standards for these content areas for K-3. The proposed standards for the younger age groups in the CCSS and NGSS content areas describe the foundational knowledge and skills needed. In these content areas and in the other domains and subdomains, a progression of learning and development is articulated and the connections across the Birth through Grade 3 continuum are evident. This consistency creates the opportunity for educators and families to develop a shared language and common concepts, and to view children’s development along a developmental continuum as well. All children, including those with developmental delays, have a place when learning and development are defined along a continuum.

**C1a: Evidence that ELD standards are developmentally, culturally, and linguistically appropriate.**

Vermont’s current VELs, as well as the proposed VELs, cover all of the Essential Domains of School Readiness. The HQP for completing the development of the proposed VELs

will ensure that these new standards will be developmentally, culturally, and linguistically appropriate for all of Vermont's infants, toddlers, preschoolers, and for children in K-3. A review by a consultant with expertise in early learning standards will attest to the appropriateness of the new VELs.

**C1b: Evidence that ELD standards are aligned with Vermont K-3 academic standards.**

The proposed VELs are for children from infancy through third grade. The Common Core State Standards and the New Generation Science Standards for K-3 are incorporated into the new VELs. The new VELs present a full continuum of standards for language arts, mathematics, and science, as well as social emotion development, approaches to learning, social studies, physical development and health.

**C1c: Evidence that ELD standards are incorporated into program standards, curricula and activities, comprehensive assessment systems, Vermont's workforce knowledge and competency framework, and professional development.**

Currently, the VELs have a role in the Early Childhood Educators Core Competencies, curriculum planning, licensing regulations, PreK policies, pre-service and in-service professional development activities, and are shared with families. Suggested activities for educators that address the VELs are included in the VELs booklets and are part of professional development. Additionally, families have received *Guiding Your Child's Early Learning: A Parent's Guide to the Vermont Early Learning Standards* (refer to Appendix X) that includes standards-informed activities for families to do with their children. Another activity is to ensure that VELs is aligned with Teaching Strategies GOLD, the statewide formative assessment public PreK, Head Start, and Early Head Start requires.

Vermont's HQP will continue and enhance the above activities. Additionally, it will expand the scope of the VELs since the new learning standards will reflect the full early childhood continuum, from infancy through grade 3.

**C1d: Evidence that Vermont has supports in place to promote understanding and commitment of ELD standards across ELD programs.**

Vermont's HQP for Section C1 details a robust approach for promoting educators', administrators', and families' awareness, understanding and use of the new VELs. Strategies include creating a cadre of VELs Experts to conduct trainings, coach and mentor early

childhood educators. An array of professional development opportunities at different levels of intensity and through various modes of delivery is planned. Professional development on the VELs and creating standards informed learning opportunities would be available (and in some cases required) across early learning and development settings as well as K-3.

(C)(2) Supporting effective uses of Comprehensive Assessment Systems.

The extent to which the State has a High-Quality Plan to support the effective implementation of developmentally appropriate Comprehensive Assessment Systems by--

(a) Working with Early Learning and Development Programs to select assessment instruments and approaches that are appropriate for the target populations and purposes;

(b) Working with Early Learning and Development Programs to strengthen Early Childhood Educators' understanding of the purposes and uses of each type of assessment included in the Comprehensive Assessment Systems;

(c) Articulating an approach for aligning and integrating assessments and sharing assessment results, as appropriate, in order to avoid duplication of assessments and to coordinate services for Children with High Needs who are served by multiple Early Learning and Development Programs;

(d) Training Early Childhood Educators to appropriately administer assessments and interpret and use assessment data in order to inform and improve instruction, programs, and services, and to effectively solicit and use family input on children's development and needs; and

(e) Articulating guidelines and procedures for sharing assessment data and results with parents, involving them in decisions about their children's care and education, and helping them identify concrete actions they can take to address developmental issues identified through the assessment process.

*If the State chooses to respond to this selection criterion, the State shall write its full response in the text box below. The State may also include any additional information it believes will be helpful to peer reviewers. If the State has included relevant attachments in the Appendix, these should be described in the narrative below and clearly cross-referenced to allow the reviewers to locate them easily.*

*In scoring the selection criterion, peer reviewers will determine, based on the evidence the State submits, whether each element of the selection criterion is implemented or planned; the quality of the implementation or plan (see the definition of a High-Quality Plan for the components reviewers will be judging); the extent to which the different types of Early Learning and Development Programs in the State are included and addressed; and the extent to which the unique needs of the State's special populations of Children with High Needs are considered and addressed. The State is responsible for providing clear and detailed information to assist the peer reviewers in making these determinations.*

Evidence for (C)(2):

- Any supporting evidence the State believes will be helpful to peer reviewers.

**Section C2: Supporting effective uses of Comprehensive Assessment Systems.**

**Abstract:** By 2016, Vermont will have a statewide plan for a Comprehensive Assessment System that aligns screenings and assessments, coordinates the implementation of assessments, describes data sharing procedures, and sets forth a professional development plan for early childhood educators across the various types of early learning and development programs, especially those programs supporting young children with high needs. This system will include developmental screenings, formative assessments, and measures of environmental quality and adult-child interactions. This work incorporates Project Budget #10.

**High-quality Plan Summary**

**Goal:** Vermont will develop a balanced and effective comprehensive assessment system of developmentally appropriate assessments that provide information about the development and learning of children from infancy through kindergarten entry, and about the quality of the programs they attend. Early childhood educators will understand the purposes of child and program assessments, implement assessments with fidelity, use the results to inform and improve their instruction, and engage families in understanding and using the information to improve outcomes, especially for young children with high needs.

**Outcomes:**

- By 2016, Vermont will have a statewide plan for a Comprehensive Assessment System. This plan will have support from cross-agency staff, administrators, and early childhood educators.
- By 2017, 90% of all children with high needs will have had a developmental screening for any developmental and behavioral concerns, followed by appropriate referrals.
- During each year of the grant, the number of programs receiving child care subsidies that use Teaching Strategies Gold as a formative assessment tool will increase by 10% annually.
- By 2017, 75% of early childhood educators teaching in publicly funded PreK will demonstrate inter-rater reliability on Teaching Strategies GOLD (TS GOLD), a required

formative assessment measure of PreK children's progress.

- By the end of the grant period, the role of the Environmental Rating Scales (ERS) in Vermont's TQRIS is strengthened and ratings from external assessors are shown to be reliable (see section B).
- By 2017, 50% of all publicly funded PreK programs use CLASS to measure adult-child interactions, and use the data for developing professional development plans.
- By the end of the grant period, 75% of K-3 educators in PreK-3<sup>rd</sup> learning communities (see Competitive Priority 4) report using information from the TS GOLD Birth through Grade 3 formative assessment and the CLASS for K-3 to drive their professional learning and instructional decision making.
- Up to 50% of early childhood educators teaching in publicly funded PreK programs and programs receiving child care subsidies have been trained and supported in the administration, interpretation, and use of data to inform and improve their instruction, and to more effectively communicate with families.

#### **Strategies**

- Create a cross-agency Comprehensive Early Childhood Assessment Work Group that also includes representatives from early learning and development programs and institutions of higher education to develop a plan for an aligned, coordinated and integrated system of child and program assessments that will yield reliable information which can be used to analyze and improve the statewide system for early learning and development.
- The Comprehensive Early Childhood Assessment Work Group will work in consultation with the existing Kindergarten through Grade 12 Data Governance Committee which is

currently engaged on the SLDS implementation<sup>21</sup> and with the new Birth Through Grade 12 Data Governance Council (see E2) to develop plans for sharing assessment results that comply with HIPPA and FERPA requirements. Develop a professional development plan for increasing early childhood educators' knowledge and skills in the areas of administration, interpretation and use of assessment data; and to enhance their ability to share assessment results with families in a manner that enables families to make decisions about their children's learning and development and take actions to support their children.

- Develop a Guide to Vermont's Comprehensive Assessment Plan and host five regional meetings to disseminate the information across the state's early learning and development programs, including public schools with K-3 classrooms.

***Strategies Specific to Developmental Screenings***

- Adopt the national Help Me Grow program to enhance the implementation and coordination of developmental screenings (i.e., Ages and Stages Questionnaire and Ages and Stages Questionnaire-Social Emotional) (see C3).

***Strategies Specific to Formative Assessments***

- Expand the use of Teaching Strategies GOLD Birth through Kindergarten (TS GOLD), Vermont's most commonly used formative assessment for children 0-5 statewide, by recruiting early learning and development programs serving children 0-5 with high needs and that are currently not using TS GOLD. Support these programs to use TS GOLD by paying the license fees for the portfolios of children with high needs for the first two

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21 The existing K-12 Data Governance Committee is the same body as the Kindergarten through Grade 12 Vermont Automated Data Reporting (VADR) Governance Committee which is currently focused on VADR project implementation associated with the construction of the SLDS.

years of implementation.

- Create a cadre of Master level TS GOLD trainers from regions across the state who will provide the “Basic” and “Beyond the Basics” workshops and coaching to early childhood educators in early learning and development programs.
- Provide “Coaching to Fidelity” to Master level trainers and others who will coach and mentor educators in early learning and development programs which include children with high needs to implement all aspects of TS GOLD effectively. Prioritize using mentors from the MATCH network (see D2).
- Introduce the new TS GOLD Birth through Grade 3 assessment in each of the four PreK-3<sup>rd</sup> learning communities (see Competitive Priority 4). Provide the PreK-3<sup>rd</sup> teachers with a 2-day training from national experts, and cover the costs of the portfolios for the PreK-3<sup>rd</sup> learning communities.
- Institute a policy whereby early childhood educators in publicly funded PreK programs are required to demonstrate inter-rater reliability on TS GOLD.
- Conduct five regional TS GOLD trainings for administrators to increase their knowledge of how to use TS GOLD assessments results to inform program improvement.
- Encourage and support programs to expand families’ knowledge of their children’s learning and development, and for families to become more engaged by allowing them to access to their child’s portfolio through the TS GOLD family portal.

***Strategies Specific to Measures of Environmental Quality***

- Hire two statewide assessors in order to increase the reliability and consistency of ratings through the various Environmental Rating Scales (Graham Child Development Institute, University of North Carolina at Chapel Hill) that are used as part of Vermont’s TQRIS (see B3).
- Provide information on the ERS - what is measured and how to use the findings to improve quality- to early learning and development programs through various modalities ((see B3).
- Revise VT STARS, to strengthen the role ERS currently plays and to ensure that all programs will need to have an external ERS assessment in order to obtain three or more

VT STARS (see B3).

***Strategies Specific to Measures of Adult-Child Interactions***

- Increase the use of the Classroom Assessment Scoring System™ (CLASS, developed by Piñata et.al.) in publicly funded PreK and in programs receiving child care subsidy as a tool for examining the quality of adult-child interactions and providing early childhood educators with information they can use to improve their practice and their programs.
- Introduce the K-3 CLASS™ as a mechanism for sustaining early childhood outcomes into the early elementary years through aligned and improved teacher practices.
- In Year 1 of the grant, contract with a national vendor to provide two CLASS trainings for each of the three CLASS™ assessments (i.e., Toddler, PreK, K-3) to 90 early childhood educators who have supervisory responsibilities.
- Build Vermont’s capacity to provide trainings on CLASS™ through Train-the-Trainers sessions, one for each of the three CLASS™ assessments. Vermont CLASS™ trainers will conduct at least two regional trainings during Years 3 and 4 of the grant.

**Table 16: Timeline and Parties Responsible**

Key Activity	Year				Parties Responsible
	2014	2015	2016	2017	
Create the Comprehensive Early Childhood Assessment Work Group to develop a plan for a quality comprehensive system	✓				AOE/BBF/DCF/HSSCO
The Comprehensive Early Childhood Assessment Work Group completes an agreed upon Plan that includes plans for professional development and sharing assessment results			✓		Comprehensive Early Childhood Assessment Work Group, BBF Professional Preparation & Development Committee
Publish a <i>Guide to Vermont’s Comprehensive Assessment Plan</i> and disseminate information through 5 regional conferences			✓		AOE/BBF/DCF/HSSCO AOE as lead
Create a cadre of Master level TS GOLD trainers and coaches	✓				AOE lead
Provide onsite TS GOLD coaching and mentoring to increase educators’ using	✓	✓	✓	✓	Master level TS GOLD coaches & mentors

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assessment with fidelity					
Pay TS GOLD licenses for 2 years for ELD programs with high needs children to begin using TS GOLD	✓	✓	✓	✓	AOE
Implement new TS GOLD Birth through Grade 3 assessment with PreK-3 <sup>rd</sup> learning communities and pay licenses for 2 years	✓	✓	✓	✓	AOE
Conduct TS GOLD regional sessions for administrators	✓		✓		
Policy requiring PreK educators to demonstrate inter-rater reliability on TS GOLD phased in		✓	✓	✓	AOE/DCF
Provide 2 CLASS <sup>TM</sup> trainings for each level (Toddler, PreK, K-3) to 90 early childhood educators	✓				AOE organizes; national CLASS vendor conducts
Provide one Train-the-Trainer session for each of the 3 CLASS <sup>TM</sup> assessments		✓			AOE organizes; national CLASS vendor conducts
Each Vermont CLASS <sup>TM</sup> trainer conducts 2+ CLASS <sup>TM</sup> trainings			✓	✓	AOE organizes, VT trainers conduct

**Metrics:** Semi-annual monitoring of success in meeting identified measures.

**Rationale:**

A comprehensive and balanced early childhood assessment system is an essential component of any state system of early care, health and education. Results of appropriate assessments that are administered with fidelity inform decision making about individual children, program quality and state level strengths and needs. Over the last few years, Vermont has put in place several policies and practices that are pieces of a comprehensive assessment system; however, these efforts have not been as aligned, coordinated, nor as widely and reliability implemented as is necessary for improving outcomes for young children, especially for those with high needs.

**C2a: Working with ELDP to select assessment instruments and approaches.**

Although the components of a comprehensive early childhood assessment system are in place in some settings, the work ahead of us is to expand the system so that all components are in

place in all the required settings, to provide the training and support necessary for all who administer assessments to do so with fidelity, to provide the training and support for results to be used and shared in a way that leads to improved outcomes for children and family engagement. It is for these reasons that the first strategy in Vermont's High-quality Plan for C2 is to establish the *Comprehensive Early Childhood Assessment Work Group*. This cross-agency and stakeholder work group on early childhood assessment will develop a written state plan for identifying the purposes of each type of assessment, specifying which assessments are required in specific learning setting, creating a schedule for the timing and frequency of statewide assessments, describing how assessment data will be reported and shared across agencies and other partners (such as BBF's Information System) and with families. In addition, the *Comprehensive Early Childhood Assessment Work Group* will propose a cross-agency plan for sustaining the state's comprehensive assessment system.

A comprehensive assessment system requires assessments for different purposes. For young children the assessment system should include screening as a way to gauge development across domains and identify those children who are in need of further assessment and attention, formative assessments that allows the adult who interact with children to know how their interactions are influencing children's early learning and development and make adjustments as necessary, measures of adult-child interaction, and assessments of program quality.

### ***Developmental Screenings***

According to *Bright Futures Guidelines for Health Supervision of Infants, Children, and Adolescents, 3<sup>rd</sup> edition*, child health providers should be performing developmental screening at 9, 18 and 24/30 months. Vermont has adopted this guideline as the EPSDT periodicity schedule for Vermont's children on Medicaid.

Other programs that serve a large portion of children with high needs and conduct developmental screenings are: home visiting programs, Parent-Child Centers, programs, IDEA Part C Child Find, Early Head Start home visitors, and programs participating in the Chittenden LAUNCH grant. However, there is work to be done in the area of developmental screening. Detailed information on Vermont's High-quality Plan for improving developmental screenings can be found in section C3 of the application.

### ***Formative Assessments***

Upon passage of Act 62, Vermont's law for publicly funded universal PreK education for 3-5 year olds, an advisory group with representation from various types of early learning and development programs (e.g., Head Start, child care programs) and higher education institutions reviewed various assessment measures and selected Work Sampling and Creative Curriculum Developmental Continuum (CCDC) as the measures for tracking the progress of children in PreK. The advisory group selected these observational measures since they appeared to be in accordance with the position statement on assessment from the National Association for the Education of Young Children (NAEYC, 2003).

Two years later, when Teaching Strategies phased out CCDC, the advisory group recommended all PreK programs use TS GOLD. Head Start and Early Head Start also use TS GOLD to assess children's progress, inform instruction and communications with families. This past year, the Vermont Birth to Three Project, a privately funded initiative that pairs mentors with infant/toddler family child care providers, is piloting TS GOLD to document children's progress. Due to the pervasive use of TS GOLD, the result is that Vermont has identified a shared statewide approach and formative assessment tool for children 0-5 years of age.

TS GOLD is a developmentally appropriate, criterion-referenced system for assessing the knowledge, skills, and behaviors of children from birth through kindergarten. It blends ongoing, authentic observational assessment across 10 areas of development and learning with performance-assessment tasks for selected literacy and numeracy objectives. Extensive research has shown TS GOLD is valid and reliable for children from diverse cultures, languages, socioeconomic backgrounds, and abilities. It can be used to assess all children, including English-language learners, children who are developing typically, children with disabilities, and children who demonstrate competencies beyond typical developmental expectations. Its comprehensiveness supports strong understanding of children's progress toward kindergarten readiness and their developmental status at kindergarten entry.

With TS GOLD early childhood educators collect evidence of children's development and learning during meaningful learning experiences. They observe intentionally throughout the day; consult with family members and specialists who work with individual children; and build portfolios with observation notes, photographs, video clips, audio clips, and samples of

children's work. This process becomes part of educators' daily routine; hence, this assessment is an authentic, naturalistic method for gathering information. Early childhood educators analyze and evaluate the evidence they collected in order to respond to children and to plan instruction that is appropriate for individual children and groups of children. The online TS GOLD system has a dedicated family portal to strengthen and simplify communication with families.

TS GOLD is an appropriate tool for children from infancy through kindergarten because of its psychometric quality and alignment with state standards, the *Common Core State Standards* for kindergarten, Office of Special Education Programs outcomes, and the *Head Start Child Development and Early Learning Framework*. Additionally, TS GOLD is a seamless system for assessing children from birth through kindergarten (and soon through third grade); early childhood educators of various age-groups and classes/grades can build a shared understanding of the knowledge, skills, and behaviors that children should develop each year and can follow individual children's progress across the continuum.

Currently, Teaching Strategies is piloting TS GOLD Birth through Grade 3 with a projected implementation date of fall 2014. The expansion of TS GOLD to include the primary grades will create a seamless formative assessment system through the full early childhood continuum, a continuum that is reflected in Vermont's proposed new Vermont Early Learning Standards (see C1) and consistent with Vermont's goal of sustaining early childhood outcomes through K-3 through aligned teacher practices and shared knowledge (see Priority 4).

As a consequence of the overlaps across PreK, Head Start, and child care programs, the progress of many children with high needs between the ages of 3-5 is documented using TS GOLD. However, not all high needs children are included. The populations of children who may not be included are infants and toddlers receiving child care subsidy, and preschoolers who receive child care subsidy but are not in a qualified PreK program. Vermont's HQP is to support more programs that have children with high needs to use TS GOLD to improve child outcomes through more intentional, informed, differentiated and developmentally appropriate instruction.

All early childhood educators who use TS GOLD have received at least initial training on the purpose of this formative assessment, how to conduct child observations, collect documentation, navigate the online version of TS GOLD, and communicate findings with families. However, early childhood educators need to have deeper knowledge in order to

accurately interpret and using formative assessment data to inform practice. Additionally, educators who implement TS GOLD need to demonstrate that they are reliable in their evaluations.

### ***Measures of Environmental Quality***

The Environmental Rating Scales (Graham Child Development Institute, University of North Carolina at Chapel Hill) are a central part of the Program Practices arena of Vermont's TQRIS, initially as a self-assessment tool and later conducted by an external assessor. Refer to Section B for details on the role the Environmental Rating Scales (ERS) plays in VT STARS, and to read Vermont's HQP to enhance the reliability of ERS assessors.

### ***Measures of Adult-Child Interactions***

The Classroom Assessment Scoring System™ (CLASS™) is the most researched and widely acknowledged tool to assess the quality of adult-child interactions. It is an observation tool designed to support teachers' practices and decision making. CLASS™ is a valid assessment that describes multiple dimensions of adult-child/student interactions linked to child/student achievement and development. The CLASS™ can be used to reliably assess classroom quality for program evaluation, and provides a tool to help new and experienced teachers become more effective. CLASS™ assessments cover the age/grade span from toddler to grade 6. Using a consistent definition of quality adult-child interactions across the full continuum of early childhood increases the potential of CLASS™ becoming part of Vermont's robust comprehensive assessment system for children from infancy through third grade.

Although CLASS™ has been added to the list of state approved assessments in VT STARS, few early learning and development programs use CLASS™. Vermont's Head Start programs have conducted CLASS™ assessments over the past two years; however, few early childhood educators and administrators outside of Head Start know about or use CLASS™. Vermont's HQP for C2 includes an intentional promotion of CLASS™ across programs that support young children from infancy through grade 3. This goal appears even more urgent after the recent research study showing that CLASS™ ratings were more highly correlated with child outcomes in states' publicly funded PreK programs than with the programs' TQRIS ratings (Sabol, et. al., 2013).

**C2b: Working with ELDP to strengthen early childhood educators’ understanding of the purposes and uses of each assessment.**

As noted in the Strategies (see above), a Guide to Vermont’s Comprehensive Assessment Plan will be developed and regional meetings will be held to disseminate information about the Plan to early learning and development program administrators and early childhood educators. The plan and regional meetings will communicate what the “puzzle” of comprehensive assessment is and how all of the pieces fit together to create a whole. However, understanding the whole is not sufficient information for the early childhood educators and supervisors who will be using the assessments tools (i.e., ASQ and ASQ-SE for developmental screening, TS GOLD to assess children’s learning and development, ERS to assess early childhood environments, and CLASS™ to assess adult-child interactions). Since early childhood educators need in-depth knowledge to administer, interpret, use assessment results to inform instruction, and communicate results with families, Vermont’s HQP includes multiple and varied modes of professional development opportunities (e.g., workshops, coaching or mentoring).

**C2c: Articulating an approach for aligning and integrating assessments and sharing assessment results.**

Vermont’s HQP articulates steps that will be taken at the state level to develop a comprehensive assessment system plan. The plan will include how assessments are aligned with each other and Vermont’s Early Learning Standards, and how they are integrated into various programs (e.g., PreK) and systems (e.g., VT STARS). Concurrently with the development of the Comprehensive Assessment System, the Data Governance Committee will be developing protocols for sharing data across agencies (see E2).

Ultimately, the critical measure of whether a comprehensive assessment system is effective is by how well it works to improve outcomes for young children and their families, especially children with high needs. In order to assure families are partners in our efforts, the Comprehensive Assessment Workgroup will include evidence-based recommendations for sharing information gleaned from the implementation of the comprehensive assessments with families in its plan. Additionally, all trainings on assessment will emphasize communicating results with families.

**C2d: Training early childhood educators to appropriately administer assessments and interpret and use data.**

The Strategies and Activities included in Vermont's HQP detail a range of trainings to assure that early childhood educators appropriately administer and interpret assessments, and use the data to inform their practices. Additionally, early childhood educators need to implement the various assessments with fidelity; otherwise the results are questionable rather than helpful. In order to support early childhood educators across early learning and development settings to administer assessments, interpret and use the data appropriately, Vermont's HQP proposes training sessions AND follow-up mentoring opportunities. Simply hearing and seeing how to administer an assessment is not adequate; actually using an assessment under the guidance and with the support and feedback of a mentor will greatly enhance the early childhood educators' learning.

**C2e: Articulating guidelines and procedures for sharing assessment data and results.**

As previously mentioned, a Guide to Vermont's Comprehensive Assessment Plan will be developed and regional meetings will be held to disseminate information about the Plan to early learning and development program administrators and early childhood educators. In addition, the Plan will work in concert with the Data Governance group (see E2) to establish protocols for sharing information across agencies and with appropriate parties in a manner that is consistent with FERPA and HIPPA requirements. The importance of sharing data and results with families is discussed above.

**(C)(3) Identifying and addressing the health, behavioral, and developmental needs of Children with High Needs to improve school readiness.**

The extent to which the State has a High-Quality Plan to identify and address the health, behavioral, and developmental needs of Children with High Needs by--

(a) Establishing a progression of standards for ensuring children's health and safety; ensuring that health and behavioral screening and follow-up occur; promoting children's physical, social, and emotional development across the levels of its Program Standards; and involving families as partners and building parents' capacity to promote their children's physical, social, and emotional health;

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(b) Increasing the number of Early Childhood Educators who are trained and supported on an ongoing basis in meeting the health standards;

(c) Promoting healthy eating habits, improving nutrition, expanding physical activity, and providing information and guidance to families to promote healthy habits at home;

(d) Leveraging existing resources to meet ambitious yet achievable annual targets to increase the number of Children with High Needs who—

(1) Are screened using Screening Measures that align with the Medicaid Early Periodic Screening, Diagnostic and Treatment benefit (see section 1905(r)(5) of the Social Security Act) or the well-baby and well-child services available through the Children's Health Insurance Program (42 CFR 457.520), and that, as appropriate, are consistent with the Child Find provisions in IDEA (see sections 612(a)(3) and 635(a)(5) of IDEA);

(2) Are referred for services based on the results of those screenings, and, where appropriate, received follow-up; and

(3) Participate in ongoing health care as part of a schedule of well-child care, including the number of children who are up to date in a schedule of well-child care; and

(e) Developing a comprehensive approach to increase the capacity and improve the overall quality of Early Learning and Development Programs to support and address the social and emotional development (including infant-early childhood mental health) of children from birth to age five.

*If the State chooses to respond to this selection criterion, the State shall write its full response in the text box below. The State shall include the evidence listed below and describe in its narrative how each piece of evidence demonstrates the State's success in meeting the criterion; the State may also include any additional information it believes will be helpful to peer reviewers. If the State has included relevant attachments in the Appendix, these should be described in the narrative below and clearly cross-referenced to allow the reviewers to locate them easily.*

*In scoring the selection criterion, peer reviewers will determine, based on the evidence the State submits, whether each element of the selection criterion is implemented or planned; the quality of the implementation or plan (see the definition of a High-Quality Plan for the components reviewers will be judging); the extent to which the different types of Early Learning and Development Programs in the State are included and addressed; and the extent to which the unique needs of the State's special populations of Children with High Needs are considered and addressed. The State is responsible for providing clear and detailed information to assist the peer reviewers in making these determinations.*

*Additionally, States must provide baseline data and set targets for the performance measures under (C)(3)(d).*

Evidence for (C)(3)(a):

- To the extent the State has established a progression of health standards across the levels of Program Standards that meet the elements in selection criterion (C)(3)(a), submit--
  - The progression of health standards used in the Program Standards and the State's plans for improvement over time, including documentation demonstrating that this progression of standards appropriately addresses health and safety standards; developmental, behavioral, and sensory screening, referral, and follow-up; health promotion including healthy eating habits, improved nutrition, and increased physical activity; oral health; social and emotional development; family involvement and capacity-building; and health literacy among parents and children;

Evidence for (C)(3)(b):

- To the extent the State has existing and projected numbers and percentages of Early Childhood Educators who receive training and support in meeting the health standards, the State must submit documentation of these data. If the State does not have these data, the State must outline its plan for deriving them.

Evidence for (C)(3)(c):

- Any supporting evidence the State believes will be helpful to peer reviewers.

Evidence for (C)(3)(d):

- Documentation of the State's existing and future resources that are or will be used to address the health, behavioral, and developmental needs of Children with High Needs. At a minimum, documentation must address the screening and referral of and follow-up for all Children with High Needs, and how families will be engaged in the process; how the State will promote the participation of Children with High Needs in ongoing health care as part of a schedule of well-child care; how the State will promote healthy eating habits and improved nutrition as well as increased physical activity for Children with High Needs; and how the State will promote health literacy for children and parents.

Evidence for (C)(3)(e):

- Any supporting evidence the State believes will be helpful to peer reviewers.

**Section C3: Identifying and addressing the health, behavioral and developmental needs of children with high needs to improve school readiness.**

**Abstract:**

Vermont is committed to helping all its children, particularly those with high needs, achieve

success in school and life. In this section, we build upon our existing robust systems to create additional supports to improve school readiness. These include implementing a home visiting system with array of evidence-based models, offering child care health consultation services with special focus on nutrition and physical activity; implementing the Help Me Grow framework, which offers a population-based approach to the early detection of children at-risk for developmental and behavioral problems and their linkage to programs and services; and multiple strategies to strengthen the capacity of early care and education programs to improve the social and emotional outcomes of young children and address challenging behavior. Activities in C3 relate to Project Budget #11, #12, #13, and #14.

**C3a: Establishing a progression of standards for ensuring children’s health and safety.**

**High-quality Plan Summary**

**Goal:** Vermont has established a progression of standards for ensuring children’s health and safety with the adoption of *Bright Futures: Guidelines for Health Supervision of Infants, Children and Adolescents, 3<sup>rd</sup> edition*. Vermont’s early care and education programs follow *Caring for our Children* (2011), the national health and safety performance standards developed by the American Academy of Pediatrics. To ensure that health and behavioral screening and follow-up occur, to promote children’s physical, social and emotional development across the levels of the program standards, and to involve families as partners and to build their capacity, Vermont proposes to implement an evidence-based statewide home visiting system.

Vermont has a long history of home visiting services, including Early Head Start and Head Start. Since 2010, Maternal, Infant and Early Childhood Home Visiting (MIECHV) and Linking Action for the Unmet Needs in Children’s Health (LAUNCH), Vermont has been able to implement several evidenced-based programs. Home visiting services have been shown to improve child and family outcomes. The literature suggests that high quality home visiting programs are: voluntary; family centered; staffed by well trained and supervised staff; coordinated with other services; and grounded in specific goals with data, quality improvement, and evaluation to document results.

**Outcomes:**

- During each year of the funding period, increase the number of high needs children

receiving home visiting services by 10% from baseline (2013);

- By 2017, increase by 10% the percentage of children with high needs who are up-to-date in a schedule of well child care;
- During each year of the funding period, increase the number of children with high needs screened for both behavioral and developmental concerns across child serving sectors by 15% from baseline (2013); and

**Strategies:**

- Evidence-based home visiting achieved through adherence to models (described below), training, and ongoing quality assurance;
- Initiate or expand the following evidence-based home visiting models throughout the State:
  - Nurse Family Partnership;
  - PAT;
  - MECSH;
  - Early Start (New Zealand); and
  - Early Head Start.
- Ensure fidelity to evidence-based home visiting models through training, technical assistance and ongoing quality assurance.
- Tracking outcomes via ongoing data collection and analysis for six benchmark areas of home visiting:
  - Maternal and infant health;
  - Non-accidental and accidental injury prevention;
  - Domestic violence prevention;
  - Kindergarten readiness;
  - Economic self-sufficiency; and
  - Referral to community resources

**Table 17: Timeline and Parties Responsible**

Key Activity	Year				Parties Responsible
	2014	2015	2016	2017	

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Hire Home Visiting Data Analyst	✓				
Hire Home Visiting Coordinator at DCF	✓				DCF in collaboration with VDH
Sign agreements with Early Start and MEC SH	✓				DCF
Identify organizations to host Early Start and MEC SH programs	✓				DCF and VDH
Bring Early Start and MEC SH trainers to Vermont to train trainers from identified host organizations	✓				DCF and VDH
Roll out Early Start and MEC SH in four regions		✓			DCF and VDH
Roll out Early Start and MEC SH in four additional regions			✓		DCF and VDH
Roll out Early Start and MEC SH in remaining four regions				✓	DCF and VDH
Provide continuous program oversight, data analysis, and quality improvement		✓	✓	✓	DCF and VDH

**Metrics:** Ongoing monitoring of quality indicators and success in meeting Outcomes.

**Rationale:**

Vermont has a long history of offering home visiting services to pregnant women and families with young children. In 1998, several of the MCH home visitation programs were organized into the Vermont Department of Health’s Healthy Babies program for pregnant women and infants. Healthy Babies was Vermont’s first attempt at organizing home visitation into a coordinated and collaborative system between state services and various community agencies. The program used elements of Hawaii’s Healthy Start program and also Nurse Family Partnership. In 2000, the program was reorganized to include services for children up to age 3 and was renamed Healthy Babies, Kids, and Families (HBKF). In 2004, HBKF was again re-worked to encompass the programs of HBKF (nursing and family support services), Children’s Upstream Services (CUPS, children’s mental health), and Family, Infant Toddler (Part C/Early Intervention). This formed the core of Children’s Integrated Services (CIS), which is now the

main statewide system for coordinating referrals, services, and funding for pregnant women and families with young children.

Also, Early Head Start, an evidenced-based home visiting model for pregnant women, has had a long-term presence in the State. However, due to lack of funding and capacity, it is estimated that the program can only reach less than 5% of its eligible families.

Other home visiting services – largely developed by community-based organizations services e.g. Parent Child Centers, Home Health Agencies and others, have not always adhered to evidence-based models or been offered statewide. They have applied evidence-informed strategies.

The Maternal, Infant, and Early Childhood Home Visiting (MIECHV) initiative offered Vermont the opportunity to systematically fund community based organizations to offer comprehensive and evidenced-based home visiting services.

In 2010, to meet MIECHV requirements, the Vermont Department of Health (VDH), in collaboration with the Department for Children and Families (DCF) conducted a home visiting needs assessment. The assessment indicated that there was a lack of evidenced based home visiting programming (except for the limited scope of Early Head Start) and that there was a need to strengthen home visiting services, especially nurse-based services. The needs assessment also ranked the 14 counties of the state by “need” according to the MIECHV grant prescribed measures. Thus, using the MIECHV funds, Vermont began implementing the approved evidenced based model of Nurse Family Partnership (NFP), beginning in the most needy counties as determined by the MIECHV rankings. By January 2014, via MIECHV funding (no state or other funds are used for this program), eleven counties are participating in the NFP program. A key component of implementing NFP is that it is embedded in the CIS system of care, making NFP an additional resource available to families accessing CIS services.

In 2012, the Vermont Department of Health, in partnership with Building Bright Futures received a SAMHSA grant for Linking Action for Unmet Needs in Children’s Health (LAUNCH). The purpose of the grant is to create a strength-based, family-centered, culturally competent, and sustainable community system for promoting young child wellness and the social and emotional health of children and families in Chittenden County, Vermont’s most populous as it includes the state’s largest city, Burlington. Project LAUNCH home visiting services are also

provided through the existing CIS system.

Project LAUNCH includes the implementation of Parents As Teachers (PAT), an evidenced-based home visiting program to strengthen parenting skills and promote child development knowledge of caregivers. This program will be initially offered to families in Chittenden County. Additional funding will be needed to expand statewide to interested communities.

The MIECHV grant funds and the national federal support for establishing home visiting models has sparked a new energy in Vermont for improving home visiting programs and systems. Funding from the Pew Trust Home Visiting Campaign has provided a local consultant to facilitate the Vermont Home Visiting Alliance, a membership organization including State agencies providing early childhood services; parent child centers home health agencies; Head Start; and business leadership. This organization is working to establish and support systems of evidenced-based home visiting models statewide.

In 2013, the Alliance was instrumental in the crafting and passage of Act 66, legislation directing the state's agencies and home visiting stakeholders to establish quality standards for programs, to develop measures for program outcomes, and to create a coordinated system to ensure families in need have access to the most appropriate program.

The implementation of the currently available home visiting models -- NFP, Early Head Start, and PAT -- has resulted in planning efforts to offer comprehensive evidenced-based models and approaches to community organizations statewide. Service gaps have been identified, such as for pregnant women who would benefit from services but do not fit the criteria for NFP.

Two additional models have been identified as ideal for adding to Vermont's burgeoning menu of evidenced based services for children and families: (1) The Maternal Early Childhood Sustained Home-visiting (MECSH) program that provides nurse home visitors for pregnant women and families who are at risk for poor health and development outcomes. This program is viewed as complementary to NFP; (2) The Early Start (New Zealand) program for families with children birth to age five has been identified as a good match for replication by Parent Child Centers to complement their current evidence informed home visiting services. Early Start works to create a partnership with the families to improve child health, child development and school

readiness, reductions in child maltreatment and positive parenting practices.

**C3b & C3c (Combined): Increasing the number of early childhood educators who are trained and supported in meeting the health standards and promoting health eating habits, improving nutrition, expanding physical activity, and providing information and guidance to families to promote healthy habits at home.**

**High-quality Plan Summary**

**Goal:** Vermont's plans for C3b and C3c are closely linked, and thus we have combined these sections of the application. Vermont's high-quality plan for the combined sections is to ensure children with high needs have access to high-quality child development programs that incorporate health, safety, nutrition and physical activity best practices by well trained and supported early childhood educators. To achieve this goal, Vermont will build upon its Healthy Child Care Vermont (HCCVT) system and the robust health and safety standards built into its licensing requirements for all Early Learning programs by enhancing and expanding Child Care Health Consultation (CCHC) services. These consultants will work with a network of providers to meet established licensing health standards, progressive standards as outlined in Vermont's QRIS, Head Start, Child Adult Care Food Program (CACFP), Vermont Early Learning Standards (VELS) and currently emerging health, safety, nutrition and physical activity best practices for the field as identified in *Caring For Our Children* (2011) standards. Literature including studies of Nebraska CCHC services (NE DHHS, 2009) supports the effectiveness of the CCHC model. CCHC services will include:

- A web-based platform for accessing health and safety information;
- A warm-line call option for general health and safety consultation; and
- A network of Child Care Health Consultants to provide onsite technical assistance, help developing policies and environments to promote children's health and development and health training opportunities for early childhood educators to promote best practices for high-quality early care and education programming with special attention to nutritional and physical activity standards.

**Outcomes:**

- By 2014, develop a warm-line call option for general health, safety, and nutrition

consultation available to all Vermont early care and education programs, capable of providing 750 encounters per year;

- By 2014, increase the number of Child Care Health consultants trained in the National Training Institute model of child care health consulting to 4 statewide consultants;
- During each year of the funding period, increase the number of early childhood educators by 20% from baseline (2013) who are trained by CCHC to successfully implement health, safety, nutrition and physical activity standards as required by licensing and promoted through Vermont's QRIS, VT STARS;
- During each year of the funding period, increase the number of high needs children in early learning and development programs that utilize CCHC services by 20% from baseline (2013);
- By 2015, implement a health and safety platform via Help Me Grow (see C3d) and make it available to all Vermonters;
- During each year of the funding period, increase the number of high needs children in early learning and development programs that participate in CACFP by 10% from baseline (2013) (see B4c2);
- During each year of the funding period, increase the number of early childhood educators who are trained and supported in meeting the health standards by 10% from baseline (2013) (see D2d2).

**Strategies:**

To ensure that Vermont's early childhood educators are trained and supported on an on-going basis in meeting the health, nutrition and physical activity standards as required by licensing and promoted through VT STARS Vermont will implement these key strategies:

- Implement a web-based platform that will help providers and families navigate the different agencies, partners, and coordinating systems for regulations, best practices, and referrals;
- Establish and promote a warm-line call option for general health and safety consultation available to all Vermont early care and education programs;

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- Train four child care health consultants in the National Training Institute model of child care health consulting to provide 600 encounters per year;
- Provide coordinating support and oversight for the web-based platform, warm-line and CCHC consulting services by providing appropriate coordination staff to be housed in the Maternal Child Health Division.
- Link CCHC services to Vermont’s early childhood professional development system through MATCH (Mentoring, Advising, Teaching, Coaching/Consulting and Helping (see D2 and Appendix XII).
- Link CCHC services to current state initiatives supporting nutrition and physical activity in early development and education settings including but not limited to: CACFP, Hunger Free Vermont (HFV), I Am Moving I am Learning, Eat Well Play More (EWPM), Vermont Birth – Three (VB3) and Step Ahead Recognition System (VT STARS).

**Table 18: Timeline and Parties Responsible**

Key Activity	Year				Parties Responsible
	2014	2015	2016	2017	
Hire HCCVT Coordinator	✓				VT MCH and CDD/HCCVT
Develop and implement Warm-line	✓	✓	✓	✓	VT MCH, CDD/HCCVT and HCCVT Coordinator
Hire and Train CCHCs	✓				VT MCH, CDD/HCCVT and participating agencies
Link CCHC to Vermont Early Childhood Professional Development System via MATCH	✓	✓	✓	✓	HCCVT Coordinator, NLCDC
Coordinate Web-based platform development and implementation with HMG (C3d)	✓	✓	✓	✓	HMG National Office; Management Committee; Project Manager, HCCVT Coordinator, Participating agencies and providers;
CCHC and HMG VT data collection and evaluation		✓	✓	✓	HCCVT Coordinator; HMG Project Manager participating agencies and providers
Link CCHC to HFV&VB3 to promote inclusion of Family Child Care Providers		✓	✓	✓	HCCVT Coordinator, VB3, CCHC, Participating agencies and providers;

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in CACFP					
Link CCHC to HFV, IMIL, & EWPM to promote inclusion of Center-based Child Care Providers in CACFP		✓	✓	✓	HCCVT Coordinator, CCHC, Nutrition and Physical Activity Committee, EWPM, participating agencies and providers

**Metrics:** Semi-annual monitoring of success in meeting Outcomes targets.

**Rationale:**

The Healthy Child Care Vermont (HCCVT) initiative was established in 1996 through collaboration between the Vermont Department of Health Department (VDH) and the Child Development Division (CDD) of the Department for Children and Families (DCF). A public health nurse served each of twelve Agency of Human Services (AHS) regions in the State. The nurse functioned as the designated child care health consultant for the local VDH district office; her activities included health consultation and training. In order to support the continuation of HCCVT in the face of shifting resources in 2009, the goals and objectives of HCCVT were embedded into Vermont’s Early Childhood Comprehensive Systems (ECCS) program. To assure ongoing connections with public health and child health providers, Vermont’s Title V Director, VDH, Breena Holmes, M.D., is a consultant for this program. In addition, the State Advisory Council’s Nutrition and Physical Activity Committee is chaired by the ECCS coordinator in consultation with the Fit and Healthy leadership of the Vermont Department of Health.

In 2010, the Child Development Division, with support from ECCS, entered into a grant agreement with Northern Lights Career Development Center (NLCDC) (see D2) to continue the work of HCCVT. NLCDC has historically been involved in supporting Vermont’s VT STARS program, Vermont’s TQRIS. The grant agreement proposed activities that would support the ongoing work of HCCVT in the following manner:

- A nurse consultant/trainer was hired, attended the National Training Institute in North Carolina, and returned to provide training in Vermont.
- The nurse consultant/trainer developed a standardized health and safety curriculum to be used consistently across the state to train child care providers in basic health and safety components, including prevention of infectious diseases, injury

prevention, nutrition and physical activity.

- A second nurse consultant/trainer was hired to expand the training statewide. Trainings were provided by the two nurses throughout most of the State, both face-to-face and virtually.
- Medication administration training was the main focus of work for HCCVT in 2011, and VDH and CDD successfully partnered with the Vermont Chapter of the American Academy of Pediatrics to respond to the AAP's request for proposals (July, 2011) for the *Healthy Futures: Improving Health Outcomes for Young Children Curriculum for Medication Administration in Early Education and Child Care Settings Implementation Project*.

These initiatives have strengthened Vermont's efforts to reinvigorate our health consultation in childcare. Through Vermont's Early Learning Challenge application, VDH and CDD seek additional funding to support this network of health professionals in continuing to provide training and technical assistance for Vermont's early care and education providers.

The Healthy Child Care Vermont (HCCVT) initiative seeks to scale up and incorporate Child Care Health Consultant (CCHC) services as part of the support system it offers to early care and education providers. Funds under this application, if awarded, will flow through the Vermont Maternal Child Health (MCH) and Child Development Divisions (CDD) collaboratively to support this initiative. The CDD's Early Childhood Comprehensive Systems (ECCS) Coordinator will work in concert with a new HCCVT Coordinator housed in MCH to ensure the full array of HCCVT services are coordinated and supported.

Vermont supports a progression of training and professional development opportunities aimed at supporting educators to effectively understand and implement the state's health and safety standards while promoting programs' effectiveness in responding to the developmental needs of children and families. Northern Lights Career Development Center (NLCDC) is the cornerstone agency that assists educators in accessing professional development and support initiatives along the continuum of their careers. NLCDC ensures an alignment of Vermont's professional development opportunities with a progression of standards including state licensing standards, VT STARS, Vermont Early Learning Standards and CACFP.

NLCDC offers a fundamentals course that lays the foundation for prospective educators by

focusing on Vermont's health and safety standards. This course includes 45 hours of coursework of which 6 hours are focused on specialized childcare to meet the needs of high-risk children. This course is required to achieve a Level I early childhood certificate and is a requirement for providers seeking a Child Care Apprentice certificate. NLCDC also offers a more advanced course with 80 hours of additional training geared towards a Level II certificate.

Professionals who have experience in the field and who seek to attain a Bachelor's Degree, endorsement and/or Masters level coursework in Early Childhood or Early Childhood Special Education can take advantage of Vermont's Higher Education Collaborative: a cohort of collegiate level trainings geared toward Early Childhood Educator Licensing and endorsement goals. Course work focuses on advanced child development, assessment, curriculum development, early intervention, special education and family centered collaboration/consultation services.

A range of other prevention and promotion-based trainings are available statewide for early care and education programs. These include:

- Multi-Tiered System of Supports (MTSS): to address children's social-emotional health and development. Trained by CSEFEL and CELL in the Pyramid model, Vermont has a cadre of trainers able to deliver these professional development opportunities to providers statewide. Entering its eighth year, MTSS will incorporate early literacy and early numeracy competencies, promote high-quality inclusive environments on a continuum for infants and children through grade three and promote children's successful engagement in family, neighborhood, community and school (see C3e).
- Parents As Teachers (PAT via Project LAUNCH): to address family partnerships across settings that promote holistic health and development for children. This relationship-based model is being implemented through Vermont Project LAUNCH to reach high-risk, high needs children and families at the earliest ages possible in order to assist families with service planning, access and coordination.
- Healthy Child Care Vermont (HCCVT): to address provider needs in the areas of general health and safety regulation and implementation, medication administration training, nutrition and physical activity consultation, program policy development,

injury prevention and emergency preparedness planning.

- I Am Moving, I Am Learning (IMIL): to address children’s physical health and well-being. This program seeks to support providers in gaining the knowledge and tools they need to intentionally plan for children’s physical activity while in care outside the home and to promote healthy eating choices for young children.
- Eat Well, Play More Vermont!
  - With a grant from Robert Wood Johnson and the Y of the USA, Eat Well, Play More Vermont is a collaborative of diverse statewide partners promoting policy, systems, and environmental change to address childhood obesity in Vermont. The purpose of the program is to create environments for children and families that support active living and healthy eating where they live, learn, work and play. Our strategies include: (a) improving nutrition and increasing physical activity in school and out-of-school settings; (b) improving nutrition and increasing physical activity in early care and education settings; and (c) increasing access to high-quality, affordable foods through pricing strategies and availability in retail outlets.
- Hunger Free Vermont Trainings:
  - Child Nutrition Training: designed to meet the needs of childcare, education and food service professionals seeking to maximize access to healthy meals for Vermont’s children through sustainable programming. Using elements of *The Learning Kitchen* curriculum, we will collaborate with Hunger Free Vermont program to integrate these training into our healthcare consultation role.

As previously stated, the proposed CCHCs will augment the existing training and educational opportunities through:

- A web-based platform for accessing health and safety information;
- A warm-line call option for general health and safety consultation; and
- A network of Child Care Health Consultants to provide onsite technical assistance, help developing policies and environments to promote children’s health and development and health training opportunities for early childhood educators to

promote best practices for high-quality early care and education programming with special attention to nutritional and physical activity standards.

During the first year of funding, the HCCVT Coordinator at MCH will be hired and a health and safety warm-line call system will be developed and implemented. The call system consultation services will be available by the end of 2014 to the approximately 9,000 Vermont early care and education professionals serving Vermont's young children. In addition, the HCCVT Coordinator will work collaboratively with the Help Me Grow (HMG) Management Committee (see C3d) to ensure the new web-based platform incorporates a health and safety module to be accessible to all Vermonters. Design and implementation of the HMG service is slated to occur between 2014 and 2015.

All CCHCs will be linked to Vermont's early childhood professional development system at Northern Lights Career and Development Center (NLCDC) through the MATCH framework (See D2) and will be accessible to the approximately 600 early care and education programs participating in Vermont's TQRIS, VT STARS.

In subsequent funding years, the warm-line and HMG web-based services will be updated and maintained, and will be linked to additional Vermont early childhood system components. In particular, CCHC will link with Vermont Birth to Three (VB3), Eat Well Play More and the State Advisory Council's Nutrition & Physical Activity committee. These entities seek to educate, promote and provide on-going support for educators and programs participating in the Child Adult Care Food Program (CACFP), I Am Moving I Am Learning (IMIL) and Hunger Free Vermont nutrition and physical activity programs.

**C3d: Leveraging existing resources to meet targets to increase the number of children with high needs who are screened, referred for services, and participate in ongoing health care.**

**High-quality Plan Summary**

**Goal:** Vermont seeks to increase population level, cross-sector collaboration in order to promote the optimal healthy development of all Vermont children. In order to reach this goal, it is imperative that Vermont focus on high needs children at-risk for adverse developmental and behavioral outcomes (as opposed to an exclusive focus on children with delays and disorders). The Help Me Grow (HMG) framework, a widely used and validated model, offers a population-

based approach to the early detection of children at-risk for developmental and behavioral problems and their linkage to programs and services. An aligned birth-to-eight approach to school readiness includes addressing the health and development needs of the whole child; this approach prioritizes the physical, social and emotional development of the child, beginning at birth, as a foundation for later academic skills. Implementing the HMG framework in Vermont will:

- Promote guideline-based developmental care in all child serving settings in Vermont by providing routine surveillance;
- Develop a network of trained professionals to perform recommended developmental and autism screening; and
- Connect children and families with a concern or with a developmental delay to Children's Integrated Services (CIS), which provides evaluation and intervention services.

**Outcomes:**

- During each year of the funding period, increase the number of children with high needs screened for both behavioral and developmental concerns across child serving sectors by 15% from baseline (2013);
- During each year of the funding period, increase the number of children with high needs referred for services by 20% from baseline (2013);
- During each year of the funding period, increase the number of children with high needs who participate in ongoing health care as part of a medical home by 5% from baseline (2013); and
- During the funding period, increase the number of families equipped with the knowledge, skills and support to access community-based services through a statewide system by 25% from baseline, established through a survey conducted prior to the implementation of the program (2013).

**Strategies:**

To achieve universal developmental screening in Vermont, we must align across several settings:

- Medical home;
- Home Visiting programs (MIECHV, PAT and state funded, including Parent Child Centers);
- Children’s Integrated Services/IDEA Part C/Child Find/Early Essential Education;
- Early Head Start and Head Start; and
- Early childhood educators including those in the Early Multi-tiered Support System (MTSS) program (see C3e).

To assure this alignment, key strategies will include:

- Provide regional professional development opportunities to early childhood educators and other related professionals to administer, interpret, use and communicate results of Ages and Stages Questionnaires (ASQ and ASQ-SE);
- Support the set up and training of an additional tab for developmental screening on the Department of Health Child Health Profile (currently immunization, lead, newborn screening and hearing screening results). Multiple providers will be able to enter and access this central repository for developmental screening results; and
- Create a cross-agency work group on developmental screening to coordinate the training (administration and interpretation) and communication. This group will also work in consultation with the new Prenatal through Grade 12 Data Governance Council (see E2) on sharing of these data.

**Table 19: Timeline and Parties Responsible**

Key Activity	Year				Parties Responsible
	2014	2015	2016	2017	
Technical Assistance from HMG National Office	✓				HMG National Office; VT HMG Management Committee
Establishment of HMG VT Management Committee	✓				VT participating agencies and providers
Hire HMG VT Project Manager	✓				Management Committee
Design of HMG VT program and systems	✓				HMG National Office; Management Committee; Participating agencies and providers; Project Manager

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Implement HMG VT		✓	✓	✓	Management Committee; Project Manager
HMG VT data collection and evaluation		✓	✓	✓	Project Manager; participating agencies and providers
Hire additional project staff			✓	✓	Project Manager

**Metrics:** Semi-annual monitoring of success in meeting outcomes.

**Rationale:**

Developmental surveillance and screening of children and adolescents is a Vermont priority. Our *Healthy Vermonters 2020* goal is to increase the percentage of children who are screened for developmental delay before age 24 months and who are evaluated before age 36 months. The American Academy of Pediatrics *Bright Futures Guidelines* recommend early and continuous developmental surveillance and screening for all children. Standardized screening with a validated tool is recommended at ages 9, 18, 24 or 30 months. Screening for autism is recommended at 18 and 24 months.

Under the Affordable Care Act, developmental screening up to age 3 and autism screening are mandated preventive services (fully covered by health plans). Developmental screening is an essential component of Vermont’s child health work including Early Periodic Screening Diagnosis and Treatment (EPSDT) mandate, Blueprint for Health Care Reform Initiative, HRSA Title V Block grants, U.S. Department of Health and Human Services Head Start and Early Head Start grants, the Individuals with Disabilities Education Act (IDEA), and SAMHSA Project LAUNCH as well as Early Essential Education and Child Find. Developmental screening is an essential population health indicator; screening reaches vulnerable populations including children with high needs. Early recognition and timely diagnosis of the developmental concerns of young Vermont children is part of the current Children’s Integrated Services vision as well as the VT Maternal and Child Health (MCH) and the Building Bright Futures strategic plans.

Making sure our youngest and most vulnerable children, often culturally diverse and high needs, are screened and given support early has emerged as a priority across this country. Nationally, agencies are teaming up in a coordinated effort to encourage responsible developmental and behavioral screening and follow up. A new developmental and behavioral

screening initiative, targeting diverse cultures, will soon be launched.

Like our national leaders, we too, in Vermont, are recognizing the need to team up across health, human service, and education sectors to reduce the number of high needs children, particularly those from our own refugee populations, that are currently eluding early detection. . This need was highlighted by a VT Department of Health conference convened last year entitled, *Considering Culture in the Screening and Assessment of Young Children with Developmental Concerns*. Almost 200 health and education professions came together to improve their knowledge skills around bilingual language acquisition, to better understand the cultural limitations of screening and assessment tools, and to learn how to improve their cultural competence for effective treatment and intervention planning. (See attached conference data summary for more information.) Linguistic and cultural diversity can compound existing difficulties in linking high needs children to screening and services: language barriers affect access to resources, children may have behavioral or developmental concerns but are not eligible for Early Intervention due to the limitations of assessment tools, or they may be “waiting” to be evaluated or receive appropriate services. We will utilize the Help Me Grow (HMG) framework to close gaps and barriers due to cultural competency issues that currently exist in Vermont. We will also use the HMG framework to disseminate any new or adapted screening tools developed for diverse cultures by our national partners and will coordinate statewide efforts to identify and link children from diverse cultures to services.

With Help Me Grow as the coordinating hub, our Vermont Project LAUNCH will provide specific training to providers in administering developmental and behavioral screening to children who are linguistically and culturally diverse. Projects LAUNCH training targets early care and education providers and home visitors. These providers will conduct screening in diverse settings (such as child care centers and communities) in order to reach underserved populations. Additionally, Project LAUNCH partners will be utilizing child development resources developed by the Center for Disease Control and Prevention’s “*Learn the Signs. Act Early.*” program (LTSAE). These resources are research-based; field tested with several cultures for family-friendliness and appropriateness, and translated into Spanish and several other languages. In Vermont, we will be translating some of these LTSAE materials into several refugee languages. The CDC’s LTSAE materials are designed to bring awareness to parents and

providers about typical and atypical child development and will additionally be distributed statewide through the Help Me Grow call center system.

While much work and progress has been made towards universal developmental screening, a key element is missing. Presently, Vermont does not have a repository to coordinate and track developmental screening results and referrals across multiple settings and providers. As a result, screenings may not take place, duplicate screenings may occur, referrals may not always be coordinated and early intervention may not happen at the earliest possible age. Further, Vermont lacks the means to easily monitor progress and link universal developmental screening data with other aspects of its early childhood comprehensive service and assessment system.

The proposed Help Me Grow (HMG) program would augment and expand the current Vermont system, offering developmental surveillance, screening, and care coordination with linkages to community-based programs and services up to age 8. The HMG preventative approach to school readiness would integrate child health, early care and education, and family support services, offer cost efficiencies through blended funding across state agencies and programs, and monitor outcomes and results via a common data set.

- HMG serves as an umbrella for coordinating early childhood health, social and educational services, ensuring that all programs and sectors are benefiting from an integrated approach to meeting children's needs.
- HMG is a systems change strategy that increases effective collaboration across child-serving settings in order to improve access to existing services and resources.
- HMG has been designed with an emphasis on helping families navigate the different agencies and partners in the community, and coordinating systems for referral and follow up to ensure complete coverage. Through the use of a centralized telephone access point, this evidence-based model provides coordination across early learning and development programs while strengthening the effectiveness of child health practices as medical homes.

A variety of public and community partners would participate in the development and implementation of HMG, and serve on a Vermont Management Committee, including:

- Department of Health (Maternal and Child Health Division, including Children with Special Health Needs)

- Department for Children and Families (Child Development Division, including Children’s Integrated Services)
- Agency of Education
- Building Bright Futures State Council
- Vermont 211
- Project LAUNCH partners
- Parent Child Center Network

HMG National generates an annual Common Indicators Data Report for HMG affiliated states that demonstrates the impact of HMG. Data sharing agreements with CIS and other agencies, including the Vermont Department of Health Child Health Profile Universal Developmental Screening Repository, will facilitate HMG data collection and reporting.

**C3e: Developing a comprehensive approach to increase the capacity and improve the over quality of ELDP to support and address the social and emotional development of children from birth to age five.**

**High-quality Plan Summary**

**Goal:** Vermont seeks to strengthen the capacity of early learning and development programs to improve the social and emotional outcomes of young children and address challenging behavior, particularly for children with high needs. Using a comprehensive approach for professional development, Vermont will target early childhood programs with Children’s Integrated Services (CIS) Specialized Child Care status, Early Childhood Mental Health, Public PreK, Head Start and home-based settings) and promote the use of the evidence based Pyramid model to support social and emotional well-being and competence. Also, add Early Multi-tiered System of Supports (Early MTSS) to enhance systems development at the state, regional and local level in order to promote desired outcomes that will lead to the success of Vermont’s children in school and beyond.

**Outcomes:**

- During the funding period, raise public awareness (state, regional and local) by 35% from baseline (2014) regarding the importance of children’s social emotional well-being and early identification and intervention of children with high needs inclusive

of children with disabilities. Establish baseline via a survey conducted at the beginning of the funding period.

- During the funding period, build the capacity and effectiveness of the Building Bright Futures Regional Councils (see A1) to support targeted early learning and development programs within each region to implement the FEL Pyramid.
- During the funding period, increase by 25% from baseline (2013) the number of Early MTSS and K-12 MTSS targeted kindergarten and early learning and development programs per region.
- By 2017, increase by 35% from baseline (2013) the number of early childhood practitioners who are competent in promoting young children's social skills and preventing and addressing challenging behavior via the TPOT and TPTOES assessments.
- By 2017, train a cadre of 8-10 state level Early MTSS trainers, including at a minimum, 2 Early MTSS trainers and 2 practice coaches per BBF region (12 regions across the state) in the FEL Pyramid model.
- By 2017, increase 40% from baseline (2013) the number of children who participate in targeted early learning and development settings who demonstrate age appropriate social and emotional skills (based on Vermont's Readiness Kindergarteners Survey, Early Childhood Outcomes Reporting specific to children with disabilities and served under IDEA Part B and C, ASQ-SE, and Teaching Strategies Gold).
- By 2017, increase the involvement of early childhood mental health professionals as practice coaches through the Early MTSS professional development system as measured by recruitment of 12 individuals (minimum 1 per region).
- During the funding period, decrease by 50% from baseline (2013) behavior symptoms resulting in child expulsions from targeted early learning and development settings.
- During the funding period, increase by 35% from baseline (2013), parents who (a) participate in trainings at regional and local levels; and (b) parents who report positive change and increase in social skills based on a parent satisfaction survey.

**Strategies:**

Vermont will implement 8 key strategies:

- Convene a RTT Early MTSS Leadership Team to scale up and expand current SPDG Early MTSS and K-12 MTSS work. The RTT Early MTSS team will have cross-sector state and regional membership including Project Launch, SPDG K-12 MTSS, Early Head Start/Head Start, community-based child care, Public PreK, early childhood mental health, IDEA Part C and B programs, Help Me Grow, Parent Child Centers, and others.
- Collaborate with, and provide systems support to, each of the 12 Building Bright Futures Regional Councils (see A1) in order to develop a common framework, including a shared understanding and ‘buy-in’ of RTT Early MTSS and its processes.
- Each regional BBF council will identify at least 2 local high-quality early learning and development programs and determine each program’s ‘readiness’ (utilizing the Early MTSS Program Inventory) for Early MTSS adoption and implementation of Pyramid Model evidence based practices.
- Through the Governor’s Early Childhood Framework and Action Plan and related activities, raise awareness at the state, regional and local levels to support the urgency of and need for universal developmental screening of health/nutrition and social emotional well-being to increase the likelihood of early identification and intervention for children with high needs. (See C3a).
- Recruit, select and train a group of state level RTT Early MTSS trainers, BBF system coaches and site-based practice coaches to increase the capacity and expertise of providers in each BBF region.
- Provide initial and ongoing training to regional practice coaches regarding the reliability of the Teaching Pyramid Observation Tool (TPOT), an evaluation tool that measures teacher implementation evidence based practices at each tier of the Pyramid Model.
- For each cohort, the regional network of trainers/coaches will conduct an initial and on-going series of Early MTSS mini-modules for each tier of the Pyramid model following the ‘Train-Coach-Train (TCT)’ training module.

- For each cohort, conduct parent trainings at the local level on Pyramid Parent Modules via regional training teams, inclusive of a parent member.
- Reliable, ongoing data collection will contribute to inform all levels of the Early MTSS organizational structure (state, region and local levels). Data will be exchanged via feedback loops between state, region and local levels and analyzed to inform on-going support, evaluation, continuous program improvement and ultimate sustainability of the model.

**Table 20: Timeline and Parties Responsible**

Key Activity	Year				Parties Responsible
	2014	2015	2016	2017	
Establish statewide leadership and planning teams	✓				VT Agency of Education, VT Department of Health, VT Department for Children and Families, Building Bright Futures State and Regional Councils, Project Launch and K-12 MTSS
Hire project manager	✓				AOE Lead
Recruit and train cadre of trainers and coaches	✓	✓	✓	✓	AOE Leadership Team
Develop and implement Governor’s EC Public Awareness Campaign (health/social emotional well being)	✓	✓			Leadership Team, Project Manager
Convene information sessions with BBF state director and regional BBF councils	✓	✓	✓	✓	Project Manager and selected Leadership team members
BBF Councils adopt five key components of Early MTSS to support targeted early learning and development program readiness	✓	✓	✓	✓	Leadership Team, 12 BBF Regional Councils
Early learning and development programs identified in each region	✓	✓	✓	✓	BBF regional councils
Conduct Train-Coach-Train PD series; Utilize already established Early MTSS Pyramid Model evidence base practices, materials	✓	✓	✓	✓	State, regional and program level

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and resources as foundation					
First regional training conducted; subsequent trainings per cohort year	✓	✓	✓	✓	Leadership team and project manager, trainers
Conduct Parent Workshops at regional and program level: Utilize already established Early MTSS Parent Pyramid Model evidence based practices, materials and resources for regional and program parent workshops	✓	✓	✓	✓	State, regional and program partners
Quality improvement and evaluation processes established and implemented	✓	✓	✓	✓	All participants
Regularly scheduled “train the trainer” events		✓	✓	✓	AOE, Leadership Team
Additional programs and coaches identified and trained		✓	✓	✓	AOE Lead BBF regional councils
Conduct TPOT reliability training for coaches	✓	✓	✓	✓	AOE Lead
TPOT/TPITOS assessments for Pyramid Model implementation to fidelity at regular intervals		✓	✓	✓	AOE Lead, Coaches
Ongoing quality improvement and evaluation		✓	✓	✓	All participants

**Metrics:** Semi-annual monitoring of success in meeting Outcomes targets.

**Rationale:**

Social-emotional competence is a vital component of school readiness and success. Yet, young children’s challenging behavior remains a significant issue for many early childhood practitioners (Hemmeter, et al, 2006). In a meta-analysis of existing research, authors agreed that severe and persistent challenging behavior when left untreated increased the likelihood of academic and social problems and mental health issues in adolescence (Dunlop, 2006). The National Academy of Sciences reported that 60% of children enter school with the cognitive skills needed to be successful, but only 40% have the social and emotional skills needed to succeed in kindergarten (Raver, 2002).

Results from Vermont’s FY13 Readiness Kindergarteners Survey (see C1) indicate at least 85% or more of all children were rated as either “practicing” or “performing independently” (i.e.,

they were considered “ready”) on all survey items. It is important to note that a total of 1,228 (or 23.1%) of the children surveyed were eligible for specialized services. And, when you take a closer look at the survey results by social and emotional domain indicators, there is evidence that only 44.9% of kindergartners ‘*used problem-solving skills in social situations*’ and that only 53.5% of kindergartners ‘*appropriately expressed their feelings and needs*’. These two social emotional indicators are in line with the national research findings as stated above.

There is evidence that the trajectory of children’s social-emotional development can be changed, but the resources and expertise needed by the early childhood community to affect positive change are often not available, particularly for children with high needs.

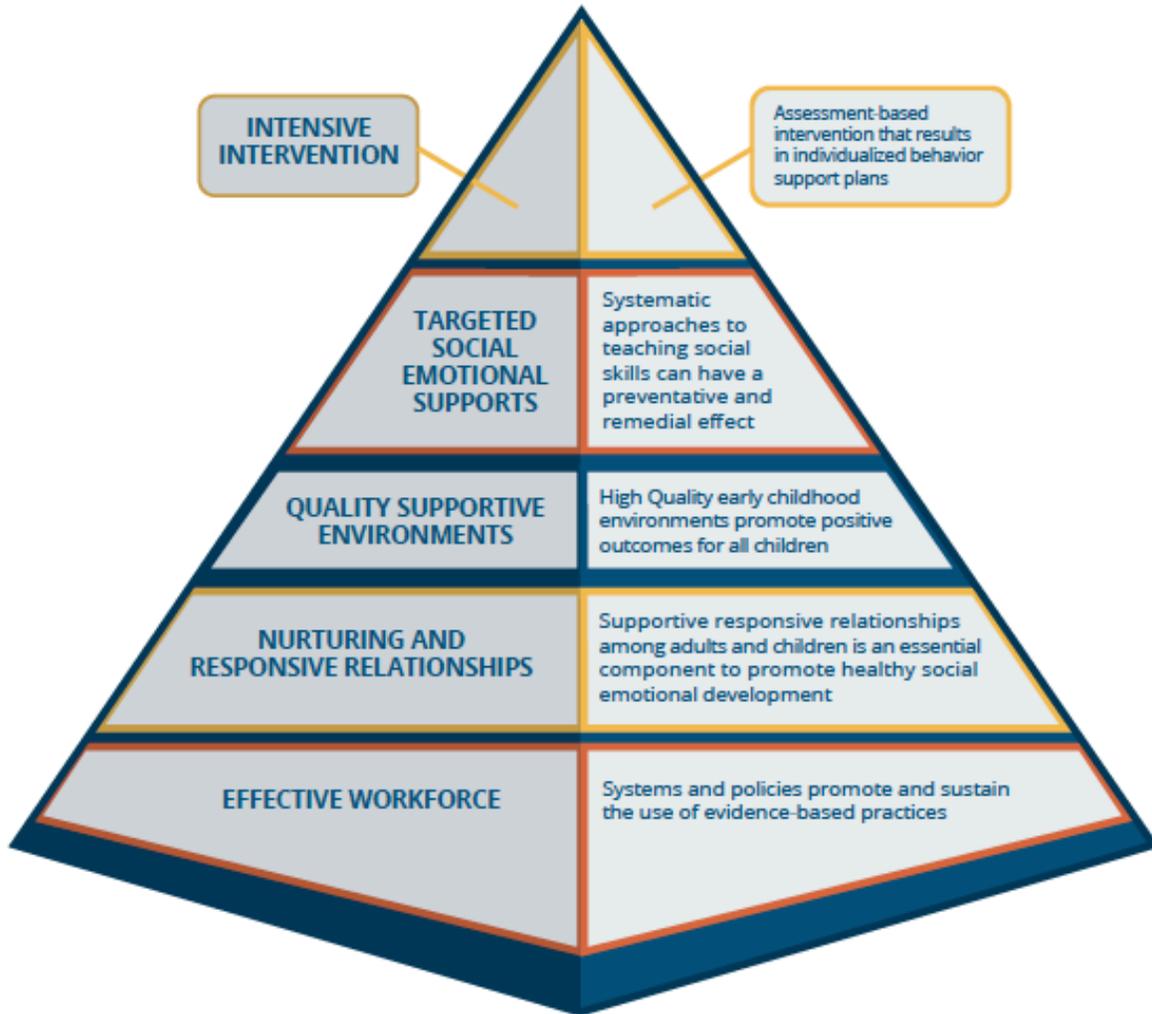
PreKindergarten students are expelled at a rate more than three times that of their older peers in the K-12 grades.

Vermont has safeguards in place such as Children’s Integrated Services/Early Intervention (IDEA Part C) and Essential Early Education (school district Part B) for children with disabilities to access appropriate early intervention and early childhood special education services within the home, natural environments and early learning and development programs. However, capacity of community-based resources, services, and qualified personnel are inequitable across the state to meet the needs of children with high needs and their families, especially in our most rural areas.

Another safeguard is Vermont’s Special Accommodations Grants, administered through the AHS CDD. These grants are intended to support accommodations for children with high needs to access high-quality, safe, and inclusive early learning and development programs in order to contribute to their overall well-being. In FY13, 81% of grant applications received were approved and awarded to early learning and development programs seeking funding and assistance. 62% of the applications received were awarded to specifically support children who demonstrate challenging behaviors.

In 2006, Vermont’s Foundations for Early Learning (FEL), a professional development initiative geared to early childhood practitioner’s knowledge and use of evidence based practices to support young children’s social and emotional competence and confidence. FEL, the early childhood component of the State Personnel Development Grant (SPDG) 2006, was developed with the assistance of two nationally acclaimed TA centers, the Center on the Social and

Emotional Foundations for Early Learning (CSEFEL) and the Center for Early Literacy Learning (CELL).



**Figure 20: FEL Pyramid Model**

This framework (in Vermont is known as the FEL Pyramid Model; see Figure 21 above) builds upon a tiered public health approach that promotes:

- Universal supports for all children social emotional wellness;
- Prevention and targeted supports for some children who need more; and
- Intensive supports and services for few children who need them most.

To create a focused, sustainable and statewide professional development system, FEL instituted “train the trainer” Institutes in three regions across the state. In addition, eight

community-based early childhood programs (infant, toddler and preschool age) were identified as quality sites and teachers received coaching support over the course of a year or more to implement evidence based practices to promote young children's social and emotional competence. Based on evaluation data over the last 8 years, the pyramid model has shown to be a sound framework for early care and education systems. FEL data also indicated that teacher implementation of EBPs to support social emotional development increase over time grew in FEL pilot sites where coaching was a prominent driver. The Teacher Pyramid Observation Tool (TPOT) was used to collect pre and post data over 3 years.

FEL is now referred to as Early Multi-tier System of Supports or 'Early MTSS' and will continue to incorporate the FEL pyramid model as a tiered framework of evidence-based practices (EBP) which focuses on universal promotion, prevention and intervention for delivering a comprehensive range of EBP and strategies to families and early childhood practitioners. The goal is to improve social and emotional and early learning competence and confidence for all infants, toddlers and young children (birth through age 8) -- especially children with high needs and developmental disabilities.

RTT Early MTSS will provide the necessary resources to scale up and support sustainability efforts of the current AOE State Personnel Development Grant (SPDG) Early and K-12 MTSS projects as well as align with Project Launch (Linking Actions for Unmet Needs in Children's Health) a recently awarded federal grant program of the federal Substance Abuse and Mental Health Services Administration (SAMHSA) to Vermont's most populace region, Chittenden County. Project Launch seeks to promote the wellness of young children birth to age eight and focuses on improving the systems that serve young children with the goal of helping all children reach physical, social, emotional, behavioral, and cognitive milestones. Project Launch and RTT Early MTSS outcomes work hand in hand to strengthen an early childhood system that supports positive outcomes for children, their families and communities.

RTT Early MTSS will allow for horizontal expansion, scale-up and sustainability of goals attained, lessons learned and positive outcomes realized for children, families and early childhood practitioners who participated in the Foundations for Early Learning (FEL) initiative over the past five years. Vertical alignment with K-12 MTSS will ensure the use of compatible language and evidence-based practices to promote a consistent and seamless multi-tier system of

supports for children (and families) transitioning to kindergarten from early learning and development programs or transitioning between programs and grade levels. [K-3 link]

In the first year of the newly awarded SPDG grant, Vermont Reads Institute and Vermont Statewide Steering Committee on RTII developed the guidance document, *Vermont Multi-tiered System of Supports Response to Intervention and Instruction Field Guide* (2012) that identified 10 guiding principles and 5 key components to effective system development and sustainability. RTT Early MTSS will adopt and adapt this model to support strong organizational leadership and systems development at state, regional and program levels.

The following five key MTSS components are critical to ensure implementation of evidence based practices to fidelity and sustainability of the Pyramid Model:



**Figure 21: Vital Components of System Development & Sustainability**

- Strong Systemic Support
  - Functional Leadership Team
  - Staff Commitment
  - Supportive System
- Partnership & Collaboration
  - Family Involvement
  - Early Childhood Community Based Partners

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- K-12 Transition
- Well-designed Professional Development
  - Identification of Staff need
  - Provision of professional development support
  - Assessment of Learning and Implementation
- Provision of High-quality and Responsive Learning Environments
  - Social-emotional Growth and Development
  - Early Learning Growth and Development
  - Child Response and Performance
- Comprehensive and Functional Assessment System
  - Effective Problem Solving Process
  - Evidence-Based Decision Making
  - Promotes Ongoing Improvement

<b>Performance Measures for (C)(3)(d) Leveraging existing resources to meet ambitious yet achievable annual statewide targets.</b>					
	<i>Baseline and annual targets</i>				
	<b>Baseline (Today, if known)</b> <i>If unknown please use narrative to explain plan for defining baseline and setting and meeting annual targets</i>	<b>Target for end of calendar year 2014</b>	<b>Target for end of calendar year 2015</b>	<b>Target for end of calendar year 2016</b>	<b>Target for end of calendar year 2017</b>
<b>Number of Children with High Needs screened</b>	12,660 of 22,210 (56%) <sup>1</sup>	13,326	13,770	14,214	14,659
<b>Number of Children with High Needs referred for services who received follow-up/treatment</b>	7596 <sup>2</sup>	7976 (5% increase)	8375	8794	9234
<b>Number of Children with High Needs who participate in ongoing health care</b>	89.5 % (19,878)	91%	93%	94%	95%

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<b>Performance Measures for (C)(3)(d) Leveraging existing resources to meet ambitious yet achievable annual statewide targets.</b>					
	<i>Baseline and annual targets</i>				
	<b>Baseline (Today, if known)</b> <i>If unknown please use narrative to explain plan for defining baseline and setting and meeting annual targets</i>	<b>Target for end of calendar year 2014</b>	<b>Target for end of calendar year 2015</b>	<b>Target for end of calendar year 2016</b>	<b>Target for end of calendar year 2017</b>
<b>as part of a schedule of well child care</b>					
<b>Of these participating children, the number or percentage of children who are up-to-date in a schedule of well child care</b>	72.2% (16,036)	75%	78%	80%	82%
<p><sup>1</sup>2012 Medicaid recipients ages 0-5 (Vermont Medicaid covers children up to 300 % federal poverty which is denominator here. (22,210). We are unable to determine a subgroup of 200% FPL but feel this estimate is inclusive of other high needs children.</p> <p><sup>2</sup>Vermont Child Health Improvement Program (VCHIP) Developmental Screening project in 40 provider practices identified a rate of 60% for referred and evaluated Medicaid children who screened positive for developmental concern. We use this data here to determine Vermont's baseline.</p>					

**(C)(4) Engaging and supporting families.**

The extent to which the State has a High-Quality Plan to provide culturally and linguistically appropriate information and support to families of Children with High Needs in order to promote school readiness for their children by--

(a) Establishing a progression of culturally and linguistically appropriate standards for family engagement across the levels of its Program Standards, including activities that enhance the capacity of families to support their children's education and development and help families build protective factors;

(b) Increasing the number and percentage of Early Childhood Educators trained and supported on an ongoing basis to implement the family engagement strategies included in the Program Standards; and

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(c) Promoting family support and engagement statewide, including by leveraging other existing resources, such as home visiting programs, family resource centers, family support networks, and other family-serving agencies and organizations, and through outreach to family, friend, and neighbor caregivers.

*If the State chooses to respond to this selection criterion, the State shall write its full response in the text box below. The State shall include the evidence listed below and describe in its narrative how each piece of evidence demonstrates the State's success in meeting the criterion; the State may also include any additional information it believes will be helpful to peer reviewers. If the State has included relevant attachments in the Appendix, these should be described in the narrative below and clearly cross-referenced to allow the reviewers to locate them easily.*

*In scoring the selection criterion, peer reviewers will determine, based on the evidence the State submits, whether each element of the selection criterion is implemented or planned; the quality of the implementation or plan (see the definition of a High-Quality Plan for the components reviewers will be judging); the extent to which the different types of Early Learning and Development Programs in the State are included and addressed; and the extent to which the unique needs of the State's special populations of Children with High Needs are considered and addressed. The State is responsible for providing clear and detailed information to assist the peer reviewers in making these determinations.*

Evidence for (C)(4)(a):

- To the extent the State has established a progression of family engagement standards across the levels of Program Standards that meet the elements in selection criterion (C)(4)(a), submit--
  - The progression of culturally and linguistically appropriate family engagement standards used in the Program Standards that includes strategies successfully used to engage families in supporting their children's development and learning. A State's family engagement standards must address, but need not be limited to: parent access to the program, ongoing two-way communication with families, parent education in child development, outreach to fathers and other family members, training and support for families as children move to preschool and kindergarten, social networks of support, intergenerational activities, linkages with community supports and adult and family literacy programs, parent involvement in decision making, and parent leadership development; and
  - Documentation that this progression of standards includes activities that enhance the capacity of families to support their children's education and development.

Evidence for (C)(4)(b):

- To the extent the State has existing and projected numbers and percentages of Early Childhood Educators who receive training and support on the family engagement strategies included in the Program Standards, the State must submit documentation of these data. If the State does not have these data, the State must outline its plan for deriving them.

Evidence for (C)(4)(c):

- Documentation of the State's existing resources that are or will be used to promote family support and engagement statewide, including through home visiting programs and other family-serving agencies and the identification of new resources that will be used to promote family support and engagement statewide.

We are not responding to section C4.
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#### **D. A Great Early Childhood Education Workforce**

*Note: The total available points for (D)(1) and (D)(2) = 40. The 40 available points will be divided by the number of selection criteria that the applicant chooses to address so that each selection criterion is worth the same number of points. For example, if the applicant chooses to address both selection criteria in Focused Investment Area (D), each criterion will be worth up to 20 points.*

*The applicant must address one or more selection criteria within Focused Investment Area (D).*

(D)(1) Developing a Workforce Knowledge and Competency Framework and a progression of credentials.

The extent to which the State has a High-Quality Plan to--

(a) Develop a common, statewide Workforce Knowledge and Competency Framework designed to promote children's learning and development and improve child outcomes;

(b) Develop a common, statewide progression of credentials and degrees aligned with the Workforce Knowledge and Competency Framework; and

(c) Engage postsecondary institutions and other professional development providers in aligning professional development opportunities with the State's Workforce Knowledge and Competency Framework.

*If the State chooses to respond to this selection criterion, the State shall write its full response in the text box below. The State shall include the evidence listed below and describe in its narrative how each piece of evidence demonstrates the State's success in meeting the criterion; the State may also include any additional information it believes will be helpful to peer reviewers. If the State has included relevant attachments in the Appendix, these should be described in the narrative below and clearly cross-referenced to allow the reviewers to locate them easily.*

*In scoring the selection criterion, peer reviewers will determine, based on the evidence the State submits, whether each element of the selection criterion is implemented or planned; the quality of the implementation or plan (see the definition of a High-Quality Plan for the components reviewers will be judging); the extent to which the different types of Early Learning and*

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*Development Programs in the State are included and addressed; and the extent to which the unique needs of the State's special populations of Children with High Needs are considered and addressed. The State is responsible for providing clear and detailed information to assist the peer reviewers in making these determinations.*

Evidence for (D)(1):

- To the extent the State has developed a common, statewide Workforce Knowledge and Competency Framework that meets the elements in selection criterion (D)(1), submit:
  - The Workforce Knowledge and Competencies;
  - Documentation that the State's Workforce Knowledge and Competency Framework addresses the elements outlined in the definition of Workforce Knowledge and Competency Framework in the Program Definitions (section III) and is designed to promote children's learning and development and improve outcomes.

We are not responding to section D1.
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(D)(2) Supporting Early Childhood Educators in improving their knowledge, skills, and abilities.

The extent to which the State has a High-Quality Plan to improve the effectiveness and retention of Early Childhood Educators who work with Children with High Needs, with the goal of improving child outcomes by--

(a) Providing and expanding access to effective professional development opportunities that-

(1) Are aligned with the State's Workforce Knowledge and Competency Framework;

(2) Tightly link training with professional development approaches, such as coaching and mentoring; and

(3) Are supported by strong evidence (e.g. available evaluations, developmental theory, or data or information) as to why these policies and incentives will be effective in improving outcomes for Children with High Needs;

(b) Implementing effective policies and incentives (e.g., scholarships, compensation and wage supplements, tiered reimbursement rates, other financial incentives, management opportunities) to promote professional improvement and career advancement along an articulated career pathway that-

(1) Are aligned with the State's Workforce Knowledge and Competency Framework;

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(2) Tightly link training with professional development approaches, such as coaching and mentoring; and

(3) Are supported by strong evidence (e.g., available evaluations, developmental theory, or data or information) as to why these policies and incentives will be effective in improving outcomes for Children with High Needs;

(c) Publicly reporting aggregated data on Early Childhood Educator development, advancement, and retention; and

(d) Setting ambitious yet achievable targets for--

(1) Increasing the number of postsecondary institutions and professional development providers with programs that are aligned to the Workforce Knowledge and Competency Framework and the number of Early Childhood Educators who receive credentials from postsecondary institutions and professional development providers with programs that are aligned to the Workforce Knowledge and Competency Framework; and

(2) Increasing the number and percentage of Early Childhood Educators who are progressing to higher levels of credentials that align with the Workforce Knowledge and Competency Framework.

*If the State chooses to respond to this selection criterion, the State shall write its full response in the text box below. The State may also include any additional information it believes will be helpful to peer reviewers. If the State has included relevant attachments in the Appendix, these should be described in the narrative below and clearly cross-referenced to allow the reviewers to locate them easily.*

*In scoring the selection criterion, peer reviewers will determine, based on the evidence the State submits, whether each element of the selection criterion is implemented or planned; the quality of the implementation or plan (see the definition of a High-Quality Plan for the components reviewers will be judging); the extent to which the different types of Early Learning and Development Programs in the State are included and addressed; and the extent to which the unique needs of the State's special populations of Children with High Needs are considered and addressed. The State is responsible for providing clear and detailed information to assist the peer reviewers in making these determinations.*

Evidence for (D)(2):

- Evidence to support why the proposed professional development opportunities, policies, and incentives will be effective in improving outcomes for Children with High Needs (e.g., available evaluations, developmental theory, or data or information about the population of Children with High Needs in the State).

*Additionally, the State must provide baseline data and set targets for the performance measure under (D)(2)(d)(1) and (D)(2)(d)(2).*

**Section D2: Improving early child educators in improving their knowledge, skills, and abilities.**

**Abstract:**

Vermont has developed and implemented a comprehensive system of professional development for early child educators over the past 30 years designed to support those that work in all regulated settings. Professional development has evolved over time. In the current framework of professional development, the Northern Lights Career Development Center (NLCDC) is an organizational hub guiding the professional development system.

The NLCDC has helped Vermont develop, manage and deliver learning opportunities that are in line with national recommendations and research informed practices. In 2011, Vermont conducted a professional development survey of the workforce and, with over 900 respondents; it has helped inform the current work and offerings in the system. Another survey commissioned by Building Bright Futures as part of a John Snow, Inc. Study also informed current practices.

In 2013, Vermont is ready to create an even more robust system of professional development by implementing a statewide framework to identify, support and effectively integrate mentoring, coaching and other similar services.

The activities in Section D2 reflect Project Budget #3, #15, #16, #17, and #18.

Please note that in Section D2, the High Quality Plan Summary covers the entire section (D2a1, D2a2, D2a3, D2b1, D2b2, D2b3, D2c, D2d1 and D2d2) and includes a goal, outcomes, strategies, timeline and metrics for all subsections. Each subsection has its own rationale.

The Vermont Child Development Workforce:

The Vermont Child Development Division (CDD) estimates there are over 9,000 people are the regulated child care workforce based on the number of current staff that have completed record checks in Vermont's Bright Futures Child Care Information System (BFIS). The Vermont Agency of Education (AOE) reports 1,327 individuals with a current teaching license with an early childhood and/or early childhood special education endorsement.

The Early Childhood Educator includes a variety of professional roles across early childhood systems in Vermont (such as child care, PreK – 3<sup>rd</sup> Grade, Head Start and Early Head

Start, early childhood, family support, and health). While there have been efforts to understand the demographics of the Vermont early care and education workforce, there has not been a workforce study done that looks at workforce demographics across sectors.

In Vermont, the childcare workforce is made up of women, which parallels the National workforce (T.E.A.C.H. Early Childhood® National Technical Assistance Center, 2010). CDD reports that 60% of our workforce holds a quality and credential account through our Vermont professional development system and of those account holders, 95% of them are women. VAEYC is the provider of the state's largest early childhood professional development conference. For the last 5 years, conference attendance has averaged 98% women.

Nationally, the childcare workforce is racially, ethnically and linguistically diverse. (T.E.A.C.H. Early Childhood® National Technical Assistance Center, 2010) In Vermont, our workforce is more racially and linguistically homogenous but economically diverse; this reflects our state's general population. In Vermont, our early childhood workforce earns low wages in comparison to other professions with like responsibilities. This parallels the National workforce (T.E.A.C.H. Early Childhood® National Technical Assistance Center, 2010) and is evidenced by the Vermont results from the Bureau of Labor and Statistics Occupational Employment Survey (May 2012):

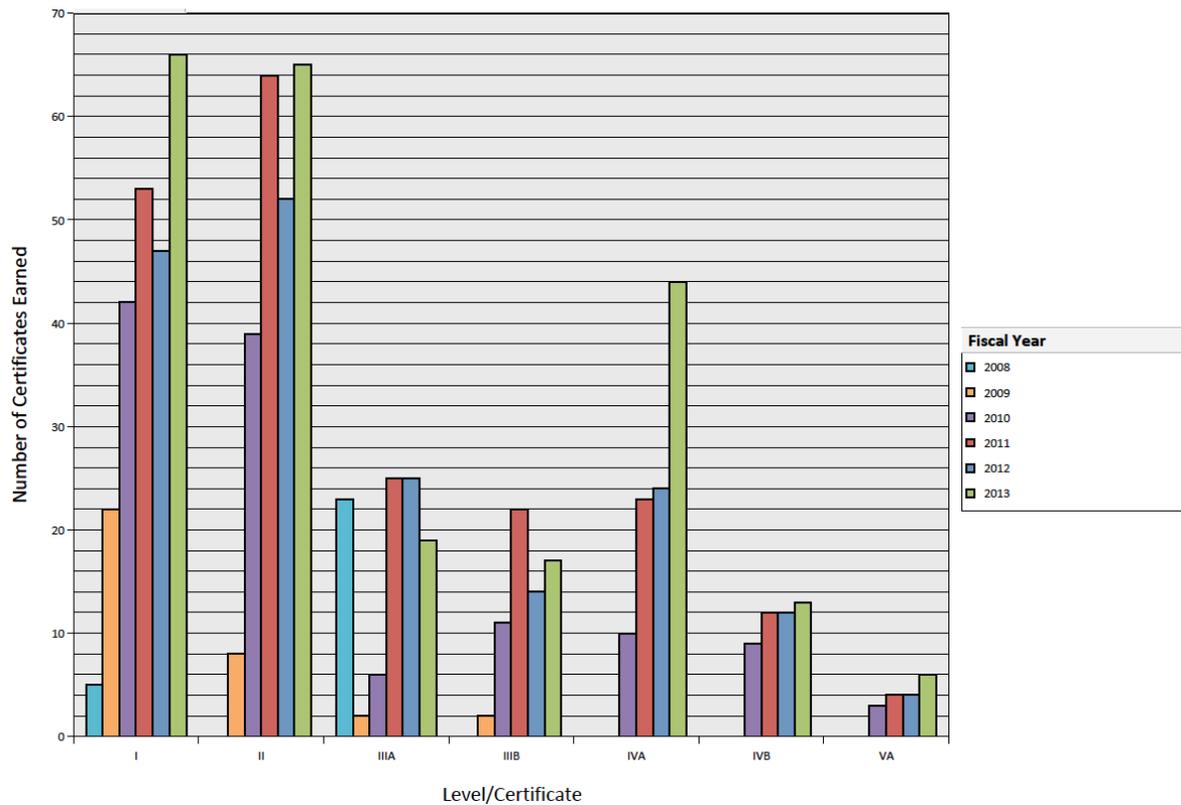
- Childcare workers earn an annual average of \$23,230 (centers and home-based average);
- Preschool teachers, except early childhood special educators, earn an annual average of \$34,140;
- Kindergarten teachers, except early childhood special educators earn an annual average of \$50,980; and
- Assistant teachers in public schools (not specific to PreK or kindergarten) earn an average of \$27,100.

The 2012 Federal poverty level for a family of two is \$15,130. (U.S. Department of Health and Human Services, 2012). With a salary of \$23,230, a child care worker with one child would have an income at just over 150% of the poverty guidelines.

The majority of Vermont's Child Care workforce appears to be generally lacking two- and four- year degrees in Early Childhood Education or a related field although a more fully utilized

BFIS system will confirm this. This is similar to the national workforce (T.E.A.C.H. Early Childhood® National Technical Assistance Center, 2010).

Figure 23 illustrates the pattern of certificates linked to academic achievements awarded to Vermont professionals since 2008. Even though certificates and degrees are being earned, the actual numbers of individuals remains small in comparison to the total number of individuals in the workforce. T.E.A.C.H. will help increase the numbers achieving credentials particularly at the III B (Associate Degree) and the IV A levels (Bachelor Degree).



**Figure 22: Early Childhood Certificates Awarded on Vermont’s Early Childhood Career Ladder, 2008-2013**

**High-quality Plan Summary**

**Goal:** Expand access to evidence informed learning opportunities that are aligned with the State’s workforce and competency framework, and linked with developmental approaches such as mentoring. Early childhood educators in all settings – home child care, licensed centers, public school PreK, and Head Start – will have access to these opportunities and will assist in documenting the efficacy of the learning/mentoring experience.

**Outcomes:**

- During each funding year, there will be a 15% increase in availability and accessibility of advanced training and coursework.
- During each funding year, there will be a 20% increase use of documented mentoring and coaching as a model to inform and support evidence based practices.
- By the end of the funding period (2017) there will be an increase in enrollment of 20% in the Vermont Child Care Apprenticeship Program from baseline (2013).
- By the end of the funding period (2017), an increase in enrollment of 90% by early childhood professionals in credit bearing courses sponsored through the registered apprenticeship program from baseline (2013).
- By 2017, Vermont's institutions of higher education strengthen the quality and alignment of their pre-service and in-service courses for early childhood educators through collaboration and cooperation.
- Early childhood educators report they have increased their knowledge and skills in content areas that pertain especially to children with high needs (e.g., teaching young dual or English language learners, supporting children with low incidence disabilities).
- At the end of the funding period, 300 early childhood educators will receive T.E.A.C.H. scholarships to enable them to pursue an Associate's or Bachelor's degree.
- Beginning in 2015, Vermont will conduct a Biennial comprehensive survey of its early childhood workforce, produce a public report, and incorporate the resulting data in BFIS.
- During the funding period, verified professional development information in BFIS as a result of the comprehensive early childhood will increase by 20%.
- During the funding period, 100 leaders including local leaders in Vermont Promise Communities (see Competitive Priority 5) and state partners in health, education and human services, participate in and successfully complete the basic Vermont Early Childhood Leadership Institute program.

**Strategies:**

- Implement a statewide mentoring and coaching structure (MATCH) based on evidence-informed mentoring and coaching strategies for early childhood educators serving children with high needs, and evaluate the efficacy of both the system of MATCH and the efficacy of the mentoring activities in meeting the goals of the mentoring of the mentoring/coaching partnerships.
- Build on work currently underway with and between higher education institutions and other professional development providers to strengthen the quality, alignment and accessibility of courses and programs for pre-service and in-service early childhood educators. Expand articulation agreements among institutions of higher education.
- Provide in-depth professional development opportunities (credit and non-credit bearing) that are focused on increasing early childhood educators' knowledge and skills in content areas that are especially needed when teaching young children with high needs (e.g., multi-day workshops with follow-up mentoring on supporting children's self-regulation or cultural competence; week-long summer institute on engaging families or PreK-3<sup>rd</sup> approach to early literacy).
- Expand the availability of registered apprenticeship college courses from three locations to six locations around the state.
- Expand existing scholarships and bonuses to promote professional improvement and career advancement along a career ladder by implementing a licensed T.E.A.C.H. model in Vermont.
- Create an interagency workgroup supported by consultants to establish the survey content and methodology and public report on the early childhood workforce, linked to the BFIS.
- Increase the number and percentage of early childhood educators who are progressing to higher levels of credentials through strategies previously mentioned
- More accurately capture professional development related data in the BFIS.
- As an overarching strategy to develop broader leadership in early childhood, create

an Early Childhood Leadership Institute will be developed and implemented.

- Implement new licensing regulations that include increased professional development requirements and strengthen the licensing and relicensing process to align documentation of professional development achievements with the Bright Futures Information System.
- 

**Table 21: Timeline and Parties Responsible**

Key Activity	Year				Parties Responsible
	2014	2015	2016	2017	
<b>MATCH</b>					
Convene experts and stakeholders to conduct a Results Based Accountability Process for MATCH and develop an evaluation model for the system of MATCH and the services provided by MATCH professionals	✓				“MATCH Team” CDD and AOE Lead with Partners including NLCDC, VB3, VAEYC, VCCPA, VCCICC, CCRRs and others
MATCH team aligns and works with MTSS development and regional delivery model	✓	✓			CDD and AOE Lead with Partners including NLCDC, VB3, VAEYC, VCCPA, VCCICC, CCRRs and others
Roll out of MATCH in accordance with established evaluation criteria	✓	✓			CDD and AOE Lead with Partners including NLCDC, VB3, VAEYC, VCCPA, VCCICC, CCRRs and others
Full implementation of MATCH with funding for evidence based MATCH Services to programs serving children with high needs		✓	✓	✓	CDD will manage with AOE the funds for targeted high-quality MATCH services
Evaluation of MATCH and MATCH Services	✓	✓	✓	✓	CDD/AOE lead with MATCH professionals

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Documented					and programs receiving MATCH services providing data
Report on MATCH Evaluation(s)	✓	✓	✓	✓	CDD/AOE lead
Develop plans for sustainability			✓	✓	CDD/AOE with MATCH Team and partners
Hire staff and determine sites for courses; conduct Results Based Accountability process	✓				Contractor in partnership with CCRRs, the State and organizations
<b>APPRENTICESHIP</b>					
Promote apprenticeship and coursework	✓	✓	✓	✓	Contractor in partnership with CCRRs, the State and organizations
Recruit and enroll apprentices and other early childhood professionals	✓	✓	✓	✓	Contractor in partnership with CCRRs, the State and organizations and licensed centers
Deliver coursework	✓	✓	✓	✓	Contractor and Community College of Vermont
Support and monitor courses and students	✓	✓	✓	✓	Contractor
Report /evaluate outcomes	✓	✓	✓	✓	Contractor/State
<b>HIGHER EDUCATION PROGRAMS &amp; PROFESSIONAL DEVELOPMENT (INCLUDING LEADERSHIP INSTITUTE)</b>					
Invigorate and formally establish the Early Childhood Higher Education Workgroup (ECHEW) with paid facilitation	✓				Current committee on higher education and early childhood education; AOE and CDD
ECHEW meets monthly to work on a shared agenda that includes work on: aligning courses,	✓	✓	✓	✓	ECHEW members and consultant

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accessing national TA centers and incorporating new research, creating common eLearning modules, etc.					
Create in-depth study courses on topics most pertinent to supporting children with high needs (e.g., trauma, ELL); courses include follow-up mentoring and/or virtual mentoring.	✓	✓	✓	✓	Higher education institutions (IHEs), professional development (PD) providers (e.g., Stern Center, Higher Education Collaborative), AOE & CDD, consultant
Offer two different in-depth study courses twice a year (Fall & Winter) in the northern & southern part of the state					IHEs, PD providers, AOE & CDD, consultant
Develop and offer an annual week-long Summer Institute for Early Childhood Educators focused on educators' practices (e.g., early numeracy, Universal Design, early literacy strategies for all children	✓	✓	✓	✓	IHE faculty, AOE & CDD, consultant, PD providers
<b>APPRENTICESHIP</b>					
Promote apprenticeship and coursework	✓	✓	✓	✓	Contractor in partnership with CRRs, the State and organizations
Recruit and enroll apprentices and other early childhood professionals	✓	✓	✓	✓	Contractor in partnership with CRRs, the State and organizations and licensed centers
Deliver coursework	✓	✓	✓	✓	Contractor and Community College of Vermont

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Support and monitor courses and students	✓	✓	✓	✓	Contractor
Report /evaluate outcomes	✓	✓	✓	✓	Contractor/State
<b>TEACH</b>					
Ensure selected host for TEACH is successfully meeting the contract with TEACH including raising funds	✓	✓	✓	✓	TEACH, TEACH host partner, CDD and AOE and partner, TEACH advisory committee
Develop/Affirm funding resources for scholarships and contracts and Award TEACH Scholarships	✓	✓	✓	✓	TEACH Vermont
<b>SURVEY</b>					
Establish interagency work group to manage survey development process	✓				Agencies including CDD AOE, NLCDC, CCR&Rs
Hire consultants to assist with design and delivery methodology	✓				Interagency Work Group above
Develop survey methodology and related systems	✓				Interagency Work Group; Consultants
Test survey	✓				Consultants and a few regulated programs
Implement survey, analyze data, and issue public report		✓			Agency staff and community partners such as CCR@Rs
<b>INCREASING ECE'S WITH HIGHER CREDENTIALS</b>					
Implement CDD/Streamline Committee plan to link information in BFIS with licensing renewal	✓	✓	✓	✓	CDD, Professional Development Streamline Committee including NLCDC and Stakeholder and Partners and representatives of the Early Childhood Educator workforce
Ensure all sponsors of training are timely in submitting attendance	✓	✓	✓	✓	NLCDC, CDD

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verification					
Implement new regulations for the workforce that include higher standards		✓	✓	✓	CDD
Ensure TEACH data is included in BFIS PD data		✓	✓	✓	CDD/AOE/TEACH

**Metrics:** Ongoing monitoring of success in achieving process measures and quantitative outcomes.

**D2a: Providing and expanding access to effective professional development that (1) is aligned with the State’s workforce knowledge and competency framework; (2) in which training and professional development are linked; and (3) is supported by strong evidence.**

**Rationale:**

Vermont has worked hard to improve the effectiveness and retention of its early childhood educators across all settings, particularly those who work with children with high needs, by providing and expanding access to effective professional development opportunities through statewide systems. Yet, as a rural state, access to education and training is a challenge.

Northern Lights Career Development Center is the primary organization that orients and advises Vermont’s early childhood and afterschool professional workforce about career pathways, core competencies, and professional development opportunities. NLCDC is a statewide center that has both a physical office and virtual presence. NLCDC is housed within the Community College of Vermont and works to unify and enhance the professional development system in Vermont by serving as a central hub with a virtual gateway for communicating system information and resources.

- NLCDC worked with the BBF Professional Preparation and Development committee, CDD and AOE to develop Vermont’s workforce knowledge and competency framework;
- It maintains an instructor registry and the statewide early learning course calendar that is part of the Building Bright Futures Information System (see A1);

- It approves training and administers individual professional development activities and documentation via Building Bright Future's Information System (BFIS) (see A1);
- It partners with educators and providers working in all early childhood settings to guide staff professional development opportunities (refer to *Vermont Career Advising Guide for Early Childhood and Afterschool Professionals* in Appendix XVIII); and
- It supports a comprehensive, accessible and integrated system of quality professional development in Vermont.

NLCDC is supported by an annual grant of approximately \$350,000 in funds from the Vermont Child Development Division (CDD).

NLCDC supports and the BFIS database documents the growth of individuals in the field of early childhood and afterschool, while recognizing the related professional development systems of Head Start and Agency of Education. As discussed in section E2, work is underway to enhance the integration and comprehensiveness of these and related data systems.

The NLCDC/BFIS system includes a career ladder and related bonuses for achievement and is primarily funded by the Child Development Division (CDD) and managed by the Northern Lights Career Development Center. The bonus structure is described in D2b.

Twelve CCRRs from across Vermont serve as the State's Early Childhood Professional Development System, each located in one of the Building Bright Futures Regional Council districts/Agency of Human Services regions. These 12 agencies serve as a primary regional or local interface to the professional development system and provide guidance, resources and opportunities.

This includes delivering the core training content required to attain the NLCDC Level I and Level II Certificates, which also provides the training required for the Child Development Associate (CDA) credential, which is an element requirement to earn a Level II certificate. These classes and this credential precede college course offerings sponsored through the Vermont's registered apprenticeship program that are recognized at the Level III A.

Other organizations in the professional development system include VAEYC (Vermont Association for the Education of Young Children), the Stern Center for Language and Learning,

the Vermont Center for the Book, VSA Vermont, Prevent Child Abuse Vermont and the Vermont Child Care Providers Association.

The system is guided and supported by the Building Bright Futures Professional Preparation and Development Committee (PPD), which is a statewide subcommittee of the State BBF council. The PPD has a broad mailing constituency but also has approximately 20 key stakeholders representing various sectors of the workforce and those that educate and support their professional development that have met regularly for many years.

The PPD and NLCDC have been working to build a coordinated, aligned and comprehensive system. To date, this work has resulted in foundational elements including:

- A set of guiding principles designed to serve as a framework for developing and evaluating the system;
- Core knowledge areas and competencies developed to serve as a foundation for the system and the basis for early childhood professional standards;
- Early childhood certificates and credentials have been developed based on core knowledge areas and competencies aligned with the NLCDC career ladder;
- A professional development registry and training calendar has been established via the Bright Futures Information System (BFIS); and
- Quality assurance mechanisms are in place through the NLCDC Instructor Registry.

In 2011, the PPD contracted with John Snow, Inc. (JSI), a noted public health consulting firm, to conduct an evaluation of the Vermont early childhood professional development system.

Since the JSI report was issued, the PPD has established priorities and engaged in systems improvement work. Key findings included:

- **Cost of training and education.** For the Early Childhood Workforce this can include both community based training as well as college courses (particularly general education courses). This is a real challenge for many in the workforce even though CRRs, Starting Points networks, apprenticeship program courses, the CDD and soon TEACH try to reduce costs for participants.
- **Unequal geographic access to training and education.** This is a systemic problem in a sparsely populated, rural state. For our workforce, the lack of access can include both community based training as well as college courses although Starting Points

Networks contribute to local learning opportunities. On-line options such as Better Kid Care produced by the University of Pennsylvania are becoming more available and approved by NLCDC, but may be a challenge because high speed Internet is required, is relatively expensive, and is not available in all parts of Vermont. Also, some individuals still prefer and do better in traditional learning settings.

- **Access to training and education limited by employment and family obligations.** This is one area that we hope that TEACH, a project described in D2b, can help address by incorporating personal and professional needs into training and education programming.
- **Gaps in available training topics and intensity.** There is limited training variety, particularly for advanced topics. This is a consistent challenge to CCRRs that provide required entry level I and II course content and also endeavor provide advanced training. VAEYC sponsors advanced trainings and the CDD provides regional collaborative grants of \$1,500, as well as the Higher Education Collaborative and apprenticeship courses, to help address this but the need is still great.
- **The workforce desires financial incentives to support education and training.** Bonuses are currently provided at each stage of the career ladder (see Table 22), and these are beginning to be utilized more frequently by the workforce. However, the bonus levels are not perceived as sufficient by many to meet the overall professional development requirements and needs, and to support the enhanced training and education required by the TQRIS. The current bonus structure is described in section D2b.
- **Current articulation agreements are not effective for much of the workforce.** Barriers to access to higher education include time-limits on when a course was completed; a lack of transferability of course credits from one institution to another as courses are not equivalent; and non-credit professional development does not clearly or consistently articulate to higher education. There definitely is a need for better articulation between higher education institutions although some are more accommodating of the needs of the workforce than others, and there is a robust

system of evaluating experience, education and training in determining the “credit for prior learning” at two institutions of higher education in Vermont (such as Community College of Vermont and Springfield College). A fully comprehensive model of articulation and transferability has not been achieved despite the work of higher education committees and participation of state colleges, community college of Vermont and the University of Vermont. We hope with TEACH and continued encouragement from the early childhood workforce and advocates, more consistent and clear articulations will be achieved.

- **Providers feel the professional development system is unclear.** Providers report they are uncertain what they need to do and where they need to do it, and how the component elements of the professional development system integrate. While CRRs have tried to convey that there is a system guided by NLCDC and documented in BFIS, and have very explicit direction to explain the early childhood professional development system at each sponsored learning opportunity, more work clearly needs to be done in this area. A lack of alignment between key elements of the professional development system, such as Northern Lights Career Development Center and Vermont’s Agency of Education, which contributes to the confusion, and is addressed by activities in this proposal.

The strategies already in place to enhance the professional competencies and credentials of child care workers in Vermont, as well as those proposed in the High-quality Plan herein, are likely to improve outcomes for children with high needs.

- They are in line with the comprehensive study of Vermont’s early childhood workforce undertaken in 2011 by JSI;
- They reflect evidence in the literature. For example, on-site support for implementation of knowledge and skills is the most effective way to change and improve practice. (Donovan, Bransford, and Pellegrino, 1999) published a research synthesis on human learning and its implications for teaching. The report indicated that in order for a learner to gain a deep knowledge of specific content he/she must develop an understanding of how the knowledge may be used in a specific context and how it may be generalized other situations. Similar conclusions were reached by

Bransford, Brown and Cocking (2000).

In February 2010, an ad hoc committee of early childhood practitioners, leaders, coaches and mentors from a variety of public and private early childhood settings, lead by the staff at the Northern Lights Career Development Center (NLCDC), met to determine the needs, interests and current status of people who provide services such as mentoring and coaching for early childhood practitioners. A survey was subsequently conducted with these individuals.

The results indicated that there were a wide array of activities and practices in place and that there could be value in creating a more coordinated and clear system to support both people providing “one to one” services and for those receiving these services. The committee determined over the course of considerable work and discussion that it was more important to create a clear structure for this kind of work than it was to create definitions for specific titles such as “mentor” or “advisor”. They determined that the overarching structure would be called MATCH. Key MATCH activities included:

- Completing the structural vision of the MATCH system;
- Defining the competencies and qualifications to provide MATCH services;
- Developing a searchable data base of approved MATCH professionals;
- Conducting a Pilot implementation of MATCH to test requirements and refine plans for the system and upcoming implementation; and
- Understanding the need to develop a sufficient evaluation structure for MATCH to determine efficacy and participant satisfaction and personal and programmatic quality improvement as a result of MATCH services.

Vermont’s High-quality Plan for expanding access to mentoring and consulting is to develop an evaluation plan to document the efficacy of MATCH and to ensure there are appropriate metrics and practices in place to determine the impact of MATCH as an agent of change.

There is a need to enhance the quality of specialized care services to children with high needs (see B4). Some of this need will be met though Children’s Integrated Services, which will increase the number of specialized child care programs. MATCH will complement this by providing additional technical assistance. CIS child care specialists will be able to apply for funding necessary to receive coaching and mentoring via MATCH. Vermont Early Learning

Standards, CLASS and TS Gold child assessments (see C1 and C2) also include coaching from a MATCH professional.

Categories of individuals who may become MATCH professionals includes:

- FEL Pyramid coaches;
- CDA advisors;
- Environmental Rating Scale assessors and consultants;
- Health consultants (Healthy Child Care Vermont);
- Accreditation consultants/mentors;
- CCRR trainers/program consultants;
- Curriculum and child assessment consultants;
- MTSS/Foundations for Early Learning Trainers/Consultants/Coaches;
- Strengthening Families Protective Factors trainers and coaches; and
- AOE professionals who will mentor/coach on implementing the new Vermont Early Learning standards into the curriculum, to name a few.

MATCH developed concurrently with the Vermont's Foundations for Early Learning (FEL) Pyramid trainer-coach-consultant model over the past few years as established professional coaching guidelines developed from two national technical assistance centers: Center on the Social and Emotional Foundations for Early Learning (CSEFEL) and Center for Early Literacy Learning (CELL). There are currently 160 FEL coaches registered in the Northern Lights Instructor Registry who will be part of MATCH.

We propose to hire staff to facilitate a strategic planning process to discuss strategies to implement recommendations to increase the number and variety of academic and training courses related to supporting children with high needs.

In 2009, the Higher Education-Early Education Task Force was formed. The Task Force was assembled with the support of the Vermont Business Roundtable, AOE, CDD and philanthropic organizations. The members of this Task Force included the Chancellor of Vermont state colleges, a college president, professors from early childhood teacher preparation programs, the director of the Northern Lights Career Development Center, and a Head Start program director. The Task Force examined research on teacher credentials and practices, then

formed two subgroups: one group was charged with doing further research and recommend models for supporting educators to achieve an associates and/or a baccalaureate degree, and the other was to research funding possibilities. These subgroups drafted recommendations for the Task Force; some of these recommendations included increased financial supports, articulation agreements, and establishing consistent credit equivalents for credentials such as the Program Director certificate.

The Higher Education-Early Childhood Education Task Force group has continued to meet and learn from each other and, via conference calls, from higher education experts from around the country. In October 2012, this group planned and organized a higher education event in Manchester, Vermont for early childhood professionals to learn about higher education professional development opportunities from colleges, universities, AOE, CDD, and the Vermont Student Assistance Corporation (VSAC). Representatives from six colleges and universities, VSAC, AOE, and CDD presented to describe grants and loans to support early educators as they seek advanced credentials and baccalaureate degrees. As sequel to this event, VAEYC and the Vermont Head Start-State Collaboration Office are co-sponsoring a Back to School: College and University Opportunities for Early Educators Roundtable to be held on October 18<sup>th</sup> at the Annual VAEYC Conference in Killington, Vermont. Vermont's high quality plan includes building on the good work and good will of this group to develop a formal workgroup of representatives from all higher education institutions with early childhood programs to meet monthly and work on a shared agenda for improving, aligning, and increasing access to undergraduate and graduate early childhood pre-service and in-service courses and programs.

The Vermont Child Care Apprenticeship Program (VCCAP) matches mentors (such as head teachers, assistant directors, program coordinators, and directors) with less experienced staff (such as assistant teachers, individual aids, paraprofessionals) for formal training in the field of early care and education. VCCAP follows the tradition of registered apprenticeship, which combines supervised on-the-job training with 297 hours of formal training hours over a two-year time period. These training hours include six tuition-free college credits in the field of early care and education along with 4,000 hours of formal on-the-job training.

The VCCAP is managed through the efforts of the Vermont Child Care Industry and

Careers Council (VCCICC), a statewide, not for profit organization, working in partnership with the Vermont Department of Labor. VCCICC blends state and federal funding, private foundation and community grants, to pay for the college courses that are offered to benefit the child care workforce. These courses are offered tuition-free, both in conventional classroom settings and online. Classroom courses are rotated around the state to provide access to higher education in various geographical areas to ensure that access is fairly equally available throughout the state.

Research indicates that adults learn best when the learning is relevant and can be applied to practice (Karge, Phillips, Jessee, & McCabe, 2011) Effective mentoring, as described by Price, Graham, & Hobbs, (1997) involves regular observation, both formally and informally, to assess the on-the-job performance of mentees and to guide the mentee to identify strategies to improve their practice.

Mentors in the Child Care Apprenticeship Program are also instructed to use the Daily Activity Assessment Tools to assess apprentices' skills in common daily tasks, such as engaging a child in conversation. The VCCICC contracted with the Jeffords Center at the University of Vermont to assess the validity of these Daily Activity Assessment Tools. They found that "the Vermont Child Care Apprenticeship Program offers a robust system of assessment that appears to be provisionally reliable and valid" (University of Vermont, 2013).

A professional development opportunity with a targeted focus developed in Vermont is the now nationally disseminating Building Blocks for Literacy model. This has been widely shown to assist children to develop essential foundational skills to help them learn to read and write upon entering kindergarten. It was developed in Vermont in 1997. Building Blocks for Literacy has reached an estimated 2,750 early care and education providers, 1,200 parents, and 55,000 preschool children in Vermont. Research on the effectiveness of Building Blocks for Literacy was cited 14 times in the federal Department of Education's recent *Toward the Identification of Features of Effective Professional Development for Early Childhood Educators, Literature Review* (2012).

#### The Vermont Early Childhood Leadership Institute

Vermont will design and deliver an Early Childhood Leadership Institute (ECLI) to inform and empower local leaders to fulfill the promise of every Vermont child. The ECLI will provide programming to 25 early childhood stakeholders per year for the four years of the funding cycle,

for a total of 100 participants. It will be planned and implemented by a ECLI Work Group made up of public and private sector early childhood stakeholders from across the State.

This Institute will include both leadership development and early childhood content. It will be built on leadership training models developed by the Snelling Center for Government, a Vermont non-profit that created the Vermont Leadership Institute (VLI) in 1995 with the goal of stimulating citizen interest and participation in government.

The VLI is an intensive program nine-month program consisting of eight overnight sessions, totaling nineteen seminar days between September and June. Each session is held in a different region of the state to convey a sense of Vermont's rich historic, geographic and cultural diversity.

Key program features include:

- Participants learn directly from a variety of other leaders and their stories.
- Experiential activities, journaling and small-group conversations encourage exploration of individual and organizational values and options.
- The learning environment features an appreciative, collaborative approach and lively interaction.
- Thoughtful support for and among participants—before and during sessions—develops from the very beginning.

Other core models will also inform the ECLI, including those developed by the National Implementation Research Network (NIRN).

**D2b: Implementing effective policies and incentives to promote professional improvement and career advancement along an articulated career pathway that: (1) is aligned with the State's workforce knowledge and competency framework; (2) tightly links training with professional development approaches; and (3) is supported by strong evidence.**

**Rationale:**

In early childhood, Vermont has policies and incentives in place to promote professional improvement and career advancement along an articulated career pathway (see Table 22).

Bonuses for academic achievement have been in place for 20 years. Requirements include:

- Course content must be aligned with the State's workforce knowledge and

competency framework in order to progress on the career pathway and achieve Level certificates.

- Bonuses ranging from \$100 for a level I achievement to \$1,200 for a Bachelor’s Degree are awarded when an early childhood educator submits evidence of the academic achievement and a current individual professional development plan. Details and grant applications are available on the CDD and Northern Lights Career Development Center websites, and promoted through the network of CCRRs.

Vermont is proposing to incorporate federal T.E.A.C.H. Early Childhood® scholarships (TEACH) into its existing resources that currently support the workforce to attain degrees and credentials. The TEACH grant program provides grants of up to \$4,000 a year to students who are completing or plan to complete course work needed to begin a career in teaching. It is an evidence-informed strategy that is built on a theory of change that recognizes the need for a comprehensive approach to building a great early childhood workforce. TEACH projects nationally have reached almost 120,000 teachers, directors and family child care providers working in diverse early care and education settings across the country. Nationally, about 10% of recipients work in Head Start settings and about 12% work in PreK settings. TEACH scholarships typically reach a high proportion of people of color and those with low incomes. The average hourly wage of a TEACH recipient nationally in FY13 was less than \$10. Yet these individuals, while juggling work, school and family, do well, with average grade point averages in excess of 3.0.

TEACH scholarships bring with them support for the workforce that is both financial and personal. Scholarships provide support for tuition, books, travel, paid release time and a compensation enhancement at the end of each scholarship contract. However, each recipient also benefits from a scholarship counselor who provides support.

**Table 22: CDD Financial Incentives 2012-2013**

<b>CDD Financial Incentives to Increase Quality &amp; Professional Development 7/1/2012 through 6/30/2013</b>			
<i>For Individuals/Professionals</i>			
<b>Northern Lights Career Development Certificate Bonuses</b>	<b>Licensed Center Staff</b>	<b>Registered Home Provider</b>	<b>Total Number Awarded</b>
<b>CDA Renewal - \$150</b>	13	3	<b>16</b>

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<b>Bonus</b>			
Level I - \$100 Bonus	31	12	<b>43</b>
Level II - \$500 Bonus	43	11	<b>54</b>
Level IIIA - \$750 Bonus	11	0	<b>11</b>
Level IIIB - \$1000 Bonus	7	2	<b>9</b>
Level IVA - \$1200 Bonus	23	4	<b>27</b>
Level IVB - \$1200 Bonus	3	1	<b>4</b>
Level VA - \$1200 Bonus	3	0	<b>3</b>
Level VB - \$1200 Bonus	3	0	<b>3</b>
Teaching Licensure Endorsement - \$500 Bonus	8	0	<b>8</b>
Director Credential Step 3 - \$500 Bonus	2	0	<b>2</b>
Afterschool Professional Credential - \$500 Bonus	9	2	<b>11</b>
Afterschool Essentials Certificate - \$100 Bonus	1	0	<b>1</b>
<b>Professional Fee Supports:</b>			
College Tuition – Up to \$1000 per semester	27	18	<b>45</b>
Teaching Licensure Peer Review Fee – Up to \$500	2	2	<b>4</b>
Child Development Associate (CDA) Fees – Up to \$425	29	32	<b>61</b>
<i>For Early Education Programs</i>			
	<b>Licensed Centers</b>	<b>Registered Home Programs</b>	<b>Total Awarded</b>
<b>STEP Ahead Recognition Program Bonuses (VT STARS)</b>			
Level 1 - \$250 Bonus	10	76	<b>86</b>
Level 2 - \$500 Bonus	18	61	<b>79</b>
Level 3 - \$1000 Bonus	30	37	<b>67</b>
Level 4 - \$1,150	22	6	<b>28</b>
Level 5 - \$1,550	16	2	<b>18</b>
<b>Accreditation Bonuses</b>			

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NAEYC Accreditation - \$1000 Bonus	8	0	<b>8</b>
<b>Accreditation Fee Support</b>			
NAEYC Accreditation – up to the total amount of required fees	26	0	<b>26</b>
NAFCC – up to the total amount of required fees for NAFCC members	0	26	<b>26</b>
<i>Community Grants</i>			
Collaborative Training Grant – Up to \$1500	1	0	<b>1</b>

**D2c: Publicly reporting aggregated data on early childhood educator development, advancement, and retention.**

**Rationale:**

Vermont’s Bright Futures Child Care Information System (BFIS) is an online resource that is self-described as “a place for parents and child care providers to get answers to questions about child care, early education, school age care, and the services available to help ensure that high-quality child care is available to every child in Vermont who needs it.” BFIS is also a data base for licensing, financial payments related to child care and grants to providers and programs. When it was deployed in 2005, the primary focus was on ensuring payments were made to providers and that licensing procedures and records were documented. Since documentation of professional development was not deemed vital to operations, fully engaging the programs and early childhood educators in the system for documenting professional development was not as strong and information of this type was not consistently or regularly entered. Since 2005 however, the professional development system itself has developed and there are clear standards for how and what should be in BFIS to document professional development achievements and activities. We are therefore using an existing resource and getting mobilized to fully utilize its potential.

BFIS is under-populated with professional development data. Much of what there is is self-reported but not verified. This has severely limited the state’s capacity to understand the professional development status and needs of the workforce. The CDD and the BFIS’

Professional Development Streamline Committee have been working on strategies to streamline the entry of professional development into BFIS includes state and partner agencies, activities that will be furthered under this grant.

The Agency of Education also maintains two educator data bases that contain information on licensed early childhood educators. In addition to containing information on educators' licenses, the data bases include basic demographic information and teaching assignments if the educator is employed by a public school.

While the previously mentioned JSI survey provided substantive information regarding the workforce, it did not include wages and salaries. Wages and salaries have not been surveyed in more than ten years, and are not currently tracked by BFIS. Also, no structure is in place in Vermont to survey the early childhood workforce going further. Such a structure will be put in place to conduct such surveys annually, and BFIS will begin to track these data including wages and salaries.

**D2d: Setting ambitious yet achievable targets for (1) increasing the number of postsecondary institutions and professional development providers with programs, and the number of early childhood educators who receive credentials; and (2) increasing the number and percentage of early childhood educators who are progressing to higher levels of credentials.**

**Rationale:**

Vermont's higher education providers serving the Early Childhood Workforce report that are aligned to Vermont's workforce knowledge and competency framework (see Table A1-11). According to the JSI workforce survey, early childhood educators are still challenged in their progression to degrees when, for example, coursework in one state institution does not articulate to another. Another identified challenge is the need for advanced coursework pertinent to experienced professionals.

In establishing targets, we recognize the degree to which alignment with the framework is mature, but additional articulation is required. Therefore:

- We set a target of 3% for increasing the number of post secondary institutions and professional development providers with programs that are aligned with Vermont's'

workforce knowledge and competency framework because most if not all are already aligned.

Although extensive effort has gone into supporting the workforce in attaining professional development, credentials and degrees, and a great deal of information is known about who has received these credentials, there are still limitations to the data the State has. For example, even though BFIS has some information on everyone employed in regulated care, the baseline information (see Table D2d2) is the only verified professional development information. The total number of individuals in the workforce is stated as 9,074. These data reflect that only 7.95% of the family child care home providers, and 14.21% of the licensed staff, have credentials.

We estimate that the number of individuals who have the qualifications to attain credentials/degrees is actually much higher; we know anecdotally that many in the workforce have not submitted information to the system. Not all apprentices who have completed their apprenticeships are verified in BFIS and also the vast majority of licensed teachers also do not have their degrees verified in BFIS. As noted previously in D2, we are working to remedy this data issue that does not necessarily reflect an actual number of degrees and credentials.

On the positive side, Table D2d2 reflects the work over the last few years of the Child Development Division and the Northern Lights Career Development Center and PPD partners to implement a statewide system of professional development that includes critical elements recommended by NAEYC: (a) funding, (b) core professional knowledge, (c) qualifications and credentials; (d) quality assurances access, and (e) outreach. It is not inconsequential that 786 individual credential, certificates, degrees were achieved and verified in BFIS. There is still much to be done but with the ongoing guidance of the State Advisory Committee Subcommittee, the Professional Preparation and Development Committee, more progress will be made over the next 4 years both in identifying people who already have degrees and credentials and promoting others to attain them as well.

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<b>Performance Measures for (D)(2)(d)(1): Increasing the number of Early Childhood Educators receiving credentials from postsecondary institutions and professional development providers with programs that are aligned to the Workforce Knowledge and Competency Framework</b>					
	<b>Baseline (Today)</b>	<b>Target - end of calendar year 2014</b>	<b>Target - end of calendar year 2015</b>	<b>Target - end of calendar year 2016</b>	<b>Target – end of calendar year 2017</b>
Total number of “aligned” institutions and providers	23	25	27	28	28
Total number of Early Childhood Educators credentialed by an “aligned” institution or provider	783	1441	2,783	4,224	5,685
<i>[Please indicate whether baseline data are actual or estimated and describe the methodology used to collect the data, including any error or data quality information; and please include any definitions you used that are not defined in the notice. If baseline data are not currently available please describe in your High-Quality Plan in your narrative how and when you will have baseline data available.]</i>					

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<b>Performance Measures for (D)(2)(d)(2): Increasing number and percentage of Early Childhood Educators who are progressing to higher levels of credentials that align with the Workforce Knowledge and Competency Framework.</b>										
<b>Progression of credentials (Aligned to Workforce Knowledge and Competency Framework)</b>	<i>Baseline and Annual Targets -- Number and percentage of Early Childhood Educators who have moved up the progression of credentials, aligned to the Workforce Knowledge and Competency Framework, in the prior year</i>									
	<b>Baseline (Today)</b>		<b>Target- end of calendar year 2014</b>		<b>Target- end of calendar year 2015</b>		<b>Target- end of calendar year 2016</b>		<b>Target- end of calendar year 2017</b>	
	#	%	#	%	#	%	#	%	#	%
<b>Credential Type 1 - All</b> VT Early Childhood Level I Certificate (Lowest Credential)	118	1.30%	200	2.20%	400	4.41%	600	6.61%	750	8.27%
Registered – Home Based	29	2.66%	50	4.58%	150	13.75%	250	22.91%	300	27.50%
Licensed Center Staff	89	1.11%	150	1.88%	250	3.13%	350	4.38%	450	5.64%
<b>Credential Type 2 - All</b> VT Early Childhood Level II Certificate or Child Development Associate (CDA)	203	2.24%	250	2.76%	400	4.41%	600	6.61%	800	8.82%
Registered – Home Based	54	4.95%	75	6.87%	150	13.75%	250	22.91%	275	25.21%
Licensed Center Staff	149	1.87%	175	2.19%	250	3.13%	350	4.38%	525	6.58%
<b>Credential Type 3 - All</b> VT Early Childhood Level IIIA Certificate	72	0.79%	250	2.76%	500	5.51%	800	8.82%	1000	11.02%
Registered – Home Based	8	0.73%	50	4.58%	100	9.17%	200	18.33%	250	22.91%
Licensed Center Staff	64	0.80%	200	2.51%	400	5.01%	600	7.52%	750	9.39%
<b>Credential Type 4 - All</b> VT Early Childhood Level IIIB Certificate or Associate Degree	87	0.96%	200	2.20%	400	4.41%	600	6.61%	850	9.37%
Registered – Home Based	21	1.92%	50	4.58%	75	6.87%	75	6.87%	75	6.87%
Licensed Center Staff	66	0.83%	150	1.88%	325	4.07%	525	6.58%	775	9.71%

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<b>Credential Type 5 - All</b> VT Early Childhood Level IVA Certificate or Bachelor Degree	151	1.66%	200	2.20%	400	4.41%	600	6.61%	850	9.37%
Registered – Home Based	30	2.75%	50	4.58%	75	6.87%	100	9.17%	125	11.46%
Licensed Center Staff	121	1.52%	150	1.88%	325	4.07%	500	6.26%	725	9.08%
<b>Credential Type 6 - All</b> VT Early Childhood Level IVB Certificate	40	0.44%	200	2.20%	400	4.41%	600	6.61%	850	9.37%
Registered – Home Based	5	0.46%	15	1.37%	20	1.83%	25	2.29%	35	3.21%
Licensed Center Staff	35	0.44%	185	2.32%	380	4.76%	575	7.20%	815	10.21%
<b>Credential Type 7</b> VT Early Childhood Level VA Certificate or Master Degree	40	0.44%	45	0.50%	60	0.66%	75	0.83%	100	1.10%
Registered – Home Based	4	0.37%	5	0.46%	5	0.46%	5	0.46%	5	0.46%
Licensed Center Staff	40	0.50%	40	0.50%	55	0.69%	70	0.88%	95	1.19%
<b>Credential Type 8</b> VT Early Childhood Level VB Certificate (Highest Credential)	10	0.11%	10	0.11%	15	0.17%	20	0.22%	50	0.55%
Registered – Home Based	1	0.09%	1	0.09%	2	0.18%	2	0.18%	2	0.18%
Licensed Center Staff	9	0.11%	9	0.11%	13	0.16%	18	0.23%	48	0.60%
<b>Total Staff with Level Certificates or Degrees</b>	<b>721</b>	<b>7.95%</b>	<b>1355</b>	<b>14.93%</b>	<b>2575</b>	<b>28.38%</b>	<b>3895</b>	<b>42.92%</b>	<b>5250</b>	<b>57.86%</b>
Registered	152	13.93%	296	27.13%	577	52.89%	907	83.13%	1067	97.80%
Licensed	573	7.18%	1059	13.27%	1998	25.03%	2988	37.43%	4183	52.40%
<b>Credential Type 9</b>	42	0.46%	50	0.55%	60	0.66%	70	0.77%	80	0.88%

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Apprenticeship Program Completed										
Registered – Home Based	3	0.27%	5	0.46%	5	0.46%	5	0.46%	5	0.46%
Licensed Center Staff	39	0.49%	45	0.56%	55	0.69%	65	0.81%	75	0.94%
<b>Credential Type 10</b> Early Childhood Family Mental Health Credential	3	0.03%	10	0.11%	15	0.17%	25	0.28%	30	0.33%
Registered – Home Based	0	0	0	0%	0	0%	0	0%	0	0%
Licensed Center Staff	3	0.04%	10	0.13%	15	0.19%	25	0.31%	30	0.38%
<b>Credential Type 11</b> Program Director Credential – Step One	17	0.19%	26	0.29%	32	0.35%	53	0.58%	74	0.82%
Registered – Home Based	0	0	1	0.09%	2	0.18%	3	0.27%	4	0.37%
Licensed Center Staff	17	0.21%	25	0.31%	30	0.38%	50	0.63%	70	0.88%
<b>Credential Type 12</b> Program Director Credential – Step Two	1	0.01%	26	0.29%	51	0.56%	101	1.11%	151	1.66%
Registered – Home Based	0	0	1	0.09%	1	0.09%	1	0.09%	1	0.09%
Licensed Center Staff	1	0.01%	25	0.31%	50	0.63%	100	1.25%	150	1.88%
<b>Credential Type 13</b> Program Director Credential – Step Three	2	0.02%	25	0.28%	50	0.55%	80	0.88%	100	1.10%
Registered – Home Based	0	0	0	0	0	0	0	0	0	0
Licensed Center Staff	2	0.03%	25	0.31%	50	0.63%	80	1.00%	100	1.25%
<b>Total staff with any credential or degree</b>	786	8.66%	1492	16.44%	2783	30.67%	4224	46.55%	5685	62.65%

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Registered – Home Based	155	14.21%	303	27.77%	585	53.62%	916	83.96%	1077	98.72%
Licensed Center Staff	635	7.95%	1189	14.89%	2198	27.53%	3308	41.44%	4608	57.72%

The baseline data provided in this chart is the actual number of individuals who have received the credential and the information has been verified by the Vermont Northern Lights Career Development Center in the Bright Futures Information System.

Northern Lights Career Development Center awards the credentials listed in this chart and enters them as verified into Bright Futures Information System at the time of award. The percentage of individuals with the credential is calculated using the number of individuals receiving the credential and the total number of people in the workforce. The number of individuals in the workforce is collected in Bright Futures Information System through the child care licensing process and collects the individuals that are currently working in regulated early care settings. The total amount of home based providers is 1091, and licensed center is 7983 for a total of 9074 individuals in the early care workforce, 9.24% currently hold a degree or credential.

## **E. Measuring Outcomes and Progress**

*Note: The total available points for (E)(1) and (E)(2) = 40. The 40 available points will be divided by the number of selection criteria that the applicant chooses to address so that each selection criterion is worth the same number of points. For example, if the applicant chooses to address both selection criteria in Focused Investment Area (E), each criterion will be worth up to 20 points.*

*The applicant must address one or more selection criteria within Focused Investment Area (E).*

### (E)(1) Understanding the status of children's learning and development at kindergarten entry.

The extent to which the State has a High-Quality Plan to implement, independently or as part of a cross-State consortium, a common, statewide Kindergarten Entry Assessment that informs instruction and services in the early elementary grades and that--

(a) Is aligned with the State's Early Learning and Development Standards and covers all Essential Domains of School Readiness;

(b) Is valid, reliable, and appropriate for the target population and for the purpose for which it will be used, including for English learners and children with disabilities;

(c) Is administered beginning no later than the start of the school year ending during the fourth year of the grant to children entering a public school kindergarten; States may propose a phased implementation plan that forms the basis for broader statewide implementation;

(d) Is reported to the Statewide Longitudinal Data System, and to the early learning data system, if it is separate from the Statewide Longitudinal Data System, as permitted under and consistent with the requirements of Federal, State, and local privacy laws; and

(e) Is funded, in significant part, with Federal or State resources other than those available under this grant (e.g., with funds available under section 6111 or 6112 of ESEA).

*If the State chooses to respond to this selection criterion, the State shall write its full response in the text box below. The State may also include any additional information it believes will be helpful to peer reviewers. If the State has included relevant attachments in the Appendix, these should be described in the narrative below and clearly cross-referenced to allow the reviewers to locate them easily.*

*In scoring the selection criterion, peer reviewers will determine, based on the evidence the State submits, whether each element of the selection criterion is implemented or planned; the quality of the implementation or plan (see the definition of a High-Quality Plan for the components reviewers will be judging); the extent to which the different types of Early Learning and Development Programs in the State are included and addressed; and the extent to which the*

*unique needs of the State's special populations of Children with High Needs are considered and addressed. The State is responsible for providing clear and detailed information to assist the peer reviewers in making these determinations.*

Evidence for (E)(1):

- Any supporting evidence the State believes will be helpful to peer reviewers.

**Section E1: Understanding the status of children's learning and development at kindergarten entry.**

**Abstract:** One of the strengths of Vermont's ELD system is its Ready Kindergartners Survey, which has been in use statewide since 2000. While the Ready Kindergartners Survey has served Vermont well, there is some work to be done to ensure that it reflects the latest research on predictors of school success and to verify that it is appropriate for all subgroups of kindergartners. The methods currently used to collect the readiness data need to be improved so that kindergarten teachers can easily and securely submit child level ratings that include children's identifying information. Further, kindergarten teachers need to engage in professional development experiences to understand the RKS items and rating scale to assure reliability and that they know how to interpret the data to use it to inform their instruction. Work in this section relates to Budget Project #19.

**High-quality Plan Summary**

**Goal:** Vermont seeks to strengthen its statewide Ready Kindergartners Survey (RKS) so that it is appropriate for all children, is reliable, and has the ability to inform instruction at the classroom level, and to inform policies and practices at the local, regional and state levels.

**Outcomes:**

- Vermont's Ready Kindergartners Survey (RKS) is aligned with the new Vermont Early Learning Standards (see C1).
- The enhanced RKS is shown to be a valid and reliable measure of children's learning and development upon entering kindergarten.
- By 2016, Vermont's kindergarten teachers understand and reliably implement the enhanced RKS, and use the results to inform their instruction.

- By 2017, the percentage of kindergartners assessed through the statewide RKS is increased from 81.8% (2012-2013 baseline) to 100%.
- By the end of the grant, 70% of elementary school principals report that they understand the purposes and content of the revised RKS.
- By 2017, 70% of administrators and teachers of PreK programs report that they understand the purposes and content of the revised RKS, and how kindergarten readiness data can inform their practices.
- During 2016 and 2017, the data from the enhanced RKS are made available on the ECDRS (see E2);
- During 2016 the data from the enhanced RKS are extracted, transferred, and loaded into SLDS and linked with the new SLDS data elements and by the end of 2017, the integrated enhanced RKS-SLDS data will be transferred into ECDRS (see Figure 12 in E2).

**Strategies:**

- Contract with national experts to conduct a review of the current Ready Kindergartners Survey to determine: (1) construct validity (i.e., how well the individual items on the RKS measure a particular construct), (2) internal consistency (i.e., the correlations among the items within a particular construct), (3) alignment of the RKS with the Vermont Early Learning Standards, and the fairness of the RKS for subgroups (e.g., low social economic status, English Language Learners, children with disabilities). These analyses will indicate needed revisions of the assessment items and identify any necessary changes to the processes used to analyze the RKS data.
- Convene a group of kindergarten teachers, representatives from a cross-section of early learning and development programs, and school administrators to review the results and recommendations of the expert review of the current RKS to determine which revisions should be made.
- Create an application for secure online data collection with the ability to extract RKS data in such a way that the data may become part of the AOE's state longitudinal data system.
- With input from kindergarten teachers and others, develop initial professional development activities on implementing the enhanced RKS.
- Recruit 50 kindergarten teachers to pilot the enhanced RKS after completing initial

professional development activities, and use the results to inform any additional revisions to the RKS and the further development of professional development activities.

- Develop professional development activities in various formats (i.e., online modules and face-to-face trainings) for kindergarten teachers to develop in-depth knowledge of the RKS: how to reliably complete the enhanced RKS and use the information to inform instruction.
- Create and disseminate a RKS Users Guide published online and in hard copy.
- Develop RKS professional development activities for elementary school principals, and administrators and educators in early learning and development programs in various formats (i.e., webinars, online modules, face-to-face trainings). These activities will provide an overview of the RKS and focus on interpreting the results, identifying trends, and discerning implications for policies and practices.
- Continue to link the RKS data to the ECDRS. Link the RKS data to the AOE’s Education Data Warehouse (EDW) until the SLDS is fully operational in 2014-2015.

**Table 23: Timeline and Parties Responsible**

Key Activity	Year				Parties Responsible
	2014	2015	2016	2017	
Complete an Expert Review of the current RKS	✓				American Institute for Research with oversight from Building Bright Futures (BBF), VT Agency of Education (AOE), VT Department of Health (VDH), VT Department for Children and Families (DCF)
Review of kindergarten teachers and other stakeholders findings and expert review and recommend revisions to RKS	✓				BBF/AOE/DCF/VDH team convene meetings
Create application for secure online RKS data collection	✓				Consultant with oversight from BBF/AOE/DCF/VDH

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Develop initial professional development activities	✓				Consultant with oversight from BBF/AOE/DCF/VDH
Pilot enhanced RKS	✓				50 volunteer K teachers
Analyze results of Pilot	✓				American Institute for Research with oversight from BBF/AOE/DCF/VDH
Develop and provide professional development activities for kindergarten teachers to gain in-depth knowledge of RKS	✓	✓	✓		Consultant with oversight from BBF/AOE/DCF/VDH
Create and disseminate a RKS Users Guide		✓			Consultant with oversight from BBF/AOE/DCF/VDH
Develop and provide professional development activities for principals, administrators & educators in ELD programs		✓	✓		Consultant with oversight from BBF/AOE/DCF/VDH
Fully implement the enhanced RKS			✓		AOE
Link enhanced RKS data with SLDS and ECDRS			✓	✓	AOE/BBF

**Metrics:** Semi-annual monitoring of success in meeting Outcomes targets and process measures.

**Rationale:**

Since 2000, Vermont has gathered information on the readiness of children entering kindergarten by annually surveying all kindergarten teachers about the “readiness” of their students within the first six to ten weeks of school. Teachers complete a survey for each child in her or his kindergarten class. The Ready Kindergartners Survey (RKS) is a common, statewide kindergarten entry assessment. It is not a direct assessment of children; rather it relies on the accumulated observational knowledge the teacher has developed about the child during the first few weeks of kindergarten.

The RKS (see Appendix XIX) consists of 28 items across the domains of “social and emotional development,” “approaches to learning,” “communication,” “cognitive development and general knowledge,” and “physical health and development”. These domains are consistent with all of the Essential Domains of School Readiness (see Table A1-6). Teachers are asked to

rate each of the children in their kindergarten class on 25 of the items using the following rating scale:

- BEGINNING: Frequently requires adult guidance in this area. Skills are observed rarely.
- PRACTICING: Sometimes requires adult guidance in this area. Skills are observed frequently, but may be inconsistent.
- PERFORMING INDEPENDENTLY: Rarely requires adult guidance. Skills are observed frequently and are consistent. Child initiates appropriate behaviors.
- DON'T KNOW: No opportunity to observe this behavior.

The last three items on the RKS asks the teacher to determine if factors such as poor health, hunger, and fatigue impact the child's ability to learn.

In 2006, a crosswalk of the RKS items and the Vermont Early Learning Standards showed that the items were aligned.

While the Ready Kindergartners Survey has served Vermont well, there is some work to be done to ensure that it reflects the latest research on predictors of school success and to verify that it is appropriate for all subgroups of kindergartners. The methods currently used to collect the readiness data need to be improved so that kindergarten teachers can easily and securely submit child level ratings that include children's identifying information. Further, kindergarten teachers need to engage in professional development experiences to assure reliability and that they know how to interpret the data to use it to inform their instruction.

For the above reasons, representatives from AOE, AHS, and BBF collaboratively submitted a proposal to the A.D. Henderson Foundation early this year (see Appendix XXI). The proposal was funded for \$99,395 to support the following activities:

- Contracting with the American Institutes for Research (AIR) to conduct an Expert Review and validation of the current RKS;
- Convening a group of kindergarten teachers and stakeholders to review findings from AIR's Expert Review and recommend revisions to RKS;
- Creating an application for secure online RKS data collection;
- Developing initial professional development activities for the teachers involved in the pilot;
- Piloting the enhanced RKS; and

- Analyzing the results of the pilot.

Completion of these activities will result in verifying that the RKS is valid and appropriate for children from various culturally or linguistically diverse backgrounds, and inclusive of children with special needs. However, it does not address additional activities that are required to ensure kindergarten teachers use the RKS reliably, and know how to use the data in their RKS Class Profile to inform instruction. Professional development for school principals and ELD program administrators and educators is also needed:

- Developing and providing professional development activities for kindergarten teachers to gain in-depth knowledge of RKS and using data to inform instruction;
- Creating and disseminating a RKS Users Guide;
- Developing and providing professional development activities for principals, administrators and educators in early learning and development programs;
- Linking the enhanced RKS data with ECDRS;
- Linking the enhanced RKS data with SLDS (see E2); and
- Implementing the enhanced RKS statewide.

The RTT-Early Learning Challenge grant would support the first five activities. The last activity, full statewide implementation of the enhanced RKS, will be supported with state funds, as has been the case for many years with the current RKS.

In July 2013, Governor Shumlin announced a public-private partnership to enable communities across the state to launch or expand publicly funded PreKindergarten programs. The state is providing \$400,000 from the Agency of Education to towns that want to create or expand their publically funded PreK programs. An additional \$400,000 is being provided by the Vermont Community Preschool Collaborative (VCPC), a fund created and supported by the nonprofit Permanent Fund for Vermont's Children, to ensure more children have access to high-quality programs. These funds will result in additional services to an estimated 340 children, of whom some will be children with high needs.

**E1a: The Kindergarten Entry Assessment (KEA) is aligned with the State's ELDS and covers all essential domains of school readiness.**

As previously mentioned, since 2000 Vermont has gathered information on the readiness of

children entering kindergarten by annually surveying all kindergarten teachers about the “readiness” of their students within the first six to ten weeks of school. Teachers complete a survey for each child in her or his kindergarten class. The Ready Kindergartners Survey (RKS) is a common, statewide kindergarten entry assessment. It consists of 28 items across the domains of “social and emotional development,” “approaches to learning”, “communication”, “cognitive development and general knowledge”, and “physical health and development”. These domains are consistent with all of the Essential Domains of School Readiness (see Table A1-6).

**E1b: The KEA is valid, reliable and appropriate**

As previously noted, an evaluation of the validity and reliability of the instrument is currently being conducted. The long history of successful use of the instruments speaks to its appropriateness.

**E1c: The KEA is administered beginning no later than the start of the school year ending during the fourth year of the grant to children entering a public school kindergarten.**

As previously stated, Vermont has been surveying since 2000 to establish children’s readiness to enter kindergarten. Thus, this requirement is not applicable.

**E1d: The KEA is reported to the Statewide Longitudinal Data System (SLDS).**

As described below in Table 25 in E2, RKS data is not presently linked to Vermont’s ECDRS, but the BBF currently has the RKS data on its Planned Data list. Additional data integration will be completed through funding available under this application, such that RKS data will be fully integrated into the SLDS after SLDS becomes fully operational in 2016.

**E1e: The KEA is funded, in significant part, with Federal or State resources other than those available under this grant.**

Vermont has been surveying to assess children’s readiness to enter kindergarten for 13 years. Funding for this effort has come from existing State funds, and this will continue going forward. Thus, no RTT-ELC funds, should Vermont be awarded a grant, will be used for general operations of the RKS.

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(E)(2) Building or enhancing an early learning data system to improve instruction, practices, services, and policies.

The extent to which the State has a High-Quality Plan to enhance the State's existing Statewide Longitudinal Data System or to build or enhance a separate, coordinated, early learning data system that aligns and is interoperable with the Statewide Longitudinal Data System, and that either data system--

(a) Has all of the Essential Data Elements;

(b) Enables uniform data collection and easy entry of the Essential Data Elements by Participating State Agencies and Participating Programs;

(c) Facilitates the exchange of data among Participating State Agencies by using standard data structures, data formats, and data definitions such as Common Education Data Standards to ensure interoperability among the various levels and types of data;

(d) Generates information that is timely, relevant, accessible, and easy for Early Learning and Development Programs and Early Childhood Educators to use for continuous improvement and decision making and to share with parents and other community stakeholders; and

(e) Meets the Data System Oversight Requirements and complies with the requirements of Federal, State, and local privacy laws.

*If the State chooses to respond to this selection criterion, the State shall write its full response in the text box below. The State may also include any additional information it believes will be helpful to peer reviewers. If the State has included relevant attachments in the Appendix, these should be described in the narrative below and clearly cross-referenced to allow the reviewers to locate them easily.*

*In scoring the selection criterion, peer reviewers will determine, based on the evidence the State submits, whether each element of the selection criterion is implemented or planned; the quality of the implementation or plan (see the definition of a High-Quality Plan for the components reviewers will be judging); the extent to which the different types of Early Learning and Development Programs in the State are included and addressed; and the extent to which the unique needs of the State's special populations of Children with High Needs are considered and addressed. The State is responsible for providing clear and detailed information to assist the peer reviewers in making these determinations.*

Evidence for (E)(2):

- Any supporting evidence the State believes will be helpful to peer reviewers.

**Section E2: Enhancing the State’s existing statewide longitudinal data system or build or enhance a separate, coordinated, early learning data system.**

**Abstract:** The high quality plan in E2 consists of four RTT-ELC funded activities summarized in Figure 24 (Project Budget #21 - #27):

- Activity 1: Completion of the Construction of an Early Childhood Data Reporting System (ECDRS) corresponding with Project Budget #21
- Activity 2: Establish a Prenatal to Grade 12 (P-12) Data Governance Council to Meet the Data System Oversight Requirements corresponding with Project Budget #22
- Activity 3: Develop a Web-Based Children Integrated Services (CIS) Data System corresponding with Project Budget #20
- Activity 4: Link and Integrate Five Additional Essential Datasets with SLDS and Transfer Their Custom Reports/Data Extracts into ECDRS:
  - 1) Publicly funded PreK datasets from 61 Supervisory Unions corresponding with Project Budget #23;
  - 2) Enhanced RKS dataset corresponding with Project Budget #24;
  - 3) IDEA Part B dataset corresponding with Project Budget #25;
  - 4) TS Gold Dataset corresponding with Project Budget #26; and
  - 5) Head Start and Early Head Start datasets from the seven Head Start and four Early Head Start programs in Vermont corresponding with Project Budget #27

Vermont’s existing early learning and related data systems are not well integrated. As Figure 24 suggests, the proposed initiatives will result in far more integrated data systems -- a coordinated, integrated 21st Century early learning data system (ELDS) and will enhance, will aligned with, and will be interoperable with the State of Vermont’s SLDS.

The above four activities with their seven projects are ambitious but achievable, and they will improve instruction, practices, services, and policies that support the health, development and learning of high-needs children and families, by enabling Vermont to enhance its early learning data capacity via a coordinated, integrated 21st Century early learning data system (ELDS) that will enhance, will aligned with, and will be interoperable with the State of Vermont’s SLDS.

These projects will enable the building of integrated data systems and will provide policymakers, parents, and practitioners with data which would be used to develop policy, programmatic, and

instructional strategies to close the achievement gap between high needs children and those children without high needs in Vermont.

Please note that the four activities have one overarching goal but individual strategies, outcomes, metrics, and a timeline embedded within their respective narratives (see below).

These four activities address all elements of E2, including a, b, c, d and e.

### **High Quality Plan**

**Overarching Goal for E2:** For the purposes of improving instruction, practices, services, and policies that support the health, development and learning of children and families, including children with high needs, Vermont seeks to enhance its early learning data capacity via a coordinated, integrated 21<sup>st</sup> Century early learning data system that enhances, is aligned with, and is interoperable with the State of Vermont's SLDS<sup>22</sup>. The State will ensure that both systems (a) contain all essential data elements; (b) enable uniform data collection and easy entry of essential data elements; (c) facilitate the exchange of data between participating State agencies; (d) generate information that is timely, relevant, accessible, and easy for early learning and childhood programs and providers to use for continuous improvement and decision making and to share with parents and other community stakeholders; and (e) meet regulatory and best practice data oversight requirements, as defined in the RTT-ELC application.

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<sup>22</sup> Vermont's Agency of Education is currently constructing its SLDS, and the SLDS will be operational in 2016. It will collect and maintain detailed, high-quality, student- and staff-level data that are linked across entities and that over time provide a complete academic and performance history for each student. In the interim, data are being housed at Vermont's Agency of Education's Education Data Warehouse.



- By January 2014: *Is the quality of early childhood programs improving?* Specifically (B)(2)(c): Increasing the number and percentage of Early Learning and Development Programs participating in the statewide Tiered Quality Rating and Improvement System and (B)(4)(c)(1): Increasing the number of Early Learning and Development Programs in the top tiers of the Tiered Quality Rating and Improvement System.
- By January 2015: *Is the early childhood workforce skilled and stable?* Specifically the composition and qualifications of the early childhood educator workforce and the Performance Measures for (D)(2)(d)(2): Increasing the number and percentage of Early Childhood Educators who are progressing to higher levels of credentials that align with the Workforce Knowledge and Competency Framework.
- By January 2015: *Are our young children achieving optimal health and development?* Specifically for the kindergarten entry early childhood developmental period using the Vermont's Ready Kindergartners Survey (RKS) within the context of Vermont's ELD Comprehensive Assessment System (see Figure 3.)
- By January 2016: *Are children ages birth to six spending their days in quality environments policy?* Specifically children with high needs: a. children of low-income families enrolled in the child care subsidy program and b. children enrolled in Part C of IDEA, Children's Integrated Services: Early Intervention and performance measure (B)(4)(c)(2): Increasing the number and percentage of Children with High Needs who are enrolled in Early Learning and Development Programs in the top tiers of the Tiered Quality Rating and Improvement System.
- By January 2017: *Are our young children achieving optimal health and development?* Specifically for the infant and toddler early childhood developmental periods and the Ages and Stages Questionnaires (ASQ and ASQ-SE) developmental screening and outcomes data in C3d and within the context of Vermont's ELD Comprehensive Assessment System (see Figure 3.) This will include Performance Measures for (C)(3)(d), developmental screening and for

high needs children and referral outcomes.

- By December 2017: ECDRS working in conjunction with the Prenatal through Grade 12 Data Governance Council will have established data sharing agreements and file transfer processes to exchange child, program and educator program participation and attendance datasets from CIS (Activity #3) and SLDS (Activity #4.)

**Strategies for Activity 1:**

- In collaboration with AOE staff and other appropriate stakeholders, prepare an Early Childhood and K-12 SLDS Data Integration Needs Assessment using the Institute for Education Science (IES), SLDS Grant Program’s Early Childhood Self-Assessment and Planning Guide and results from key documents and processes such as *The Key to Good Policy, Smart Decisions and Wise Investments: Vermont’s Roadmap for an Early Childhood Data Reporting System* and November 2012 ECDRS Stakeholder Meeting. This needs assessment will inform the requirements assessment strategy in Project #4.
- In collaboration with AOE staff and other appropriate stakeholders, Review and align the ECDRS data elements with Common Education Data Standards to ensure interoperability among the various levels and types of data with the VT K-12 SLDS.
- Complete ECDRS by build out the ECDRS working prototype v1.3 by:
  - Acquiring key datasets specific to the following policy questions: Are our young children achieving optimal health and development? Is the quality of early childhood programs improving? How skilled and stable is our early childhood workforce? These datasets include those addressing child health and development, child participation-attendance, and workforce. ;
  - Preparing the data for use by end-users (analysis, story behind the data – includes research, translate in plain language and tailor for various audiences);
  - Developing user guides and implement training and support services; and
  - Solidifying system infrastructure;
- Monitor data gaps, assuring data integrity, and monitoring traffic metrics and outcome patterns;
- Secure funding to maintain and refine ECDRS after RTT-ELC grant funding ends.

**Table 24: Timeline and Parties Responsible**

Key Activity	Year				Parties Responsible
	2014	2015	2016	2017	
Prepare an Early Childhood and K-12 SLDS Data Integration Needs Assessment	✓				VT AOE, AHS and BBF staff
Review and align the ECDRS data elements with Common Education Data Standards	✓				VT AOE, AHS, BBF Date and Evaluation Committee, and BBF ECDRS staff
Acquire key datasets	✓	✓	✓	✓	BBF ECDRS Staff and Data Stewards
Prepare the data for use by end-users	✓	✓			BBF ECDRS Staff
Solidify system infrastructure	✓	✓			BBF ECDRS Staff
Develop user guides and implement training	✓	✓			BBF ECDRS Staff
Monitor data gaps, assuring data integrity, and monitoring traffic metrics and outcome patterns	✓	✓	✓	✓	BBF Data and Evaluation Committee and ECDRS Staff
Maintain and refine system including seeking additional funding sources			✓	✓	BBF, BBF Data and Evaluation Committee, and BBF ECDRS Staff

**Metrics:** Timely completion of process and outcome measures defined above.

**Rationale:**

Vermont is one of the states that are developing reporting systems to acquire, connect and analyze data across the early childhood system and link with other child, family, workforce, program, and community databases. On September 25, 2013, Building Bright Futures (BBF) launched the ECDRS working prototype (version 1.3) acquired and used seven datasets (see

Figure 24) including the STARS dataset (see B1) to answer the policy question, *Is the quality of early childhood programs improving?* The BBF is a non-profit organization with a contract with the State government to fund multiple functions including spearheading the ECDRS development process (see A1).

BBF is ready to now build out in phases and complete the ECDRS working prototype.<sup>23</sup> BBF has proven the viability of this concept with the ECDRS working prototype. ECDRS is a searchable web-based public platform that is accessible to all Vermonters, and has multiple audiences: policymakers, parents, and administrators and practitioners in public and private early childhood agencies serving children and families.

The completion of ECDRS is pivotal to the enhancement of Vermont's existing data systems into a coordinated, integrated whole. This was a key goal defined in *The Key to Good Policy, Smart Decisions and Wise Investments: Vermont's Roadmap for an Early Childhood Data Reporting System* (see Appendix XXIV) developed by a broad group of stakeholders, in a process funded by a National Governors' Association technical assistance award (Paterson, et al., 2012). This roadmap document serves as ECDRS' strategic plan.

BBF has begun implementing the ECDRS strategic plan. The RTT-ELC grant would enable the BBF to collect the data and finish building ECDRS so that ECDRS would contain readily accessible data to answer questions posed by and of interest to policymakers, parents, and administrators and practitioners. ECDRS facilitates the exchange of data among early childhood stakeholders in a manner meeting the requirements of an effective system as described above in the Goal statement. ECDRS would provide information that is timely, relevant, accessible, and

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<sup>23</sup> The ECDRS Working Prototype is a functional model of the integrated online system developed to demonstrate that meaningful data can be harnessed and used to advance the well-being of Vermont's children.

easy for Early Learning and Development Programs and Early Childhood Educators to use for continuous improvement and decision making and to share with parents and other community stakeholders.

As mentioned above, BBF has received grants from CDD and DCF to fund the development of multiple functions including spearheading the ECDRS development process, and BBF's Data and Evaluation Committee provides oversight and guidance to BBF staff as they build the system using emerging and innovative open-sourced information technology. The BBF Data and Evaluation Committee members include representatives from AOE, AHS, VDH, the Vermont Head Start-State Collaboration Office, private philanthropic organizations, the business community, and other stakeholders.

ECDRS' key benefits are that it:

- Allows quick access to indicators for all dimensions of children and family well-being and early childhood system strengths;
- Collects and organizes multiple data elements to answer key policy questions; and
- Captures data at multiple geographic levels including at the town-, school district/supervisory union-<sup>24</sup>, county-, regional-, and state levels.

By providing a robust and extensive range of data to the public, the ECDRS system will help policymakers, parents, and administrators and practitioners who work in public and private agencies track aggregated, child, family and community outcomes; stimulate dialogue; inform policy development and decision making; support quality improvement; identify data gaps; and assist partners in finding interoperability solutions.

Figure 25 and Table 25 below provides a visual depiction of the multiple data contributors and users of ECDRS, a reflection of the Vermont's integrated and comprehensive view of its

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<sup>24</sup> In Vermont, local educational authorities have different names, including "school district" and "supervisory union."

early childhood system and relationship to other systems (health, care and education) that support children prenatal through age 8 (third grade).



**Figure 24: ECDRS System**

As explained in Table 25, ECDRS is presently a working prototype containing the data sets depicted in the “Existing Data” column. ECDRS will achieve mature functionality when: (a) all but two of the data sets described in the Table are in place<sup>25</sup> and (b) ECDRS can fully accomplish the following:

<sup>25</sup> The Child Health Profile and the Child Abuse and Neglect Datasets will be incorporated as soon as possible but likely on a timeline outside the scope of the RTT-ELC grant funding.

- Visualization (charts, graphs and maps);
- Analysis and Communication (linking and story building);
- Connecting and Exchanging (learning from people and projects; pull in or push out data);
- Data Cataloging (data definitions, stewards, sources and relationships) and
- Training and Support (understanding and using the data; making data actionable).



**Figure 25: ECDRS Prototype Home Page**

**Table 25: Vermont ECDRS – Existing and Planned Data Sets**

Existing Data	Planned Data
Regulated Care and Education Programs and Step Ahead Recognition System (VT STARS) Tier Level, Bright Futures Information System, CDD-DCF-AHS	Ready Kindergartners Survey (RKS) Dataset AOE
Vermont National Accredited Child Care and Education Program, 2007-current, CDD-DCF-AHS	Composition and Qualifications of Early Childhood Workforce, Bright Futures Information System, CDD-DCF-AHS
Vermont Early Head Start-Head Start Program and Partner, (SY 2012-2013) Vermont Head Start Association	Child Care Subsidy Participation and Attendance, Bright Futures Information System, CDD, DCF, AHS and Children’s Integrated Services Early Intervention (Part C of IDEA,) Participation and Attendance, CDD-DCF-AHS
Identification of Publicly Funded PreK (Act 62) Programs, VT STARS Administrators, CDD-DCF-AHS	National, state and local datasets that provide socio-demographic and population well-being that influence positive child health and development outcomes.

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Public School Students Eligible for Free and Reduced Price School Meals (SY 2007/08-2011/12), Child Nutrition Programs, AOE	
Child, Youth, Adult and Elderly Population Single Year Age Counts and Percentages in Vermont, U.S. Census Bureau, 2010 Census, Summary File 1, Table P12	CIS and SLDS Participation, Attendance and Development/Growth Datasets, AOE
Ratio of Income to federal Poverty Level by VT, Counties and Age Group (Census Bureau, 5 American Community Survey)	
Head Start Community Needs Assessment Datasets, All seven HS agencies	Child Abuse and Neglect Dataset, Family Services Division, Family Services Division, DCF, AHS

**Activity 2: Establish a Prenatal through Grade 12 (P-12) Data Governance Council to Meet the Data System Oversight Requirements**

**Outcomes for Activity 2:**

- A new P-12 Data Governance Council is appointed by Governor Shumlin and meets monthly during the first funding year, then quarterly during the rest of the funding period. The membership of the P-12 Data Governance Council will include representatives from the existing Kindergarten through Grade 12 (K-12) Data Governance Committee which was formed to provide data governance for the SLDS;<sup>26</sup>
- During the first funding year, the P-12 Data Governance Council establishes appropriate policies, and procedures and assures training to effect the appropriate effective integration of ELDS and SLDS by taking actions to ensure that both ELDS and the

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26 The existing K-12 Data Governance Committee is the same body as the Kindergarten through Grade 12 Vermont Automated Data Reporting (VADR) Governance Committee which is currently focused on VADR project implementation associated with the construction of the SLDS.

enhanced SLDS:

- Have all of the Essential Data Elements;
- Enable uniform data collection and easy entry of the Essential Data Elements by Participating State Agencies and Participating Programs;
- Facilitate the exchange of data among Participating State Agencies by using standard data structures, data formats, and data definitions such as Common Education Data Standards to ensure interoperability among the various levels and types of data;
- Generate information that is timely, relevant, accessible, and easy for Early Learning and Development Programs and Early Childhood Educators to use for continuous improvement and decision making and to share with parents and other community stakeholders; and
- Meet the Data System Oversight Requirements and complies with the requirements of Federal, State, and local privacy laws.

**Strategies for Activity 2:**

1. Governor Shumlin will establish a P-12 Data Governance Council with broad stakeholders appointed by the Governor.
2. The P-12 Data Governance Council will approve policies and enforcement mechanisms to ensure that Vermont has a coordinated, early learning data system that enhances, is aligned with, and is interoperable with the existing and enhanced SLDS and that the requirements of the RTT-ELC grant are met. The membership of the P-12 Data Governance Council will include representatives from the K-12 Data Governance

Committee.<sup>27</sup>

**Table 26: Timeline and Parties Responsible**

Key Activity	Year				Parties Responsible
	2014	2015	2016	2017	
P-12 Data Governance Council appointed	✓				Governor
P-12 Data Governance Council meets monthly					P-12 Data Governance Council
P-12 Data Governance Council establishes appropriate polices and procedures	✓				P-12 Data Governance Council
P-12 Data Governance Council assures appropriate training	✓				P-12 Data Governance Council
P-12 Data Governance Council meets quarterly		✓	✓	✓	P-12 Data Governance Council
P-12 Data Governance Council assures ongoing operational quality		✓	✓	✓	P-12 Data Governance Council

**Metrics:** Timely completion of process measures defined above.

**Rationale:**

The need for data governance was also identified as a priority in the previously mentioned

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27 The existing K-12 Data Governance Committee is the same body as the Kindergarten through Grade 12 Vermont Automated Data Reporting (VADR) Governance Committee which is currently focused on VADR project implementation associated with the construction of the SLDS.

ECDRS strategic plan (Paterson, et al., 2012). Activity #2 addresses that need and meets the Data System Oversight Requirements of the RTT-ELC grant application and complies with the requirements of Federal, State, and local privacy laws, and at the same time this initiative will ensure that data will be made accessible to educators, parents, and other stakeholders inform instruction, practices, and policies to support the health, development, and learning of high needs children and their families.

The strategic plan called for the need for a data governance body and recommended that the BBF be appointed to serve in this role. However, the BBF lacks the legal authority to govern the data held by State agencies, departments, and divisions. Thus, we seek to establish a new P-12 Data Governance Council within State government to allow for more robust oversight. The existing K-12 Data Governance Committee at AOE will still exist as a “project based” governance committee because it is needed to address the questions/concerns/needs that arise during the SLDS grant implementation.<sup>28</sup>

During the first year of this grant, the State will establish a new P-12 Data Governance Council to establish policies and enforcement mechanisms to ensure that Vermont has a coordinated, early learning data system that enhances, is aligned with, and is interoperable with the existing and enhanced Statewide Longitudinal Data System (SLDS). The SLDS K-12 Governance Committee will still exist as a “project based” governance committee, and it is needed to address the questions/concerns/needs that arise during the SLDS grant implementation. Meanwhile, representatives from the K-12 Data Governance Committee (either the project director, the co-chairs, or some other representation) will participate as members on overall P-12 Data Governance Council to ensure consistent communication and direction.

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<sup>28</sup> The existing K-12 Data Governance Committee is the same body as the Kindergarten through Grade 12 Vermont Automated Data Reporting (VADR) Governance Committee which is currently focused on VADR project implementation associated with the construction of the SLDS.

The P-12 Governance Council will ensure that the early learning data system (ELDS)<sup>29</sup> and the enhanced SLDS meet regulatory and best practice oversight and privacy requirements, including the Data System Oversight Requirements of the RTT-ELC grant application and complies with the requirements of Federal, State, and local privacy laws.

The P-12 Governance Council will:

- Develop and establish policies regarding the quality, privacy, and integrity of data contained in both data systems and assure appropriate utilization of interoperability practices such as an identity management system;
- Develop and establish policies and procedures to facilitate the exchange of data between participating State agencies and between State agencies and BBF's ECDRS by using an identity management system to enable the assignment of unique identifiers when needed and the matching of records among data systems;
- Prioritize data system development projects;
- Develop and approve a data governance policy identifying the elements that are collected and maintained; and
- Provide training on internal controls to system users.

The P-12 Governance Council will develop and approve a transparency policy that will inform the public, including parents, Early Childhood Educators, elementary school educators, and programs, of the existence of data systems that house personally identifiable information, and will explain what data elements are included in such a system. As appropriate and consistent with Federal, State, and local statutes and regulations, the P-12 Governance Council will develop

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<sup>29</sup> For the purposes of this application, Vermont's early learning data system (ELDS) is defined as containing ECDRS, the CIS data system on the BFIS Oracle platform, the sharing of data between ECDRS and the CIS data system, data that ECDRS obtains from national, state, and local private and public sources including CIS and SLDS data, and ECDRS' reporting of data from private and public sources.

and approve policies regarding parental consent procedures for parents to disclose personally identifiable child and parent data and will describe allowable and potential uses of such data.

Using the existing Vermont Agency of Education (AOE) K-12 SLDS Governance Structure as its model, the P-12 Council's membership will be appointed by the Governor, and will include appropriate stakeholders including:

- AOE and AHS Staff:
  - Agency Deputy Directors, Co-Chairs
  - AOE Director, Integrated Support for Learning
  - AOE Director, Information Technology
  - Two representatives from the K-12 Data Governance Committee
  - Professional Development Coordinator
  - Data Administration Director
  - Appropriate Department for Children and Families and Child Development Division staff, including the Vermont Head Start Collaboration Director
  - Appropriate Vermont Department of Health staff
- Representatives from VT supervisory unions, schools, and technical centers
  - Superintendents
  - Principals
  - Curriculum Coordinators
  - Education Technology
  - Technical Center Directors
  - Education Service Agencies.
  - K-12 educators;
  - Public health officials;
  - Workforce development officials

In addition, there will be an external advisory group to offer additional advice and feedback:

- Governor's Office
- State Board of Education
- State Legislature

- Parents
- Research Partners
- Stakeholder Associations, such as the Vermont Association for the Education of Young Children and the Vermont Head Start Association
- Other State Agencies
- BBF Executive Director
- BBF Data and Evaluation Committee
- Vermont Interagency Coordinating Council. Early childhood sub-systems (education, health, and care); K-12 education; health and human services; public health; higher education; workforce development; parents-families; and research and advocacy organizations.

**Activity 3: Develop a Web-Based Children Integrated Services (CIS) Data System**

**Outcomes for Activity 3:**

- CIS Data System is developed and implemented as described below by the end of 2015. All CIS services providers are trained on the system by June 2016.
- All CIS data are entered into the system by December 2016.
- The system is fully implemented by March 2017.
- CIS exchanges its child-level program participation and attendance data with ECDRS by end of 2017.

**Strategy for Activity 3:**

1. Establish and build the CIS Data System onto the BFIS Oracle platform as described below

**Table 27: Timeline and Parties Responsible**

Key Activity	Year				Parties Responsible
	2014	2015	2016	2017	
Appoint an appropriate CIS staff member as Project Manager	✓				Work Group
Appoint a CIS Data System Work Group to provide	✓				Governor or Senior Staff

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project oversight					
Review and update previous data system development work	✓				Work Group; Project Manager
Initiate procurement of a data system development firm; hire a contractor	✓				Work Group; Project Manager
Manage contractor to assure appropriate timeliness and deliverables	✓				Project Manager
Test and deploy the system		✓			Contractor
Enter all data into the system			✓		Staff
Train users			✓		Project Manager
Provide technical assistance to troubleshoot user problems, as appropriate			✓	✓	Contractor, Project Manager
Perform regular data integrity checks and system quality oversight			✓	✓	Work Group; Project Manager

**Metrics:** Timely completion of process measures outlined above.

**Rationale:**

This project will build the CIS Data System onto the existing Bright Futures Information System Oracle platform and will close a data gap in Vermont related to the array of services provided through CIS – Part C/Early Intervention, nursing and family support home visiting, early childhood and family mental health, and specialized child care).<sup>30</sup> It also serves to further enhance Vermont’s early learning data capacity and integration with BFIS and ECDRS.

CIS is Vermont’s unique model for integrating early childhood health, mental health, early intervention services and specialized child care services for pregnant women and children from

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<sup>30</sup> BFIS is a data system containing child care subsidy, licensing, quality, and workforce data.

birth to age six. The model is designed to improve child and family outcomes by providing family-centered, holistic, prevention, early intervention, and health promotion services, effective service coordination, and flexible funding to address gaps in services (see A1).

A web-based data add-on to the Bright Futures Information System (BFIS) will be constructed and deployed to move CIS data collection from a cumbersome paper-based process to a streamlined electronic process, while assuring integration and alignment with ELDS and SLDS. Increased capacity will include:

- OSEP Part C data elements needed for required federal reporting (currently a cumbersome, manual process);
- Report generation on contract performance measures;
- Increased coordination and collaboration relating to CIS service delivery with improved data sharing and more efficient allocation of resources; and
- Expanded case management capability for the 4,000 to 5,000 families annually served by CIS.

This data add-on will move the State forward in its efforts to end paper-based processing and manual submission of child and family reporting data, and towards a centralized, electronically-based integrative system for case management, Federal IDEA Part C program reporting, and contract performance measurement.

#### **Activity 4: Link Additional Essential Datasets with SLDS**

##### **Outcomes for Activity 4:**

- Linking and integrating key data from five datasets (State-funded PreK, Readiness Kindergarteners Survey, IDEA Part B, Teaching Strategies Gold, and Head Start/Early Head Start) with SLDS
- Transfer program participation and attendance from the five integrated SLDS datasets (SLDS-State-funded PreK, SLDS-Readiness Kindergarteners Survey, SLDS-IDEA Part B, SLDS-Teaching Strategies Gold, and SLDS-Head Start/Early Head Start) with ECDRS

##### **Strategies for Activity 4:**

1. AOE staff, in collaboration with BBF staff and other appropriate stakeholders, will prepare an Early Childhood and K-12 SLDS Data Integration Needs Assessment using the

Institute for Education Science (IES), SLDS Grant Program’s Early Childhood Self-Assessment and Planning Guide and results from key documents and processes such as *The Key to Good Policy, Smart Decisions and Wise Investments: Vermont’s Roadmap for an Early Childhood Data Reporting System* and November 2012 ECDRS Stakeholder Meeting (see Strategy #1 in Activity 1).

2. AOE staff, in collaboration with BBF staff and other appropriate stakeholders, will review and align the ECDRS data elements with Common Education Data Standards to ensure interoperability among the various levels and types of data with the VT K-12 SLDS (see Strategy #2 in Activity 1).
3. AOE staff in collaboration with the Vermont Head Start Collaboration Director, BBF staff, Teaching Strategies staff, and state-funded PreK, Part B, and Head Start and Early Head Start providers, will prepare a requirements assessment document to determine what is required to link and share the identified data elements of the five datasets with SLDS.
4. AOE will hire contractors to build the necessary connections and technical processes to enable interoperability for longitudinal analysis, program evaluation, and feedback between systems. Based on our assessment of the essential data element profile in Table A1-13, the following currently external datasets to the new K-12 SLDS will be extracted, transferred, and loaded into SLDS and linked with SLDS data elements: Teaching Strategies Gold, Publicly-funded School-based PreK, Readiness Kindergarten Survey, IDEA Part B, and Head Start and Early Head Start. It is important to note that these additional datasets are supplemental in nature to those data that will be collected and stored as part of Vermont’s Fiscal Year 2012 SLDS grant implementation since that grant solely funds and focuses on K-12 data systems.

**Table 28: Timeline and Parties Responsible**

Key Activity	Year				Parties Responsible
	2014	2015	2016	2017	
Draft Early Childhood and K-12 SLDS Plan	✓				VT AOE and AHS staff
Align with SLDS	✓				AOE staff
Prepare requirements document	✓				AOE staff
Initiate procurement of a data	✓				AOE staff

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system development firm and hire a contractor or amend the contract of the existing SLDS vendor;					
Manage contractor to assure appropriate timeliness and deliverables	✓				AOE staff
Granting out funds to the Head Start, Early Head Start programs, and Supervisory Unions to fund the development of Excel templates development for public-PreK and Head Start and Early Head Start data collections	✓				AOE staff working with Vermont Head-Start Collaboration Director, Head Start and Early Head Start programs and Supervisory Unions
Test and deploy the system		✓			Contractor
Refine and maintain system		✓	✓	✓	AOE staff working with Vermont Head-Start Collaboration Director, Head Start and Early Head Start programs and Supervisory Unions

**Metrics:** Timely completion of process and outcomes measures.

**Rationale:**

Activity 4 focuses on linking and integrating data from five essential datasets with SLDS:

- Teaching Strategies Gold at Teaching Strategies
  - *Teaching Strategies GOLD*<sup>®</sup> is an observational formative assessment tool that helps teachers pinpoint educational activities to the specific developmental and learning needs of individual children. Both aggregate and child-identified data will be available.
- Publicly Funded School-Based PreK at 61 Supervisory Unions
  - Each of 61 Supervisory Unions collect data on publicly funded PreK programs operated by public schools within their respective Supervisory Unions.
- Readiness Kindergarteners Survey (RKS) at AOE
  - As described in E1, Vermont has a well-articulated, longstanding system for assessing kindergarten readiness. The resulting data are presently aggregated, but

will include identified data under proposed funding through this application.

- IDEA Part B at AOE;
  - These data focus on children and youth with disabilities between the ages of 3-22 who receive special education and related services.
- Head Start/Early Head Start (HS/EHS) at Seven Head Start and Four Early Head Start Programs
  - Each of the seven Head Start programs in Vermont maintains their own data systems. The four Early Head Start programs in Vermont are housed in four of the seven Head Start programs. The four organizations operating both Head Start and Early Head Start programs have data systems which contain data on children from birth to age five, pregnant women, and their families. The data systems of the remaining three Head Start programs contain data on three-, four-, and five-year-old children and their families.

Activity 4 will close critical data gaps and further enhance the capacity and integration of Vermont's ELDS and SLDS. It will promote uniform data collection and easy entry, the exchange of data among State and provider agencies, and the generation of timely, relevant and accessible data for early learning and early childhood providers. In addition, Activity 4 will support longitudinal analysis and program evaluation and help policymakers make decisions and craft policies to close the achievement gap between children with and without high needs.

## VII. COMPETITION PRIORITIES

*Note about Absolute Priorities: Absolute priorities describe items that a State must address in order to receive a grant.*

### Priority 1: Absolute Priority -- Promoting School Readiness for Children with High Needs.

To meet this priority, the State's application must comprehensively and coherently address how the State will build a system that increases the quality of Early Learning and Development Programs for Children with High Needs so that they enter kindergarten ready to succeed.

The State's application must demonstrate how it will improve the quality of Early Learning and Development Programs by integrating and aligning resources and policies across Participating State Agencies and by designing and implementing a common, statewide Tiered Quality Rating and Improvement System. In addition, to achieve the necessary reforms, the State must make strategic improvements in those areas that will most significantly improve program quality and outcomes for Children with High Needs. Therefore, the State must address those criteria from within each of the Focused Investment Areas (sections (C) Promoting Early Learning and Development Outcomes for Children, (D) A Great Early Childhood Education Workforce, and (E) Measuring Outcomes and Progress) that it believes will best prepare its Children with High Needs for kindergarten success.

*Applicants do not write a separate response to this priority. Rather, they address this priority throughout their responses to the selection criteria. Applications must meet the absolute priority to be considered for funding. A State meets the absolute priority if a majority of reviewers determines that the State has met the absolute priority.*

*Note about Competitive Preference Priorities: Competitive preference priorities can earn the applicant extra or "competitive preference" points.*

### Priority 2: Competitive Preference Priority -- Including All Early Learning and Development Programs in the Tiered Quality Rating and Improvement System. (10 points)

Priority 2 is designed to increase the number of children from birth to kindergarten entry who are participating in programs that are governed by the State's licensing system and quality standards, with the goal that all licensed or State-regulated programs will participate. The State will meet this priority based on the extent to which the State has in place, or has a High-Quality Plan to implement no later than June 30<sup>th</sup> of the fourth year of the grant--

(a) A licensing and inspection system that covers all programs that are not otherwise regulated by the State and that regularly care for two or more unrelated children for a fee in a

provider setting; provided that if the State exempts programs for reasons other than the number of children cared for, the State may exclude those entities and reviewers will determine whether an applicant has met this priority only on the basis of non-excluded entities; and

(b) A Tiered Quality Rating and Improvement System in which all licensed or State-regulated Early Learning and Development Programs participate.

*If the State chooses to respond to this competitive preference priority, the State shall write its full response in the text box below. The State may also include any additional information it believes will be helpful to peer reviewers. If the State has included relevant attachments in the Appendix, these should be described in the narrative below and clearly cross-referenced to allow the reviewers to locate them easily.*

*In scoring this priority, peer reviewers will determine, based on the evidence the State submits, whether each element of the priority is implemented or planned; the quality of the implementation or plan (see the definition of a High-Quality Plan for the components reviewers will be judging); and the extent to which the different types of Early Learning and Development Programs in the State are included and addressed. The State is responsible for providing clear and detailed information to assist the peer reviewers in making these determinations.*

**Competitive Priority 2: Including All Early Learning and Development Programs in the Tiered Quality Rating and Improvement System.**

**Abstract:**

In this section, Vermont documents its activities to including all ELDP in its TQRIS.

In 2013, 464 of Vermont's child care providers are licensed. Depending on provider type (see Table B2-c) between 42% and 100% of early childhood providers participate in VT STARS. Licensure is a threshold requirement for participation in VT STARS, which offers financial incentives and supports to participating providers (See B1 and B2). Through ongoing outreach through multiple early childhood provider networks, Vermont seeks to attract unlicensed early

childhood providers to seek licenses and ultimately to participate in VT STARS.

VT STARS is a tiered, voluntary, point-based system. It requires participants to meet one threshold requirement, State licensing or registration<sup>31</sup>, and then awards a star rating (1 to 5 VT STARS) based on points acquired for meeting additional criteria. Thus, VT STARS is directly linked to Vermont's early learning and development (ELD) licensing system.

One of the strategies under this application (see B1) is to increase the number of Vermont licensed early learning and development programs participating in the state's tiered QRIS from 74% to 85%. Sections B1 and B2 describe our efforts to provide incentives and supports to encourage ELD programs not presently in VT STARS to voluntarily apply.

**Priority 2a: How Vermont's licensing and inspection system covers all programs that are not otherwise regulated.**

Vermont statute requires that providers must be regulated when providing paid care to children in more than two families rather than for more than two unrelated children. Our TQRIS program, VT STARS, includes all regulated providers as well as state funded preschool programs in any setting, all of which must be licensed. VT STARS does not exclude any regulated provider and regulation encompasses everyone caring for more than two families with no exceptions. Thus, Vermont does mandate that all regulated programs are included in the State's TQRIS, but the State's definition of regulated programs varies from the federal definition.

A statutory change will be proposed in the next legislature to require regulation when

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<sup>31</sup> In Vermont, all full-time child care providers providing care for more than two families must be licensed to operate a child care facility or be registered with the State to run a family child care home. Requirements for licensing and registration are similar.

providing paid care for more than two children unrelated to the provider.

Licensure is a threshold requirement for participation in Vermont's TQRIS, which offers financial incentives and supports to participating providers (See B1 and B2).

The majority of unlicensed providers are small, informal caretakers giving care to a small number of children, often in more remote parts of the State. Through ongoing outreach via multiple early childhood provider networks, Vermont seeks to attract unlicensed early childhood providers to seek licenses and ultimately to participate in VT STARS.

**Priority 2b: How all licensed/regulated ELDP participate in VT STARS.**

VT STARS is a tiered, voluntary, point-based system. It requires participants to meet one threshold requirement, State licensing or registration<sup>32</sup>, and then awards a star rating (1 to 5 VT STARS) based on points acquired for meeting additional criteria. Thus, VT STARS is directly linked to Vermont's early learning and development (ELD) licensing system. VT STARS ratings are valid for three years from the date of the assessment, with an annual reporting requirement. Any program can request an additional assessment within that time period in order to attain a higher star level.

Vermont launched VT STARS in 2003, one of only 13 states to launch a QRS prior to 2004 (ACF OPE, 2010). VT STARS was developed in order to increase the number of programs intentionally addressing and documenting quality in their programs in order to close the "quality gap" between the 5% of regulated programs that were nationally accredited and the 95% who were simply operating legally. The goal over time was to turn the pyramid of quality upside

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<sup>32</sup> In Vermont, all full-time child care providers providing care for more than two families must be licensed to operate a child care facility or be registered with the State to run a family child care home. Requirements for licensing and registration are similar.

down and have the majority of programs be of high-quality and a minority of programs that had not moved to improve quality beyond licensing. VT STARS and the levels within it would also provide a resource to parents to help guide them in selecting a program for their children.

All types of Vermont early learning and development (ELD) programs are eligible to participate in VT STARS. All participants are rated on the same criteria, including staff qualifications and annual professional development, program practices (including ERS and child observation, and health promotion), families and community, program administration, and regulatory history. However, the VT STARS rating evaluation process is tailored to different kinds of providers. For example, there are streamlined processes for accredited and Head Start programs.

One of the strategies under this application (see B1) is to increase the number of Vermont licensed early learning and development programs participating in the state's tiered QRIS from 74% to 85%. Sections B1 and B2 describe our efforts to provide incentives and supports to encourage ELD programs not presently in VT STARS to voluntarily apply.

Priority 3: Competitive Preference Priority -- Understanding the Status of Children's Learning and Development at Kindergarten Entry. (10 points)

To meet this priority, the State must, in its application, address selection criterion (E)(1) and earn a score of at least 70 percent of the maximum points available for that criterion.

*For Competitive Preference Priority 3, a State will earn all ten (10) competitive preference priority points if a majority of reviewers determines that the State has met the competitive preference priority. A State earns zero points if a majority of reviewers determines that the applicant has not met the competitive preference priority.*

*Applicants do not write a separate response to this priority. Rather, applicants address Competitive Preference Priority 3 by writing to selection criterion (E)(1).*

Priority 4: Competitive Preference Priority -- Creating Preschool through Third Grade Approaches to Sustain Improved Early Learning Outcomes through the Early Elementary Grades. (10 points)

Priority 4 is designed to build upon the State's High-Quality Plan to improve birth through age five early learning outcomes, and to sustain and extend improved early learning outcomes through the early elementary school years, including by leveraging existing Federal, State, and local resources. The State will meet this priority based on the extent to which it describes a High-Quality Plan to improve the overall quality, alignment, and continuity of

teaching and learning to serve children from preschool through third grade through such activities as--

(a) Enhancing the State’s kindergarten-through-third-grade standards to align them with the State’s Early Learning and Development Standards across all Essential Domains of School Readiness;

(b) Identifying and addressing the health, behavioral, and developmental needs of Children with High Needs from preschool through third grade, and building families’ capacity to address these needs;

(c) Implementing teacher preparation and professional development programs and strategies that emphasize developmental science and the importance of protective factors, pedagogy, and the delivery of developmentally appropriate content, strategies for identifying and addressing the needs of children experiencing social and emotional challenges, and effective family engagement strategies for educators, administrators, and related personnel serving children from preschool through third grade;

(d) Implementing model systems of collaboration both within and between Early Learning and Development Programs and elementary schools to engage and support families and improve all transitions for children across the birth through third grade continuum;

(e) Building or enhancing data systems to monitor the status of children’s learning and development from preschool through third grade to inform families and support student progress in meeting critical educational benchmarks in the early elementary grades; and

(f) Other efforts designed to increase the percentage of children who are able to read and do mathematics at grade level by the end of the third grade.

*If the State chooses to respond to this competitive preference priority, the State shall write its full response in the text box below. The State may also include any additional information it believes will be helpful to peer reviewers. If the State has included relevant attachments in the Appendix, these should be described in the narrative below and clearly cross-referenced to allow the reviewers to locate them easily.*

*In scoring this priority, peer reviewers will determine, based on the evidence the State submits, whether each element of the priority is implemented or planned; the quality of the implementation or plan (see the definition of a High-Quality Plan for the components reviewers will be judging); and the extent to which the different types of Early Learning and Development Programs in the State are included and addressed. The State is responsible for providing clear and detailed information to assist the peer reviewers in making these determinations.*

**Competitive Priority 4: Sustaining Program Effects into the Early Elementary Grades**

**Abstract:** Vermont will build a system that sustains early childhood outcomes throughout K-3,

reduces the achievement gap, establishes a culture productive to sustained program effectiveness, and maintains a developmental focus across PreK through grade 3, especially for children with high needs. These goals will be accomplished through a revision of Vermont’s Early Learning Standards (VELS), enhanced alignment between systems, and enhanced professional development. This work includes Project Budget # 28.

Implementing strategies to improve the outcomes of children from birth through age 5 who have high needs is critical; however, without efforts to extend those gains into kindergarten and the primary grades, these children run the risk of losing the ground gained. This “fade out” effect can be mitigated by establishing more alignment and continuity between early learning and development programs and early elementary grades, and by ensuring children and their families have smooth transitions when they enter kindergarten.

Vermont policy defines “early childhood” as prenatal through third grade (see A1). There is an acute awareness that supporting young children and families to achieve high standards doesn’t stop when the child enters kindergarten. Vermont views public schools as critical partners in this work. It is for this reason that the Vermont Early Learning Standards (VELS) are being revised to reflect a full Infant through Third Grade continuum, and the assessments of child progress and adult-child relationships Vermont educators have selected mirror that full continuum (see C2). Vermont is addressing this priority in order to further our efforts to establish a more integrated PreK-Grade 3 system which is especially effective in supporting young children with high needs.

Several strategies will be used to create a more continuous and aligned Birth-Grade 3 system throughout the state, including a focused effort to partner with a nationally recognized PreK-Grade 3 expert who will work with teachers and leaders in selected school communities that have a large percentage of children with high needs. This work will focus on child engagement, instructional practices, and child outcomes. This partnership will run through the funding period, and will result in a cadre of Vermont PreK-Grade 3 experts to coach other school communities around the state.

**Goal:** Vermont will build a Birth through Grade 3 system for supporting our children’s early learning and development that integrates and coordinates the early childhood 0-5 system with our K-12 system in order to (1) sustain improved child outcomes throughout K-3, (2) reduce the

Achievement Gap, (3) establish a culture of collaborative inquiry, shared language and aligned instructional practices across PreK - Grade 3, and (4) maintain a developmental perspective across PreK - Grade 3. An integrated, predictable, and aligned system will benefit all children, but especially children with high needs.

**Outcomes:**

- By 2014, the new Vermont Early Learning Standards (VELS) that extend from infancy through grade 3 will be completed and the process for disseminating the standards, providing professional development, and informing and engaging families begins (see C1).
- Three to four “school communities” (i.e., elementary schools and PreK partner programs) serving a large percentage of children with high needs participate in a PreK-Grade 3 initiative to improve educator effectiveness and child outcomes.
- By 2016, 75% of administrators and early childhood educators (PreK – Grade 3) in the “PreK-Grade 3 learning communities” demonstrate that they are knowledgeable about brain research, developmental science, and protective factors.
- By the end of the grant period, the third grade reading and mathematics achievement levels of children with high needs in the PreK-Grade 3 learning communities are significantly higher than comparable children who are not in PreK-Grade 3 learning communities.
- By 2017, Vermont has a cadre of PreK-Grade 3 experts to coach other school communities with high needs children; these school communities are engaged in continuous improvement and committed to a -PreK-Grade 3 approach.
- By 2016, 50% of early childhood educators in PreK-Grade 3 learning communities improve the effectiveness of their instruction as shown through a comparison of Snapshot data collected over two years.
- By 2016, 50% more families of children entering kindergarten in a PreK-Grade 3 learning community report that their children and family experienced a smooth, positive transition experience.

**Strategies:**

- Revise the VELs to reflect a Birth through Grade 3 continuum that incorporates the CCSS, and provide professional development opportunities that include educators across the Birth-Grade 3 continuum (see C1).
- Align formative assessment practices with the new Birth-Grade 3 VELs (e.g., TS GOLD Birth through Grade 3), and expand the use of the K-3 CLASS assessment of adult-child interactions (see C2).
- Connect five separate categories of data from programs that serve children 0-5 years to the SLDS (See Figure 12 in E2).
- Use kindergarten readiness data to inform policies and practices prior to kindergarten and through K-3 (See E1).
- Collect and disseminate information on strategies for successful kindergarten transition practices for all children, including children with disabilities, to families of incoming kindergartners and elementary schools.
- Partner with a national PreK-Grade 3 organization to provide professional development and coaching to state and local instructional leaders, principals, and program administrators in order to support early childhood educators to improve their practices through a process of collaborative inquiry, an integral aspect of professional reflection and continuous improvement.
- Invite “school communities” to apply for participation in the PreK-Grade 3 state sponsored initiative. Select 4-5 school communities based on their percentage of high needs children, geographic location, and levels of commitment to collaboration across PreK-Grade 3 settings and to collaborative inquiry.
- The national PreK-Grade 3 organization will provide a week-long summer institute and bi-monthly coaching sessions for school/program leaders in the “PreK-Grade 3 learning communities” who are committed to supporting teachers’ understanding Snapshot data, and their developing a plan for data-informed changes to their practices.
- The national PreK-Grade 3 organization will train data collectors to collect Snapshot data reliably; Snapshot is an observation tool that looks at teachers’ practices and child/student engagement. The organization also will analyze and report the Snapshot results of

individual teachers, age/grade levels, schools, districts and statewide.

- The national PreK-Grade 3 organization will provide consultation on advancing a PreK-3 approach in the “PreK-Grade 3 learning communities” across the state.

**Table 29: Timeline and Parties Responsible**

Key Activity	Year				Parties Responsible
	2014	2015	2016	2017	
Finalize the new VELS (Birth through Grade 3), submit for adoption by the State Board of Education, publish and provide professional development opportunities.	✓				AOE/DCF/HSSCO VELS Revision Committee AOE and DCF as leads
Provide professional development to B-Grade 3 teachers, support & engage families (see C1)	✓	✓	✓	✓	AOE/DCF/HSSCO VELS Revision Committee
Align formative assessment practices with the new VELS and implement the Toddler, PreK and K-3 CLASS assessments (see C2).	✓	✓	✓	✓	AOE as lead
Connect five separate categories of data about young children with ages ranging from prenatal through age 5 with the SLDS (see Figure 12 in E2)			✓	✓	AOE/DCF/HSSCO AOE as lead
Use kindergarten readiness data to inform policies and practices prior to K, during transition to K, and through K-3 (see E1)		✓			AOE/DCF/HSSCO/ VDH AOE as lead
Update Vermont’s parent kindergarten readiness guides and disseminate to families and PreK partners.	✓	✓	✓	✓	AOE/DCF/HSSCO AOE as lead
Share information on what schools can do to ensure smooth transitions to kindergarten in webinars and print		✓			AOE/HSSCO AOE as lead
Contract with a national PreK-Grade 3 organization to further efforts to sustain early outcomes in K-3	✓				AOE

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PreK-Grade 3 contractor provides week-long summer institutes, bi-monthly coaching, training on Snapshot, and analysis and reports of Snapshot data, and provides consultation on “learning communities” and other models to advance the initiative.	✓	✓	✓	✓	National PreK - Grade 3 organization with AOE oversight, participation
PreK-Grade 3 contractor trains data collectors to use Snapshot reliably, analyze data, and provide technical assistance	✓	✓	✓	✓	National PreK - Grade 3 organization with AOE oversight, participation
Vermont data collectors begin collecting data in PreK programs and K-3 classrooms	✓	✓	✓	✓	Vermont data collectors

**Metrics:**

- Monitoring success in achieving outcomes and process measures as well as:
  - Independent review from national expert on early learning standards verifying that the new Vermont Early Learning Standards are aligned to the Common Core State Standards and reflect a continuum of development and learning from infancy through grade 3.
  - A pre- and post- PreK-Grade 3 assessment of the knowledge of administrators and educators in the PreK-Grade 3 Learning Communities on the research that underlies a PreK-Grade 3 approach (e.g., brain development, protective factors, child development).
  - Comparison of the third grade results of children in PreK-Grade 3 Learning Communities on state assessments (i.e., Smarter Balance) in English Language Arts and Mathematics with results of a group of comparable children not in PreK-Grade 3 Learning Communities schools.
  - Comparison of Snapshot classroom data for individual teachers and schools from Fall 2014 and Fall 2016.
  - Survey of families regarding their transition to Kindergarten to be collected in Fall 2014 (baseline) and Fall 2015, 2016, and 2017.

**Rationale:**

Ample research exists indicating a “fade out” of the gains young children make in a quality early learning and development program and that appear to disappear by the time they reach third grade (New America Foundation, 2009). Children with high needs are especially vulnerable to fade out. However, if the child is in a coordinated PreK through grade 3 school system that has aligned standards, practices and assessments, then the gains made in the quality early learning and development program are more likely to be sustained. The effects of such a coordinated approach can help to reduce or ameliorate an achievement gap, and promote the development of a solid foundation for learning and development beyond grade 3.

Most researchers (e.g., Grantmakers for Education, 2007; Foundation for Child Development, 2005), agree that the elements of a coordinated and aligned PreK through grade 3 system include:

- Curriculum, standards, and assessments that are aligned from PreK through grade 3;
- Instructional practices and approaches that are consistent across PreK through grade 3;
- PreK that is available to three- and four-year-olds, along with full day kindergarten;
- Small class sizes;
- Authentic partnerships between families and school that include opportunities for families to be actively engaged throughout PreK and grade 3; and
- Classroom teachers who possess a BA and who are qualified to teach PreK through grade 3.

Vermont is well positioned to move towards a PreK through grade 3 approach since some of the above elements are either in place or within reach. Vermont has a very low student to teacher ratio and small class sizes [include numbers here]. Vermont’s universal PreK often include three- and four-year-olds. Vermont’s early childhood educator license is from birth through grade 3 that bridges the early childhood world with K-3. Additionally, as a result of the rural nature of our state, there exist many opportunities for authentic partnerships and involvement of families with the school, which is often the center of the community in many small towns. Certainly, the potential for Vermont to successfully implement a PreK-Grade 3 approach that will sustain child outcomes through K-3 is great.

To move the PreK through grade 3 agenda will require the creation of opportunities, persuasive research and arguments, resources and supports. Enacting state policies that mandate

schools adopt a PreK-Grade 3 approach would definitely NOT work, even if such policies managed to pass the state legislature (which is highly doubtful). In Vermont, local control of K-12 schools is very much a reality; each town's local school board has a great deal of autonomy as do school administrators and, to a lesser degree, classroom teachers. While there are state regulations and requirements that K-12 schools must follow in terms of serving children with disabilities, state standards and assessments, and safety rules, most of the decisions regarding teacher practices, curriculum, and teacher evaluation are determined at the local school level. Given this reality, the way change happens at local schools is by working intensely with individual school leaders and teachers, encouraging them to look objectively at their practices and the impacts of those practices on children.

The Early Learning Challenge grant provides Vermont the opportunity to take concrete steps towards implementing a PreK-Grade 3 approach. A birth through grade 3 definition of "early childhood" is explicit throughout our application. Many of the activities described in Vermont's Reform Agenda presented in our application extend to K-3; for example, the new Vermont Early Learning Standards that reflect a Birth-Grade 3 continuum (see C1), the proposed comprehensive assessment system (see C2), and professional development activities (D2). However, additional efforts are needed to truly affect change as serve as a School Turnaround strategy.

Vermont's HQP for this priority is to partner with a nationally recognized organization with expertise in PreK-3. A process for recruiting school communities with a large percentage of children with high needs and an openness to continuous improvement will be used to select 4 school communities (i.e., includes community-based PreK programs as well as a school) to participate in the PreK-3 partnership. In order to participate, school communities will need to commit some of their own resources (e.g., staff time, travel and expenses); this requirement will ensure that the school community is committed to working collaboratively with the national PreK-3 organization, the state, and the other school communities. The small number of school communities that will be part of this three-way partnership (national PreK-3 organization, school communities) will serve as an incubator for innovative approaches to implementing a PreK-3 approach that will improve the quality, continuity, and alignment of teaching and learning across PreK and K-3 in order to improve outcomes for all children, particularly those with high needs.

**Priority 4a: Enhancing the State's K-3 standards to align with the State's ELD standards**

**across all essential domains.**

Vermont's proposed Vermont Early Learning Standards include learning and development standards for infants through third graders, incorporate the Common Core State Standards and New Generation Science Standards, and cover all of the Essential Domains of School Readiness (see C1).

**Priority 4b: Identify and address the health, behavioral and developments of children with high needs from birth to Grade 3 and build family capacity to address those needs.**

The Early Multi-tiered System of Supports (Early MTSS) is an evidence-based, comprehensive approach to addressing the behavioral and developmental needs of young children from birth through third grade. Early MTSS is proposed as a key strategy in Vermont's application (see C3e). Early MTSS delivers strategies and recommended practices for families, early childhood educators, and K-3 teachers to use for the promotion of children's positive social emotional and behavioral development, the prevention of negative behaviors, and for intervention when needed.

**Priority 4c: Implement teacher preparation and professional development.**

Vermont's HQP for this priority proposes a partnership with a national expert in PreK - Grade 3 and selected school communities with a large percentage of high needs children for the purpose of leaders and teachers to engage in professional development that emphasizes developmental science, protective factors, pedagogy, and effective family engagement strategies. Through vertical and horizontal level groupings across PreK-Grade 3, this type of intense focused professional development and use of classroom and child data will yield results and the types of learning and expertise that can be extended to other school communities in the state.

**Priority 4d: Implement model systems of collaboration.**

Statewide efforts to improve children's transitions to kindergarten are included in the HQP for this priority. Families and early learning and development programs will receive updated information and suggested activities that can support successful transitions, including for children with special needs. Additionally, information and suggested practices for schools to use to smooth children and families' transitions to kindergarten will also be compiled and disseminated.

The PreK - Grade 3 initiative described herein exemplifies collaboration between early learning and development programs and elementary schools that will greatly improve transitions across the PreK- Grade 3 continuum.

**Priority 4e: Build or enhance data systems to monitor the status of children’s early learning and development from birth through Grade 3.**

Vermont is constructing a State Longitudinal Data System (SLDS) that will be fully operational in 2016. As described in related HQPs in section E2, data from various sources will be used to bridge data systems and include data from various types of early learning and development programs serving children (prenatal-Kindergarten). Additionally, the PreK - Grade 3 school communities will use the new *Teaching Strategies GOLD Birth through Third Grade* formative assessment to assess children and inform instruction.

**Priority 4f: Other efforts to increase the percentage of children who are able to read and do math at grade level by the end of Grade 3.**

Last year, the AOE and DCF jointly funded a pilot PreK-Grade 3 professional development project in a school district that has a large percentage of children with high needs. The emphasis of this small project was twofold: to increase early childhood educators’ knowledge of evidence-based practices in early literacy, and to create an opportunity for teachers in K-3 and across PreK settings to come together to develop shared knowledge and a common vocabulary. This pilot is still in progress, but early reports indicate that participants increased their knowledge of literacy, built new relationships, and gained a better understanding of each other’s “worlds”.

Vermont was one of five states chosen to work with the federally funded SWIFT (School Wide Integrated Framework for Integration) Center. This work will involve implementation and capacity building at SEA and Lea levels in the areas of administrative leadership, multi-tiered systems of support, integrated educational framework, family and community partnerships and inclusive policy structure and practice.

**Priority 5: Competitive Preference Priority -- Addressing the Needs of Children in Rural Areas.**  
*(5 points)*

The State will meet this priority based on the extent to which it describes:

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(a) How it will implement approaches to address the unique needs (e.g., limited access to resources) of children in rural areas, including rural areas with small populations; and

(b) How these approaches are designed to close educational and opportunity gaps for Children with High Needs, increase the number and percentage of Low-Income children who are enrolled in high-quality Early Learning and Development Programs; and enhance the State's integrated system of high-quality early learning programs and services.

*If the State chooses to respond to this competitive preference priority, the State shall write its full response in the text box below. The State may also include any additional information it believes will be helpful to peer reviewers. If the State has included relevant attachments in the Appendix, these should be described in the narrative below and clearly cross-referenced to allow the reviewers to locate them easily.*

*In scoring this priority, peer reviewers will determine, based on the evidence the State submits, whether each element of the priority is implemented or planned; the quality of the implementation or plan; and the extent to which the different types of Early Learning and Development Programs in the State are included and addressed. The State is responsible for providing clear and detailed information to assist the peer reviewers in making these determinations.*

**Competitive Preference Priority 5: Addressing the needs of children in rural areas.**

**Abstract:**

In a rural environment, community partners operating local programs are critical to bringing statewide standards, policies, innovations and investments to children and families in geographically remote and economically diverse communities. Vermont will work with its community partners to assure it addresses the needs of children in rural areas, particularly children with high needs, through a new targeted initiative, Vermont Promise Communities. This is Project Budget #29.

Both Competitive Priority 5a (implementing approaches to address the unique needs of children in rural areas, including rural areas with small populations), and 5b (approaches designed to close educational and opportunity gaps for Children with High Needs, increase the number and percentage of Low-Income children who are enrolled in high-quality Early Learning and Development Programs; and enhance the State's integrated system of high-quality early learning programs and services), are addressed by the following High Quality Plan (HQP).

Vermont ranks 49 out of the 50 states by population (see A1 for a discussion of Vermont's

rurality). The State is a collection of small towns scattered across a geographically challenging terrain of mountains and river valleys. With a population of 625,741, Vermont has an average density of 65 people per square mile. Twenty-five percent (25%) of those people are young children. According to the U.S. Census Bureau, American Community Survey (2008), no children in Vermont live in an area characterized as urban and only 30% live in communities defined as suburban. The majority of Vermont's children (70%) live in rural areas.

Too many of those children are poor. Children in Vermont have the highest rates of poverty of any age group. Sixteen percent of all children ages 5 or under in Vermont are poor. Of those children, 47%, almost half, are extremely poor, living with incomes less than one-half of the poverty line. In Vermont, poverty drives an achievement gap more than any other factor that exists between children living in low income households and their more affluent peers.

In nine of the 61 public school Supervisory Unions (SUs) (school districts) in Vermont, the 2012-2013 Ready Kindergarteners Survey (RKS) scores were in the bottom 25 percent in four domains of the RKS. Three of these scored in the lowest 25% in all five domains. Not coincidentally, these SUs all have higher percentages of children eligible for free and reduced lunch. These educational disparities persist up through the elementary grades and beyond in a widening achievement gap between children living in poor communities and their peers in more affluent communities. As Lichter and Parisi (2008) write: "the rural poor live in a much different physical and social world from the large majority of middle-class Americans....They truly are doubly disadvantaged—they have many needs but live in communities lacking the resources to meet them."

We propose to adapt Promise Communities to Vermont, the transformative work on urban poverty that Geoffrey Canada initiated in Harlem Children's Zone that inspired President Obama's Promise Neighborhoods program administered by the U.S. Department of Education.

Canada's answer to "what will it take" in Harlem was "whatever it takes". A wise and well-known Vermonter<sup>33</sup> opines "none of us can truly tap the potential that is out there until we become involved with the people of our communities in promoting the well-being of everyone's children."

Vermont will use RTT-ELC resources to engage with particular communities in Vermont where needs are high and educational and developmental outcomes for children indicate risk.

### **High Quality Plan Summary**

#### **Goal:**

Vermont's goal is to mobilize our most distressed rural communities to work towards the transformation of every aspect of the environment that poor children grow up in. Through the Promise Communities project we intend to provide human, information and financial resources to help citizens and stakeholders plan, imagine and work together across sectors – health, education, human services and community planning – to do 'whatever it takes' to significantly improve the educational and developmental outcomes for children with high needs in their communities so that the promise of every child in that rural community may be fully realized.

#### **Outcomes:**

Outcomes will be quantified later on the basis of additional information, such as assessment data in selected communities.

- By the end of the funding period (2017), between 18-23 of 61 Supervisory Unions where achievement gaps between high needs children and their peers are greatest, will successfully develop and implement a sustainable Promise Community Plan to support children and families from PreK - Grade 3.
- By the end of the funding period (2017), children and families in Promise Communities

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<sup>33</sup> Con Hogan, Former Secretary of VT Agency of Human Services, member of the Board of the Permanent Fund for Vermont's Children, consultant to states and nations about the well-being of children

will have affordable access to high quality early learning and development programs in their community

- By the end of the funding period (2017), children with high needs in Promise Communities will receive timely and appropriate services to overcome challenges and barriers to success. These include: Children's Integrated Services including IDEA, Part C Early Intervention, Early Childhood and Family Mental Health Services, Specialized Child Care Services and Home Visiting; and Essential Early Education Services (IDEA, Part B section 619)
- By the end of the funding period (2017), children living in Promise Communities will access a medical home and receive regular well child care including early and appropriate developmental screening.
- By the end of the funding period (2017), community leaders, service providers and families in Promise Communities will understand and access state resources and systemic supports.
- By the end of the funding period (2017), children and families in Promise Communities will access public benefits & services to which they are entitled to meet their basic needs.
- By the end of the second funding year (2015), Ready Kindergarteners Survey results improve by at least 25% in every domain in every Promise Community in Vermont.
- By the end of the funding period (2017), the achievements gap indicated on standardized tests of grade three reading and math between children eligible for free and reduced lunch and more affluent peers will decrease by at least 10% in every Promise Community in Vermont.
- Additional outcomes may be defined by participants in the evaluation process.

**Strategies:**

- Create and convene a statewide project implementation team.
- Finalize the components, strategies and timeline for mobilizing community work.
- Engage an expert evaluation partner with experience in participatory evaluation methodology.
- Develop a menu of incentives to support recruitment of communities.

- Develop a menu/set of criteria to define parameters for community strategies/investments eligible for support through Promise Communities pool of grant funds.
- Recruit and select six communities, and secure a commitment from designated community partners.
- Build local coalitions and convene local Promise Community teams.
- Establish the regional Building Bright Futures (BBF) Regional Councils (see A1) as the local conveners and develop protocols related to shared decision making, collaboration among key partners, and coordination and integration to benefit young children and families
- Repeat with a new cohort of six communities each year of RTT-ELC grant period, convening each new cohort in August.

	2014-15	2015-16	2016-17	2017-18
Year 1 in Community	Cohort I	Cohort II	Cohort III	
Year 2 in Community		Cohort I	Cohort II	Cohort III

- In 2016, disseminate preliminary findings of evaluation and consider the efficacy and feasibility of sustaining the Promise Communities project strategy for the short term by recruiting a fourth cohort which would extend the project by one year
- In 2017, disseminate results of evaluation and consider the efficacy and feasibility of sustaining the Promise Communities project by recruiting additional Supervisory Unions

**Table 30: Timeline and Parties Responsible**

Key Activity	Year				Parties Responsible
	2014	2015	2016	2017	
Hire a Promise Communities Project Coordinator and three Promise Community Coaches (community facilitators) to provide intensive support for planning and	✓				CDD/DCF

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implementation of Promise Communities					
Support intensive training to project staff.	✓				CDD/DCF
Convene a Promise Communities State Team (PC State Team) that includes staff from health, education and human services agencies, the BBF Statewide Council, content experts and other stakeholders interested in supporting this project	✓				CDD/DCF Project Coordinator
Finalize selection criteria for Promise Community participation.	✓				PC State Team Project Coordinator
Assemble and analyze relevant data to prioritize Supervisory Unions in Vermont for participation	✓				Project Coordinator PC State Team
Finalize and communicate incentives for community participation	✓				PC State Team Project Coordinator
Finalize menu/set of criteria to define parameters for community strategies/investments eligible for support through pool of grant funds	✓				PC State Team Project Coordinator
Identify the components, strategies and timeline for mobilizing community work	✓				PC State Team Project Coordinator
Develop a process to select 6 Supervisory Unions for each year of the grant to become Promise Communities	✓				PC State Team Project Coordinator
Engage experienced evaluation partner	✓				PC State Team
Recruit Cohort I	✓				PC State Team Project Coordinator
Build local coalition and create local Community Promise Team under auspices of regional BBF Council	✓				Project Coordinator PC Coaches PC State Team
Develop participatory evaluation plan, evaluation strategies and performance measures	✓				Evaluation Partner Project Coordinator PC Coaches PC State Team Local PC Teams w/in Regional BBF Councils
Provide training related to why it	✓				Project Coordinator

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matters, common frameworks and evidence informed strategies to local coalitions and teams					PC Coaches PC State Team Expert Consultants
Local coalition and team creates and implements an integrated written plan to support strong families and healthy, competent, successful children from the prenatal period through third grade in their areas during the funding period. Strong families		✓	✓	✓	Local PC Teams w/in Regional BBF Councils PC Coaches
Create a Promise Communities learning network to share success, lessons learned and emerging best practice		✓	✓	✓	Project Coordinator PC Coaches PC State Team
Repeat recruitment and community activities for 2 – 3 more cohorts		✓	✓	✓	Project Coordinator PC Coaches PC State Team Local PC Teams w/in Regional BBF Councils
Communicate and release preliminary findings of evaluation study			✓		Evaluation partner PC State Team
Consider the efficacy and feasibility of sustaining the project for the short term by recruiting a fourth cohort which would extend the project by one year			✓		PC State Team CDD/DCF AOE VDH AHS Governor’s Office
Complete final evaluation activities and publish results				✓	Evaluation Partner PC State Team
Consider the efficacy and feasibility of sustaining the project for the long term in order to engage more/all SUs in Vermont				✓	CDD/DCF AOE VDH AHS Governor’s Office

**Metrics:** Monitor success in achieving quantitative outcomes and process measures.

**Rationale:**

The state of Vermont has demonstrated a strong and enduring commitment to the early learning and development of young children, particularly children with high needs. We pay close attention to the real lives and experiences of families raising children in our predominantly rural communities – their needs and priorities are the focus and center of our legislation, policies, and

practice. We have a strong history of commitment to building a high quality early learning and development system for all Vermont children and believe that our most vulnerable, and often hardest to reach, children are best served in this context.

The State has a responsibility to work with stakeholders to identify shared positive outcomes for children and families in Vermont, establish measurable high standards for evidence informed service delivery, and provide equitable resources across the state then let local communities design customized integrated systems that assimilate their particular assets and challenges.

As has been documented throughout this application, a range of ELD programs and services are being effectively delivered to children and families, including children with high needs, throughout this predominantly rural state. But delivery may not be consistent or reach children with high needs and their families in every community. Barriers like limited community resources in small rural towns, transportation, inter-generational poverty, inadequate affordable housing, lack of local employment opportunities, and incomplete education inhibit access to robust array of integrated services that provide the

Vermont seeks use RTT-ELC resources to leverage state resources, initiatives and partnerships into targeted high-intensity supports to build local infrastructure and coalesce local resources in order to improve outcomes for young children in our highest need, rural communities through the Promise Communities project.

#### **Laying the foundation, assembling resources**

The Child Development Division (CDD) within the Department for Children and Families (DCF) in the Agency of Human Services (AHS) is responsible for leading implementation of the HQP described above. CDD will hire a state project implementation team that includes a high level Promise Communities Project Manager and three skilled and knowledgeable Community Promise Coaches to work directly with participating communities. Community Promise Coaches will receive intensive training in common framework and skills related to facilitation, mediation and strategic planning to bring to communities they assist.

CDD will form a statewide implementation team and engage with local partners and the regional Building Bright Futures Council in assessing, planning and accessing resources.

#### **Recruiting Promise Communities**

The geographic unit of measure for a local community for the Promise Communities Project is proposed as a Supervisory Union (an amalgam of school districts). A primary desired outcome is reduction of school related achievement gaps, so we consider it important to create community around local education agencies (LEAs).

We will analyze key data related to concentrated populations of children with high needs in rural areas of the state, including poverty, disabilities, open cases with the DCF Family Services Division, and English Language Learners, and cross reference this with performance measures that identify achievement gaps – such as the Ready Kindergarteners Survey and Grade 3 standardized test scores – to identify those Supervisory Unions where significant progress might be made through this project for children with high needs.

Prioritized Supervisory Unions will be invited to apply to become a Promise Community and will have to organize a coalition of local partners to make the application. Priority will be given where local “buy in” is strongest. Each BBF Regional Council will be limited to working with one Promise Community. This will also assure that the project is implemented with a lens toward geographic dispersion across the state.

Recruitment will be supported by a set of RTT-ELC Promise Community incentives:

- Priority access to the Early Childhood Leadership Institute proposed in this application (see D2);
- Two years of intensive technical assistance in asset mapping, needs assessment, strategic planning, and implementation from Promise Community Coaches;
- Training and support in use of the common frameworks like the Results Based Accountability model and the Strengthening Families Framework and the AAP Bright Futures guide;
- Prioritized access to other projects funded through RTT-ELC (see D2 and C3); and
- Seed money for strategies and investments identified in the Promise Communities Plan (up to \$200,000 per community).

### **Building the local coalition**

As previously stated, Building Bright Futures (BBF) Regional Councils (see A1) will act as local conveners for Promise Communities and will work to build the local coalition to apply and participate.

Certain participants will be required in the coalition for a successful application: the BBF Regional Council Coordinator; administrators from every LEA in the supervisory union; the regional AHS District Office and Field Director; local Blueprint Wellness team leaders and/or medical practitioners that work children and families; and a representative from the Regional Planning Commission. Others are strongly recommended: families with young children; representatives from the Parent Child Center (PCC), local Head Start and/or Early Head Start grantee and Designated Mental Health Agency associated with that catchment area; community based ELD providers (Center and Family CC Homes); representatives from town governments in the SU, including School Board representatives; the local Community Child Care Support Agency; the local Community Action Program; local libraries; legislators; and other community partners and stakeholders. If a broad coalition beyond required partners is not signed on at the time of application, one activity will be to build a deep and broad coalition focused on young children and families in each promise Community.

Once the project activity concludes in a Promise Community, the BBF Regional Council will continue to oversee and maintain work toward goals and outcomes identified in the Promise Community Plan.

### **Common frameworks**

Statewide leaders in Vermont have adopted certain frameworks to guide and drive improving services for children and families through an integrated approach.

#### **➤ Results based Accountability (RBA)**

Developed by Marc Friedman of the Fiscal Policies Studies Institute, Results Based Accountability (RBA) is an outcomes focused model that may be effectively applied to develop local strategies to turn talk to action to improve services and outcomes for high needs children and their families in communities. In working together to achieve shared outcomes, collaborators must develop a consistent system for monitoring and managing progress. Adopting the RBA approach across Promise Communities will allow participants to measure performance, and see if they are achieving the outcomes set out in the Community Promise Plan.

The RBA model looks at measured data over time and asks if the trend is acceptable. If not, interventions are developed to "turn the curve" in the right direction. In the long term, high level indicators will show if Promise Communities are achieving closing achievement and opportunity

gaps and improving outcomes for children and families. More immediately, specific indicators selected for projects and activities will show if these are having an impact and contributing toward turning the curve.

➤ **The Strengthening Families Framework (SFF)**

Strengthening Families is a framework was developed by Center for the Study of Social Policy over the last decade to prevent child abuse and neglect. This approach helps child welfare systems, early education and other programs work with parents to build the following protective factors: Parental resilience; social connections; concrete support in times of need; knowledge of parenting and child development; and social and emotional competence of children.

The AHS Integrated Family Services (IFS) leadership team has adopted this framework and works to embed these protective factors into existing programs and systems. The protective factors are informed by evidence from rigorous research and have widespread support from social researchers, child welfare officials, early childhood practitioners and policy experts (see B4).

➤ **The Bright Futures Guidelines**

Bright Futures is a set of principles, strategies, and tools that are theory-based; evidence-driven, and systems-oriented that can be used to improve the health and well-being of all children. It helps health care providers shift their thinking to a prevention-based, family-focused, and developmentally-oriented direction. Vermont has adopted Bright Futures as the standard of care for infants, children, and adolescents. Bright Futures fosters partnerships between families, providers, and communities; and empower families with the skills and knowledge to be active participants in their children's healthy development (see A1).

➤ **Early Multi-Tiered System of Supports (MTSS)**

MTSS (see C3) is a multi-step process of providing instruction and support to promote the academic and behavioral success of all children. Individual children's progress is monitored and results are used to make decisions about further instruction and intervention. MTSS is most commonly used in addressing reading, math and behavior, but it can also be used in other areas. The MTSS process is flexible and designed by school districts to meet the needs of their students. As part of a major State Personnel Development Grant (SPDG) awarded by the US Department of Education, the Vermont Agency of Education (AOE) developed an MTSS field

guide to support strong organizational leadership and systems development.

On October 29, 2013, the proposed Vermont Early Childhood Framework (see A1) will be formally presented by the Governor and potentially adopted by a broad, cross sector group of ELD System participants and stakeholders. This framework, if adopted, will help guide the work of Promise Communities.

➤ **Seed money for implementation**

Each Promise Community may request up to \$200,000 in one time funds to support implementation of their plan. A range of possible strategies may be implemented with these funds including ‘Baby College’ to educate young parents about child development and parenting; Welcome Baby Visits to link new parents to local resources and other families; playgroups; funds for concrete supports; programs in local community institutions like public libraries and community centers; playgrounds; after school programs; nutrition supports like food shelves or local food hubs to promote and support nutritious snacks and meals and nutrition education in ELDP; support for community health clinics; improving the capacity and quality of local ELDP (home, school or community based); full service school models; and shared services models to better support comprehensive services in local ELDP.

➤ **Participatory Evaluation**

We have set aside resources for evaluating each community’s efforts as well as the project as a whole. We believe that participatory research as an evaluation methodology has some advantages in a locally driven effort like Promise Communities. It fully engages all participants. It identifies locally relevant evaluation questions. It can inform in process program performance. It builds community capacity and helps develop leaders and build teams. It can sustain organizational learning and growth.

*Note about Invitational Priorities: Invitational priorities signal areas the Departments are particularly interested in; however, addressing these priorities will not earn applicants any additional points.*

Priority 6: Invitational Priority -- Encouraging Private-Sector Support.

The State will meet this priority based on the extent to which it describes how the private sector will provide financial and other resources to support the State and its Participating State Agencies or Participating Programs in the implementation of the State Plan.

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We are not responding to this section.

## **VIII. BUDGET AWARD INFORMATION**

Budget Requirements: To support States in planning their budgets, the Departments have developed the following budget caps for each State. We will not consider for funding an application from a State that proposes a budget that exceeds the applicable cap set for that State. The Departments developed the following categories by ranking every State according to its share of the national population of children ages birth through five-years-old from Low-Income families and identifying the natural breaks in the rank order. Then, based on population, budget caps were developed for each category.<sup>34</sup>

Category 1--Up to \$75M-- Florida, New York, Texas.

Category 2--Up to \$52.5M--Arizona, Georgia, Michigan, Pennsylvania.

Category 3--Up to \$45M--Alabama, Indiana, Kentucky, Louisiana, Missouri, New Jersey, Oklahoma, Puerto Rico, South Carolina, Tennessee, Virginia.

Category 4--Up to \$37.5M--Alaska, Arkansas, Connecticut, District of Columbia, Hawaii, Idaho, Iowa, Kansas, Maine, Mississippi, Montana, Nebraska, New Hampshire, Nevada, North Dakota, South Dakota, Utah, Vermont, West Virginia, Wyoming.

The State must include in its budget the amount of funds it intends to distribute through MOUs, interagency agreements, contracts, subgrants, or other mechanisms authorized by State procurement laws to localities, Early Learning Intermediary Organizations, Participating Programs, or other partners.

The State must set aside \$400,000 from its grant funds for the purpose of participating in RTT-ELC grantee technical assistance activities facilitated by ED or HHS.

Grant Period: The grant period for this award is December 31, 2013 through December 31, 2017.

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34 Source: U.S. Department of Commerce, Census Bureau, 2011. American Community Survey (ACS) 1-year Public Use Microdata Sample (PUMS) data.

**BUDGET INSTRUCTIONS**  
(Evidence for selection criterion (A)(4)(b))

In the following budget section, the State is responding to selection criterion (A)(4)(b). The State should use its budgets and budget narratives to provide a detailed description of how it plans to use Federal RTT-ELC grant funds and funds from other sources (Federal, State, private, and local) to support projects under the State Plan. States' budget tables and narratives, when taken together, should also address the specific elements of selection criterion (A)(4)(b), including by describing how the State will effectively and efficiently use funding from this grant to achieve the outcomes in the State Plan and do so in a manner that

- (1) Is adequate to support the activities described in the State Plan;
- (2) Includes costs that are reasonable and necessary in relation to the objectives, design, and significance of the activities described in the State Plan and the number of children to be served; and
- (3) Details the amount of funds budgeted for Participating State Agencies, localities, Early Learning Intermediary Organizations, Participating Programs, or other partners, and the specific activities to be implemented with these funds consistent with the State Plan, and demonstrates that a significant amount of funding will be devoted to the local implementation of the State Plan

The budget narratives should be of sufficient scope and detail for the Departments to determine if the costs are necessary, reasonable, and allowable. For further guidance on Federal cost principles, an applicant may wish to consult OMB Circular A-87. (See [www.whitehouse.gov/omb/circulars](http://www.whitehouse.gov/omb/circulars)).

We expect the State to provide a detailed budget by category for each Participating State Agency that rolls up into the total statewide budget. We further expect that the budgets of each Participating State Agency reflect the work associated with fully implementing the High-Quality Plans described under the selection criteria and Competitive Preference Priority 2 and describe each Participating State Agency's budgetary role<sup>35</sup> in carrying out the State Plan.

For purposes of the budget, we expect that the State will link its proposed High-Quality Plans to "projects" that the State believes are necessary in order to implement its plans. The State might choose to design some projects that address only one criterion's High-Quality Plan, while other

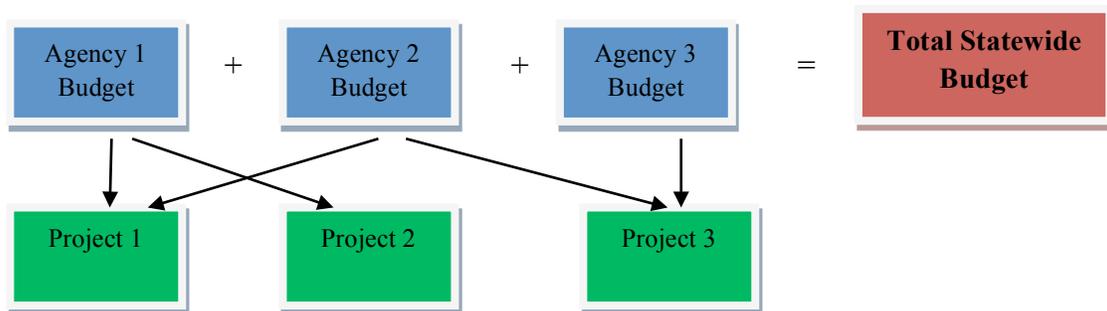
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<sup>35</sup> Participating State Agency's budgetary roles should be consistent with the scope of work outlined in the Participating State Agency's MOU or other binding agreement.

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projects might address several similarly-focused criteria as one group. For example, the State might choose to have one “management project” focused on criterion (A)(3), organizing and aligning the early learning and development system to achieve success. It might have another “workforce project” that addresses criteria (D)(1) and (D)(2) under the Great Early Childhood Education Workforce section.

Some projects may be done entirely by one Participating State Agency, while others may be done by multiple agencies in collaboration with one another. The State, together with its Participating State Agencies, will define the projects required to implement the State Plan and will determine which Participating State Agencies will be involved in each project, as shown below.



To support the budgeting process, we strongly suggest that applicants use the RTT-ELC budget spreadsheets prepared by the Departments to build their budgets. These spreadsheets must be submitted together with, but in a file separate from, the application.<sup>36</sup> These spreadsheets have formulas built into them that are intended to help States produce the budget tables required within this section.

The following information must be included in the State’s budget:

- I. Budget Summaries: In this section, the State provides overall budget summary information by budget category, Participating State Agency, and project.

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<sup>36</sup> See Application Submission Procedures, section XV. Please note that the RTT-ELC budget spreadsheets will not be used by the reviewers to judge or score the State’s application. However, these spreadsheets do produce tables that States may use in completing the budget tables that the State submits as part of its application. In addition, the budget spreadsheets will be used by the Departments for budget reviews.

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- a. Budget Summary by Budget Category. This is the cover sheet for the budget. (See Budget Table I-1.) States should complete this table as the final step in their budgeting process, and include this table as the first page of the State’s budget. (Note: Each row in this table is calculated by adding together the corresponding rows in each of the Participating State Agency Budget by Category tables. If the State uses the budget spreadsheets provided, these “roll-up” calculations are done automatically.)
  - b. Budget Summary by Participating State Agency. This summary lists the total annual budget for each Participating State Agency. (See Budget Table I-2.) States should complete this table after completing Budget Table II-1 for each Participating State Agency (see Part II: Participating State Agency Budgets). If the State uses the budget spreadsheets provided, these “roll-up” calculations are done automatically for the State.
  - c. Budget Summary by Project. This summary lists the total annual budget for each of the projects. (See Budget Table I-3.) States should complete this table after completing Budget Table II-2 for each Participating State Agency (see Part II: Participating State Agency Budgets). If the State uses the budget spreadsheets provided, these “roll-up” calculations are done automatically for the State.
  - d. Budget Summary Narrative. This budget narrative accompanies the three Budget Summary Tables and provides the rationale for the budget. The narrative should include, for example, an overview of each Participating State Agency’s budgetary responsibilities and descriptions of each project that the State has included in its budget.
- II. Budgets for Each Participating State Agency. In this section, the State describes each Participating State Agency’s budgetary responsibilities.<sup>37</sup> The State should replicate this section for each Participating State Agency and for each Participating State Agency complete the following:
- a. Participating State Agency By Budget Category. This is the budget for each Participating State Agency by budget category for each year for which funding is requested. (See Budget Table II-1.)
  - b. Participating State Agency By Project. This table lists the Participating State Agency’s proposed budget for each project in which it is involved. (See Budget Table II-2.)
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<sup>37</sup> Participating State Agency’s budgetary roles should be consistent with the scope of work outlined in the Participating State Agency’s MOU or other binding agreement.

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- c. Participating State Agency Budget Narrative. This budget narrative describes the Participating State Agency's budget category line items and addresses how the Participating State Agency's budget will support the implementation of each project in which it is involved.

The State should replicate Budget Part II for each Participating State Agency as follows:

- For Participating State Agency 1: Budget by Category, Budget by Project, Narrative
- For Participating State Agency 2: Budget by Category, Budget by Project, Narrative

**BUDGET PART I: SUMMARY**

**BUDGET PART I - TABLES**

<b>OVERALL STATEWIDE BUDGET</b>					
<b>Budget Table I-1: Budget Summary by Budget Category</b> (Evidence for selection criterion (A)(4)(b))					
<b>Budget Categories</b>	<b>Grant Year 1 (a)</b>	<b>Grant Year 2 (b)</b>	<b>Grant Year 3 (c)</b>	<b>Grant Year 4 (d)</b>	<b>Total (e)</b>
1. Personnel	1,773,139	1,820,833	1,303,952	1,317,493	<b>6,215,417</b>
2. Fringe Benefits	437,033	451,771	454,919	458,281	<b>1,802,004</b>
3. Travel	126,500	121,000	113,500	113,500	<b>474,500</b>
4. Equipment	43,200	23,600	20,000	0	<b>86,800</b>
5. Supplies	128,560	106,159	81,529	81,529	<b>397,777</b>
6. Contractual	2,763,125	3,790,550	2,944,813	1,490,095	<b>10,988,583</b>
7. Training Stipends	0	0	0	0	<b>0</b>
8. Other	371,829	350,912	379,548	349,188	<b>1,451,477</b>
<b>9. Total Direct Costs (add lines 1-8)</b>	<b>5,643,386</b>	<b>6,664,825</b>	<b>5,298,261</b>	<b>3,810,086</b>	<b>21,416,558</b>
10. Indirect Costs*	563,046	551,187	450,803	406,104	<b>1,971,140</b>
11. Funds to be distributed to localities, Early Learning Intermediary Organizations, Participating Programs, and other partners	1,589,949	3,252,176	4,404,551	4,249,640	<b>13,496,316</b>
12. Funds set aside for participation in grantee technical assistance	215,632	124,660	124,660	124,660	589,612
<b>13. Total Grant Funds Requested (add lines 9-12)</b>	<b>8,012,013</b>	<b>10,592,848</b>	<b>10,278,275</b>	<b>8,590,490</b>	<b>37,473,626</b>
14. Funds from other sources used to support the State Plan	16,216,675	15,217,327	14,957,755	15,207,626	<b>61,599,383</b>

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<b>15. Total Statewide Budget (add lines 13-14)</b>	<b>24,228,688</b>	<b>25,810,175</b>	<b>25,236,030</b>	<b>23,798,116</b>	<b>99,073,009</b>
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Columns (a) through (d): For each grant year for which funding is requested, show the total amount requested for each applicable budget category.

Column (e): Show the total amount requested for all grant years.

Line 6: Show the amount of funds allocated through contracts with vendors for products to be acquired and/or professional services to be provided. A State may apply its indirect cost rate only against the first \$25,000 of each contract included in line 6.

Line 10: If the State plans to request reimbursement for indirect costs, complete the Indirect Cost Information form at the end of this Budget section. Note that indirect costs are not allocated to line 11.

Line 11: Show the amount of funds to be distributed to localities, Early Learning Intermediary Organizations, Participating Programs, and other partners through contracts, interagency agreements, MOUs or any other subawards allowable under State procurement law. States are not required to provide budgets for how the localities, Early Learning Intermediary Organizations, Participating Programs, and other partners will use these funds. However, the Departments expect that, as part of the administration and oversight of the grant, States will monitor and track all expenditures to ensure that localities, Early Learning Intermediary Organizations, Participating Programs, and other partners spend these funds in accordance with the State Plan.

Line 12: The State must set aside \$400,000 from its grant funds for the purpose of participating in RTT-ELC grantee technical assistance activities facilitated by ED or HHS. This is primarily to be used for travel and may be allocated to Participating State Agencies evenly across the four years of the grant.

Line 13: This is the total funding requested under this grant.

<b>OVERALL STATEWIDE BUDGET</b>					
<b>Budget Table I-2: Budget Summary by Participating State Agency</b>					
<b>(Evidence for selection criterion (A)(4)(b))</b>					
<b>Agency Name</b>	<b>Grant Year 1 (a)</b>	<b>Grant Year 2 (b)</b>	<b>Grant Year 3 (c)</b>	<b>Grant Year 4 (d)</b>	<b>Total (e)</b>
<b>Office of the Governor</b>	532,532	336,156	338,897	346,750	<b>1,554,335</b>
<b>Agency of Human Services</b>	193,739	195,429	199,763	204,383	<b>793,314</b>
<b>Agency of Education</b>	1,889,596	1,689,745	3,508,490	2,365,569	<b>9,453,400</b>
<b>Department of Children and Families</b>	17,254,138	20,446,409	19,342,220	19,064,942	<b>76,107,709</b>

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<b>Department of Health</b>	2,113,044	1,101,172	650,672	650,672	<b>4,515,560</b>
<b>Building Bright Futures</b>	2,245,639	2,041,264	1,195,988	1,165,800	<b>6,648,691</b>
<b>Total Statewide Budget</b>	<b>24,228,688</b>	<b>25,810,175</b>	<b>25,236,030</b>	<b>23,798,116</b>	<b>99,073,009</b>

<b>OVERALL STATEWIDE BUDGET</b>					
<b>Budget Table I-3: Budget Summary by Project</b> (Evidence for selection criterion (A)(4)(b))					
<b>Project</b>	<b>Grant Year 1 (a)</b>	<b>Grant Year 2 (b)</b>	<b>Grant Year 3 (c)</b>	<b>Grant Year 4 (d)</b>	<b>Total (e)</b>
<b>1: Governing and Managing</b>	564,408	572,727	589,235	606,099	<b>2,332,469</b>
<b>2: Supporting BBF Regional Councils</b>	1,562,725	1,370,850	1,000,800	1,000,800	<b>4,935,175</b>
<b>3: Building ECE Leadership</b>	201,000	150,000	150,000	150,000	<b>651,000</b>
<b>4: Expand Strengthening Families Child Care Programs</b>	1,143,162	1,233,162	1,448,162	1,388,162	<b>5,212,648</b>
<b>5: Annual STARS awards</b>	923,500	1,005,895	1,122,263	1,289,401	<b>4,341,059</b>
<b>6: Validating and Evaluation of STARS</b>	79,625	154,625	129,625	54,625	<b>418,500</b>
<b>7: Rating and Monitoring Early Learning and Development</b>	372,133	404,796	444,090	438,217	<b>1,659,236</b>
<b>8: Children's Integrated Services Specialized Child Care</b>	2,984,580	3,087,144	3,189,708	3,292,272	<b>12,553,704</b>
<b>9: Revised VELs &amp; Dissemination/Training</b>	352,682	236,684	157,697	128,643	<b>875,706</b>
<b>10: Comprehensive Assessment Strategies</b>	343,002	314,104	309,671	271,973	<b>1,238,750</b>

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<b>11: Home Visiting</b>	11,483,828	10,418,908	9,968,908	9,888,908	<b>41,760,552</b>
<b>12: Health Care Consultation</b>	374,332	366,206	366,576	366,576	<b>1,473,690</b>
<b>13: Developmental Screening (Help Me Grow)</b>	178,059	174,713	173,843	173,843	<b>700,458</b>
<b>14: MTSS Supporting Socio-Emotional Development</b>	331,585	347,793	370,025	324,922	<b>1,374,325</b>
<b>15: Apprenticeship</b>	375,030	385,700	394,204	411,379	<b>1,566,313</b>
<b>16: Evaluate Implement of MATCH in VT</b>	87,500	87,500	87,500	87,500	<b>350,000</b>
<b>17: TEACH / Higher Ed</b>	320,242	379,291	462,460	507,548	<b>1,669,541</b>
<b>18: Workforce Study</b>	184,625	104,625	0	0	<b>289,250</b>
<b>19: Kindergarten Readiness Survey</b>	170,436	90,655	22,573	10,938	<b>294,602</b>
<b>20: CIS Data System</b>	557,291	2,057,291	557,291	169,136	<b>3,341,009</b>
<b>21: ECDRS</b>	682,914	670,414	195,188	165,000	<b>1,713,516</b>
<b>22: Data Governance</b>	82,625	82,625	3,000	3,000	<b>171,250</b>
<b>23: SLDS Pre-K Data</b>	0	0	885,375	885,375	<b>1,770,750</b>
<b>24: KRS Data</b>	0	0	195,850	0	<b>195,850</b>
<b>25: Part B Data</b>	0	0	195,850	0	<b>195,850</b>
<b>26: Interface SLDS and TS Gold</b>	0	0	346,575	0	<b>346,575</b>

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<b>27: Head Start / Early Head Start</b>					<b>285,850</b>
<b>28: Sustaining Program Effects into Early Elementary Grades</b>					<b>1,304,585</b>
<b>29: Promise Communities</b>					<b>6,050,796</b>
<b>Total Statewide Budget</b>	<b>21,269,651</b>	<b>20,223,307</b>	<b>19,814,807</b>	<b>19,785,820</b>	<b>99,073,009</b>

**BUDGET PART I -NARRATIVE**

*Describe, in the text box below, the overall structure of the State's budget for implementing the State Plan, including*

- *A list of each Participating State Agency, together with a description of its budgetary and project responsibilities;*
- *A list of projects and a description of how these projects taken together will result in full implementation of the State Plan;*
- *For each project:*
  - *The designation of the selection criterion or competitive preference priority the project addresses;*
  - *An explanation of how the project will be organized and managed in order to ensure the implementation of the High-Quality Plans described in the selection criteria or competitive preference priorities; and*
- *Any information pertinent to understanding the proposed budget for each project.*

Vermont requests \$37,473,626 from the Department of Education to implement our State Plan. This request includes \$21,416,558 in direct cost, \$14,085,928 in funds that will be distributed or set aside, and \$1,971,140 in indirect cost. Our request will be leveraged with \$61,999,383 of other funds, for a total State Plan budget of \$99,473,009.

As discussed in A2, Vermont has four major investment strategies for these funds: (1) Capitalize on the broad and deep professional linkages and relationships in a small, rural state to maximize service reach and effectiveness, and the efficient and effective implementation of the State Plan; (2) Invest in people through expanded personal and professional development to drive effectiveness and where needed, change; (3) Improve standards, assessment and data integration to drive increased program quality and improvement; and (4) Expand supports and services to improve outcomes for children in our highest need rural areas.

Based on these strategies, we have developed 39 projects that operationalize one or more of them. Most of these projects are statewide; a few target specific communities where the need is greatest, such as remote rural areas.

The tables below, one for each major participating agency that will be receive funding, lists the name of each project, the section of the application to which it is linked, its project budget number, and the project funded amount (including both RTT-ELC and leveraged funds). Some of these projects are collaborations between agencies, and thus appear in more than one table. In addition to the application sections noted, the advances that these projects represent directly or

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indirectly impact children with high needs. Thus, all of these projects are also linked to Absolute Priority 1.

Detailed information about the management of each project is provided in the HQPs embedded across the application. The roles and responsibilities of each agency listed below is summarized in A3.

<b>Governor's Office (Lead Program Agency)</b>			
<b>Project Name</b>	<b>Application Section</b>	<b>Project Budget No.</b>	<b>Total Amount</b>
Governing and Managing the Project	A3	1	2,332,469
Building ECE Leadership	D2	3	651,000
Data Governance Structure expanding SLDS	E2	22	171,250
<b>Agency of Human Services (Lead Fiscal Agency)</b>			
<b>Project Name</b>	<b>Application Section</b>	<b>Project Budget No.</b>	<b>Total Amount</b>
Governing and Managing the Project	A3	1	2,332,469
<b>Agency of Education (Participating State Agency)</b>			
<b>Project Name</b>	<b>Application Section</b>	<b>Project Budget No.</b>	<b>Total Amount</b>
Revised VELs & Dissemination/Training	C1	9	875,706
Build on Developmental Screening	C2	10	1,238,750
Expanding and Improving use of TS Gold	C2	10	1,238,750
Increase use of CLASS in Pre-K as tool	C2	10	1,238,750
MTSS supporting social and emotional development	C3	14	1,374,325
Ready Kindergarteners Survey	E1	19	294,602
SLDS Pre-K Data	E2	23	1,770,750
Ready Kindergarteners Data	E2	24	195,850
Part B Data	E2	25	195,850
Interface SLDS and TS Gold	E2	26	346,575
Head Start/Early Head Start	E2	27	285,850

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<b>Agency of Education (Participating State Agency)</b>			
<b>Project Name</b>	<b>Application Section</b>	<b>Project Budget No.</b>	<b>Total Amount</b>
Sustaining Program Effects into Early Elementary Grades	CP4	28	1,304,585
Workforce Study	D2	18	289,250
Rating and Monitoring Early Learning and Development Programs	B3	7	1,659,236
TEACH/Higher Ed	D2	17	1,669,541
Governing and Managing the Project	A3	1	2,332,469
<b>Agency of Human Services, Department of Children and Families (Participating State Agency)</b>			
<b>Project Name</b>	<b>Application Section</b>	<b>Project Budget No.</b>	<b>Total Amount</b>
Expand Strengthening Families Child Care Programs	B4	4	5,212,648
Annual STARS awards	B4	5	4,341,059
Validating and Evaluation of STARS	B5	6	418,500
Children's Integrated Services Specialized Child Care	B1	8	12,553,704
Apprenticeship	D2	15	1,566,313
Evaluate Implementation of MATCH in VT	D2	16	350,000
CIS Data System	E2	20	3,341,009
Rating and Monitoring Early Learning and Development Programs	B3	7	1,659,236
TEACH/Higher Ed	D2	17	1,669,541
Home Visiting	C3	11	41,760,552
Promise Communities	CP5	29	6,050,796
<b>Building Bright Futures (State Advisory Council on Early Childhood Education and Care and Participating Agency)</b>			
<b>Project Name</b>	<b>Application Section</b>	<b>Project Budget No.</b>	<b>Total Amount</b>
Supporting BBF Regional Councils	A3	2	4,935,175
ECDRS	E2	21	1,713,516
<b>Department of Health (Participating State Agency)</b>			

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<b>Project Name</b>	<b>Application Section</b>	<b>Project Budget No.</b>	<b>Total Amount</b>
Health Care Consultation	C3	12	1,473,690
Developmental Screening (Help Me Grow)	C3	13	700,458
Home Visiting	C3	11	41,760,552

**BUDGET PART II: PARTICIPATING STATE AGENCY**

*The State must complete Budget Table II-1, Budget Table II-2, and a narrative for each Participating State Agency with budgetary responsibilities. Therefore, the State should replicate the Budget Part II tables and narrative for each Participating State Agency, and include them in this section as follows:*

- *Participating State Agency 1: Budget Table II-1, Budget Table II-2, narrative.*
- *Participating State Agency 2: Budget Table II-1, Budget Table II-2, narrative.*

**BUDGET PART II -TABLES**

Budget Table II-1: Participating State Agency Budget By Budget Category--*The State must include the Participating State Agency’s budget totals for each budget category for each year of the grant.*

<b>Participating State Agency-Level Budget Table II-1</b> <i>Governor’s Office</i> <b>(Evidence for selection criterion (A)(4)(b))</b>					
<b>Budget Category</b>	<b>Grant Year 1 (a)</b>	<b>Grant Year 2 (b)</b>	<b>Grant Year 3 (c)</b>	<b>Grant Year 4 (d)</b>	<b>Total (e)</b>
1. Personnel	90,379	95,350	100,494	105,975	<b>392,198</b>
2. Fringe Benefits	46,308	47,541	48,812	50,170	<b>192,831</b>
3. Travel	2,000	2,000	2,000	2,000	<b>8,000</b>
4. Equipment	2,500	0	0	0	<b>2,500</b>
5. Supplies	2,000	2,000	2,000	2,000	<b>8,000</b>
6. Contractual	196,375	0	0	0	<b>196,375</b>
7. Training Stipends	0	0	0	0	<b>0</b>
8. Other	152,000	152,000	152,000	152,000	<b>608,000</b>
9. Total Direct Costs (add lines 1-8)	<b>491,562</b>	<b>298,891</b>	<b>305,306</b>	<b>312,145</b>	<b>1,407,904</b>
10. Indirect Costs*	25,970	22,265	18,591	19,605	<b>86,431</b>

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11. Funds to be distributed to localities, Early Learning Intermediary Organizations, Participating Programs, and other partners	0	0	0	0	0
12. Funds set aside for participation in grantee technical assistance	0	0	0	0	0
<b>13. Total Grant Funds Requested</b> (add lines 9-12)	<b>517,532</b>	<b>321,156</b>	<b>323,897</b>	<b>331,750</b>	<b>1,494,335</b>
14. Funds from other sources used to support the State Plan	15,000	15,000	15,000	15,000	60,000
<b>15. Total Statewide Budget</b> (add lines 13-14)	<b>532,532</b>	<b>336,156</b>	<b>338,897</b>	<b>346,750</b>	<b>1,554,335</b>

Participating State Agency-Level Budget Table II-2 Governor's Office (Evidence for selection criterion (A)(4)(b))					
Project	Grant Year 1 (a)	Grant Year 2 (b)	Grant Year 3 (c)	Grant Year 4 (d)	Total (e)
<b>1: Governing and Managing</b>	173,907	178,531	185,897	193,750	<b>732,085</b>
<b>3: Building ECE Leadership</b>	201,000	150,000	150,000	150,000	<b>651,000</b>
<b>22: Data Governance</b>	82,625	82,625	3,000	3,000	<b>171,250</b>
<b>Total Statewide Budget</b>	<b>457,532</b>	<b>411,156</b>	<b>338,897</b>	<b>346,750</b>	<b>1,554,335</b>

<b>GOVERNING AND MANAGING/ PROJECT 1 BUDGET NARRATIVE</b>
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**1) Personnel - \$392,198**

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The Governing and Managing project will require two additional staff members; a Grant Manager, with a starting salary of \$53,164 and an Administrative Assistant to the Grant Manager with a starting salary of \$37,215. Each position's salary will increase by .94% for each of the three remaining grant years. Both positions will be 100% FTE.

**2) Fringe Benefits - \$192,831**

The Grant Manager will earn \$27,240 in fringe benefits in the first year. The Administrative Assistant to the Grant Manager will earn \$19,068 in fringe benefits. Fringe benefits for each position will also increase by .97% for each of the three remaining grant years.

**3) Travel**

N/A

**4) Equipment - \$2,500**

An estimated \$2,500 will be used for equipment for these positions in the first year only. The equipment will include two workstations for each position as both positions will be housed in two state agencies and they will split their time equally; one workstation at the Agency of Human Services (AHS) and another at the Agency of Education (AOE). Each workstation will include a desk, chair, laptop (or desktop computer) and telephone.

**5) Supplies - \$4,000**

An estimated \$1,000 will be needed each year for office supplies, printing and postage.

**6) Contractual**

N/A

**7) Training Stipends**

N/A

**8) Outreach - \$8,000**

Funds needed for various outreach activities including statewide public input sessions through Vermont Interactive Technologies and will be \$2,000 per year for each of the grant years.

**9) Total Direct Costs - \$599,529**

**10) Indirect Costs - \$72,557**

Indirect costs are calculated by using the State's restricted indirect rate of 18.5%.

**11) Funds distributed to localities, Early Learning Intermediary Organizations, Participating Programs, or other partners through MOUs, interagency agreements, contracts, or other mechanisms authorized by State procurement laws.**

N/A

**12) Funds set aside for participation in grantee technical assistance**

N/A

**13) Total Funds Requested - \$672,085**

**14) Other Funds Allocated to the State Plan -\$60,000**

Governor's Senior Staff will provide oversight to the Grant Manager, participate actively in the VT RTT-ELC State Management Team and work closely with Agency of Human Services Management to ensure coordinated and efficient grant implementation.

**15) Total Budget - \$732,085**

<b>BUILDING ECE LEADERSHIP/PROJECT 3 BUDGET NARRATIVE</b>
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**1) Personnel**

N/A

**2) Fringe Benefits**

N/A

**3) Travel**

N/A

**4) Equipment**

N/A

**5) Supplies**

N/A

**6) Contractual - \$46,375**

The Building Early Childhood Education (ECE) Leadership project will require development of an ECE Leadership Institute and will be based on a leadership institute model already successful in the state. This development will require a contractor which will cost \$46,375. Development will begin in January 2014 and will be completed by September 2014.

**7) Training Stipends**

N/A

**8) Other / Tuition Reimbursement - \$600,000**

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The Institute will be attended by a maximum of 25 students per year and will cost \$6,000 per student, per year, for a total of \$600,000. The VT RTT-ELC grant will reimburse the majority of tuition costs, with students contributing a nominal cost of \$200. This nominal cost may be defrayed due to financial hardship.

**9) Total Direct Costs - \$646,375**

**10) Indirect Costs - \$4,625**

Indirect costs are calculated by using the State's restricted indirect rate of 18.5%.

**11) Funds distributed to localities, Early Learning Intermediary Organizations, Participating Programs, or other partners through MOUs, interagency agreements, contracts, or other mechanisms authorized by State procurement laws.**

N/A

**12) Funds set aside for participation in grantee technical assistance**

N/A

**13) Total Funds Requested - \$651,000**

**14) Other Funds Allocated to the State Plan**

N/A

**15) Total Budget - \$651,000**

<b>DATA GOVERNANCE STRUCTURE/PROJECT 24 BUDGET NARRATIVE</b>
--

**1) Personnel**

N/A

**2) Fringe Benefits**

N/A

**3) Travel - \$8,000**

\$2,000 per year for four years is needed for in-state travel.

**4) Equipment**

**5) Supplies - \$4,000**

An estimated \$1,000 will be needed each year for office supplies, printing and postage.

**6) Contractual - \$150,000**

The cost to hire a contractor to manage Data Governance processes and procedures, facilitate meeting discussions, and handle the logistics is \$75,000 per year for two years. After the first two years, the Data Governance Structure should no longer need this person at meetings during Year 3 and 4 as the data governance decisions and procedures will have been resolved by the end of Year 2.

**7) Training Stipends**

N/A

**8) Other**

N/A

**9) Total Direct Costs - \$162,000**

**10) Indirect Costs - \$9,250**

Indirect costs are calculated by using the State's restricted indirect rate of 18.5%.

**11) Funds distributed to localities, Early Learning Intermediary Organizations, Participating Programs, or other partners through MOUs, interagency agreements, contracts, or other mechanisms authorized by State procurement laws.**

N/A

**12) Funds set aside for participation in grantee technical assistance**

N/A

**13) Total Funds Requested - \$171,250**

**14) Other Funds Allocated to the State Plan**

N/A

**15) Total Budget - \$171,250**

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<b>Participating State Agency-Level Budget Table II-1</b>					
<i>Agency of Human Services</i>					
(Evidence for selection criterion (A)(4)(b))					
<b>Budget Category</b>	<b>Grant Year 1 (a)</b>	<b>Grant Year 2 (b)</b>	<b>Grant Year 3 (c)</b>	<b>Grant Year 4 (d)</b>	<b>Total (e)</b>
1. Personnel	53,164	56,088	59,114	62,338	<b>230,704</b>
2. Fringe Benefits	27,240	27,965	28,713	29,512	<b>113,430</b>
3. Travel	0	0	0	0	<b>0</b>
4. Equipment	2,500	0	0	0	<b>2,500</b>
5. Supplies	1,000	1,000	1,000	1,000	<b>4,000</b>
6. Contractual	0	0	0	0	<b>0</b>
7. Training Stipends	0	0	0	0	<b>0</b>
8. Other	0	0	0	0	<b>0</b>
<b>9. Total Direct Costs (add lines 1-8)</b>	<b>83,904</b>	<b>85,053</b>	<b>88,827</b>	<b>92,850</b>	<b>350,634</b>
10. Indirect Costs*	9,835	10,376	10,936	11,533	<b>42,680</b>
11. Funds to be distributed to localities, Early Learning Intermediary Organizations, Participating Programs, and other partners	0	0	0	0	<b>0</b>
12. Funds set aside for participation in grantee technical assistance	100,000	100,000	100,000	100,000	<b>400,000</b>
<b>13. Total Grant Funds Requested (add lines 9-12)</b>	<b>193,739</b>	<b>195,429</b>	<b>199,763</b>	<b>204,383</b>	<b>793,314</b>

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14. Funds from other sources used to support the State Plan	0	0	0	0	0
<b>15. Total Statewide Budget</b> (add lines 13-14)	<b>193,739</b>	<b>195,429</b>	<b>199,763</b>	<b>204,383</b>	<b>793,314</b>

<b>Participating State Agency-Level Budget Table II-2</b> <i>Agency of Human Services</i> (Evidence for selection criterion (A)(4)(b))					
<b>Project</b>	<b>Grant Year 1 (a)</b>	<b>Grant Year 2 (b)</b>	<b>Grant Year 3 (c)</b>	<b>Grant Year 4 (d)</b>	<b>Total (e)</b>
<b>1: Governing and Managing</b>	193,739	195,429	199,763	204,383	<b>793,314</b>
<b>Total Statewide Budget</b>	<b>193,739</b>	<b>195,429</b>	<b>199,763</b>	<b>204,383</b>	<b>793,314</b>

**GOVERNING AND MANAGING/PROJECT 1 BUDGET NARRATIVE**

**1) Personnel - \$230,704**

The Governing and Managing project will require a 100% FTE Fiscal Manager, with a starting salary of \$53,164. This position's salary will increase by .94% for each of the three remaining grant years.

**2) Fringe Benefits - \$113,430**

The Fiscal Manager will receive \$27,240 in fringe benefits in the first year. Fringe benefits for this position will increase by .97% for each of the three remaining grant years.

**3) Travel**

N/A

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**4) Equipment - \$2,500**

An estimated \$2,500 will be used for equipment for this position in the first year only.

**5) Supplies - \$4,000**

An estimated \$1,000 will be needed each year for office supplies, printing and postage.

**6) Contractual**

N/A

**7) Training Stipends**

N/A

**8) Outreach**

N/A

**9) Total Direct Costs - \$350,634**

**10) Indirect Costs - \$42,680**

Indirect costs are calculated using the State's restricted indirect rate of 18.5%.

**11) Funds distributed to localities, Early Learning Intermediary Organizations, Participating Programs, or other partners through MOUs, interagency agreements, contracts, or other mechanisms authorized by State procurement laws.**

N/A

**12) Funds set aside for participation in grantee technical assistance - \$400,000**

These are the funds for VT RTT-ELC State Management Team to access federal technical assistance from US DOE and US HHS as needed during the grant period.

**13) Total Funds Requested - \$393,314**

**14) Other Funds Allocated to the State Plan**

N/A

**15) Total Budget - \$793,314**

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<b>Participating State Agency-Level Budget Table II-1</b>					
<i>Agency of Education</i>					
<b>(Evidence for selection criterion (A)(4)(b))</b>					
<b>Budget Category</b>	<b>Grant Year 1 (a)</b>	<b>Grant Year 2 (b)</b>	<b>Grant Year 3 (c)</b>	<b>Grant Year 4 (d)</b>	<b>Total (e)</b>
1. Personnel	79,746	84,132	88,671	93,507	<b>346,056</b>
2. Fringe Benefits	48,013	49,106	50,235	51,440	<b>198,794</b>
3. Travel	1,800	1,800	1,800	1,800	<b>7,200</b>
4. Equipment	0	0	20,000	0	<b>20,000</b>
5. Supplies	10,500	10,500	10,500	10,500	<b>42,000</b>
6. Contractual	1,035,200	965,700	1,935,700	1,049,700	<b>4,986,300</b>
7. Training Stipends	0	0	0	0	<b>0</b>
8. Other	104,838	96,446	84,082	53,722	<b>339,088</b>
<b>9. Total Direct Costs (add lines 1-8)</b>	<b>1,280,097</b>	<b>1,207,684</b>	<b>2,190,988</b>	<b>1,260,669</b>	<b>5,939,438</b>
10. Indirect Costs*	166,333	162,187	181,761	140,076	<b>650,357</b>
11. Funds to be distributed to localities, Early Learning Intermediary Organizations, Participating Programs, and other partners	60,000	60,000	810,000	670,000	<b>1,600,000</b>
12. Funds set aside for participation in grantee technical assistance	0		0	0	<b>0</b>
<b>13. Total Grant Funds Requested (add lines 9-12)</b>	<b>1,506,430</b>	<b>1,429,871</b>	<b>3,182,749</b>	<b>2,070,745</b>	<b>8,189,795</b>
14. Funds from other sources used to support the State Plan	383,166	259,874	325,741	294,824	<b>1,263,605</b>

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<b>Participating State Agency-Level Budget Table II-1</b>					
<i>Agency of Education</i>					
<b>(Evidence for selection criterion (A)(4)(b))</b>					
<b>Budget Category</b>	<b>Grant Year 1 (a)</b>	<b>Grant Year 2 (b)</b>	<b>Grant Year 3 (c)</b>	<b>Grant Year 4 (d)</b>	<b>Total (e)</b>
<b>15. Total Statewide Budget</b> (add lines 13-14)	<b>1,889,596</b>	<b>1,689,745</b>	<b>3,508,490</b>	<b>2,365,569</b>	<b>9,453,400</b>

<b>Budget Table II-2: Participating State Agency</b>					
<i>Agency of Education</i>					
<b>(Evidence for selection criterion (A)(4)(b))</b>					
<b>Project</b>	<b>Grant Year 1 (a)</b>	<b>Grant Year 2 (b)</b>	<b>Grant Year 3 (c)</b>	<b>Grant Year 4 (d)</b>	<b>Total (e)</b>
1: Governing and Managing	111,413	114,518	119,326	123,717	468,974
7: Rating and Monitoring Early Learning and Development	97,171	96,292	135,586	135,713	464,762
9: Revised VELs & Dissemination/Training	352,682	236,684	157,697	128,643	875,706
10: Comprehensive Assessment Strategies	343,002	314,104	309,671	271,973	1,238,750
14: MTSS Supporting Socio-Emotional Development	331,585	347,793	370,025	324,922	1,374,325
17: TEACH / Higher Education	159,812	158,861	159,030	159,118	636,821
19: Kindergarten Readiness Survey	170,436	90,655	22,573	10,938	294,602
23: SLDS Pre-K Data	0	0	885,375	885,375	1,770,750
24: KRS Data	0	0	195,850	0	195,850
25: Part B Data	0	0	195,850	0	195,850
26: Interface SLDS and TS Gold	0	0	346,575	0	346,575

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<b>Budget Table II-2: Participating State Agency</b>					
<i>Agency of Education</i>					
<b>(Evidence for selection criterion (A)(4)(b))</b>					
<b>Project</b>	<b>Grant Year 1 (a)</b>	<b>Grant Year 2 (b)</b>	<b>Grant Year 3 (c)</b>	<b>Grant Year 4 (d)</b>	<b>Total (e)</b>
27: Head Start / Early Head Start	0	0	285,850	0	285,850
28: Sustaining Program Effects into Early Elementary Grades	323,495	330,838	325,082	325,170	1,304,585
<b>Total Statewide Budget</b>	<b>1,889,596</b>	<b>1,689,745</b>	<b>3,508,490</b>	<b>2,365,569</b>	<b>9,453,400</b>

**AGENCY OF EDUCATION BUDGET NARRATIVE**

**1) Personnel - \$346,056**

*It is assumed that the positions will be filled by January 1, 2014; hence personnel costs are calculated for 12 months per year, every year of the grant.*

<i>Employees of the Project</i>	<i># of positions</i>	<i>% FTE</i>	<i>Base Salary</i>	<i>Total Annual Cost</i>
AOE Project Coordinator  This position will work at the AOE to coordinate the AOE RTT-ELC grant activities and liaison with the Project Manager and other PSAs.	1	100%	\$53,164	\$53,164 Year 1 \$56,088 Year 2 \$59,114 Year 3 \$62,338 Year 4
RTT-ELC Assessment Coordinator  This position will facilitate the activities related to the Comprehensive Assessment System and provide technical assistance and professional	1	50%	\$26,582	\$26,582 Year 1 \$28,044 Year 2 \$29,557 Year 3 \$31,169 Year 4

development to the field				
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The base salary for both positions estimate assumes that the individual will be at a Coordinator I position (Pay Grade 24), possess a master’s degree, and have 5 or more years of relevant experience. An annual increase of approximately 5% is calculated for Years 2, 3, and 4.

**2) Fringe Benefits - \$198,794**

The AOE Project Coordinator and the Assessment Coordinator will earn \$27,240 and \$20,773, respectively. The standard rate for fringe benefits that all Vermont state employees have was used to budget the amounts in Years 1-4 of the grant. It also projected that the fringe benefits for each position will increase by .97% for Years 2-4.

**3) Travel - \$7,200**

The AOE Project Coordinator and the RTT-ELC Assessment Coordinator are expected to do some in-state travel to attend meetings, visit programs, conduct trainings, etc. The budget includes \$1200 per year for the AOE Project Coordinator and \$600 per year for the part-time RTT-ELC Assessment Coordinator.

**4) Equipment - \$20,000**

In Year 3 of the grant, the purchase of a secure file transfer protocol (secure FTP or SFTP) server and software to transfer data securely between applications/systems/environments. This equipment would be utilized by each of the system integration projects #23 through #27 (i.e., State Longitudinal Data System & PreK Data, SLDS & Ready Kindergartners Survey data, SLDS & Part B 619 data, SLDS & TS GOLD data, and SLDS & Head Start and Early Head Start data).

**5) Supplies - \$42,000**

A total of \$10,000 per grant year is budgeted for the Multi-Tiered Systems of Support (MTSS) social-emotional development project (#14) to purchase assessment tools required for target site data collection: Ages and Stages Questionnaire, TPOT, SSIS, BIR on-line tracking system. An estimated \$500 will be needed each year for office supplies for the 1.5 FTE positions. **6)**

**Contractual - \$4,986,300**

<b>Project #7- Developing &amp; Implementing a Monitoring System for Public PreK - \$400,000</b>	
<p>We propose to contract with an early childhood educator who has expertise in public PreK and program evaluation to coordinate and participate in the development of a monitoring system. During the entire grant period, this person will oversee the development, piloting, and the first two years of implementation to gather baseline data. Additionally, in Year 1 and 2, a contract with a national expert in monitoring public PreK will be executed. In Year 3 and 4, we propose contracting with an assessor to assist in the initial implementation phase.</p>	
<b>Year</b>	<b>Budget</b>
Grant Year 1	\$80,000
Grant Year 2	\$80,000
Grant Year 3	\$120,000
Grant Year 4	\$120,000

<b>Project #9 – Revising the Vermont Early Learning Standards (VELS) - \$440,500</b>	
<p>We propose contracting with a national expert on early learning and develop standards to review our draft revised VELS. Another contract will be for a consultant to finalize the new VELS. We plan to contract with a consultants and graphic artist to create the new VELS, write the Parent Guide to the VELS, and create a VELS calendar of activities for families.</p>	
<b>Year</b>	<b>Budget</b>
Grant Year 1	\$197,500
Grant Year 2	\$125,,000
Grant Year 3	\$59,000
Grant Year 4	\$59,000

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<b>Project #10 – Comprehensive Assessment System - \$461,800</b>	
We propose contracting with various experienced early childhood educators who will serve as Master Level TS GOLD trainers and coaches and/or VT CLASS trainers. We plan to contract with the vendors that provide trainings on TS GOLD and CLASS. Additionally, we will contract with the vendor to purchase TS GOLD portfolios.	
<b>Year</b>	<b>Budget</b>
Grant Year 1	\$158,200
Grant Year 2	\$126,200
Grant Year 3	\$103,700
Grant Year 4	\$73,700

<b>Project #14 – Supporting Social-Emotional Development through MTSS - \$687,000</b>	
Contract with a consultant to serve as the Early MTSS Project Manager throughout the grant period. Contract with various experienced early childhood educators with expertise in children’s social emotional development to serve as coaches, trainers, and mentors to staff at project sites. Contract with a national expert to consult with the cadre of Early MTSS trainers on Content and/or Systems. Contract with a Vermont organization to coordinate trainings and supports fro families in the project sites.	
<b>Year</b>	<b>Budget</b>
Grant Year 1	\$154,000
Grant Year 2	\$184,000
Grant Year 3	\$195,000
Grant Year 4	\$154,000

<b>Project #17 – Aligning Higher Education Programs &amp; Increasing Advanced Professional Development Opportunities - \$522,000</b>	
<p>We propose contracting with a faculty member and/or administrator from each of the colleges in Vermont that have early childhood education programs to work on strengthening and aligning coursework. A contract for a consultant to support the colleges' work is also planned. Additionally, we propose contracting with the higher education institutions and professional development organizations to sponsor free or reduced rate advanced courses focusing on topics most germane to children with high needs (e.g., Supporting young English language learners).</p>	
<b>Year</b>	<b>Budget</b>
Grant Year 1	\$130,500
Grant Year 2	\$130,500
Grant Year 3	\$130,500
Grant Year 4	\$130,500

<b>Project #19 – Vermont's Ready Kindergartners Survey - \$110,000</b>	
<p>We propose contracting with a consultant to create two interactive e-learning modules: a basic introduction to the enhanced VT RKS for administrators and PreK educators, and an in-depth module on administering and interpreting the RKS for kindergarten teachers. Another contract will be for providing a 1-credit course on the enhanced RKS. We also propose contracting with a national research group to analyze the results of the enhanced RKS pilot.</p>	
<b>Year</b>	<b>Budget</b>
Grant Year 1	\$45,000
Grant Year 2	\$55,000
Grant Year 3	\$10,000
Grant Year 4	\$0

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<b>Projects #23-#27 – Linking Early Childhood Data to the SLDS - \$1,310,000</b>	
AOE will hire contractors to build the necessary connections and technical processes to enable interoperability for longitudinal data analysis, program evaluation, and feedback between systems. The datasets – PreK program data, Ready Kindergartners Survey data, Part B 619 data, TS GOLD data - will be included.	
<b>Year</b>	<b>Budget</b>
Grant Year 1	\$0
Grant Year 2	\$0
Grant Year 3	\$1,057,500
Grant Year 4	\$252,500

<b>Project #28 – Sustaining Program Effects into Early Elementary Grades - \$812,000</b>	
Contract with a national organization with PreK-3 <sup>rd</sup> expertise to support Vermont’s initiative to implement a PreK-3 approach in four targeted school communities. Contract with two assessors to become trained and collect Snapshot data.	
<b>Year</b>	<b>Budget</b>
Grant Year 1	\$270,000
Grant Year 2	\$265,000
Grant Year 3	\$260,000
Grant Year 4	\$260,000

**7) Training Stipends - \$0**

**8) Other - \$339,088**

This budget funds printing costs, meeting space rental, phones, office space, and conferences for the RTT-ELC employees.

**9) Total Direct Costs -\$ 5,939,438**

9. Total Direct Costs (add lines 1-8)	<b>1,280,097</b>	<b>1,207,684</b>	<b>2,190,988</b>	<b>1,260,669</b>	<b>5,939,438</b>
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**10) Indirect Costs - \$650,357**

10. Indirect Costs*	166,333	162,187	181,761	140,076	<b>650,357</b>
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Indirect costs are calculated using an indirect cost rate of 18.5%, the Agency of Education’s agreed upon restricted indirect rate with the US Department of Education.

**11) Funds distributed to localities, Early Learning Intermediary Organizations, Participating Programs, or other partners through MOUs, interagency agreements, contracts, or other mechanisms authorized by State procurement laws. - \$1,600,000**

<b>Project #14 – Supporting Social-Emotional Development through MTSS - \$240,000</b>	
Grants to Building Bright Futures Regional Councils to support the implementation of the Early MTSS system will be awarded. Each grant would be approximately \$20,000.	
<b>Year</b>	<b>Budget</b>
Grant Year 1	\$60,000
Grant Year 2	\$60,000
Grant Year 3	\$60,000
Grant Year 4	\$60,000

<b>Projects #23-#27 – Linking Early Childhood Data to the SLDS - \$1,220,000</b>	
Grants to LEAs to build out their data systems to incorporate PreK data as part of the SLDS. Each grant to the LEA would be approximately \$20,000.	
<b>Year</b>	<b>Budget</b>
Grant Year 1	\$0
Grant Year 2	\$0
Grant Year 3	\$610,000
Grant Year 4	\$610,000

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**12) Funds set aside for participation in grantee technical assistance**

The \$400,000 budget for technical assistance is in the Agency of Human Services' budget.

**13) Total Funds Requested - \$8,189,795**

<b>13. Total Grant Funds Requested</b> (add lines 9-12)	<b>1,506,430</b>	<b>1,429,871</b>	<b>3,182,749</b>	<b>2,070,745</b>	<b>8,189,795</b>
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**14) Other Funds Allocated to the State Plan**

14. Funds from other sources used to support the State Plan	383,166	259,874	325,741	294,824	<b>1,263,605</b>
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These funds come from a variety of sources including \$128,000 from the USDOE Office of Special Education, \$99,320 from the A.D. Henderson Foundation and \$1,036,285 from the VT Agency of Education's operating budget.

**15) Total Statewide Budget - \$9,453,400**

<b>15. Total Statewide Budget</b> (add lines 13-14)	<b>1,889,596</b>	<b>1,689,745</b>	<b>3,508,490</b>	<b>2,365,569</b>	<b>9,453,400</b>
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<b>Participating State Agency-Level Budget Table II-1</b>					
<i>Department of Children and Families</i>					
(Evidence for selection criterion (A)(4)(b))					
<b>Budget Category</b>	<b>Grant Year 1 (a)</b>	<b>Grant Year 2 (b)</b>	<b>Grant Year 3 (c)</b>	<b>Grant Year 4 (d)</b>	<b>Total (e)</b>
1. Personnel	313,342	313,342	313,342	313,342	<b>1,253,368</b>
2. Fringe Benefits	129,190	129,190	129,190	129,190	<b>516,760</b>
3. Travel	27,600	27,600	27,600	27,600	<b>110,400</b>
4. Equipment	14,600	0	0	0	<b>14,600</b>
5. Supplies	44,050	34,050	34,050	34,050	<b>146,200</b>
6. Contractual	1,141,250	2,584,550	959,550	416,395	<b>5,101,745</b>
7. Training Stipends	0	0	0	0	<b>0</b>
8. Other	16,016	12,416	12,416	12,416	<b>53,264</b>
<b>9. Total Direct Costs (add lines 1-8)</b>	<b>1,686,048</b>	<b>3,101,148</b>	<b>1,476,148</b>	<b>932,993</b>	<b>7,196,337</b>
10. Indirect Costs*	97,744	97,744	93,119	93,119	<b>381,726</b>
11. Funds to be distributed to localities, Early Learning Intermediary Organizations, Participating Programs, and other partners	1,529,949	3,183,176	3,584,051	3,569,140	<b>11,866,316</b>
12. Funds set aside for participation in grantee technical assistance	0	0	0	0	<b>0</b>
<b>13. Total Grant Funds Requested (add lines 9-12)</b>	<b>3,313,741</b>	<b>6,382,068</b>	<b>5,153,318</b>	<b>4,595,252</b>	<b>19,444,379</b>
14. Funds from other sources used to support the State Plan	13,940,397	14,064,341	14,188,902	14,469,690	<b>56,663,330</b>

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<b>15. Total Statewide Budget</b> (add lines 13-14)	<b>17,254,138</b>	<b>20,446,409</b>	<b>19,342,220</b>	<b>19,064,942</b>	<b>76,107,709</b>
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<b>Participating State Agency-Level Budget Table II-2</b> <i>Department of Children and Families</i> (Evidence for selection criterion (A)(4)(b))					
<b>Project</b>	<b>Grant Year 1 (a)</b>	<b>Grant Year 2 (b)</b>	<b>Grant Year 3 (c)</b>	<b>Grant Year 4 (d)</b>	<b>Total (e)</b>
<b>Governing and Managing</b>	85,349	84,249	84,249	84,249	<b>338,096</b>
<b>Expand Strengthening Families Child Care Programs</b>	1,143,162	1,233,162	1,448,162	1,388,162	<b>5,212,648</b>
<b>Annual STARS awards</b>	\$923,500	\$1,005,895	\$1,122,263	\$1,289,401	<b>4,341,059</b>
<b>Validating and Evaluation of STARS</b>	79,625	154,625	129,625	54,625	<b>418,500</b>
<b>Rating and Monitoring Early Learning and Development</b>	274,962	308,504	308,504	302,504	<b>1,194,474</b>
<b>Children's Integrated Services Specialized Child Care</b>	2,984,580	3,087,144	3,189,708	3,292,272	<b>12,553,704</b>
<b>Home Visiting</b>	9,923,175	9,858,655	9,858,655	9,778,655	<b>39,419,140</b>
<b>Apprenticeship</b>	375,030	385,700	394,204	411,379	<b>1,566,313</b>
<b>Implementation of MATCH in VT</b>	87,500	87,500	87,500	87,500	<b>350,000</b>
<b>TEACH / Higher Ed</b>	160,430	220,430	303,430	348,430	<b>1,032,720</b>
<b>WF Study</b>	184,625	104,625	0	0	<b>289,250</b>
<b>CIS Data System</b>	557,291	2,057,291	557,291	169,136	<b>3,341,009</b>
<b>Promise Communities</b>	474,909	1,858,629	1,858,629	1,858,629	<b>6,050,796</b>
<b>Total Statewide Budget</b>	<b>17,254,138</b>	<b>20,446,409</b>	<b>19,342,220</b>	<b>19,064,942</b>	<b>76,107,709</b>

## **Budget Part II – Narrative: Department for Children and Families (DCF)**

The Child Development Division (CDD) within DCF will be administering and overseeing these grant funds and activities in the DCF. CDD has a strong history of distributing funds and monitoring activities and outcomes for implementation of statewide projects and initiatives related to CCDF quality-funded projects. CDD also administers the state Head Start Collaboration Office, IDEA, Part C and CBCAP funding.

CDD has proposed 6 positions in this application 5 are related to specific projects that will be managed by the CDD and are described below. 1 additional position is included to assist in the added volume of grants, contract and payment activity that will accompany CDD's responsibilities for implementation of the proposed RTT-ELC plan.

CDD has considerable responsibilities within the early learning and development system, including the following:

- Regulation and monitoring of all child care programs - approx. 1,589 ELD and AS programs
- Implementation and oversight of VT STARS – Vermont's TQRIS
- Administration of Vermont's Child Care Financial Assistance Program (CC FAP)
- Co-administration of publicly funded preschool with Agency of Education (AOE)
- Implementation and oversight for workforce initiatives including the Northern Lights Career Development Center (NLCDC) and the Apprenticeship Program
- Administration of Vermont's Parents Child Centers base funding
- On-going development and administration of Children's Integrated Services (CIS) which includes IDEA, Part C – Early Intervention, Nursing and Family Support Home Visiting, Early Childhood and Family Mental Health Services, and Specialized Child Care Services
- Management of and enhancements to of the Bright Futures Information System (BFIS) which includes automated CC FAP functions, a professional registry, licensing case management and regulatory history data and STARS data
- Administration of the Building Bright Futures (BBF) statewide Council grant and Building Bright Futures Direct Services grants to regional BBF Councils
- Administration and oversight for Community Child Care Support Agencies that are funded in 12 AHS districts to determine eligibility for CCFAP, provide referral serviced, and support professional development for local early childhood educators (ECE)

These responsibilities provided a framework for building projects on existing services and adding others that complement and strengthen the early learning and development system in Vermont. Project budgets were derived by working with early learning and development system partners to identify where projects align with agency responsibilities and infrastructure. In most cases, CDD or our partners have experience funding and implementing similar projects.

### **1. Personnel: \$1,047,364**

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*(assume position will be filled for January 1, 2014; personnel cost is calculated for 12 months during Grant Year 1 and each year thereafter)*

<b>Project</b>	<b>Position</b>	<b># of positions</b>	<b>% FTE</b>	<b>Base Salary</b>	<b>Total annual cost</b>
Project 1: A3	<b>Contracts &amp; Payments Specialist:</b> this position will assist in managing the added volume of grants, contract and payment activity that will accompany CDD's responsibilities for implementation of the proposed RTT-ELC plan.	1	100%	\$51,501	\$51,501
Project 11: C3	<b>Home Visiting Coordinator:</b> this position will manage oversight for implementation of evidence-based models and integration of all model locally through CIS	1	100%	\$54,725	\$54,725
Project 20: E2	<b>AHS Information Technology (IT) Project Manager:</b> this position will have in-agency oversight responsibility for the IT contract to build the CIS System, A FT Project Manager to manage the project will also be secured with contract funds	1	25%	\$61,860	\$15,465
Project 29: CPP5	<b>Promise Communities Project Manager:</b> this position will be responsible for implementing Promise Communities Project, will supervise Coaches and work with PS State Team. This person will be point person on RTT-ELC for CDD and will sit on CDD Senior Management Team to ensure new and expanded activities are integrated with CDD usual business	1	100%	\$61,859	\$61,859
Project 29: CPP5	<b>Promise Community Coaches:</b> these three positions will be assigned to work from home offices in different regions of the state supporting communities in creating	3	100%	\$43,264	\$129,792

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	and implementing their Promise Community Plans. Each will work with 2 – 4 communities at time				
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**2. Fringe benefits: \$431,824**

The State of Vermont provides the following fringe benefits for at cost of about 40% of employee annual salary:

- Health Insurance including dental, vision, mental health/substance abuse & prescriptions
- Life insurance
- Social Security
- Long Term Disability
- Employee Support Services
- Retirement

**3. Travel: \$110,400**

CDD maintains several state fleet vehicles which most employees share. Employees who travel in-state frequently are assigned a fleet car. If no state vehicle is available mileage rate \$0.565 per mile. Vermont pays government standard rates for any overnight stay. Per diem for out-of-state travel is \$0.565.

Project	Purpose	Description of costs	Total annual cost
Project 11: C3	Support Home Visiting Coordinator to travel in-state to local sites and regional meetings,  Support Home Visiting Coordinator to travel annually to federal Maternal, Infant and Early Childhood Home Visiting (MIECHV) Conference	Mileage allocation \$1,500 annual @ \$.565 per mile  1 out-of state trip annually, probably to DC, estimated at \$1,500	\$3,000
Project 29: CPP5	Support state fleet vehicles for 3 PC Coaches  Support PC Project Manager to travel in-state to community sites and regional meetings,  Support PC Project Manager to attend one major national conference related to project work annually	\$7,200 annually for each fleet vehicle  Mileage allocation \$1,500 annual @ \$0.565 per mile  1 out-of state trip annually estimated at \$1,500	\$24,600

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**4. Equipment: \$13,500**

Consistent with AHS IT Equipment Standards issues 12/6/2012  
 Employees assigned to Central Office (CO) use networked CDD printers

<b>Project</b>	<b>Justification</b>	<b>Item description and unit costs</b>	<b>Total (Y1)</b>
Project 11: C3	Home Visiting Coordinator:  Laptop computer and docking station to perform assigned duties in CO and when working remotely, cell phone for business contact when traveling in or out of state, LCD projector for use in meetings	Laptop and docking station : \$1100  Cell phone: \$720  LCD projector: \$1000	\$2820
Project 29: CPP5	Promise Communities Project Manager:  Laptop computer and docking station to perform assigned duties in CO and when working remotely, cell phone for business contact when traveling in or out of state, LCD projector for use in meetings	Laptop and docking station : \$1100  Cell phone: \$720  LCD projector: \$1000	\$2820
Project 29: CPP5	Promise Communities Coaches: (each ) Laptop computer and docking station to perform assigned duties from home office, home office printer, cell phone for business contact when traveling in-state. (shared) LCD projector for use in meetings	Laptop and docking station (3) : \$3200  Cell phone (3) : \$2160  LCD projector (1): \$1000	\$7860

**5. Supplies: \$145,600**

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<b>Project</b>	<b>Description of costs</b>	<b>Total annual cost</b>
Project 11: C3	Office supplies & printing for HV Coordinator	\$150
	Purchase /Print training materials related to training community providers in evidence-based models	\$43,750 in Y1 \$33,150 annually Y2-4
Project 29: CPP5	Office supplies & printing for PC Project Manager	\$150
	Home Office Supplies for 3 PC Coaches	\$450

**6. Contractual: \$5,101,745**

CDD/DCF will follow Vermont procurement laws and procedures in identifying vendors and developing and executing contracts.

<b>Project</b>	<b>Purpose</b>	<b>Y1</b>	<b>Y1</b>	<b>Y3</b>	<b>Y4</b>
Project 4: B4	Propose contract with expert evaluator to evaluate impacts of Strengthening Families current and expanded grant program for ELDP	\$100,000	\$100,000	\$100,000	\$100,000
Project 6: B5	Propose contract with expert researcher or research institution to conduct external 3rd party evaluation of VT STARS (TQRIS)	\$75,000	\$150,000	\$125,000	\$50,000
Project 11: C3	Propose contracts with MIECVH approved model training vendors to provide training in Vermont to community home visiting providers. Includes on-going TA for implementation of models with fidelity	\$171,250	\$119,550	\$119,550	\$39,550
Project 18: D2	Propose contract with expert	\$180,000	\$100,000		

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	researcher or research institution to survey and report on ECE workforce in Vermont				
Project 20: E2	Propose 2 contracts – 1 with an expert Project Manager to work with CDD and IT vendor to manage project and deliver system. 1 with IT vendor to expand CDD’s BFIS by developing and building a case management data system for Children’s Integrated Services (CIS) which includes IDEA, Part C (Early Intervention) on the same platform	\$500,000	\$2,000,000	\$500,000	\$111,845
Project 29: CPP5	Propose contract with expert evaluator/research institution with experience in participatory evaluation assess to impacts of Promise Community Project on children, families, communities and state system	\$115,000	\$115,000	\$115,000	\$115,000

**8. Other: \$45,920**

Project	Description of costs	Total annual cost
Project 11: C3	CO Office Space costs for HV Coordinator	\$1,837
Project 29: CPP5	CO Office Space costs for PC Project Manager	\$1,837
	Home Office Allowance for 3 PC Coaches	\$5,070 (\$1,690 each)

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	Year 1: Intensive training on frameworks/facilitation/mediation for coaches	\$3,600
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**9. Total Direct Costs: \$7,196,337**

9. Total Direct Costs (add lines 1-8)	1,686,043	3,101,148	1,476,148	932,993	<b>7,196,337</b>
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**10. Indirect costs: \$381,726**

CDD/DCF does not have an approved federal rate. We apply a cost allocation method. For the purpose of the grant we applied 18.5% which is the lowest approved rate amongst participating state agencies (AOE). This rate was applied against Personnel (salaries only) and the first \$25,000 of each proposed contract (Line 6.) annually.

10. Indirect Costs*	97,744	97,744	93,119	93,119	<b>381,726</b>
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**11. Funds distributed to localities, ELIO, Participating Programs, or other partners through MOUs, interagency agreements, contracts or other mechanisms authorized by State procurement laws: \$11,866,316**

CDD/DCF will follow Vermont procurement laws and procedures in distributing funds.

Project	Purpose	Y1	Y1	Y3	Y4
Project 4: B4	Increase existing competitive grant opportunity for Strengthening Families Centers serving children with high needs, bring in more centers that meet criteria and/or increase grants to current grantees as warranted (\$100,000)  Work with Vermont Birth – 3 to develop (\$1.1 million) “hub & spoke” model provide these comprehensive Strengthening Families services to high-	\$155,000	\$245,000	\$460,000	\$400,000

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	quality Family Child Care Providers serving children with high needs				
Project 5: B2	Direct annual incentive/reward payments to ELDC participating in VT STARS from BFIS	\$760,500	\$828,945	\$928,418	\$1,067,680
Project 7: B3	Increase VT STARS Administration contract to improve monitoring processes. If improvements are achieved, State will re-purpose quality funds in fourth year to sustain improved practice	\$115,000	\$148,542	\$148,542	
Project 8: B4	Increase CIS Administrative Contracts in 4 regions that do not have a FT Specialized Child Care Coordinator.	\$125,000	\$125,000	\$125,000	\$125,000
Project 11: C3	Provide stipends to support local home visiting staff to attend training in MIECHV approved, evidence-based home visiting models	\$11,500	\$11,500	\$11,500	\$11,500
Project 15: D2	Increase Apprenticeship grant to Vermont Child Care Industry and Careers Council (VCCIC) to purchase additional classes from the Community College of Vermont (CCV) so that a regular progression of classes is offered regionally every year. Also support some additional administrative work to enroll ECE in expanded classes	\$127,360	\$130,600	\$134,002	\$143,371
Project 16: D2	Provide targeted relationship based professional development experiences – MATCH (mentoring, advising, teaching,	\$87,500	\$87,500	\$87,500	\$87,500

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	coaching, consulting, helping) – to Strengthening Families (SF) grantees (Project 4: B4), Specialized Child Care Providers (Project 11:C3) and ELDP in Promise Communities (Project 29: CPP5) focused on improving quality, use of the SF Framework, inclusion, and addressing the particular needs of children with high needs and their families				
Project 17: D2	Provide a grant to a selected host agency to launch TEACH in Vermont to systemically support scholarships and professional advancement for ECE working in high quality ELDP	\$124,750	\$184,750	\$267,750	\$312,750
Project 20: E2	Vermont’s Department of Information and Innovation (DII) requires that agencies reserve 3% of any proposed IT project budgeted over \$1 million to support high level oversight from DII	\$23,339	\$23,339	\$23,339	\$23,339
Project 29: CPP5	Provide communities working to establish/improve local early learning and development opportunities and close achievement gaps for children with high needs in rural communities as part of the proposed Promise Communities Project - a transformative planning and implementation process - to apply for up to \$200,000 in seed money per community to support implementation of their Promise Community plan	\$0	\$1,398,000	\$1,398,000	\$1,398,000

**12. Funds set aside for participation in grantee assistance: \$0**

The \$400,000 budget for technical assistance is in the Agency of Human Services' Office budget.

**13. Total Funds Requested: \$ 19,444,379**

<b>13. Total Grant Funds Requested</b> (add lines 9-12)	<b>3,313,741</b>	<b>6,382,068</b>	<b>5,153,318</b>	<b>4,595,252</b>	<b>19,444,379</b>
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**14. Other Funds Allocated to the Vermont's Plan: \$56,663,330**

CDD is using approximately \$13,940,397 in the state fiscal year 2014 (July 1, 2013 – June 30, 2014) to provide various levels of support to the many of the projects included in the grant application. This funding is composed of state appropriation, CCDF quality funds, IDEA, Part C administrative funds, Medicaid under Vermont's Managed Care Organization (MCO) waiver (described in A1) and other sources. This does not include the \$40 million in state and federal funds that support subsidy payments for child care services in the CC Financial Assistance Program. In most cases, we assumed continued but level spending for the same purposes over the grant period.

<b>Project</b>	<b>Purpose &amp; Source</b>	<b>Y1</b>	<b>Y1</b>	<b>Y3</b>	<b>Y4</b>
Project 4: B4	In 2011, CDD was able to make state funds available to purchase almost \$900,000 in Medicaid funds as a Managed Care Organization Investment (MCOI) under the Medicaid waiver. Using a competitive granting process (criteria described in section B4) CDD awards grants to high quality licensed ELDP centers to provide comprehensive services to high needs children and apply the Strengthening Families Framework to build protective factors in families of high needs children.	\$883,537	\$883,537	\$883,537	\$883,537

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Project 5: B2	CDD uses CCDF quality funds to provide one-time bonus awards to programs as they enter VT STARS and each time they advance to a higher quality tier. Bonuses are also awarded to programs achieving national accreditation. We anticipate increases in this allocation as more ELDP enter and move up in ratings over the grant period.	\$163,000	\$176,950	\$193,845	\$221,721
Project 7: B3	CDD uses \$150,032 in CCDF quality funds annually to support administration of VT STARS by a community based organization selected through a competitive bidding process. Currently CDD uses CCDF quality to pay stipends to ERS assessors for observations in VT STARS programs. If the proposed project achieves the monitoring improvements we seek, we will shift this money and additional quality resources to sustain this activity for the future.	\$159,962	\$159,962	\$159,962	\$302,504
Project 8: B4	CDD uses several different funding streams to support the successful inclusion of high needs children in high quality ELDP as part of Specialized Child Care Services (SCCS) in CIS. \$1.2 million of TANF direct funds are spent annually to support transportation of high needs children to and from ELDP; \$686,660 of Part C administration funds and	\$2,859,580	\$2,962,144	\$3,064,708	\$3,167,272

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	<p>MCO funds are spent annually to pay for SCCS Coordinators on regional CIS Teams. Currently 8 regions have FT Coordinators and 4 have PT Coordinators; \$250,000 annually of state appropriations is spent on Accommodation Grants to high quality ELDP serving high needs children – mostly these are used to provide additional staff for children with special needs or serious social and emotional challenges; and \$717,950 in Medicaid MCOI is supporting a differential payment so SCCS approved ELDP providing services to particular populations of high needs children (described in section B4). The differential is currently 7%. The RTT-ELC plan will increase this to 10% over the grant period for providers meeting higher quality criteria so we will gradually increase the annual allocation to accommodate that change.</p>				
<p>Project 11: C3</p>	<p>CDD spends more than \$9.5 million annually in MCO and IDEA Part C administration funds to support Children’s Integrated Services (CIS) in the AHS regions in Vermont. CIS is described in sections A1 and B4. High quality home visiting is part of the flexible continuum of services available to families with children with high needs in</p>	<p>\$9,590,968</p>	<p>\$9,590,968</p>	<p>\$9,590,968</p>	<p>\$9,590,968</p>

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	CIS.				
Project 15: D2	CDD uses just under \$250,00 annually of CCDF quality funds to support a strong Child Care Apprenticeship Program in Vermont. VCCIC provides free ELD coursework to ECE participating in the Apprenticeship Program and also allows other ECE to attend once apprentices are enrolled. VCCIC also provides career counseling and other supports for apprentices and mentors.	\$247,670	\$255,100	\$260,202	\$268,008
Project 17: D2	CDD currently provides up to \$1,000 per semester to ECE taking college course work. Once TEACH is up and running and can support a diversity of college level experiences we will eventually transition these funds to that project.	\$35,680	\$35,680	\$35,680	\$35,680

**15. Total Statewide Budget for DCF**

<b>15. Total Statewide Budget (add lines 13-14)</b>	<b>17,254,138</b>	<b>20,446,409</b>	<b>19,342,220</b>	<b>19,064,942</b>	<b>76,107,709</b>
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<b>Participating State Agency-Level Budget Table II-1</b>					
<i>Department of Health</i>					
(Evidence for selection criterion (A)(4)(b))					
<b>Budget Category</b>	<b>Grant Year 1 (a)</b>	<b>Grant Year 2 (b)</b>	<b>Grant Year 3 (c)</b>	<b>Grant Year 4 (d)</b>	<b>Total (e)</b>
1. Personnel	306,918	342,331	342,331	342,331	<b>1,333,911</b>
2. Fringe Benefits	101,282	112,969	112,969	112,969	<b>440,189</b>
3. Travel	19,100	19,100	19,100	19,100	<b>76,400</b>
4. Equipment	0	0	0	0	<b>0</b>
5. Supplies	7,210	4,809	5,179	5,179	<b>22,377</b>
6. Contractual	11,000	26,000	24,000	24,000	<b>85,000</b>
7. Training Stipends	0	0	0	0	<b>0</b>
8. Other	13,975	15,050	15,050	15,050	<b>59,125</b>
<b>9. Total Direct Costs (add lines 1-8)</b>	<b>459,485</b>	<b>520,259</b>	<b>518,629</b>	<b>518,629</b>	<b>2,017,002</b>
10. Indirect Costs*	58,815	68,141	67,771	67,771	<b>262,498</b>
11. Funds to be distributed to localities, Early Learning Intermediary Organizations, Participating Programs, and other partners	0	9,000	10,500	10,500	<b>30,000</b>
12. Funds set aside for participation in grantee technical assistance (Help Me Grow technical assistance)	115,632	24,660	24,660	24,660	<b>189,612</b>
<b>13. Total Grant Funds Requested (add lines 9-12)</b>	<b>633,932</b>	<b>622,060</b>	<b>621,560</b>	<b>621,560</b>	<b>2,499,112</b>
14. Funds from other sources used to	1,479,112	479,112	29,112	29,112	<b>2,016,448</b>

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support the State Plan					
<b>15. Total Statewide Budget</b> (add lines 13-14)	<b>2,113,044</b>	<b>1,101,172</b>	<b>650,672</b>	<b>650,672</b>	<b>4,515,560</b>

<b>Participating State Agency-Level Budget Table II-2</b>					
<i>Department of Health</i>					
(Evidence for selection criterion (A)(4)(b))					
<b>Project</b>	<b>Grant Year 1 (a)</b>	<b>Grant Year 2 (b)</b>	<b>Grant Year 3 (c)</b>	<b>Grant Year 4 (d)</b>	<b>Total (e)</b>
<b>11: Home Visiting</b>	1,560,653	560,253	110,253	110,253	<b>2,341,412</b>
<b>12: Health Care Consultation</b>	374,332	366,206	366,576	366,576	<b>1,473,690</b>
<b>13: Developmental Screening (Help Me Grow)</b>	178,059	174,713	173,843	173,843	<b>700,458</b>
<b>Total Statewide Budget</b>	<b>2,113,044</b>	<b>1,101,172</b>	<b>650,672</b>	<b>650,672</b>	<b>4,515,560</b>

<b>HOME VISITING/PROJECT 11 BUDGET NARRATIVE (SHARED PROJECT WITH DEPARTMENT OF CHILDREN AND FAMILIES)</b>
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**1) Personnel - \$283,308 (additional budget information for Project 11 in Department for Children and Families budget)**

- 1) Home visiting Data Analyst \$60,000/year  
 The Data Analyst will be housing within the Division of Health Surveillance in the Department of Health. This position will be responsible for data collection, management and report production. This includes ensuring data integrity, developing and managing and producing reports using a variety of reporting and analysis tools to support program work and performance measurement.

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Importance: Data collection and analysis ensures programs are meeting goals and objectives, and allows for monitoring program fidelity and success.

- 2) Business Office Support \$3,610/year  
Handles accounts payable and receivable, grant and contract management, vendor payments, payroll administration. Estimated as .1 FTE for a Grants Management Specialist, based on the current salary range for this job title.
  
- 3) Commissioner's Office \$2,255/year  
Provides policy and legal guidance for the program. Estimated as .05 FTE for a Public Health Planner, based on the current salary range for this job title.
  
- 4) Program Supervision \$2,700/year  
Assumes the participation of the Division Director in the guidance of the program. Estimated at 1 hour per week from the MCH Director based on current salary.
  
- 5) Office Services \$2,262/year  
Assumes the need for a range of Office Services. Estimated as .1 FTE for an Administrative Assistant, based on the current salary range for this job title.

All personnel salaries are based on typical state salary ranges for comparable positions and roles.

**2) Fringe Benefits - \$93,492**

The actual cost of fringe benefits (not a fringe benefit rate) will be reported as a direct cost of the program. The actual cost of fringe benefits varies from employee to employee based on salary, employee choice of health care plan, and employee election of certain other benefits. The usual, major components of this cost are FICA at approximately 7% of salary, and retirement and health insurance, each at approximately 13% of salary. The cost of each employee's fringe benefits will be allocated to the program based on hours worked in the program relative to all hours worked by the employee. Based on the current, average cost of fringe benefits for employees, we are estimating the cost of fringe benefits at 33% of salary.

**3) Travel**

N/A

**4) Equipment**

**5) Supplies - \$3,600**

General office expenses, including phone, copiers, supplies, postage, etc. Estimate based on current office expenses for similar programs, approximately \$1,200 for year one and \$800 in each remaining year

**6) Contractual**

N/A

**7) Training Stipends**

N/A

**8) Other - \$8,600**

Rent and utility costs associated with office space occupied by program staff. Assumes annual costs of \$2,150 per person, based on a cost of \$15 a square foot.

**9) Total Direct Costs - \$389,000**

**10) Indirect Costs - \$52,412**

Indirect costs are calculated by using the state's restricted indirect rate of 18.5%.

**11) Funds distributed to localities, Early Learning Intermediary Organizations, Participating Programs, or other partners through MOUs, interagency agreements, contracts, or other mechanisms authorized by State procurement laws.**

N/A

**12) Funds set aside for participation in grantee technical assistance**

N/A

**13) Total Funds Requested - \$441,412**

**14) Other Funds Allocated to the State Plan- \$1,900,000**

Affordable Care Act : Maternal, Infant and Early Childhood Home Visiting funds includes 2 related grants. One (formula) grant expires in 2014 and the other (discretionary) expires in 2015.

**15) Total Budget – \$2,083,939**

<b>HEALTHCARE CONSULTATION IN CHILDCARE/PROJECT 12) BUDGET NARRATIVE</b>
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**1) Personnel - \$802,707**

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The HCCVT Service Coordinator will be housed within the VT MCH division and will be responsible for ensuring all HCCVT services are well coordinated and executed including but not limited to the HMG General Health web platform, the warm-line call system and the CCHC statewide service coordination.

Importance: Coordination and oversight of the HCCVT services will play a critical role in ensuring health information pertinent to young children and the early years is accessible to a variety of constituent groups (general public, parents, providers etc); that it is up to date, accurate and coordinated across state departments and divisions. Coordination will assist with HCCVT service data collection and analysis and will offer a valuable information conduit between the constituencies it serves and state level policy makers.

(4) PT Child Care Health Consultants (.6 FTE each): \$30,000 salary/\$9,900 fringe. The CCHCs will be supervised by the HCCVT Service Coordinator and will be responsible for providing one to one health consultation services to early care and education programs statewide.

Importance: Child Care Health Consultants will play a critical role bridging state MCH and CDD division information, service delivery, professional development and on-going coaching in latest health policy and best practices for early care and education programming. The primary role will be to ensure programs implement best health practices with fidelity.

1) Business Office Support \$10,225/year

Handles accounts payable and receivable, grant and contract management, vendor payments, payroll administration. Estimated as .3 FTE for a Grants Management Specialist, based on the current salary range for this job title.

2) Commissioner's Office \$6,390/year

Provides policy and legal guidance for the program. Estimated as .2 FTE for a Public Health Planner, based on the current salary range for this job title.

3) Program Supervision \$7,670/year

Assumes the participation of the Division Director in the guidance of the program. Estimated at 3 hours per week from the MCH Director based on current salary.

4) Office Services \$6,392/year

Assumes the need for a range of Office Services. Estimated as .3 FTE for an Administrative Assistant, based on the current salary range for this job title.

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All personnel salaries are based on typical state salary ranges for comparable positions and roles.

**2) Fringe Benefits - \$264,893**

The actual cost of fringe benefits (not a fringe benefit rate) will be reported as a direct cost of the program. The actual cost of fringe benefits varies from employee to employee based on salary, employee choice of health care plan, and employee election of certain other benefits. The usual, major components of this cost are FICA at approximately 7% of salary, and retirement and health insurance, each at approximately 13% of salary. The cost of each employee's fringe benefits will be allocated to the program based on hours worked in the program relative to all hours worked by the employee. Based on the current, average cost of fringe benefits for employees, we are estimating the cost of fringe benefits at 33% of salary.

**3) Travel - \$48,000**

The rural nature of Vermont will require CCHCs to travel to early care and education programs to deliver services. It is estimated that each CCHC will travel approximately 450 miles per month at the state rate of \$.565/mile.

**4) Equipment**

N/A

**5) Supplies - \$15,777**

General office supplies as \$5,410 in year one, \$3,209 in year two and \$3,579 in each of the last two years

**6) Contractual - \$29,000**

Expenses estimated based on consultation with Help Me Grow National. Expenses include initial \$5,000 fee to cover CCHC modifier to the MCH web-based platform, Help Me Grow and initial platform trainings. There are annual estimated platform fees of \$6,000 for this modifier. See C3d for additional budget information regarding HMG.

**7) Training Stipends**

N/A

**8) Other - \$43,000**

Rent and utility costs associated with office space occupied by program staff. Assumes annual costs of \$2,150 per person, based on a cost of \$15 a square foot.

**9) Total Direct Costs - \$ 1,203,377**

**10) Indirect Costs - \$153,866**

**11) Funds distributed to localities, Early Learning Intermediary Organizations, Participating Programs, or other partners through MOUs, interagency agreements, contracts, or other mechanisms authorized by State procurement laws.**

N/A

**12) Funds set aside for participation in grantee technical assistance**

N/A

**13) Total Funds Requested - \$1,357,243**

**14) Other Funds Allocated to the State Plan-\$ 116,448**

**15) Total Budget - \$1,473,691**

<b>HELP ME GROW/PROJECT 13 BUDGET NARRATIVE</b>
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**1) Personnel - \$247,895**

Help Me Grow (HMG) Program Manager: \$60,000 salary

The HMG Program Manager will be housed within the VT MCH division and will be responsible for ensuring all HMG service system components are coordinated statewide in accordance with HMG National affiliate status. This includes HMG core activities such as a centralized call center; the development of outreach campaigns and networking opportunities that target communities and health care providers; and the collection and analysis of data (i.e. HMG General Health web platform).

Importance: Coordination and oversight of the HMG service system will play a critical role in ensuring HMG implementation is comprehensive, cost efficient, and uniquely designed to Vermont. Specifically, the HMG Program Manager will serve as key contact to the HMG National Center and oversee HMG affiliation activities across the sectors of child health, early care and education, and family support programs. Cross sector implementation is vital to improve early identification and linkage to developmental and behavioral services and supports

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for high needs children and their families. The HMG Program Manager will assemble a HMG leadership team with key partners for implementation and ongoing continuous quality improvement. The HMG Program Manager will utilize HMG National technical assistance and consultation to build upon existing Vermont systems and resources (i.e. Vermont 211/CIS regional call centers). The HMG Program Manager will be responsible for coordinating all common indicators data collection and analysis in collaboration with HMG National in order to identify gaps and barriers.

- 1) Business Office Support: \$1,805 in year one, \$3,610 in each of the remaining 3 years  
Handles accounts payable and receivable, grant and contract management, vendor payments, payroll administration. Estimated as .1 FTE for a Grants Management Specialist, based on the current salary range for this job title.
- 2) Commissioner's Office: \$1,127 in year one, \$2,255 in each of the remaining three years  
Provides policy and legal guidance for the program. Estimated as .05 FTE for a Public Health Planner, based on the current salary range for this job title.
- 3) Program Supervision: \$1,350 in year one, \$2,700 in each of the remaining 3 years  
Assumes the participation of the Division Director in the guidance of the program. Estimated at 1 hour per week from the MCH Director based on current salary.
- 4) Office Services: \$1,132 in year one, \$2,262 in each of the remaining 3 years  
Assumes the need for a range of Office Services. Estimated as .1 FTE for an Administrative Assistant, based on the current salary range for this job title.

All personnel salaries are based on typical state salary ranges for comparable positions and roles.

## **2) Fringe Benefits - \$81,805**

The actual cost of fringe benefits (not a fringe benefit rate) will be reported as a direct cost of the program. The actual cost of fringe benefits varies from employee to employee based on salary, employee choice of health care plan, and employee election of certain other benefits. The usual, major components of this cost are FICA at approximately 7% of salary, and retirement and health insurance, each at approximately 13% of salary. The cost of each employee's fringe benefits will be allocated to the program based on hours worked in the program relative to all hours worked by the employee. Based on the current, average cost of fringe benefits for employees, we are estimating the cost of fringe benefits at 33% of salary.

## **3) Travel - \$28,400**

The rural nature of Vermont will require that the HMG Program Director travel statewide in order to provide networking and community outreach activities targeting critical stakeholders including: early care and education programs, home visiting programs, infant/child mental health

programs, health care providers, CIS regional intake call center staff, and key state agencies/policymakers. The HMG Program Manager and HCCVT Service Coordinator will travel annually to the HMG National Conference as part of HMG affiliation requirements.

**4) Equipment**

N/A

**5) Supplies - \$ 3,000**

General office supplies as \$600 in year one, \$800 in each of the last three years

**6) Contractual - \$56,000**

Expenses in YR 2-4 will build on HMG National technical assistance (provided in YR 1) for data platform development and implementation. HMG data system will be based at VHD and the data platform will link/data share with the VDH Child Health Profile Universal Developmental Screening Repository. The HMG general platform will also include a modifier to capture the Child Care Health Consultant data and information (see section C3B). Cost is based on estimates from HMG National proposed budget.

**7) Training Stipends**

N/A

**8) Other-\$7,525 (\$1,075 year one, then \$2,150 for next 3 years)**

Rent and utility costs associated with office space occupied by program staff. Assumes annual costs of \$2,150 per 1.0 FTE person (only half for year one due to start up) based on a cost of \$15 a square foot.

**9) Total Direct Costs - \$464,525**

**10) Indirect Costs - \$56,221**

**11) Funds distributed to localities, Early Learning Intermediary Organizations, Participating Programs, or other partners through MOUs, interagency agreements, contracts, or other mechanisms authorized by State procurement laws - \$31,580**

Outreach, networking and marketing activities to early care and education and health care providers will occur statewide in collaboration with CIS and CDD, VDH, AOE, AHS IFS, BBF, and VT AAP. A VT leadership team of key stakeholders will develop an outreach plan and oversee implementation.

**12) Funds set aside for participation in grantee technical assistance - \$148,132**

The majority of HMG funding occurs in YR 1 for contracted technical assistance and consultation for implementation by HMG National Center staff. Services include preliminary research, conference calls and webinars, two VT site visits, follow up report and strategic plan, and ongoing consultation. YR 1 cost estimates are based on a formal proposed budget from HMG National and a detailed scope of work. Funding for YR 2-4 are minimal (annual cost of HMG affiliation is only \$2,500) due to the HMG sustainability implementation framework and cost efficiencies achieved through blending funding across state sectors.

**13) Total Funds Requested - \$700,458**

**14) Other Funds Allocated to the State Plan**

N/A

**15) Total Budget - \$700,458**

**BUDGET PART II: PARTICIPATING STATE AGENCY**

<b>Participating State Agency-Level Budget Table II-1</b>					
<i>Building Bright Futures</i>					
(Evidence for selection criterion (A)(4)(b))					
<b>Budget Category</b>	<b>Grant Year 1 (a)</b>	<b>Grant Year 2 (b)</b>	<b>Grant Year 3 (c)</b>	<b>Grant Year 4 (d)</b>	<b>Total (e)</b>
1. Personnel	929,590	929,590	400,000	400,000	<b>2,659,180</b>
2. Fringe Benefits	85,000	85,000	85,000	85,000	<b>340,000</b>
3. Travel	76,000	70,500	63,000	63,000	<b>272,500</b>
4. Equipment	23,600	23,600	0	0	<b>47,200</b>
5. Supplies	63,800	53,800	28,800	28,800	<b>175,200</b>
6. Contractual	379,300	214,300	25,563	0	<b>619,163</b>
7. Training Stipends	0	0	0	0	<b>0</b>
8. Other	85,000	75,000	116,000	116,000	<b>392,000</b>
<b>9. Total Direct Costs</b> (add lines 1-8)	<b>1,642,290</b>	<b>1,451,790</b>	<b>718,363</b>	<b>692,800</b>	<b>4,505,243</b>
10. Indirect Costs*	204,349	190,474	78,625	74,000	<b>547,448</b>
11. Funds to be distributed to localities	0	0	0	0	<b>0</b>
12. Funds set aside for participation in grantee technical assistance	0	0	0	0	<b>0</b>
<b>13. Total Grant Funds Requested</b> (add lines 9-12)	<b>1,846,639</b>	<b>1,642,264</b>	<b>796,988</b>	<b>766,800</b>	<b>5,052,691</b>
14. Funds from other sources used to support the State Plan	399,000	399,000	399,000	399,000	<b>1,596,000</b>
<b>15. Total Statewide Budget</b> (add lines 13-14)	<b>2,245,639</b>	<b>2,041,264</b>	<b>1,195,988</b>	<b>1,165,800</b>	<b>6,648,691</b>

<b>Participating State Agency-Level Budget Table II-2</b> <i>Building Bright Futures</i> (Evidence for selection criterion (A)(4)(b))					
<b>Project</b>	<b>Grant Year 1 (a)</b>	<b>Grant Year 2 (b)</b>	<b>Grant Year 3 (c)</b>	<b>Grant Year 4 (d)</b>	<b>Total (e)</b>
<b>2: Supporting BBF Regional Councils</b>	1,562,725	1,370,850	1,000,800	1,000,800	<b>4,935,175</b>
<b>23: ECDRS</b>	682,914	670,414	195,188	165,000	<b>1,713,516</b>
<b>Total Statewide Budget</b>	<b>2,245,639</b>	<b>2,041,264</b>	<b>1,195,988</b>	<b>1,165,800</b>	<b>6,648,691</b>

**BUDGET PART II - SUPPORTING BBF REGIONAL COUNCILS – PROJECT #2 NARRATIVE**

**1) Personnel**

One FTE salaried Regional Council Manager will be hired for all four years of this project. Eleven FTE salaried Regional Council Coordinators will be hired for all four years of this project.

**2) Fringe Benefits**

One FTE Regional Council Manager and eleven Regional Council Coordinators will receive fringe benefits according to BBF’s Human Resources policy.

**3) Travel**

Two Regional Council representatives from each of the twelve Regional Councils and two State Council representatives will attend the national “Smart Start” conference as well as a statewide leadership conference annually for the duration of the project. Travel costs will include but not be limited to airfare, hotel and per diems. Mileage will be reimbursed to all BBF employees according to BBF’s Mileage Reimbursement policy.

#### **4) Equipment**

Equipment such as laptops and printers will be provided in a staggered approach to each new Regional Council Coordinator and Regional Manager over the duration of Year 1 and Year 2.

#### **5) Supplies**

Each Regional Council Coordinator will be located in their respective community and be provided an annual \$2,000 supply stipend per year for the duration of the four-year project. The Supplies in the amount of \$4,800 annually will be provided to the State Council office and Regional Manager.

#### **6) Contractual**

Three Strategic Planning and Financial Planning consultants will be hired to provide needed consultation to all twelve Regional Councils in Year 1.

#### **7) Training Stipends**

N/A

#### **8) Other**

National “Smart Start” conference registration fees will be paid for all national conference attendees for the duration of the project. In addition, some monies will be spent for outreach, marketing and public awareness about the improved BBF statewide network.

#### **9) Total Direct Costs - \$3,567,200**

#### **10) Indirect Costs - \$431,975**

**11) Funds distributed to localities, Early Learning Intermediary Organizations, Participating Programs, or other partners through MOUs, interagency agreements, contracts, or other mechanisms authorized by State procurement laws.**

#### **12) Funds set aside for participation in grantee technical assistance**

#### **13) Total Funds Requested - \$3,999,175**

#### **14) Other Funds Allocated to the State Plan - \$936,000**

\$234,000 annually will be donated in-kind by other funding sources, including the State of Vermont Child Development Division and SAMHSA (Substance Abuse and Mental Health Services Association).

**15) Total Budget - \$4,935,175**

<b>BUDGET PART II – EARLY CHILDHOOD DATA REPORTING SYSTEM – PROJECT #21 NARRATIVE</b>
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**1) Personnel**

One FTE salaried Project Manager will be hired for Year 1 and Year 2 to oversee this project. One FTE salaried Senior Statistical Analyst will be hired for Year 1 and Year 2 of this project. One PTE 75% Junior Programmer will be hired for Year 1 and Year 2 of this project. One PTE 50% Data Coordinator and Business Analyst will be hired for Year 1 and Year 2 of this project.

**2) Fringe Benefits**

N/A

**3) Travel**

Employees will receive travel reimbursement for all travel for Year 1 and Year 2.

**4) Equipment**

Staging and production-ready equipment will be purchased and utilized in Year 1 and Year 2.

**5) Supplies**

Communications and training tools (software) will be purchased for Year 1 and Year 2.

**6) Contractual**

One Systems Architect will be hired for Year 1 and Year 2. One Senior Programmer will be hired for 260 hours in Year 1 and Year 2. One Data Trainer and Coach will be hired for Year 1 and Year 2. Communications and messaging will be provided by a vendor to be announced. Media technology design, development and consultation will be provided in Year 1 and Year 2. Data visualization and media decision technology consultation will be provided in Year 1 and Year 2.

**7) Training Stipends**

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N/A

**8) Outreach**

N/A

**9) Total Direct Costs - \$938,043**

**10) Indirect Costs - \$115,473**

**11) Funds distributed to localities, Early Learning Intermediary Organizations, Participating Programs, or other partners through MOUs, interagency agreements, contracts, or other mechanisms authorized by State procurement laws.**

**12) Funds set aside for participation in grantee technical assistance**

**13) Total Funds Requested - \$1,053,516**

**14) Other Funds Allocated to the State Plan - \$660,000**

\$165,000 annually will be donated in-kind by other funding sources. (SAMHSA-Substance Abuse and Mental Health Services Association)

**15) Total Budget - \$1,713,516**

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**BUDGET: INDIRECT COST INFORMATION**

To request reimbursement for indirect costs, please answer the following questions:

<p>Does the State have an Indirect Cost Rate Agreement approved by the Federal government?</p> <p>YES    <input checked="" type="checkbox"/> NO     <input type="checkbox"/></p> <p>If yes to question 1, please provide the following information:</p> <p>Period Covered by the Indirect Cost Rate Agreement (mm/dd/yyyy): From: 7/1/2012 To: 6/30/2015</p> <p>Approving Federal agency: <input checked="" type="checkbox"/> ED   <input type="checkbox"/> HHS   <input type="checkbox"/> Other (Please specify agency): Vermont Agency of Education</p>
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Directions for this form:

1. Indicate whether or not the State has an Indirect Cost Rate Agreement that was approved by the Federal government.
2. If “No” is checked, the Departments generally will authorize grantees to use a temporary rate of 10 percent of budgeted salaries and wages subject to the following limitations:
  - (a) The grantee must submit an indirect cost proposal to its cognizant agency within 90 days after the grant award notification is issued; and
  - (b) If after the 90-day period, the grantee has not submitted an indirect cost proposal to its cognizant agency, the grantee may not charge its grant for indirect costs until it has negotiated an indirect cost rate agreement with its cognizant agency.

If “Yes” is checked, indicate the beginning and ending dates covered by the Indirect Cost Rate Agreement. In addition, indicate whether ED, HHS, or another Federal agency (Other) issued the approved agreement. If “Other” was checked, specify the name of the agency that issued the approved agreement.

## **IX. APPLICATION REQUIREMENTS**

(a) The State's application must be signed by the Governor or an authorized representative; an authorized representative from the Lead Agency; and an authorized representative from each Participating State Agency.

(b) The State must submit a certification from the State Attorney General or an authorized representative that the State's description of, and statements and conclusions in its application concerning, State law, statute, and regulation are complete and accurate and constitute a reasonable interpretation of State law, statute, and regulation.

(c) The State must complete the budget spreadsheets that are provided in the application package and submit the completed spreadsheet as part of its application. These spreadsheets should be included on the CD or DVD that the State submits as its application.

(d) The State must submit preliminary scopes of work for each Participating State Agency as part of the executed memorandum of understanding (MOU) or other binding agreement. Each preliminary scope of work must describe the portions of the State's proposed plans that the Participating State Agency is agreeing to implement. If a State is awarded an RTT-ELC grant, the State will have up to 90 days to complete final scopes of work for each Participating State Agency.

(e) The State must include a budget that details how it will use grant funds awarded under this competition, and funds from other Federal, State, private, and local sources to achieve the outcomes of the State Plan (as described in selection criterion (A)(4)(a)), and how the State will use funds awarded under this program to--

(1) Achieve its ambitious yet achievable targets for increasing the number and percentage of Early Learning and Development Programs that are participating in the State's Tiered Quality Rating and Improvement System (as described in selection criterion (B)(2)(c)); and

(2) Achieve its ambitious yet achievable targets for increasing the number and percentage of Children with High Needs who are enrolled in Early Learning and Development Programs that are in the top tiers of the State's Tiered Quality Rating and Improvement System (as described in selection criterion (B)(4)(c)).

(f) The State must provide an overall summary for the State Plan and a rationale for why it has chosen to address the selected criteria in each Focused Investment Area, including--

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How the State's choices build on its progress to date in each Focused Investment Area (as outlined in Tables (A)(1)6-13 and the narrative under (A)(1)); and

Why these selected criteria will best achieve the State's ambitious yet achievable goals for improving program quality, improving outcomes for Children with High Needs statewide, and closing the educational gaps between Children with High Needs and their peers.

(g) The State, within each Focused Investment Area, must select and address—

Two or more selection criteria within Focused Investment Area (C) Promoting Early Learning and Development Outcomes for Children; and

One or more selection criteria within Focused Investment Areas (D) A Great Early Childhood Education Workforce and (E) Measuring Outcomes and Progress.

(h) Where the State is submitting a High-Quality Plan, the State must include in its application a detailed plan that is feasible and includes, but need not be limited to--

- (1) The key goals;
- (2) The key activities to be undertaken; the rationale for the activities; and, if applicable, where in the State the activities will be initially implemented, and where and how they will be scaled up over time to eventually achieve statewide implementation;
- (3) A realistic timeline, including key milestones, for implementing each key activity;
- (4) The party or parties responsible for implementing each activity and other key personnel assigned to each activity;
- (5) Appropriate financial resources to support successful implementation of the plan;

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(6) The information requested as supporting evidence, if any, together with any additional information the State believes will be helpful to peer reviewers in judging the credibility of the plan;

(7) The information requested or required in the performance measures, where applicable;

(8) How the State will address the needs of the different types of Early Learning and Development Programs, if applicable; and

(9) How the State will meet the unique needs of Children with High Needs.

## **X. REPORTING REQUIREMENTS**

Any State that applies for a grant under this competition must ensure that it has in place the necessary processes and systems to comply with the reporting requirements in 2 CFR part 170 should it receive funding under the competition. This does not apply if the State has an exception under 2 CFR 170.110(b).

A State receiving funds under an RTT-ELC grant must submit an annual report that must include, in addition to the standard elements, a description of the State's progress to date on its goals, timelines, and budgets, as well as actual performance compared to the annual targets the State established in its application with respect to each performance measure. Further, a State receiving funds under this program is accountable for meeting the goals, timelines, budget, and annual targets established in the application; adhering to an annual fund drawdown schedule that is tied to meeting these goals, timelines, budget, and annual targets; and fulfilling and maintaining all other conditions for the conduct of the project. The Departments will monitor a State's progress in meeting the State's goals, timelines, budget, and annual targets and in fulfilling other applicable requirements. In addition, we may collect additional data as part of a State's annual reporting requirements.

To support a collaborative process with the State, we may require that applicants who are selected to receive an award enter into a written performance or cooperative agreement. If we determine that a State is not meeting its goals, timelines, budget, or annual targets or is not fulfilling other applicable requirements, we will take appropriate action, which could include establishing a collaborative process or taking enforcement measures with respect to this grant, such as placing the State in high-risk status, putting the State on reimbursement payment status, or delaying or withholding funds.

## **XI. PROGRAM REQUIREMENTS**

*A State that receives a grant must meet the following requirements:*

(a) The State must have an operational State Advisory Council on Early Childhood Education and Care that meets the requirements described in section 642B(b) of the Head Start Act (42 U.S.C. 9837(b)). In addition, the State Advisory Council on Early childhood Education and Care must include the State's Child Care and Development Fund (CCDF) administrator, State agency coordinators from both Part B section 619 and Part C of the Individuals with Disabilities Education Act (IDEA), and State agency representatives responsible for health and mental health.

(b) The State must continue to participate in the programs authorized under section 619 of Part B of IDEA and Part C of IDEA and in the CCDF program.

(c) States must continue to have an active Maternal, Infant, and Early Childhood Home Visiting (MIECHV) program (pursuant to section 511 of Title V of the Social Security Act, as added by section 2951 of the Affordable Care Act of 2010 (Public Law. 111-148)) for the duration of the grant, whether operated by the State or by an eligible non-profit organization.

(d) The State is prohibited from spending funds from the grant on the direct delivery of health services.

(e) The State must participate in RTT-ELC grantee technical assistance activities facilitated by ED or HHS, individually or in collaboration with other State grantees in order to share effective program practices and solutions and collaboratively solve problems, and must set aside \$400,000 from its grant funds for this purpose.

(f) The State must--

(1) Comply with the requirements of any evaluation sponsored by ED or HHS of any of the State's activities carried out with the grant;

(2) Comply with the requirements of any cross-State evaluation--as part of a consortium of States--of any of the State's proposed reforms, if that evaluation is coordinated or funded by ED or HHS, including by using common measures and data collection instruments and collecting data necessary to the evaluation;

(3) Together with its independent evaluator, if any, cooperate with any technical assistance regarding evaluations provided by ED or HHS. The purpose of this technical assistance will be to ensure that the validation of the State's Tiered Quality Rating and Improvement System and any other evaluations conducted by States or their independent evaluators, if any, are of the highest quality and to encourage commonality in approaches where such commonality is feasible and useful;

(4) Submit to ED and HHS for review and comment its design for the validation of its Tiered Quality Rating and Improvement System (as described in

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selection criterion (B)(5)) and any other evaluations of activities included in the State Plan, including any activities that are part of the State's Focused Investment Areas, as applicable; and

(5) Make widely available through formal (e.g., peer-reviewed journals) or informal (e.g., newsletters) mechanisms, and in print or electronically, the results of any evaluations it conducts of its funded activities.

(g) The State must have a longitudinal data system that includes the 12 elements described in section 6401(e)(2)(D) of the America COMPETES Act by the date required under the State Fiscal Stabilization Fund (SFSF) grant and in accordance with Indicator (b)(1) of its approved SFSF plan.

(h) The State must comply with the requirements of all applicable Federal, State, and local privacy laws, including the requirements of the Family Educational Rights and Privacy Act, the Health Insurance Portability Accountability Act, and the privacy requirements in IDEA, and their applicable regulations.

(i) The State must ensure that the grant activities are implemented in accordance with all applicable Federal, State, and local laws.

(j) The State must provide researchers with access, consistent with the requirements of all applicable Federal, State, and local privacy laws, to data from its Tiered Quality Rating and Improvement System and from the Statewide Longitudinal Data System and the State's coordinated early learning data system (if applicable) so that they can analyze the State's quality improvement efforts and answer key policy and practice questions.

(k) Unless otherwise protected as proprietary information by Federal or State law or a specific written agreement, the State must make any work (e.g., materials, tools, processes, systems) developed under its grant freely available to the public, including by posting the work on a Web site identified or sponsored by ED or HHS. Any Web sites developed under this grant must meet government or industry-recognized standards for accessibility ([www.section508.gov/](http://www.section508.gov/)).

(l) Funds made available under an RTT-ELC grant must be used to supplement, not supplant, any Federal, State, or local funds that, in the absence of the funds awarded under this grant, would be available for increasing access to and improving the quality of Early Learning and Development Programs.

(m) For a State that is awarded an RTT-ELC grant, the State will have up to 90 days from the grant award notification date to complete final scopes of work for each Participating State Agency. These final scopes of work must contain detailed work plans that are consistent with their corresponding preliminary scopes of work and with the State's grant application, and must include the Participating State Agency's specific goals, activities, timelines, budgets, key

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personnel, and annual targets for key performance measures for the portions of the State's proposed plans that the Participating State Agency is agreeing to implement.

## **XII. CONTRACTING FOR SERVICES**

Generally, all procurement transactions by State or local educational agencies made with RTT-ELC grant funds must be conducted in a manner providing full and open competition, consistent with the standards in section 80.36 of the Education Department General Administrative Regulations (EDGAR). This section requires that grantees use their own procurement procedures (which reflect State and local laws and regulations) to select contractors, provided that those procedures meet certain standards described in EDGAR.

Because grantees must use appropriate procurement procedures to select contractors, applicants should not include information in their grant applications about specific contractors that may be used to provide services or goods for the proposed project if a grant is awarded.

### **XIII. PARTICIPATING STATE AGENCY MEMORANDUM OF UNDERSTANDING**

**NOTE: Signed copies of document are in Appendix III and the originals are included in the packet submitted with the application. There is also a PDF of all of this material included.**

#### **RACE TO THE TOP-EARLY LEARNING CHALLENGE PARTICIPATING STATE AGENCY MODEL MEMORANDUM OF UNDERSTANDING**

**(Appendix C of the Race to the Top-Early Learning Challenge  
Notice Inviting Applications)**

#### **Background for Memorandum of Understanding**

Each Participating State Agency identified in a State's Race to the Top-Early Learning Challenge (RTT-ELC) State Plan is required to enter into a Memorandum of Understanding (MOU) or other binding agreement with the State's Lead Agency that specifies the scope of the work that will be implemented by the Participating State Agency. The purpose of the MOU or other binding agreement is to define a relationship between the Lead Agency and the Participating State Agency that is specific to the RTT-ELC competition; the MOU or other binding agreement is not meant to detail all typical aspects of grant coordination or administration.

To support States in working efficiently with their Participating State Agencies to affirm each Participating State Agency's participation in the State Plan, ED and HHS have produced a model MOU, which is attached. This model MOU may serve as a template for States; however, States are not required to use it. States may use a document other than the model MOU, as long as it includes the key features noted below and in the model MOU. States should consult with their State attorneys on what is most appropriate. States may allow multiple Participating State Agencies to sign a single MOU or other binding agreement, with customized exhibits for each Participating State Agency, if the State so chooses.

At a minimum, an RTT-ELC MOU or other binding agreement should include the following key features, each of which is described in detail below and exemplified in the attached model MOU: (i) terms and conditions; (ii) a scope of work; and, (iii) authorized signatures.

(i) Terms and conditions: Each Participating State Agency must sign a standard set of terms and conditions that includes, at a minimum, key roles and responsibilities of the Lead Agency and the Participating State Agency; State recourse for non-performance by the Participating State Agency; and assurances that make clear what the Participating State Agency is agreeing to do.

(ii) Scope of work: RTT-ELC MOUs or other binding agreements must include a preliminary scope of work (included in the model RTT-ELC MOU as Exhibit I) that is completed by each Participating State Agency. The scope of work must be signed and dated by an authorized Participating State Agency official and an authorized Lead Agency official. In the

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interest of time and in consideration of the effort it will take for the Lead Agency and Participating State Agencies to develop detailed work plans for RTT-ELC, the scope of work submitted by Participating State Agencies and Lead Agencies as part of a State's application may be preliminary. Preliminary scopes of work must, at a minimum, identify all applicable portions of the State Plan that the Participating State Agency is agreeing to implement and include the required assurances. (Note that in order for a State to be eligible for the RTT-ELC competition, the Lead Agency must have executed with each Participating State Agency an MOU or other binding agreement, which the State must attach to its application and which must describe the Participating State Agency's level of participation in the grant and must include the required assurances.)

If a State is awarded an RTT-ELC grant, Participating State Agencies will have up to 90 days to complete final scopes of work, which must contain detailed work plans that are consistent with each Participating State Agency's preliminary scope of work and with the State's grant application, and must include the Participating State Agencies' specific goals, activities, timelines, budgets, and key personnel.

(iii) Authorized Signatures: The signatures on the MOU or other binding agreement demonstrate an acknowledgement of the relationship between the Participating State Agency and the Lead Agency. With respect to the relationship between the Participating State Agency and the Lead Agency, the Lead Agency's counter-signature on the MOU or other binding agreement indicates that the Participating State Agency's commitment is consistent with the requirement that a Participating State Agency implement all applicable portions of the State Plan.

**VERMONT EARLY LEARNING CHALLENGE (VT ELC)**  
**STATE PLAN**  
**MASTER AGREEMENT**  
**BETWEEN**  
**VERMONT OFFICE OF THE GOVERNOR (LEAD PROGRAM AGENCY) AND**  
**VERMONT AGENCY OF HUMAN SERVICES (LEAD FISCAL AGENCY) AND**  
**AND VERMONT AGENCY OF EDUCATION (PARTICIPATING STATE AGENCY),**  
**AND**  
**VERMONT DEPARTMENT FOR CHILDREN AND FAMILIES WITHIN THE**  
**AGENCY OF HUMAN SERVICES (PARTICIPATING STATE AGENCY)**  
**AND VERMONT DEPARTMENT OF HEALTH WITHIN THE AGENCY OF HUMAN**  
**SERVICES (PARTICIPATING STATE AGENCY),**  
**AND**  
**THE BUILDING BRIGHT FUTURES COUNCIL (PARTICIPATING AGENCY)**

This Master Agreement is entered into by and between the Vermont Office of the Governor (“Lead Program Agency”), and the Vermont Agency of Human Services (“Lead Fiscal Agency”), and the Vermont Agency of Education (“Participating State Agency”), and the Vermont Department for Children and Families within the Agency of Human Services (“Participating State Agency”), and the Vermont Department of Health within the Agency of Human Services (“Participating State Agency”), and the Building Bright Futures Council (“Participating Agency”). The purpose of this agreement is to establish a framework of collaboration, as well as articulate specific roles and responsibilities in support of the State in its implementation of an approved Race to the Top-Early Learning Challenge grant project.

**I. ASSURANCES**

The Participating State Agencies/Participating Agency hereby certifies and represents that they:

1) Each agree to be a Participating State Agency/Participating Agency and will implement those portions of the VT ELC State Plan within the Scope of Work assigned to them as indicated in Exhibit I, if the State application is funded;

2) Agree to use, to the extent applicable and consistent with the VT ELC State Plan and Exhibit I:

Vermont RTT-ELC Application for Funding [CFDA 84.412A]  
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- (a) A set of statewide Early Learning and Development Standards: (Vermont First Steps, Vermont Early Learning Standards, Common Core State Standards K12);
  - (b) A set of statewide Program Standards for Early Learning and Development Programs (VT STARS Program Performance Standards and Qualified Prekindergarten Education Program as defined in Vermont State Board of Education, Rule 2600: Rules Governing Prekindergarten Education which incorporates VT STARS Program Performance Standards);
  - (c) A statewide Tiered Quality Rating and Improvement System (Vermont Step Ahead Recognition System (VT STARS)); and
  - (d) A statewide Workforce Knowledge and Competency Framework and progression of credentials (Northern Lights Career Development Center Core Competency Documents and Vermont Northern Lights Career Ladder, and Vermont Standards Board for Professional Educators: Licensing Rules and Endorsement Area: Early Childhood Education and Early Childhood Special Educator)
- 3) Have all requisite power and authority to execute and fulfill the terms of this Master Agreement;
- 4) Are familiar with the State’s Race to the Top-Early Learning Challenge grant application and are supportive of and committed to working on all applicable portions of the VT ELC State Plan;
- 5) Will provide a Final Scope of Work only if the State’s application is funded and will do so in a timely fashion but no later than 90 days after a grant is awarded; and will describe the Participating State Agency’s/Participating Agency’s specific goals, activities, timelines, budgets, and key personnel (“Participating State Agency Plan” “Participating Agency Plan”) in a manner that is consistent with the Preliminary Scope of Work (Exhibit I), with the Budget included in section VIII of the State Plan (including existing funds, if any, that the Participating State Agency/Participating Agency is using for activities and services that help achieve the outcomes of the State Plan; and

6) Will comply with all of the terms of the Race to the Top-Early Learning Challenge Grant, this agreement, and all applicable Federal and State laws and regulations, including laws and regulations applicable to the Race to the Top-Early Learning Challenge program, and the applicable provisions of EDGAR (34 CFR Parts 75, 77, 79, 80, 82, 84, 86, 97, 98 and 99), and the suspension and debarment regulations in 2 CFR Part 3485.

## **II. PROJECT ADMINISTRATION**

### **A. PARTICIPATING STATE AGENCIES/PARTICIPATING AGENCY RESPONSIBILITIES**

In assisting the Lead Agency in implementing the tasks and activities described in the State's Race to the Top-Early Learning Challenge grant application, the Participating State Agencies/Participating Agency will:

- 1) Implement the Participating State Agency/Participating Agency Scope of Work assigned to them as identified in the Exhibit I of this agreement;
- 2) Abide by the governance structure outlined in the VT ELC State Plan;
- 3) Abide by the Participating State Agency's/Participating Agency's budget included in section XI - XIII of the State Plan (including the existing funds from Federal, State, private and local sources, if any, that the Participating State Agency/Participating Agency is using to achieve the outcomes in the RTT-ELC State Plan);
- 4) Actively participate in all relevant meetings or other events that are organized or sponsored by the State, by the U.S. Department of Education ("ED"), or by the U.S. Department of Health and Human Services ("HHS");
- 5) Post to any Web site specified by the State, ED, or HHS, in a timely manner, all non-proprietary products and lessons learned developed using Federal funds awarded under the RTT-ELC grant;
- 6) Participate, as requested, in any evaluations of this grant conducted by the State, ED, or HHS;
- 7) Be responsive to State, ED, or HHS requests for project information including on the status of the project, project implementation, outcomes, and any problems anticipated or encountered, consistent with applicable local, State and Federal privacy laws.

**B. LEAD AGENCY RESPONSIBILITIES**

In assisting the Participating State Agencies/Participating Agency in implementing their tasks and activities described in the VT ELC State Plan application, the Lead Agency will:

- 1) Work collaboratively with, and support each Participating State Agencies/Participating Agency in carrying out the Scope of Work assigned to them, as identified in Exhibit I of this agreement;
- 2) Timely award the portion of Race to the Top-Early Learning Challenge grant funds designated for each Participating State Agency/Participating Agency during the course of the project period and in accordance with the Participating State Agency's/Participating Agency's Scope of Work, as identified in Exhibit I, and in accordance with the Participating State Agency's/Participating Agency's Budget, as identified in section XI- XIII of the State's application;
- 3) Provide feedback on the Participating State Agency's/Participating Agency's status updates, any interim reports, and project plans and products;
- 4) Keep the Participating State Agencies/Participating Agency informed of the status of the VT ELC State Plan implementation and seek input from the Participating State Agency where applicable, through the governance structure outlined in the VT ELC State Plan;
- 5) Facilitate coordination across Participating State Agencies/Participating Agency necessary to implement the VT ELC State Plan; and
- 6) Identify sources of technical assistance for the project.

**C. JOINT RESPONSIBILITIES**

- 1) The Lead Agency and each Participating State Agency/Participating Agency will appoint a key contact person for the VT ELC State Plan.
- 2) These key contacts from the Lead Agency and each Participating State Agency/Participating Agency will maintain frequent communication to facilitate cooperation under this Master Agreement, consistent with the VT ELC State Plan and governance structure.
- 3) Lead Agency and Participating State Agency/Participating Agency personnel will work together to determine appropriate timelines for project updates and status reports throughout the grant period.
- 4) Lead Agency and Participating State Agency/Participating Agency personnel will negotiate in good faith toward achieving the overall goals of the State's Race to the Top-Early Learning Challenge grant, including when the VT ELC State Plan requires modifications that affect Participating State Agencies/Participating Agency, or when the Participating State Agency's/Participating Agency's Scope of Work requires modifications.

**D. STATE RECOURSE IN THE EVENT OF A PARTICIPATING STATE AGENCY'S/PARTICIPATING AGENCY'S FAILURE TO PERFORM**

If the Lead Agency determines that a Participating State Agency/Participating Agency is not meeting its goals, timelines, budget, or annual targets, or is in some other way not fulfilling applicable requirements, the Lead Agency will take appropriate enforcement action, which could include initiating a collaborative process by which to attempt to resolve the disagreements between the Lead Agency and the Participating State Agency/Participating Agency, or initiating



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**Authorized Representative of Vermont Department for Children and Families (Participating State Agency):**

October 11, 2013

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Dave Yacovone, Commissioner, Vermont Department for Children and Families

**Authorized Representative of Building Bright Futures Council (Participating Agency):**

October 11, 2013

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Julie Coffey, Executive Director, Building Bright Futures Council

**EXHIBIT I – SCOPE OF WORK FOR LEAD AGENCY AND EACH PARTICIPATING STATE AGENCY/PARTICIPATING AGENCY**

The **Vermont Office of the Governor** hereby agrees to participate in the VT ELC State Plan, as described in the State’s application, and more specifically commits to undertake the tasks and activities described in detail below.

<b>Selection Criterion</b>	<b>Participating Party</b>	<b>Type of Participation</b>
<b>All Criterion</b>	Designated Senior Staff	Provides oversight and advice for the VT RTTT ELC grant.
<b>(A)(3)</b>	Designated Senior Staff	Convenes and manages the VT RTTT ELC State Management Team.
<b>(A)(3)</b>	Designated Senior Staff	Along with VT RTTT ELC Management Team hires and supervises a VT RTTT ELC State Plan Manager. Manager serves as one of support staff of VT RTTT ELC Management Team.
<b>(A)(3)</b>	Designated Senior Staff	Hires and supervises administrative assistant for VT RTTT ELC State Plan Manager.
<b>(A)(4)</b>	Designated Senior Staff	Engages in discussion and planning by VT RTTT ELC Management Team, including the BBF Council to identify strategies and public and private funds to build on the achievements of the VT RTTT ELC State Plan.
<b>(D)(2)</b>	Designated Senior Staff	Leads formation of the Early Childhood Leadership Development Institute (ECLI) Work Group and assists in development of and successful launch of Early Childhood Leadership Development Institute.
<b>(E)(2)</b>	Designated Senior Staff	Establishes an Education Data Governance Council that includes Policy, Data and IT leadership from VT RTTT ELC participating state agencies and other relevant state agencies and partners.
<b>(E)(2)</b>	Governor Peter Shumlin	Appoints broad stakeholders to Education Data Governance Council.
<b>(E)(2)</b>	Designated Senior Staff	Hires consultant to manage Data Governance processes and procedures, facilitate meeting discussions, and handle the logistics for first two years of grant.

**Authorized Representative of Vermont Office of the Governor (Lead Program Agency):**

\_\_\_\_\_  
 Signature  
 Governor Shumlin, Governor, State of Vermont

October 11, 2013  
 \_\_\_\_\_  
 Date

Vermont RTT-ELC Application for Funding [CFDA 84.412A]  
Proposal and State Plan

**Authorized Representative of Vermont Agency of Human Services (Lead Fiscal Agency):**

October 11, 2013

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Signature

Date

Doug Racine, Secretary, Vermont Agency of Human Services

Vermont RTT-ELC Application for Funding [CFDA 84.412A]  
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The **Vermont Agency of Human Services** hereby agrees to participate in the VT ELC State Plan, as described in the State’s application, and more specifically commits to undertake the tasks and activities described in detail below.

<b>Selection Criterion</b>	<b>Participating Party</b>	<b>Type of Participation</b>
(A)(3)	Secretary of Human Services or designee	Hires VT RTTT ELC State Plan fiscal manager.
(A)(3)	Secretary of Human Services or designee	Provides oversight to the VT RTTT ELC State Plan fiscal management.
(A)(3)	Secretary of Human Services or designee	Coordinates closely with Governor’s Office designated Senior Staff providing VT RTTT ELC grant program oversight.
(A)(3)	Designated Senior Staff	Active participation as member of the VT RTTT ELC State Management Team.
(A)(3)	Designated Senior Staff	Assures financial reporting for the VT RTTT ELC grant.

**Authorized Representative of Vermont Office of the Governor (Lead Program Agency):**

October 11, 2013

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Signature \_\_\_\_\_ Date

Governor Shumlin, Governor, State of Vermont

**Authorized Representative of Vermont Agency of Human Services (Lead Fiscal Agency):**

October 11, 2013

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Signature \_\_\_\_\_ Date

Doug Racine, Secretary, Vermont Agency of Human Services

Vermont RTT-ELC Application for Funding [CFDA 84.412A]  
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The **Vermont Department for Children and Families** hereby agrees to participate in the VT ELC State Plan, as described in the State’s application, and more specifically commits to undertake the tasks and activities described in detail below.

<b>Selection Criterion</b>	<b>Participating Party</b>	<b>Type of Participation</b>
<b>(A)(3)</b>	Commissioner or designee and Head Start Collaboration Office Director	Participates regularly and actively on BBF State Advisory Council and encourages District Office staff and AHS Field Directors to participate actively on Regional Councils.
<b>(A)(3)</b>	Designated senior staff	Participates regularly and actively as a member of the VT RTTT ELC State Management Team and recruits DCF content/program experts as participants in VT ELC activities as appropriate.
<b>(A)(3)</b>	Deputy Commissioner of CDD	Hires and supervises VT ELC Contracts Manager to assist with added volume of grants, contract and payment activity that will accompany responsibilities for implementation of the proposed RTT-ELC plan.
<b>(A)(4)</b>	Designated senior staff	Engages in discussion and planning by VT RTTT ELC Management Team and the BBF Council to identify strategies and public or private funds to sustain the achievements of the VT RTTT ELC State Plan.
<b>(B)(1) &amp; (4)</b>	Designated senior staff	Maintains VT STARS as the state TQRIS. Maintains commitment to high standards. Leads improvement of VT STARS reporting.
<b>B)(2)</b>	Designated senior staff	Develops and implements a robust program of rewards and incentives to increase participation in VT STARS.
<b>(B)(2)</b>	Designated senior staff	Facilitate participation in VT STARS and support continuous program improvement and maintaining program quality through VT STARS participation.
<b>(B)(3)</b>	Designated senior staff	Leads strategies to increase frequency and quality of monitoring and rating ELDP participating in VT STARS and evaluate effectiveness to ensure continuous improvement.
<b>(B)(3)</b>	Designated senior staff	Working with AOE, improve inter-rater reliability and create integrated monitoring and rating processes across child care licensing, VT STARS and publicly funded preschool.
<b>(B)(3)</b>	Designated senior staff	Hires, trains, supervises and supports two VT STARS assessors to improve technical assistance capacity and strengthen monitoring of regulatory compliance in schools, centers and family child care homes.

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<b>Selection Criterion</b>	<b>Participating Party</b>	<b>Type of Participation</b>
<b>(B)(4)</b>	Designated senior staff	Develop and release competitive grant opportunities to expand the Strengthening Families grants, provide supports, professional development opportunities and evaluation for grantees.
<b>(B)(4)</b>	Designated senior staff	Lead strategies to strengthen and improve Specialized Child Care Services (SCCS).
<b>(B)(5)</b>	Designated senior staff	With AOE, initiate and monitor an evaluation of VT STARS.
<b>(C)(1)</b>	Designated senior staff	Support AOE in the revision, finalization, dissemination and training of the new VELs.
<b>(C)(2)</b>	Designated senior staff and HHSSCO	Actively participates in Comprehensive Assessments System group.
<b>(C)(2)</b>	Designated senior staff	Assists AOE in expansion of the use of Teaching Strategies GOLD assessment system throughout all types of early learning and development programs, including in infant and toddler settings, for documenting children's development and informing practices.
<b>(C)(2)</b>	Designated senior staff	Assists AOE in incorporation of CLASS as a commonly used assessment tool in early learning and development programs in Vermont and as part of the VT STARS array of assessment tools.
<b>(C)(3)</b>	Deputy Commissioner CDD	With VDH, hire a Home Visiting Coordinator: this position will manage oversight for implementation of evidence-based models and integration of all model locally through CIS.
<b>(C)(3)</b>	Designated senior staff	With VDH, oversee implementation of an aligned and integrated evidence-based statewide home visiting system.
<b>(C)(3)</b>	Designated senior staff	Participates in activities to promote food security, good nutrition and physical activity through early learning and development programs in schools, centers and family child care homes well as through home visiting and other services.
<b>(C)(3)</b>	Designated senior staff	Participate in statewide leadership and planning teams convened by AOE to promote comprehensive approach for professional development to support social and emotional well-being and promote Early Multi-tiered System of Supports.
<b>(D)(2)</b>	Designated senior staff, VCCICC, CCRRs	With AOE, implement and evaluate MATCH program, including development of Results Based Accountability Model.
<b>(D)(2)</b>	Designated senior staff	Formally establish the Early Childhood

Vermont RTT-ELC Application for Funding [CFDA 84.412A]  
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<b>Selection Criterion</b>	<b>Participating Party</b>	<b>Type of Participation</b>
		Education Workgroup (ECHEW) with AOE.
<b>(D)(2)</b>	Designated senior staff	Implements expansion of the Vermont Early Childhood Apprenticeship Program.
<b>(D)(2)</b>	Designated senior staff	With AOE, participate in interagency work group to manage Early Childhood Workforce Survey.
<b>(D)(2)</b>	Designated senior staff	With AOE, implement licensed TEACH model in VT.
<b>(D)(2)</b>	Designated senior staff	Lends expertise and participation to success of Leadership Development Institute.
<b>(E)(1)</b>	Designated senior staff	Participates in validation and strengthening of Vermont Ready Kindergarteners Survey.
<b>(E)(2)</b>	Commissioner or designee	Hires and supervises an AHS Information Technology (IT) Project Manager: this position will have in-agency oversight responsibility for the IT contract to build the CIS System. A FT Project Manager to manage the project will also be secured with contract funds.
<b>(E)(2)</b>	Designated senior staff	Actively participate on the Early Childhood Data Governance Council convened by the Governor's Office.
<b>(E)(2)</b>	Designated senior staff	Contributes relevant data to known/shared data on early learning and development.
<b>(E)(2)</b>	Designated senior staff	Manage CIS Data System project, including appoint staff member as project manager and appointing a work group.
<b>(E)(2)</b>	Designated senior staff	Participate with AOE on drafting of an Early Childhood and K-12 SLDS Plan.
<b>CPP4</b>	Designated senior staff	Support AOE's initiative, including hiring of contractor, to build a coordinated Birth through Grade 3 system including coordination of professional development pilot.
<b>CPP5</b>	Commissioner or designee	Hires and supervise a Promise Communities Project Manager: this position will be responsible for implementing Promise Communities Project, will supervise Coaches and work with PS State Team. This person will be point person on RTT-ELC for CDD and will sit on CDD Senior Management Team to ensure new and expanded activities are integrated with CDD usual business.
<b>CPP5</b>	Commissioner or designee	Hires and Supervises Promise Community Coaches: these three positions will be assigned to work from home offices in different regions of the state supporting communities in creating and implementing their Promise Community Plans. Each will work with 2 – 4 communities

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Selection Criterion	Participating Party	Type of Participation
		at a time.
<b>CPP5</b>	Designated senior staff	Convene and lead Promise Communities State Team to oversee menu of options development process and manage grant applications and give approvals.

**Authorized Representative of Vermont Office of the Governor (Lead Program Agency):**

October 11, 2013

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Signature Date  
 Governor Shumlin, Governor, State of Vermont

**Authorized Representative of Vermont Agency of Human Services (Lead Fiscal Agency):**

October 11, 2013

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Signature Date  
 Doug Racine, Secretary, Vermont Agency of Human Services

**Authorized Representative of Vermont Department for Children and Families (Participating State Agency):**

October 11, 2013

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Signature Date  
 Dave Yacovone, Commissioner, Vermont Department for Children and Families

Vermont RTT-ELC Application for Funding [CFDA 84.412A]  
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The **Vermont Agency of Education** hereby agrees to participate in the VT ELC State Plan, as described in the State’s application, and more specifically commits to undertake the tasks and activities described in detail below.

<b>Selection Criterion</b>	<b>Participating Party</b>	<b>Type of Participation</b>
(A)(3)	Secretary of Education or designee	Secretary or designee participates regularly and actively on BBF Council (statewide) and encourage leaders in Local Education Agencies (LEAs) to participate on BBF Regional Councils.
(A)(3)	Designated senior staff	Participate regularly and actively as a member of the VTT RTT ELC State Management Team and recruits AOE content/program experts as participants in VT ELC activities as appropriate.
(A)(3)	Secretary of Education or designee	Hires and supervises a VT ELC Coordinator to assist with added volume of responsibilities under VT ELC Plan. Coordinator serves as one of support staff of VT RTTT ELC State Management Team.
(A)(4)	Designated senior staff	Engages in discussion and planning by VT RTTT ELC Management Team and the BBF Council to identify strategies and public or private funds to sustain the achievements of the VT ELC State Plan.
(B)(1)(2)(3) & (5)	Designated senior staff	Continues active participation on the VT STARS Oversight Committee.
(B)(3)	Designated senior staff	Lead the creation of a monitoring system for publicly funded preschool.
(B)(3)	Designated senior staff	Working with DCF, improve inter-rater reliability and create integrated monitoring and rating processes across child care licensing, VT STARS and publicly funded preschool.
(B)(5)	Designated senior staff	With DCF, initiate and monitor an evaluation of VT STARS.
(C)(1)	Designated senior staff	Leads review and completion of new VELs.
(C)(1)	Designated senior staff	Leads alignment of early learning guidelines across developmental age span from birth – grade 3.
(C)(1)	Designated senior staff	Updates and disseminates materials to inform families about early learning guidelines across all developmental ages (birth – grade 3) to engage families in supporting early learning and development.
(C)(2)	Designated senior staff	Create the Comprehensive Early Childhood Assessment Work Group to develop a plan for a quality comprehensive system, with BBF, VDH and DCF.
(C)(2)	Designated senior staff	Leads expansion of the use of Teaching Strategies GOLD assessment system throughout all types of early learning and development

Vermont RTT-ELC Application for Funding [CFDA 84.412A]  
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<b>Selection Criterion</b>	<b>Participating Party</b>	<b>Type of Participation</b>
		programs, including in infant and toddler settings, for documenting children’s development and informing practices.
<b>(C)(2)</b>	Designated senior staff	Leads incorporation of CLASS as a commonly used assessment tool in early learning and development programs in Vermont and as part of the VT STARS array of assessment tools.
<b>(C)(3)</b>	CACFP staff	Participate in workgroup promoting good nutrition and food security for young children including the provision of healthy meals in early learning.
<b>(C)(3)</b>	Designated senior staff	Convene statewide leadership and planning teams to promote comprehensive approach for professional development to support social and emotional well-being and promote Early Multi-tiered System of Supports.
<b>(C)(3)</b>	Designated senior staff	Hire program manager to lead RTTT Early MTSS project.
<b>(C)(3)</b>	Designated senior staff, RTTT Early MTSS Project Manager	Work with BBF Councils to adopt five key components of Early MTSS.
<b>(C)(3)</b>	Designated senior staff	Provide oversight for RTTT Early MTSS project.
<b>(D)(2)</b>	Designated senior staff	With DCF, implement and evaluate MATCH program, including development of Results Based Accountability Model.
<b>(D)(2)</b>	Designated senior staff	Formally establish the Early Childhood Education Workgroup (ECHEW) with DCF.
<b>(D)(2)</b>	Designated senior staff	Lends expertise and participation to success of Leadership Development Institute.
<b>(D)(2)</b>	Designated senior staff	With DCF, participate in interagency work group to manage Early Childhood Workforce Survey.
<b>(D)(2)</b>	Designated senior staff	With DCF, implement licensed TEACH model in VT.
<b>(E)(1)</b>	Designated senior staff	Oversee strengthening and alignment of Ready Kindergartners Survey (RKS), including the convening of stakeholders.
<b>(E)(2)</b>	Designated senior staff	Actively participate on the Early Childhood Data Governance Council convened by the Governor’s Office.
<b>(E)(2)</b>	Designated senior staff	Lead the drafting of an Early Childhood and K-12 SLDS Plan with DCF assistance.
<b>(E)(2)</b>	Designated senior staff	Manage Early Childhood K-12 SLDS data linkages plan.
<b>CPP4</b>	Designated senior staff	Lead initiative, including hiring of contractor, to build a coordinated Birth through Grade 3 system including coordination of professional development pilot.
<b>CPP5</b>	Designated senior staff	Participate on the Promise Communities State Team to oversee menu of options development process and manage grant applications and give

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Selection Criterion	Participating Party	Type of Participation
		approvals.

**Authorized Representative of Vermont Office of the Governor (Lead Program Agency):**

\_\_\_\_\_  
Signature  
Governor Shumlin, Governor, State of Vermont

October 11, 2013  
\_\_\_\_\_  
Date

**Authorized Representative of Vermont Agency of Human Services (Lead Fiscal Agency):**

\_\_\_\_\_  
Signature  
Doug Racine, Secretary, Vermont Agency of Human Services

October 11, 2013  
\_\_\_\_\_  
Date

**Authorized Representative of Vermont Agency of Education (Participating State Agency):**

\_\_\_\_\_  
Signature  
Armando Vilaseca, Secretary, Vermont Agency of Education

October 11, 2013  
\_\_\_\_\_  
Date

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The **Vermont Department of Health** hereby agrees to participate in the VT ELC State Plan, as described in the State’s application, and more specifically commits to undertake the tasks and activities described in detail below.

<b>Selection Criterion</b>	<b>Participating Party</b>	<b>Type of Participation</b>
(A)(3)	Commissioner or designee	Participates regularly and actively on BBF State Advisory Council and encourages District Office staff and leadership of local community wellness initiatives to participate actively on Regional Councils.
(A)(3)	Designated senior staff	Participates regularly and actively as a member of the VT RTTT ELC State Management Team and recruits VDH content/program experts as participants in VT ELC activities as appropriate.
(A)(4)	Designated senior staff	Engages in discussion and planning by VT RTTT ELC State Management Team and the BBF Council to identify strategies and public or private funds to sustain the achievements of the VT ELC State Plan.
(C)(2)	Designated senior staff	Actively participates in Comprehensive Assessments System group.
(C)(3)	Commissioner or designee	With DCF, hire a Home Visiting Coordinator: this position will manage oversight for implementation of evidence-based models and integration of all model locally through CIS.
(C)(3)	Designated senior staff	Oversee implementation of an aligned and integrated evidence-based statewide home visiting system.
(C)(3)	Maternal Child Health, Healthy Child Care Vermont (HCCVT)	Lead the enhancement and expansion of Child Care Health Consultation services.
(C)(3)	Designated senior staff, HCCVT Coordinator, Nutrition and Physical Activity Cmte	Participates actively in activities to promote food security, good nutrition and physical activity through early learning and development programs in schools, centers and family child care homes well as through home visiting and other services.
(C)(3)	Designated senior staff, VT Help Me Grow Management Cmte	Lead the population-level, cross-sector collaboration to promote healthy development of Vermont children through use of the Help Me Grow framework.
(C)(3)	Designated senior staff	Participate in statewide leadership and planning teams convened by AOE to promote comprehensive approach for professional development to support social and emotional well-being and promote Early Multi-tiered System of Supports.

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<b>Selection Criterion</b>	<b>Participating Party</b>	<b>Type of Participation</b>
<b>(D)(2)</b>	Designated senior staff	Lends expertise and participation to success of Leadership Development Institute.
<b>(E)(1)</b>	Designated senior staff	Participates in validation and strengthening of Vermont Ready Kindergarteners Survey.
<b>(E)(2)</b>	Designated senior staff	Actively participates on the Early Childhood Data Governance Council convened by the Governor's Office.
<b>(E)(2)</b>	Designated senior staff	Contributes relevant health data to known/shared data on early learning and development.
<b>CPP5</b>	Designated senior staff	Participate on the Promise Communities State Team to oversee menu of options development process and manage grant applications and give approvals.

**Authorized Representative of Vermont Office of the Governor (Lead Program Agency):**

October 11, 2013

---

Signature \_\_\_\_\_ Date \_\_\_\_\_  
 Governor Shumlin, Governor, State of Vermont

**Authorized Representative of Vermont Agency of Human Services (Lead Fiscal Agency):**

October 11, 2013

---

Signature \_\_\_\_\_ Date \_\_\_\_\_  
 Doug Racine, Secretary, Vermont Agency of Human Services

**Authorized Representative of Vermont Department of Health (Participating State Agency):**

October 11, 2013

---

Signature \_\_\_\_\_ Date \_\_\_\_\_  
 Harry Chen, M.D., Commissioner, Vermont Department of Health

Vermont RTT-ELC Application for Funding [CFDA 84.412A]  
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**The Building Bright Futures Council** of Vermont hereby agrees to participate in the VT ELC State Plan, as described in the State’s application, and more specifically commits to undertake the tasks and activities described in detail below.

<b>Selection Criterion</b>	<b>Participating Party</b>	<b>Type of Participation</b>
(A)(3)	BBF Executive Director	Convenes, manages, and supports Building Bright Futures Council (statewide).
(A)(3)	BBF Executive Director, BBF State Advisory Council, BBF Regional Manager, 12 BBF Regional Council Coordinators	Actively recruits and engages critical partners at state and local levels, clearly articulates relationships and responsibilities among partners and overlapping systems of care, and promotes strategic planning and action at state and local levels.
(A)(3)	BBF Executive Director	BBF Council Executive Director participates regularly and actively as a member of the VT RTT - ELC State Management Team and recruits BBF Council content/program experts as participants in VT RTTT ELC activities as appropriate.
(A)(3)	BBF Executive Director	Hires and supervises a BBF Regional Councils Manager.
(A)(3)	BBF Executive Director, Leadership at 12 BBF Regional Councils	Hires, trains, supervises and supports 11 FTEs as Regional Council Coordinators to enhance the capacity of BBF Regional Councils.
(A)(3)	BBF Executive Director, BBF State Advisory Council, BBF Regional Manager, 12 BBF Regional Council Coordinators	Participates in the development and implementation of ELC Partnerships. Supports Regional BBF Councils in providing inclusive, collaborative local governance structure for ELC Partnerships.
(A)(3)	BBF Executive Director, 12 BBF Regional Council Coordinators, BBF State Advisory Council	Produces timely and useful reports on the status of measurable outcomes related to children’s early learning and development at both statewide and regional levels to inform improved practice, effective investments and sound policy decisions.
(A)(4)	BBF Executive Director and BBF hired consultants	Engages in discussion and planning by VT RTTT ELC State Management Team and the BBF Council to identify strategies and public or private funds to sustain the achievements of the VT ELC State Plan.
(B)(1)(2)(3) & (5)	BBF State Council Directors, BBF Regional Council Members	Designated BBF Council members continue active participation on the VT STARS Oversight Committee.
(C)(3)	BBF State Director and BBF Regional Council	Work with AOE to adopt five key components of Early MTSS.
(D)(2)	BBF SAC Cmte on Professional Preparedness and Development	BBF Council members participate in Early Childhood Higher Education Work Group convened by AOE.
(A)(3)	BBF Executive Director	Assists development and implementation of Early Childhood Leadership Development Institute.
(E)(2)	BBF Executive Director or designee	Designated staff actively participates on the Early Childhood Data Governance Council convened by the Governor’s Office.
(E)(2)	BBF Executive Director	Hires, supervises and supports data and planning personnel to create and support the unified early childhood data

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Selection Criterion	Participating Party	Type of Participation
		reporting infrastructure that tracks results and provides consistent reporting of VT's early learning and development outcomes and policy questions.
<b>(E)(2)</b>	BBF Executive Director, Hired Project Manager	Fully implements all activities in the plan to enhance Vermont's early childhood data system so that it is a unified system used by all to improve practices and inform policies that support children's health, development and learning and is aligned and interoperable with Vermont's Statewide Longitudinal Data System.

**Authorized Representative of Vermont Office of the Governor (Lead Program Agency):**

\_\_\_\_\_  
 Signature  
 Governor Shumlin, Governor, State of Vermont

October 11, 2013  
 \_\_\_\_\_  
 Date

**Authorized Representative of Vermont Agency of Human Services (Lead Fiscal Agency):**

\_\_\_\_\_  
 Signature  
 Doug Racine, Secretary, Vermont Agency of Human Services

October 11, 2013  
 \_\_\_\_\_  
 Date

**Authorized Representative of Building Bright Futures Council (Participating State Agency):**

\_\_\_\_\_  
 Signature  
 Julie Coffey, Executive Director, Building Bright Futures Council

October 11, 2013  
 \_\_\_\_\_  
 Date

Vermont RTT-ELC Application for Funding [CFDA 84.412A]  
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## **XIV. SCORING RUBRIC**

### **I. Introduction**

To help ensure inter-reviewer reliability and transparency for the RTT-ELC applicants, ED and HHS have created and are publishing a rubric for scoring State applications. The pages that follow detail the rubric and allocation of point values that reviewers will be using. The rubric will be used by reviewers to ensure consistency across and within review panels.

The rubric allocates points to each selection criterion. In all, the RTT-ELC scoring rubric includes 17 selection criteria and four competitive preference priorities. These collectively add up to 315 points. The selection criteria are divided into two sections: Core Areas and Focused Investment Areas.

- Applicants must respond to all of the selection criteria within each of the two Core Areas: (A) Successful State Systems and (B) High-Quality, Accountable Programs.
- Applicants have more flexibility within each of the Focused Investment Areas: (C) Promoting Early Learning and Development Outcomes for Children; (D) A Great Early Childhood Education Workforce; and (E) Measuring Outcomes and Progress. In these sections, applicants may select which selection criteria to address; focusing on those that the State believes will have the most impact on school readiness for its Children with High Needs, given that State's context and the current status of its early learning and development activities. The Focused Investment Areas must be addressed as follows.

#### Focused Investment Areas

- The applicant must select and address--
  - At least two selection criteria from Focused Investment Area (C) Promoting Early Learning and Development Outcomes for Children; and
  - At least one selection criterion from each of Focused Investment Areas (D) A Great Early Childhood Education Workforce and (E) Measuring Outcomes and Progress.
- Each Focused Investment Area (C), (D), and (E) is worth a specific number of points; these points will be evenly divided across the selection criteria that the applicant chooses to address in that section.

#### Priorities

Applicants must address the absolute priority throughout their applications; they do not write separately to this priority. The absolute priority must be met in order for an applicant to receive funding.

Applications that choose to address a competitive preference priority will earn extra points under that priority if the reviewers determine that the response is of high-quality. Applicants may choose to write to the invitational priority to extend the scope of the application; applicants are invited to address this and may apply funds from this grant to implement activities under it, but do not earn additional points for doing so.

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Reviewers will be required to make thoughtful judgments about the quality of the State’s application and will be assessing, based on the criteria, the comprehensiveness, feasibility, and likely impact of the State’s application. Reviewers will also be asked to evaluate, for example, the extent to which the State has set ambitious but achievable annual targets in its application. Reviewers will also need to make informed judgments about the State’s goals, the rationales for the Focused Investment Areas, the activities the State has chosen to undertake, and the timelines and credibility of the State’s plans.

This appendix includes information about the point values for each criterion and priority, guidance on scoring, and the rubric that we will provide to reviewers.

**II. Points Overview**

The chart below shows the maximum number of points that are assigned to each criterion.

	Points Available	Percent
<b>Race to the Top-Early Learning Challenge: Points Overview</b>		
<b>A. Successful State Systems</b>		
(A)(1) Demonstrating past commitment to early learning and development.	20	
(A)(2) Articulating the State’s rationale for its early learning and development reform agenda and goals.	20	
(A)(3) Aligning and coordinating work across the State	10	
(A)(4) Developing a budget to implement and sustain the work	15	
<b>Core Area A Subtotal</b>	<b>65</b>	<b>23</b>
<b>B. High-Quality, Accountable Programs</b>		
(B)(1) Developing and adopting a common, statewide Tiered Quality Rating and Improvement System	10	
(B)(2) Promoting participation in the State’s Tiered Quality Rating and Improvement System	15	
(B)(3) Rating and monitoring Early Learning and Development Programs	15	
(B)(4) Promoting access to high-quality Early Learning and Development Programs	20	
(B)(5) Validating the State’s Tiered Quality Rating and Improvement System	15	
<b>Core Area B Subtotal</b>	<b>75</b>	<b>27</b>
<b>C. Promoting Early Learning and Development Outcomes for Children</b>		
(C)(1) Developing and using statewide, high-quality Early Learning and Development Standards	60 (divided evenly across the criteria addressed)	
(C)(2) Supporting effective uses of Comprehensive Assessment Systems		
(C)(3) Identifying and addressing health, behavioral, and developmental needs		
(C)(4) Engaging and supporting families		

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	Points Available	Percent
<b>Race to the Top-Early Learning Challenge: Points Overview</b>		
<b>Focused Investment Area C Subtotal</b>	<b>60</b>	<b>21</b>
<b>D. A Great Early Childhood Education Workforce</b>		
(D)(1) Developing Workforce Knowledge and Competency Framework and a progression of credentials	40 (divided evenly across the criteria addressed)	
(D)(2) Supporting Early Childhood Educators		
<b>Focused Investment Area D Subtotal</b>	<b>40</b>	<b>14</b>
<b>E. Measuring Outcomes and Progress</b>		
(E)(1) Understanding the status of children at kindergarten entry	40 (divided evenly across the criteria addressed)	
(E)(2) Building or enhancing an early learning data system		
<b>Focused Investment Area E Subtotal</b>	<b>40</b>	<b>14</b>
<b>Total Points Available for Selection Criteria</b>	<b>280</b>	
Competitive Priority 2: Including all Early Learning and Development Programs in the TQRIS	10	
Competitive Priority 3: Understanding Status of Children’s Learning and Development at Kindergarten Entry	10	
Competitive Priority 4: Creating Preschool through Third Grade Approaches to Sustain Improved Early Learning Outcomes through the Early Elementary Grades	10	
Competitive Priority 5: Addressing the Needs of Children in Rural Areas	5	
<b>Grand Total</b>	<b>315</b>	

### III. About Scoring

#### General Notes about Scoring

There are two terms that we use repeatedly in the notice: High-Quality Plan and “ambitious yet achievable” goals or targets. These are anchor terms for both applicants to understand and reviewers to use in guiding their scoring. We discuss each below.

- *A High-Quality Plan.* In determining the quality of a State’s plan for a given selection criterion or competitive preference priority, reviewers will assess the extent to which the plan meets the definition (as provided in the notice) of a High-Quality Plan, including whether it is feasible and has a high probability of successful implementation and contains the following components--
  - (a) The key goals;

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- (b) The key activities to be undertaken; the rationale for the activities; and, if applicable, where in the State the activities will be initially implemented, and where and how they will be scaled up to achieve statewide implementation;
- (c) A realistic timeline, including key milestones, for implementing each key activity;
- (d) The party or parties responsible for implementing each activity and other key personnel assigned to each activity;
- (e) Appropriate financial resources to support successful implementation of the plan;
- (f) The information requested as supporting evidence, if any, together with any additional information the State believes will be helpful to peer reviewers in judging the credibility of the plan;
- (g) The information requested in the performance measures, where applicable;
- (h) How the State will address the needs of the different types of Early Learning and Development Programs, if applicable; and
- (i) How the State will meet the needs of Children with High Needs, as well as the unique needs of special populations of Children with High Needs.

Using the information provided to them in the application, reviewers will assess the extent to which the proposed plan in a specific selection criterion is a High-Quality Plan that is credible, feasible to implement, and likely to result in the outcomes the State has put forward.

- *Ambitious yet achievable.* In determining whether a State has ambitious yet achievable goals or targets for a given selection criterion, reviewers will examine the State's goals or targets in the context of the State's plan and the evidence submitted (if any) in support of the plan. Reviewers will not be looking for any specific targets nor will they necessarily reward higher targets above lower ones with higher scores. Rather, reviewers will reward States for developing goals and targets that, in light of each State's plan and the current context and status of the work in that State, are shown to be "ambitious yet achievable."

### About Assigning Points

Reviewers will assign points to an application for each selection criterion in Core Areas (A) and (B) and for each selection criterion that the State has chosen to address within Focused Investment Areas (C), (D), and (E).

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Quality Rubric

The following scoring rubric will be used to guide the reviewers in scoring selection criteria and priorities. (See “General Notes about Scoring” for more information about how reviewers will assess High-Quality Plans and “ambitious yet achievable” targets and goals.)

	<b>Percentage of Available Points Awarded</b>
<b>High-quality response</b>	80-100%
<b>Medium/high-quality response</b>	50-80%
<b>Medium/low-quality response</b>	20-50%
<b>Low-quality response</b>	0-20%

About Priorities

There are three types of priorities in the RTT-ELC competition.

- Applicants should address the absolute priority across the entire application and should not address it separately. It will be assessed by reviewers after they have fully reviewed and evaluated the entire application, to ensure that the application has met the priority. If an application has not met the priority, it will be eliminated from the competition. A State meets the absolute priority if a majority of reviewers determines that the State has met the absolute priority.
- Applicants earn points under the competitive preference priorities in a manner similar to how they earn points under the selection criteria.
  - Priority 2 is worth up to 10 points.
  - Priority 3 is worth 10 points; all 10 points are earned if the competitive preference priority is met. A State will earn competitive preference priority points if a majority of reviewers determines that the State has met the competitive preference priority. No points are earned if a majority of reviewers determine that the applicant has not met the competitive preference priority. A State meets the competitive preference priority by addressing selection criterion (E)(1) and earning a score of at least 70 percent of the maximum points available for that criterion.
  - Priority 4 is worth up to 10 points.
  - Priority 5 is worth up to 5 points.
- The invitational priority is addressed in its own separate section. While applicants are invited to write to the invitational priority, they will not earn points under the invitational priority.

In the Event of a Tie

If two or more applications have the same score and there is not sufficient funding to support all of the tied applicants, the applicants’ overall scores on Core Area (B) will be used to break the tie.

## **XV. APPLICATION SUBMISSION PROCEDURES**

Please note that you must follow the Application Procedures as described in the Federal Register notice announcing the grant competition.

### **Submission Information and Deadline.**

Applications for grants under this competition must be submitted by mail or hand delivery. The Departments strongly recommends the use of overnight mail. Applications postmarked on the deadline date but arriving late will not be read.

The deadline for submission of applications is October 16, 2013.

### **Application Submission Format.**

The Secretaries strongly request the applicant to limit the application text narrative to no more than 150 pages and limit appendices to no more than 150 pages. A "page" is 8.5" x 11", on one side only, with 1" margins at the top, bottom, and both sides. Line spacing for the narratives is set to 1.5 spacing, and the font used is 12 point Times New Roman. Each page in the application should have a page number. The Secretaries strongly request that applicants follow the recommended page limits, although the Secretaries will consider applications of greater length.

Applicants for a grant under this competition must submit: (1) an electronic copy of the application; and (2) signed originals of certain sections of the application. Applicants must submit their application in electronic format on a CD or DVD, with CD-ROM or DVD-ROM preferred.

We strongly recommend that the applicant submit three CDs or DVDs. Each of these three CDs or DVDs should include the following four files:

1. A single file that contains the body of the application, including required budget tables, that has been converted into a .PDF (Portable Document) format so that the .PDF is searchable. Note that a .PDF created from a scanned document will not be searchable.
2. A single file in a .PDF format that contains all application appendices.
3. A single file in a .PDF format that contains all of the required signature pages. The signature pages may be scanned and turned into a PDF. Applicants should also include all signed MOUs or other binding agreements for each Participating State Agency in the application; and
4. A single, separate file of the completed electronic budget spreadsheets (e.g., .XLS or .XLSX formats) that includes the required budget tables and budget justifications (the spreadsheets will not be reviewed by peer reviewers but will be used by the Departments for budget reviews).

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Each of these items must be clearly labeled with the State's name, city, state, and any other relevant identifying information. States must not password-protect these files. Additionally, please ensure that: (1) all three CDs or DVDs contain the same four files; (2) the files are not corrupted; and (3) all files print correctly. The Departments are not responsible for reviewing any information that is not able to be opened or printed from your application package.

In addition to the electronic files, applicants must submit a signed original of section IV of the application and one copy of that signed original. Section IV of the application includes the Application Assurances and Certifications. The Departments will not review any paper submissions of the application narrative and appendices. All applications must be submitted by mail or hand delivery. Whether you submit an application by mail or hand delivery, you must indicate on the envelope the CFDA number, including suffix letter, if any, of the competition under which you are submitting your application.

We must receive all grant applications by 4:30:00 p.m., Washington, DC time, on October 16, 2013. ***We will not accept an application for this competition after 4:30:00 p.m., Washington, DC time, on the application deadline date.*** Therefore, we strongly recommend that applicants arrange for mailing or hand delivery of their application in advance of the application deadline date.

**Submission of Applications by Mail.**

States choosing to submit their application (*i.e.*, the three CDs or DVDs containing the four application files, the signed paper original of section IV of the application, and the copy of that original) by mail (either through the U.S. Postal Service or a commercial carrier) should use the following mailing address:

U.S. Department of Education  
Application Control Center  
Attention: (CFDA Number 84.412A)  
LBJ Basement Level 1  
400 Maryland Avenue, SW.  
Washington, DC 20202-4260

We must receive applications on or before the application deadline date. Therefore, to avoid delays, we strongly recommend sending applications via overnight delivery. ***If we receive an application after the application deadline, we will not consider that application.***

**Submission of Applications by Hand Delivery.**

States choosing to submit their application (*i.e.*, the three CDs or DVDs containing the four application files, the signed paper original of section IV of the application, and the copy of that original) by hand delivery (including via a courier service) should use the following address:

U.S. Department of Education  
Application Control Center  
Attention: (CFDA Number 84.412A)

Vermont RTT-ELC Application for Funding [CFDA 84.412A]  
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550 12th Street, SW.  
Room 7041, Potomac Center Plaza  
Washington, DC 20202-4260

The Application Control Center accepts hand deliveries daily between 8:00 a.m. and 4:30:00 p.m., Washington, DC time, except Saturdays, Sundays, and Federal holidays.

*If we receive an application after the application deadline, we will not consider that application.*

**Envelope Requirements and Receipt.**

When an applicant submits its application, whether by mail or hand delivery--

(1) It must indicate on the envelope that the CFDA number of the competition under which it is submitting its application is 84.412A; and

(2) The Application Control Center will mail to the applicant a notification of receipt of the grant application. If the applicant does not receive this notification within 15 business days from the application deadline date, it should call the Application Control Center at (202) 245-6288.

In accordance with 34 CFR 75.216(b) and (c), an application will not be evaluated for funding if the applicant does not comply with all of the procedural rules that govern the submission of the application or the application does not contain the information required under the program.

## **XVI. APPLICATION CHECKLIST**

**Please use the following checklist to ensure that your application is complete:**

### **Formatting Recommendations (page 11)**

- q Are all the pages 8.5" x 11", on one side only, with 1" margins at the top, bottom, and both sides?
- q Are all pages numbered?
- q Is the line spacing for the narratives set to 1.5 spacing, and the font to 12 point Times New Roman?

### **Application Assurances and Certifications (page 21)**

- q Is all of the requested information included on the Race to the Top–Early Learning Challenge Application Assurances and Certifications page?
- q **SIGNATURE REQUIRED** – Has the Governor or his/her authorized representative signed and dated the Application Assurances and Certifications?
- q **SIGNATURE REQUIRED** – Has an authorized representative from the Lead Agency signed the Application Assurances and Certifications?  
**SIGNATURE REQUIRED** -- Has an authorized representative from each Participating State Agency signed the Application Assurances and Certifications? (Note: all Participating State Agencies must sign the application. See definition of Participating State Agency, page 18)

### **State Attorney General Certification (page 23)**

- q **SIGNATURE REQUIRED** – Has the State Attorney General or his/her authorized representative signed the Certifications?

### **Accountability, Transparency, Reporting, and Other Assurances and Certifications (page 24)**

- q **SIGNATURE REQUIRED** – Has the Governor or his/her authorized representative signed the other Assurances and Certifications?

### **Eligibility Requirements (page 25)**

- q Has the State Provided a list of the Participating State Agencies?
- q Has the State completed an MOU with each Participating State Agency?
- q Does each MOU include the necessary assurances?
- q **SIGNATURE REQUIRED** – Has every Participating State Agency signed an MOU that includes a preliminary Scope of Work, using Exhibit I or an equivalent model?
- q **SIGNATURE REQUIRED** – Has the Lead Agency counter-signed every MOU and preliminary Scope of Work?
- q Has the State certified that it is participating in the home visiting program, consistent with the requirement on page 25?

## **Selection Criteria**

### **Core Areas (page 27)**

#### **(A) Successful State Systems and (B) High-Quality, Accountable Programs**

- q Has the State responded to each of the selection criteria in Core Areas (A) and (B)?

### **Focused Investment Areas**

#### **(C) Promoting Early Learning and Development Outcomes for Children (page 60)**

- q Has the State responded to at least two of the selection criteria in section (C)?

#### **(D) A Great Early Childhood Education Workforce (page 69)**

- q Has the State responded to at least one of the selection criteria in (D)?

#### **(E) Measuring Outcomes and Progress (page 74)**

- q Has the State responded to at least one of the selection criteria in (E)?

### **OPTIONAL: Competition Priorities (page 77)**

- q Competitive Preference Priority 2: Including all Early Learning and Development Programs in the Tiered Quality Rating and Improvement System.
- q Competitive Preference Priority 3: Understanding the Status of Children's Learning and Development at Kindergarten Entry (if the State has chosen to write to (E)(1)).
- q Competitive Preference Priority 4: Creating Preschool through Third Grade Approaches to Sustain Improved Early Learning Outcomes through the Early Elementary Grades.
- q Competitive Preference Priority 5: Addressing the Needs of Children in Rural Areas.
- q Invitational Priority 6: Encouraging Private-Sector Support.

### **Budget (page 82)**

- q Has the State completed the following elements of the Budget?
  - q Budget Part I: Summary Tables and Narratives
  - q Budget Part II: Participating State Agency Budget Tables and Narratives, for each Participating State Agency
  - q Indirect Costs form
- q Has the State created its budget spreadsheets?

### **Appendix (page 123)**

- q Has the State created a table of contents for its appendix?
- q Has the State included all required documents per the instructions in the application?
- q OPTIONAL: Has the State included supporting information the State believes will be helpful to peer reviewers?

### **Application Requirements (page 99)**

- q Has the State fulfilled all of the application requirements?

**Application Submission Procedures (page 117)**

- q Has the State complied with the submission format requirements, including the application deadline for submission?
- q Does the State's submission include three CDs or DVDs, each containing the following four separate files?
  - o Body of the application narrative, including budget tables, that has been converted into a searchable .PDF document. Note that a .PDF created from a scanned document will not be searchable.
  - o Single file in a .PDF format that contains all application appendices
  - o Single file in a .PDF format that contains all required signature pages
  - o Completed electronic budget spreadsheets
- q Has the State submitted originals of all the required Signature pages?

**XVII. APPENDIX TABLE OF CONTENTS**

The Appendix must include a complete Table of Contents, which includes the page number or attachment number, attachment title, and relevant selection criterion. A sample table of contents form is included below. Each attachment in the Appendix must be described in the narrative text of the relevant selection criterion, with a rationale for how its inclusion supports the narrative and the location of the attachment in the Appendix.

Page #	Attachment Title	Relevant Selection Criterion
3	I: Building Bright Futures State Advisory Council Members, 2013	A1(1)
4	II: Supporting Children with Disabilities and Their Families, An Interagency Agreement Among Early Care, Health and Education Programs and Agencies in Vermont	A1(C)
28	III: Memorandum of Understanding	A3(1)
48	IV: Letters of Stakeholder Support	A3(3)
142	V: Report to the Vermont Legislature - Implementation of Prekindergarten Education in Accordance with Vermont's Act 62	B
168	VI: STARS Standards	B
181	VII: STARS 2011 Brochure	B
183	VIII: STARS Place Mat	B
185	IX: Vermont Early Learning Standards: Guiding the Development and Learning of Children Entering Kindergarten (2003)	C1
225	X: Guiding Your Child's Early Learning: A Parent's Guide to the Vermont Early Learning Standards (2006)	C1
249	XI: Home Visiting Regulations	C3
253	XII: Northern Lights Career Development Center: MATCH components Logic Model and Evaluation	D2

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Page #	Attachment Title	Relevant Selection Criterion
	2.0	
257	XIII: Core Competencies for Afterschool Professionals	D2
286	XIV: Evaluation of Vermont’s Early Childhood Professional Development System – Final Report	D2
367	XV: 2011 Vermont Early Childhood and Afterschool Professional Development Survey	D2
437	XVI: Core Knowledge Areas and Competencies for Early Child Professionals	D2
481	XVII: Early Childhood Career Ladder	D2
482	XVIII: Vermont Career Advising Guide for Early Childhood and Afterschool Professionals	D2
538	XIX: Ready Kindergartners Survey 2012-2013	E1
546	XX: Vermont’s Statewide Report on Kindergarten Readiness 2012-2013	E1
552	XXI: Proposal to Henderson Foundation - Validating & Enhancing Vermont’s Ready Kindergartners Survey (2013)	E1
557	XXII: “Discriminant Validity of a Community-Level Measure of Children’s Readiness for School”(2003) – An Article Discussing the Results of a Validation Study of Vermont’s Ready Kindergartners Survey	E1
568	XXIII: Draft 1 of the Vermont Early Learning Standards: Guiding the Learning and Development of Children from Infancy through Third Grade	E1
668	XXIV: The Key to Good Policy, Smart Decisions and Wise Investments: Vermont’s Roadmap for an Early Childhood Data Reporting System	E2
690	XXV: Reference List	All sections