Project Summary/Abstract

Project Title: Illinois Preschool Development Grant Birth Through Five (PDG B-5) Renewal

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Illinois is committed to ensuring equitable access to high-quality Early Childhood Care and Education (ECCE) in a mixed delivery system for all children birth to five (B-5). Through its Initial PDG B-5, the State identified significant gaps in both the availability and quality of ECCE services, as well as areas where greater alignment across systems is needed. Through this PDG B-5 Renewal, Illinois will strengthen system alignment and lay the foundation for scaling a high-quality, efficient system that is responsive to families' needs. Illinois' Needs Assessment and Strategic Plan will be updated and enhanced through input from families, stakeholders, and governance bodies, and the plan will serve as a "living document" reflecting our progress.

Illinois' Renewal application reflects a strong emphasis on family engagement with the goal of delivering ECCE services that are responsive to family needs. We will engage families in policymaking through the Family Advisory Committee of the Early Learning Council (ELC). We will also conduct Parent Cafés built upon protective factors to connect families to services and to each other around topics that reflect expressed interests.

Illinois is prioritizing supports for infants and toddlers in our proposal to expand Coordinated Intake (CI) beyond the existing Maternal, Infant, and Early Childhood Home Visiting (MIECHV) communities, connecting more families to home visiting (HV), Early Intervention, and other ECCE services. In addition, we will prioritize supports for children and families transitioning from ECCE to kindergarten by scaling local school district and community partnerships implementing promising practices to support the transition.

In the Renewal, Illinois will deepen alignment across professional development (PD) systems to share best practices and will expand both practice-based coaching and evidence-based programs to support children's social/emotional development and address trauma. Workforce development supports, including financial assistance, course modularization, and cohorts for completing degrees and credentials, will build the highly-skilled, diverse ECCE workforce Illinois needs.

Expansion of high-quality early learning opportunities in child care settings will be supported with PDG B-5 Renewal funds through subgrants to support enhanced rates, increased staff compensation, improved staff-to-child ratios, and support for continuous quality improvement (CQI), with a focus on rural areas and programs serving infants and toddlers.

Finally, Illinois' application reflects a commitment to using high-quality data to inform cross-agency decision making. Illinois will standardize ECCE data across systems and construct a platform for replicable, comprehensive analysis; construct a more accurate and comprehensive unduplicated count of children served by publicly-funded systems; and enhance performance measurement of the full ECCE system to support state and local decision-making and improve outcomes for Illinois children and families.

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PM – Pyramid Model

QRIS – Quality Rating and Improvement System T&TA – Training & Technical Assistance

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| Key Acronyms AIR – American Institutes for Research | |
| CCR&Rs – Child Care Resource & Referral Agencies | |
| CI – Coordinated Intake | |
| CoPs – Communities of Practice | |
| CQI – Continuous Quality Improvement | |
| ECBG – Early Childhood Block Grant, state funding mechanism for pre-k and 0-3 services | |
| ECCE – Early Childhood Care and Education | |
| ELC – Illinois Early Learning Council | |
| GOECD – Illinois Governor's Office of Early Childhood Development | |
| HS/EHS – Head Start and Early Head Start | |
| HV – Home visiting IDEA – Individuals with Disabilities Education Act | |
| IDHS – Illinois Department of Human Services | |
| IECAM – Illinois Early Childhood Asset Map, a key ongoing needs assessment tool | |
| I/ECMHC – Infant and Early Childhood Mental Health Consultation | |
| INCCRRA – Illinois Network of Child Care Resource & Referral Agencies | |
| ISBE – Illinois State Board of Education | |
| KIDS – Kindergarten Individual Development Survey | |
| MIECHV – Maternal, Infant, and Early Childhood Home Visiting Program | |
| PD – Professional Development | |

Introduction: Illinois has long been a leader in developing a high-quality mixed delivery system for ECCE for children B-5. Illinois was the first state to establish a statutory goal of providing universal access to preschool for both three- and four-year-olds (with approximately 80% of low-income threes and fours now served through Preschool for All and/or Head Start). Through its Early Childhood Block Grant (ECBG) birth-to-three set-aside, the State has ensured that education funding for infants and toddlers grows as preschool funding grows. Illinois' Child Care Assistance Program (CCAP) has policies that encourage and support blending and braiding of funding with ECBG and Head Start/Early Head Start (HS/EHS), and it has no waiting list for subsidy. ExceleRate Illinois, the State's Quality Rating and Improvement System (QRIS), is truly cross-sector, providing a common set of tiered program standards that support aligned monitoring systems across schools, child care centers and homes, and HS/EHS.

However, despite this strong history, Illinois has identified several key gaps in its ECCE system. Access to services remains uneven by geography and by age group, and only about one in five CCAP children are enrolled in programs in the Gold Circle of Quality, ExceleRate's highest level. Low compensation for child care staff and a lack of coherent pathways for degree and credential completion continue to present barriers to building the highly-skilled and diverse workforce Illinois needs to scale up its ECCE system. Funding mechanisms are fragmented, fail to provide sufficient and stable funding to programs, and produce an inequitable distribution of resources across the state. Likewise, existing ECCE data systems are fragmented and fail to provide coherent cross-system information about the extent to which the system is adequately and efficiently addressing families' needs. Finally, the system is insufficiently driven by input from families about their needs and preferences.

Illinois will strategically use this PDG B-5 Renewal as part of a larger effort to

"reimagine" our B-5 ECCE system to ensure access to high-quality ECCE for all children birth to age five. Governor JB Pritzker, a longtime champion of early childhood and particularly infant/toddler services, is committed to making Illinois' ECCE system the most effective and equitable in the nation.

Activity One: PDG B-5 Statewide Needs Assessment

A) Needs Assessment Process and Status: Illinois' first comprehensive periodic statewide Needs Assessment is on track to be completed by January 2020 (in compliance with the no-cost extension granted to Illinois). It builds on more than a decade of investment in infrastructure for ECCE needs assessment, including the Illinois Early Childhood Asset Map (IECAM), which annually updates demographic and ECCE service data broken out by multiple levels of geography (note: State funding for IECAM comprises part of the required match). The Needs Assessment has drawn upon several key analyses completed in the past two years, including: a county-level "Risk and Reach" report that examined 15 risk indicators and 17 indicators of public program reach in the areas of family stability, health, and ECCE; a county-level supply and demand analysis of ECCE B-5; a school-district-level analysis of the availability of publicly funded preschool; and analysis of HV availability. The following describes Illinois' plan for completing the Needs Assessment, partners engaged, and status:

| Needs Assessment Process (M=Milestone; R=Requirement) | Partners | Status and Timeline |
|---|-----------------------------|---------------------|
| M: Literature review of best practices for needs | To complete the literature | Completed |
| assessment components, methodologies, analyses, | review and analysis of | Sept. 2019 |
| and stakeholder engagement | needs assessments, | |
| R: Definition of key terms | American Institutes for | |
| R: Quality and availability of ECCE | Research (AIR) | |
| R: Gaps in data or knowledge | collaborated with the Early | |
| R: Issues involving ECCE facilities | Learning Council (ELC, | |

| M: Analysis of Illinois' state and federally | Illinois' State Advisory | Completed |
|---|------------------------------|------------|
| required needs assessments and other existing | Council) and previous | Oct. 2019 |
| needs assessments | needs assessment authors. | |
| R: Description of populations of children | | |
| R: Transition supports and gaps | | |
| M: Three external stakeholder focus groups and | AIR in collaboration with | Completed |
| analysis | CCR&Rs across the state | Oct. 2019 |
| M: Updated ELC Research Agenda | AIR, in collaboration with | Nov. 2019 |
| R: Most important gaps to fill in data or | the ELC's Data, Research, | (on track) |
| knowledge | and Evaluation | |
| M: Set of research plans to fill gaps in data and | Subcommittee | Nov. 2019 |
| knowledge, support strategic planning and | | (on track) |
| collaboration between programs and service, and | | |
| maximize parental choice | | |
| M: Early Childhood Matching Project Phase 3 | Northern Illinois University | Dec. 2019 |
| R: Unduplicated number of children served by | | (on track) |
| public funds | | |
| M: Statewide ECCE cost model | Northern Illinois University | Dec. 2019 |
| R: Analysis of cost of quality and barriers to | | (on track) |
| funding and provision of ECCE | | |
| M: Statewide Performance Measurement Plan | University of Illinois, in | Jan. 2020 |
| R: Measurable indicators of progress aligned | collaboration with AIR and | (on track) |
| with state's vision | ELC and aligned to | |
| | Strategic Planning timeline | |
| M: Statewide B-5 early childhood needs | AIR in collaboration with | Jan. 2020 |
| assessment report | partners listed above | (on track) |

B) Spotlight on Collaboration: AIR's work to complete a statewide Needs Assessment includes engagement with content area experts and stakeholders such as the ELC, authors of various needs assessments, families, community members, and providers involved in the ECCE system. AIR collected 40 needs assessments and 41 additional reports considered "needs assessment adjacent" from stakeholders across the ECCE system. AIR reviewed the family and community engagement components of these existing statewide B-5 needs assessments and conducted three of its own focus groups. These focus groups engaged families and service providers from across the state, as well as researchers and policymakers, to validate and seek input on the Needs Assessment. As the Needs Assessment is finalized, it will undergo an additional round of feedback and validation through the ELC.

C) Plans for Further Updates: Initial findings from AIR indicate that while Illinois has numerous high-quality reports assessing needs in various parts of the ECCE system, significant gaps remain in creating a comprehensive needs assessment. Knowledge gaps are typically A) topic-specific, such as a lack of in-depth information on the quality and availability of ECCE services for children in rural areas, or key concerns related to ECCE facilities, or B) caused by a lack of comprehensive data across program types and funding streams. Further, there are gaps in information about families' needs and experiences from their own perspective.

In Renewal Year One, Illinois will focus on addressing data gaps identified through the initial PDG B-5 Statewide Needs Assessment, prioritizing qualitative analysis to better understand how families engage with the ECCE system, what their needs are, and how the ECCE system might better address those needs. This work will involve surveys as well as statewide focus groups and listening sessions, and sample selection will ensure broad representation across geography, race, language, disability status, child age group, and socioeconomic status. The ELC's Family Advisory Committee and All Families Served Subcommittee will provide advisory support to this effort. This collection of family voice will provide crucial input to the Illinois Commission on Equitable Funding for Early Childhood Care and Education (the Governor's ECCE Funding Commission, described in more detail on p. 11).

The process for addressing broader data gaps will be aligned with Activity Six project timelines, with priority given to data needed to complete a performance measurement dashboard based on the Needs Assessment's performance measurement plan and aligned to the state's vision and desired outcomes as described in the Statewide Strategic Plan. As proposed in the strategic planning and performance measurement cycle in Activity Six (p. 43), in Renewal Year Two Illinois will conduct an updated statewide needs assessment to incorporate improvements to

data accessibility, cleanliness, and integration completed through Activities One and Six. This will inform an updated Strategic Plan in Renewal Year Three. Additionally, IECAM will continue to complete annual updates of demographic and service utilization data to support statewide and community-level supply and demand analyses for ECCE services.

Activity Two: PDG B-5 Statewide Strategic Plan

A) Strategic Planning Timeline and Deliverable Schedule: Illinois' Statewide

Strategic Plan is in process and scheduled to be completed by February 2020 (in compliance with the no-cost extension granted to Illinois). The Illinois Governor's Office of Early Childhood

Development (GOECD) has partnered with AIR to develop the comprehensive plan, and they have engaged the ELC and numerous other stakeholders in their process (p. 49). A key starting point for the work was a set of 20 focused strategic plans (including plans for the Child Care Development Fund, State pre-k and home visiting expansion, maternal and child health, Early Intervention, and ECCE mental health services) that the state has completed over the past four years, each informed by their own extensive stakeholder engagement process. The chart below describes Illinois' plan for completing the comprehensive Strategic Plan and current status.

| Strategic Plan Completion | Status and |
|---|------------|
| (M=Milestone; R=Requirement) | Timeline |
| M: Complete work plan for the development of the strategic plan. | Completed |
| R: Broad stakeholder engagement | Aug. 2019 |
| M: Review Illinois' existing strategic plans. | Completed |
| | Oct. 2019 |
| M: Produce draft strategic plan. | Nov. 2019 |
| R: Multisystem, statewide Strategic Plan that encompasses services for | (on track) |
| children prenatal to age five (including ECCE, health, mental health, nutrition, | |
| social services, Early Intervention, ECCE special education, and others) | |
| R: Identifies collaborations to leverage policy alignments and improve quality | |
| and coordination | |
| R: Addresses transitions across birth to age eight | |
| R: Provides framework for increasing participation in quality programs | |

| R: Assesses statutory requirements that pose barriers | |
|--|------------|
| R: Identifies indicators to track progress | |
| R: Describes governance and decision-making processes | |
| R: Describes involvement of the ELC | |
| M: Facilitate and conduct stakeholder engagement activities to obtain input on the | Dec. 2019 |
| draft strategic plan. | |
| R: Comprehensive inclusion of stakeholders representing parents, providers, | |
| program administrators, and all other stakeholders impacted by the work | |
| M: Provide Final Strategic Plan with plan for periodic updates. | Feb. 2020 |
| | (on track) |

While the full Strategic Plan is still under development, a range of stakeholders convened by the ELC has adopted a strategic **vision** and four broad **goals** (see the table below).

Stakeholders included members of the ELC, state agency representatives, ECCE service providers, families, faculty and staff from institutions of higher education, and philanthropists.

The ELC was purposeful in including **comprehensive support services stakeholders** whose work is often considered adjacent to ECCE systems, such as representatives from the Department of Public Health, the Department of Healthcare and Family Services (the state Medicaid agency), agency staff managing Early Intervention (IDEA Part C) and Early Childhood Special Education (IDEA Part B Sec. 619), and the Department of Human Services' (IDHS) Family and Community Services staff, who oversee broader social services such as TANF and WIC.

| Vision: We envision Illinois as a place where every young child – regardless of race, ethnicity, | | | |
|---|--|--|--|
| income, | income, language, geography, ability, immigration status, or other circumstance – receives the | | |
| strongest possible start to life so that they grow up safe, healthy, happy, ready to succeed, and | | | |
| eager to learn. | | | |
| Goal 1 | Improve kindergarten readiness and the prenatal-five services that support readiness | | |
| Goal 2 | 2 Develop and support a well-compensated, competent, and diverse workforce to | | |
| | deliver the services families need across all settings | | |
| Goal 3 | Support family navigation of the system | | |
| Goal 4 | Build stronger and more effective state and local governance structures | | |

This vision and these goals provide the framework for how Illinois will increase access to and participation in high-quality ECCE programs, services, and settings within our mixed delivery

Assessment. Preliminary strategic goals and objectives in the Strategic Plan will be organized by the four goal areas with an indication of whether they address the following objectives in Illinois' Logic Model (p. 51): 1) expanding **equitable access** to ECCE services, especially for target populations; 2) **coordination** across multiple ECCE services; and 3) improving **quality** of ECCE services. Implementation of the Strategic Plan will begin with Illinois' PDG B-5 Renewal, whose activities align with the above strategic goals and objectives.

B) Learning from the Initial PDG B-5: The following is a summary of learnings from the Initial PDG B-5. The implications of the ways in which Illinois is building upon these learnings appear in the narrative for each respective Activity section.

| Focused Planning Areas | Lessons Learned and Resulting Planned Activities |
|------------------------|--|
| Improved | Illinois explored barriers to existing efforts for coordinated enrollment or |
| Coordination and | centralized eligibility built upon Coordinated Intake (CI) for home |
| Collaboration | visiting (HV) and other ECCE services. In response, Illinois will launch |
| among ECCE | a CI pilot in Renewal Year One as the first step toward phasing in |
| Programs through | statewide regional points of entry; we will add HS/EHS as a partner in |
| CI Expansion | creating CI expansion hubs (p. 52). |
| Expanded Access | In the Initial PDG B-5, Illinois created a focused plan to increase access |
| to Home Visiting | to HV for children in child welfare. The priority populations for this |
| and Early | initiative are pregnant women and infants from birth to six months. The |
| Intervention for | plan focuses on the Department of Children and Family Services' |
| Children in Child | (DCFS) Intact Families (families who have had a child welfare |
| Welfare | investigation, but children have not been placed in foster care) and builds |
| | on the structure and lessons learned from the Erikson/DCFS Early |
| | Childhood Project's work with Early Intervention, as well as the Illinois |
| | Pregnant and Parenting Youth in Care HV pilot. In Renewal Year One, |
| | we will implement the plan, and a full-time HV specialist will engage |
| | with at least 100 families to connect them to intensive HV services. |
| Improved | During the Initial PDG B-5, a school district was selected to work with |
| Kindergarten | their local community to develop a pilot implementation plan for a |
| Transitions | transition "promising practice" recommended in the 2018 Kindergarten |
| | Transition Advisory Committee report, led by partnerships between |
| | school districts, ECCE programs, and community organizations. In |
| | Renewal Years One and Two, eight additional communities will receive |
| | resources to implement locally-relevant transition strategies (p. 55). |

| Expanded ECCE | Early CHOICES, an organization that advocates for inclusion of children | | |
|-------------------|--|--|--|
| Services for | with disabilities in ECCE programs, reviewed and analyzed existing data | | |
| Children with | and strategic plans regarding B-5 inclusion in community-based | | |
| Special Needs | programs. Based on stakeholder engagement, Early CHOICES drafted | | |
| | recommendations that have been vetted by a core stakeholder group and | | |
| | inform work proposed in Activities Three (p. 15) and Four (p. 17). | | |
| Improved Quality | Barriers to entering and progressing through credentials for the ECCE | | |
| through Workforce | workforce are many and varied. The workforce strategies identified and | | |
| Strategies | included in this plan are: direct support to educator candidates; cohorts to | | |
| | support candidates with similar education levels and goals; changes in | | |
| | funding structure to enhance compensation; and modifications to higher | | |
| | education approaches to ECCE coursework (p. 17). | | |
| Cross-systems | PD typically supports only one sector of the ECCE system. This plan | | |
| Alignment of | supports cross-system PD alignment and comprehensive implementation | | |
| Professional | of evidence-based initiatives, such as Pyramid Model, program supports | | |
| Development (PD) | for inclusion, and practice-based coaching (p. 18). | | |

Racial Equity: In the Initial PDG B-5, Illinois engaged the ELC in a broad effort to increase racial equity in the ECCE system. The ELC held two racial equity retreats, which along with subsequent work of the ELC standing committees produced consensus on a racial equity definition and identified four racial equity priorities: 1) align and standardize race/ethnicity data collection and reporting; 2) evaluate and identify whether processes for distributing resources exacerbate racial disparities, including agency contracting; 3) address race/ethnicity disparities in workforce compensation and advancement; and 4) eliminate racial/ethnic disparities for children participating in all programs that contribute to school readiness and life success by addressing racial disparities in preschool enrollment and prenatal-to-three services. ELC committees developed workplans, which will be implemented in the Renewal period, and these racial equity goals have deeply informed the choice of projects that are included in this PDG B-5 Renewal.

C) Implementing and Updating the Strategic Plan: Illinois will fully update its

Statewide Strategic Plan in Renewal Year Three. (See p. 43 for the Strategic Planning and

Performance Measurement Cycle.) Activities will include: 1) updating the Needs Assessment; 2)

working with ELC committees, subcommittees, state agencies, the Governor's Office, and other

stakeholders to assess the implementation of the Plan; 3) facilitating ELC Strategic Plan working group meetings; 4) participating in special strategic planning meetings with state and community leaders as requested; 5) reviewing strategic plan implementation barriers including federal, state, and local statutory requirements to identify any barriers to future coordination; 6) conducting a best-practice analysis of how other states have addressed strategic barriers; 7) conducting interviews with key stakeholders and state strategic plan implementers; 8) creating and conducting public statewide stakeholder engagement activities such as webinars, surveys, town halls, and focus groups; and 9) updating the Strategic Plan report. A full list of partners to be included in the review and update of the Strategic Plan appears in Activity Six (p. 49).

Funding Alignment: Strategic planning is in process and has not yet resulted in substantial changes in Illinois' ECCE funding alignment or efficiencies. However, in order to better understand the most effective way to align ECCE funding streams (including, at minimum, CCAP, HS/EHS, Illinois' ECBG, Title I, and local education funds) to ensure achievement of our goals, the Governor will establish an ECCE Funding Commission in November 2019. The Commission's goals are to: 1) determine the full funding need for an atscale, high-quality ECCE system for Illinois; 2) clarify the State's ECCE funding priorities; 3) determine the most effective mechanisms for equitably distributing ECCE funding; 4) determine whether ECCE governance changes are necessary to implement equitable funding; and 5) structure a management and performance measurement system that tracks equitable access to and the quality and effectiveness of ECCE services. Initial preparations for the Commission have accomplished the following: 1) built a fact base on the state of ECCE funding in Illinois, including obstacles to efficient alignment of funding streams and equitable access to quality ECCE; 2) benchmarked "what good looks like" through focused research on the ECCE funding

systems of other states; and 3) developed sample analyses to illuminate possible approaches to funding, such as creating a funding formula for preschool. The Commission will be charged with developing a "re-imagined" ECCE funding approach, informed by the Statewide Strategic Plan, that will maximize equitable access to ECCE, stabilize funding for providers, and allocate sufficient funding to support high-quality and effective services.

Activity Three: Maximizing Parent & Family Knowledge, Choice, & Engagement

Overview: Illinois proposes projects to learn from parents what they want and need to know and to engage them in appropriate programs, their children's development and learning, and improving systems and policy. Additionally, Illinois prioritizes family knowledge, choice, and engagement in all ECCE efforts, and has incorporated this priority into several other Renewal Activities. This work is described below and focuses on: A) parent and family education and engagement; B) connecting families to services; C) addressing families' child development concerns; and D) family leadership in improving the mixed delivery system.

A) Parent and Family Education and Engagement: Renewal Year One Needs

Assessment work will focus on filling gaps in knowledge about how families engage with

Illinois' ECCE system and what they want and need to know (p. 6). Findings from this work,
which will consist of focus groups and surveys, will support decision-making in the Governor's

ECCE Funding Commission and within the state agencies on how to better inform, empower,
and engage families in the mixed delivery system. In addition, parents and families have been
and will be engaged in Strategic Plan development through AIR's focus groups.

Additionally, Illinois will continue Parent and Community Cafés (Cafés) to develop parent leadership skills, strengthen families' relationships with providers and other stakeholders, and inform families about resources across the B-5 system. Cafés engage small, peer-to-peer groups of families, providers, and community stakeholders in rounds of dialogue on a specific

topic facilitated by trained parent leaders. Community partners that will support and participate in the Cafés include ECCE programs, pediatric health care providers, mental and public health care providers, WIC offices, neighborhood centers, community-based family resource centers, schools, faith-based organizations, immigrant and refugee agencies, homeless assistance programs, housing services, and other child and family serving agencies. Engaging these partners in dialogue with parents and families will both ensure these providers better understand families' needs and help **inform families and connect them to services in the community.**

In the Initial PDG B-5, the Illinois Head Start Association (IHSA) designed and piloted Cafés on two topics: the importance of school attendance in the early years (mitigating early chronic absenteeism) and supports for children with challenging behavior. Parent Leadership Institutes (trainings for parents to be Café facilitators and hosts) were held and parent leaders were recruited and trained to host and facilitate four successful Cafés in two urban and two rural HS/EHS programs. During the PDG B-5 Renewal, IHSA will develop three new Cafés and Parent Leadership Institutes, and after piloting and evaluating these new Cafés, will coordinate Cafés reaching approximately 1,000 families per year for the three years of the grant. Times, locations, and Café topics will be determined based on parents' feedback and in relation to ELC priorities. The protective factors that the Cafés will address are social connections, knowledge of parenting and child development, and children's social/emotional competence. Parent Leadership Institutes will be presented in English, Spanish, and at least one other language, ensuring that Café facilitators and hosts will be culturally and linguistically representative of the communities of the Café members (note: Illinois does not have tribal lands). Materials will be available in multiple languages, and child care and other incentives will be provided. These

efforts will result in an increase in trained parent facilitators, parent peer-to-peer networks, strong family relationships, and parent knowledge of ECCE services.

Finally, a design audit of the ExceleRate Illinois QRIS website was among our Initial PDG B-5 efforts to improve the availability and usability of information for families about highquality ECCE programs. The ExceleRate website is intended to help families make informed choices about ECCE options within a mixed delivery system. Its search feature provides families with options for ECCE based on where they live, age of child to be served, and schedule of care needed, and indicates the ExceleRate Circle of Quality providers have earned. Feedback from families and providers indicated that website navigation was a challenge and the content was unclear; in addition, families wanted access to information in their preferred language. In response, Illinois priced translation services and conducted an assessment for compliance with accessibility guidelines and standards for users with special needs. The focus of Renewal Year One will be to carry out the recommended structural changes, translations (into Spanish and Polish), and improvements to the early childhood program search feature, which will link directly to child care licensing monitoring reports on the DCFS Sunshine website. Renewal Year Two will involve continued development and translation of content and focus groups or surveys with parents to obtain feedback. Additional feedback methods will include on-screen feedback collection, user activity tracking, and reporting on findings and potential actions, which will inform future enhancements.

B) Connecting Families to Services: Through the CI expansion pilot (p. 52), families will be connected to HV, ECCE, and family support services based on families' needs and choices. The pilot will be implemented by selected Child Care Resource & Referral Agencies (CCR&Rs) and HS/EHS sites, which have recognized expertise in connecting families to ECCE

and comprehensive services. As part of this expansion, families enrolled in Medicaid Managed Care will be linked to their Care Coordinator for any needed medical and behavioral health services. Pilot sites will obtain input from families on outreach messages, intake procedures, and referral decision trees prior to rollout. To accomplish this, the pilot sites will use existing local family engagement mechanisms, such as HS/EHS Parent Committees and Policy Councils. In addition, as part of CQI, CI workers will conduct surveys or interviews with families that have participated in CI to gather their experiences and feedback. This information will be used to make modifications at the local level as well as inform broader policies and plans to scale the pilot throughout the remaining term of PDG B-5 Renewal.

Additionally, through the Cafés described above, participating families will be connected to community partners that sponsor or support the Cafés, as well as to the nearest IDHS Family and Community Resource Center, which are "one stop centers" for TANF, SNAP, job services, and other income supports. The following chart details active partnerships that GOECD has developed to ensure families statewide are informed about and connected to needed services.

| Active Partnerships | Services | | |
|-----------------------|--|--|--|
| IDHS | Family and Community Resource Centers: income assistance, job | | |
| | services, etc. | | |
| HS/EHS | Parent Cafés, leadership development, connection to community | | |
| | services | | |
| CCR&Rs | CI expansion, family engagement in CI, connection to ECCE | | |
| ELC | Support of Family Advisory Committee, family engagement in | | |
| | state-level policy making | | |
| Early CHOICES | Education, information, and inclusion in B-5 ECCE programs | | |
| Healthcare and Family | Managed Care Organizations' Care Coordinators connect families | | |
| Services (Medicaid) | to medical and behavioral health services | | |

C) Supporting Families' Child Development Concerns: Early CHOICES, the state's existing inclusion supports Training & Technical Assistance (T&TA) provider, used Initial PDG B-5 resources to partner with Early Intervention (IDEA Part C), Early Childhood Special

Education (IDEA Part B Sec. 619), families, the ELC's Inclusion Subcommittee, and Early Childhood Least Restricted Environment stakeholders to revise trainings, develop new and updated resources, translate materials for public awareness around inclusion, and develop new strategies for public awareness. Public awareness materials have been updated, and Initial PDG B-5 translation into Spanish, Polish, Arabic, Urdu, and French are in process.

PDG B-5 Renewal funds will allow Early CHOICES to expand supports for families with children B-5 who have an existing disability or are at risk of a developmental delay by providing resources, community training, and coaching to families on the following efforts: understanding eligibility for IDEA special education services; accessing B-5 IDEA programs and services, including developmental screenings; understanding families' rights to inclusion in ECCE programs; and navigating the ExceleRate Illinois system to locate high-quality inclusive programs. These efforts will include families with English as a second language through bilingual staff and interpretation services. This project will also increase families' voice in public awareness messaging on successful inclusion in all settings and will employ social media platforms for messaging and broadening access to resources. This effort supports the work in Activity Four on PD for understanding services available, eligibility criteria, and meaningful inclusion (p. 20).

D) Family Leadership in Improving the Mixed Delivery System: In January 2016, the ELC created a Family Engagement Implementation Subcommittee to increase parent voice in the ELC's work and in the development of Illinois' ECCE systems and policies at both the community and statewide levels. After much careful planning, the Subcommittee proposed the formation of a Family Advisory Committee (FAC) to promote engagement of parents and families in ECCE strategic planning and policy decision making.

Through the Initial PDG B-5, this Subcommittee of families and family engagement stakeholders established FAC representation on the ELC and defined the FAC structure and outreach process. Through the PDG B-5 Renewal, the Subcommittee will convene a meeting of cross-sector parent representatives to provide input on the formation of the FAC, hire a statewide coordinator, and populate the FAC to equitably include urban, suburban, and rural communities. Once the FAC is formed, additional activities will include orientations for parent representatives and ELC members, convening of quarterly statewide FAC meetings, and parent appointments to the ELC to inform statewide policy. To ensure inclusion of families with English as a second language, translators and interpreters will be retained for outreach materials and meetings.

Sustained support for parents to participate in the FAC will include parent stipends, child care, transportation, and other supports. The full implementation of the FAC by the end of Renewal Year One will institutionalize parent leadership and advocacy in strategic planning, goal-setting, and the review, revision, and development of policies and practices.

Additional family leadership development is described in Activity Four under a project to connect ECCE and kindergarten PD through Pyramid Model Implementation (p. 21). This project will require family engagement on a leadership team whose structure allows parents to be partners in decision making in their child's education, gain confidence as advocates for their children, serve as mentors to other families, and increase their effectiveness as communicators for their children.

Activity Four: Sharing Best Practices & Professional Development for the Workforce

Overview: Illinois will share best practices and professional development (PD) for the mixed delivery ECCE workforce via four approaches: A) improving the training and workplace experience of B-5 ECCE providers; B) credential alignment in the PD registry; C) aligning

credentials to build an ECCE career ladder; and D) increasing the availability of qualified providers. These approaches will help to align credentials, certifications, and coursework across PD and higher education to support a cohesive career ladder and will increase the availability of qualified providers throughout the state, especially in rural and other hard-to-staff areas. The PDG B-5 investments will complement the extensive investment in PD for the B-5 ECCE system the State is making with matching funds.

A) Improving Training and Workplace Experience of B-5 ECCE Providers: In 2017, Illinois passed Public Act 100-0105, which severely curtails ECCE programs' ability to expel or suspend children B-5 due to their behavior. This law highlights the need to provide best practice supports to the ECCE workforce to better support children's social/emotional development and to reduce, and ultimately eliminate, suspensions and expulsions from ECCE programs. The PDG B-5 Renewal will support three years of expanded training across a range of B-5 ECCE roles (home- and center-based child care providers, lead and assistant teachers, early interventionists, home visitors, supervisors, I/ECMHCs, administrators, coaches, and T&TA providers) and across ECCE program types to build shared understanding and connections across ECCE and health and human service providers that serve families with young children. This training is summarized in the table below and then described in greater detail.

| Approach | Reach and Target B-5 Audience |
|-----------------------------------|---|
| 1. Interdisciplinary PD: Pyramid | Approximately 180 PD providers in: |
| Model PD | - ISBE ECBG and IDEA Part B Sec. 619 |
| | - Child care (home and center providers) |
| | - I/ECMHC |
| | - HS/EHS |
| | - Early Intervention |
| 2. Interdisciplinary PD: Practice | Approximately 220 PD providers in: |
| Based Coaching Training and | - Illinois State Board of Education (ISBE) ECBG |
| Communities of Practice (CoPs) | and IDEA Part B Sec. 619 |
| | - Child care (home and center providers) |
| | - I/ECMHC |

| 3. | Trauma-Informed Care approach: ePyramid Modules (online training) | Early Childhood Instructional Leaders, internal coaches in comprehensive Preschool for All-Expansion (three-to-five) programs. Approximately 95 programs in: ISBE Preschool for All-Expansion Child care (home and center providers) HS/EHS |
|----|--|---|
| 4. | Trauma-Informed Care approach: FAN training, mentoring, and CoPs | Approximately 360 programs in: - ISBE ECBG: supervisors, family educators, HVs - HS/EHS: coaches, family support, HVs, supervisors |
| 5. | Inclusion Strategies: PD for Meaningful Inclusion | Comprehensively support two communities across: - ISBE ECBG and IDEA Part B Sec. 619 - Child care (home and center providers) - Home visitors - Families - Early Childhood Community Collaborations |
| 6. | Enhancing PD Strategies: Connecting ECCE and Kindergarten PD through PM Implementation | Approximately 70 programs: - ISBE Preschool for All-Expansion - Head Start |

Pyramid Model (PM) PD: The PM is a conceptual framework of evidence-based practices for promoting young children's healthy social/emotional development. This effort will focus on interdisciplinary PM PD to support trainers and coaches across ECCE and health and human services providers. This project will grow the qualified PM PD workforce to meet the needs of job-embedded PD for ECCE programs, leading to improved outcomes for children.

Practice Based Coaching (PBC) Training and Communities of Practice (CoPs): Illinois will facilitate trainings and CoPs on PBC with B-5 ECCE PD providers through implementation of PM practices. PBC supports B-5 ECCE PD providers' implementation of evidence-based strategies via adult learning and job-embedded PD. This effort will expand PBC to B-5 ECCE PD providers currently not captured in PM efforts. This project will lead to PD providers using evidence-based practices in job-embedded PD with teachers; PBC increases effective teacher-child interactions leading to improved child outcomes.

EPyramid Modules: Additionally, two online ePyramid Modules to support trauma-

informed care will be implemented with programs implementing the PM: 1) Trauma-Informed Care & the Pyramid Model, and 2) Wellness: Taking Care of Yourself. I/ECMHCs will facilitate the learning activities in these ePyramid modules to support implementation and reflective practices. These ePyramid modules apply a trauma-informed lens to existing PM practices, helping staff promote children's social/emotional development, healing, and resilience. Additionally, addressing staff wellness reduces workforce turnover and when staff feel well, they are better equipped to implement high-quality care for children, leading to better outcomes.

Facilitating Attuned iNteractions (FAN): The content and processes Illinois will use to support B-5 ECCE providers are built upon the current PM system and FAN with an emphasis on trauma-informed practices. The FAN is a conceptual framework for achieving attunement in relationships and reflective practice; it has been shown to strengthen providers' skills in building effective relationships with children and parents. This effort will focus on building reflective capacity and enhancing coaching skills of home visitors, family workers, program coaches, and supervisors through CoPs, mentoring, trainings, and training of trainers. Strengthening staff members' capacity to provide empathic listening and building internal mentoring supports has been shown to decrease staff burnout and turnover.

PD for Meaningful Inclusion: Illinois is focused on strengthening the workforce to support the fundamental developmental needs of all young children through special education and family engagement. This effort will support Early CHOICES in the first step toward creating a statewide system to expand meaningful inclusion of young children in community-based B-5 ECCE programs. Currently, Early CHOICES provides supports to programs on high-quality inclusion via PD to primary school-based programs funded through ISBE Part B Sec. 619. Two communities will be chosen to expand a community-wide approach to inclusion that provides PD

(including T&TA, coaching, and leadership supports) to families and B-5 ECCE providers. In an effort to support inclusion in Illinois' mixed delivery system, models of exemplary practices in inclusion will also be established to support Local Education Agencies when planning to serve infants, toddlers, and preschoolers. This expansion will include universal developmental and social/emotional screening supports and referral practices using the Ages and Stages Questionnaire (ASQ) and the ASQ: Social/Emotional for children B-5. This project is expected to increase the number of high-quality child care settings supporting meaningful inclusion of children with disabilities in child care.

ECCE and Kindergarten Pyramid Model Training: Additionally, aligning ECCE and kindergarten PD through PM Implementation will support the collaboration between current HS and Preschool for All-Expansion cohorts with consistency of practices across ECCE and kindergarten, providing continuity for children and building connections among staff. The before and after school programs that are affiliated with the kindergartens will also be engaged in the PM practices supports, further extending the continuity for children. Embedding the high-quality PM framework across grades and settings will produce positive staff relationships, engaging environments, and best practice teaching strategies that will improve children's behaviors and outcomes in social/emotional development on Illinois' kindergarten readiness assessment, the Kindergarten Individual Development Survey (KIDS).

Rationale: Research is clear that children's interactions with the adults in their lives has the most profound impact on learning and development. The evidence-based approaches described above represent a cross-system effort to support the implementation of evidence-based teaching and care practices. Expected Results: 1) Coaches will be better equipped to use evidence-based strategies to support ongoing adult learning and PD; 2) administrators and

supervisors will be better able to support their staff through reflective supervision; 3) teachers, caregivers, and home visitors will be more knowledgeable and better able to implement trauma-informed practices with children in their care and help support parents' engagement in their children's learning and development; and 4) children will be supported in mixed delivery inclusive learning settings. Building these structures for cross-system PD will increase collaboration, produce consistent, ongoing training for trainers and coaches, be cost effective, and grow the number of qualified trainers and coaches to meet the needs of the ECCE programs, leading to improved outcomes for children.

B) Credential Alignment in the PD Registry: Building on Illinois' Race to the Top-Early Learning Challenge (RTT-ELC) investments, Illinois plans to further enhance and align the comprehensive Gateways Credentials. Gateways currently includes the following credentials, each with up to six stackable levels (entry level to master's degree): Early Childhood, Infant-Toddler, Family Child Care, School Age and Youth, Family Specialist, Director, and Technical Assistance. Enhancements will support the collection of training and evaluation data across the ECCE PD programs to better assess and support the needs of our ECCE workforce.

Pyramid Model Trainer and Coach Registry: This project will make changes to the Gateways Registry to clearly identify approved PM trainers and coaches and track PM trainings. The current system allows State-funded, private, and consultant PD providers to self-identify as PM trainers and coaches without quality assurance standards and processes, and the system does not currently track PM-specific training delivery and course information. In the first six months of Renewal Year One, the Illinois PM Statewide Leadership Team PD workgroup (representing private and State PD systems) will develop guidelines for the PM PD Registry classification. When the PD provider's annual profile update is due (Gateways users must update their profiles

every 12 months), they will only be able to identify as a PM PD provider if they meet the new guidelines. A search feature will allow ECCE programs (especially rural) to find qualified PM PD providers, and the Registry will correctly track PM trainings. *Rationale*: Illinois needs more accurate tracking of qualified PM PD providers and trainings. *Expected Outcome*: A unified and aligned PM PD registry of trainers and coaches and quality data on PM training and coaching.

Registry data system to clearly define the position of home visitor and to ensure appropriate classification for new and existing users. The current system's ambiguity has allowed for many educators who are not staff in evidence-based HV programs to incorrectly categorize themselves as such. When educators' annual profile update is due, these Registry members will be required to redefine their profession using the new categories. GOECD will convene stakeholders (including home visitors, Early Intervention providers, Family Support staff, and home-based child care workers) to provide input and pilot testing before full rollout to ensure that the changes have the intended result. The updates to this Registry will be completed in Renewal Year One. Rationale: Improvements will correctly categorize home visitors, creating a better understanding of credentials and turnover so these issues can be strategically addressed. Expected Outcome: An aligned and accurate HV workforce registry, including basic demographics, educational backgrounds, credential attainment, and position tenure and turnover.

Credentialing for HV: In this project, Illinois Network of Child Care Resource and Referral Agencies (INCCRRA), which manages the Gateways Credential system, will design a consistent approach to HV credentialing based on Illinois' recently-developed set of HV competencies. A panel of institution of higher education (IHE) faculty will evaluate the alignment of two existing credentials, the home visitor Child Development Associate (commonly

used by HS/EHS HV) and the Illinois Family Specialist Credential, with the HV competencies in Renewal Year One. In Renewal Years Two and Three, Illinois will use this information to align HV credentialing across HV funders (including, if needed, the development of a new Illinois HV credential) and design and implement a plan to support the field in attaining credentials. *Rationale:* Stabilization and professionalization of the field is a priority focus of the major funders of HV in Illinois (IDHS, ISBE, IHSA, and MIECHV). Home visitors in Illinois have a range of educational backgrounds, and while each model requires home visitors to complete the model's core training, there is no common HV credential across models or funders. *Expected Outcome:* Aligned HV credentialing across funders and a clear pathway to attain credentials.

C) Aligning Credentials to Build an ECCE Career Ladder: This project contains two complementary efforts to develop personalized, responsive programs of study and supports for diverse early childhood educator candidates to attain degrees or credentials. In the first effort, IHEs will partner with ECCE programs to create focused cohorts for educator candidates; IHEs may focus on candidates seeking credentials as a Lead or Assistant Teacher in preschool or infant-toddler classrooms, Family Child Care provider, Program Director, certified bilingual educator, etc. IHEs will provide tailored supports to the cohorts to ensure persistence and degree attainment, which could include: tailored advising and mentoring, job-embedded coaching, technology access and skills support, transportation, child care, credential application fee waivers, and scholarships. Each cohort will serve 20 to 40 participants; Illinois anticipates funding six total two-year cohorts over the Renewal grant period, including at least one focusing on infant-toddler teachers and ECCE educator candidates in rural communities. These cohorts will build on previous successful models that demonstrated positive outcomes in evaluations.

The second effort focuses on modularizing IHE coursework to support early childhood educator candidates working to attain higher qualifications. Illinois has already aligned 96% of postsecondary ECCE coursework at public and private IHEs to the Gateways competencies, which form the foundation of the Gateways Credentials. However, competencies have not been scaffolded within coursework to support student growth, nor is higher education coursework responsive to students' prior professional development or experience in ECCE. Renewal funds will support a consortium of faculty at IHEs to modularize their ECCE coursework, implement assessments of prior learning, implement articulation to course credit aligned to credentials and degrees, and restructure the progression of courses to build from lower- to higher-level competencies and credentials across the Gateways ECCE Credentials spectrum. Rationale: Cohort models have shown success and merit replication. Modularized coursework will make EC credentials more attainable. Expected Outcomes: This project will support 100-200 educators in attaining higher credentials and degrees, especially in rural and underserved parts of the state. In addition, modular coursework will make credential attainment easier, especially for existing ECCE staff that have some training or coursework but have not completed degrees.

D) Increasing Availability of Qualified Providers: This project will provide supports directly to ECCE educator candidates by removing the cost of applying for Gateways Credentials and relieving educators of IHE debt that prevents them from obtaining the transcripts necessary to apply for Gateways Credentials. The project will support up to 5,000 Gateways Credential applicants per year (aligned to demand in prior years under previous fee waivers) and provide modest debt relief (approximately \$250 per educator) to approximately 300 educators. A portion of funds will be targeted to educators in rural areas. This project will complement Illinois' already robust investment in Gateways to Opportunity Scholarships, which provide tuition

support for existing ECCE staff to obtain higher credentials. *Rationale*: Direct-to-educator supports have dramatically increased the number of educators in Illinois seeking to attain additional credentials by clearing costly barriers to receiving postsecondary transcripts and applying for the credentials. *Expected Outcomes*: Increase in the number of credentialed ECCE educators and in the availability of qualified providers, especially in low-income and rural areas.

Activity Five: Improving Quality/Service Integration, Expanding Access (incl. Subgrants)

Overview: Illinois will meet the goals of Activity Five through two initiatives: A) piloting a new cross-sector quality improvement ladder that links tiered program funding with tiered QRIS standards and supports; and B) engaging communities with the greatest unmet need for ECCE services in a planning process to guide expansion.

A) Tiered QRIS/Tiered Funding Pilot: This initiative will test whether a new QRIS focus on CQI, combined with a revised child care funding method aligned with the QRIS standards, will lead to broad-based program improvement in one region of the state. In 2014 under the RTT-ELC, Illinois launched a new cross-sector QRIS system (ExceleRate Illinois) as its primary strategy for improving program quality. The system covers child care, early education programs funded through the state ECBG, and HS/EHS. During 2019, following a RTT-ELC funded evaluation of ExceleRate Illinois, GOECD and the ELC reviewed results and concluded that the system is effective in sorting programs by quality level but not very good as an engine for improvement. Eight hundred of the state's 2,685 centers are at the higher QRIS tiers (Silver and Gold), but many of them entered the system as such. Fewer than 200 have moved up one or more tiers following their initial assessments.

The ELC ExceleRate Subcommittee has identified two primary system weaknesses. First, QRIS standards focus on high-stakes program assessment scores rather than CQI. Many

programs lack cultures and practices that support improvement, and the state lacks a coordinated T&TA approach to CQI. Second, the child care funding system is not designed to support the structural quality requirements of QRIS, primarily staffing levels and compensation. In response to these two weaknesses, the ELC has developed a single tiered QRIS/tiered funding strategy.

CQI Needs: During 2018, QRIS T&TA providers reported a perception that many ECCE programs were unable to take ownership of quality improvement and instead relied on T&TA personnel to "fix" their classrooms in preparation for a program assessment. They reported that quality was sustained only in programs with "cultures of improvement." In response, the ELC has developed a framework of eight CQI component categories and has drafted QRIS standards that reflect them. Selected program leaders with experience implementing one or more of the components are currently participating in CQI CoPs across the state (funded through the Initial PDG B-5) where they share their experiences and techniques. GOECD is collecting their lessons learned to use in a resource guide and training related to this proposed pilot.

Program Funding Needs: Early in 2019, QRIS data revealed a problem in programs' achievement of staff credentialing requirements. Programs reported that child care rate add-ons associated with QRIS were not sufficient to pay credentialed staff, and further analysis confirmed that in any case, rate add-ons rarely resulted in salary increases. Especially in rural areas, staff turnover and shortages threaten the quality and viability of centers. Similarly, the cost of requirements for better staff-child ratios in birth-to-three programs has been an obstacle to program participation at higher QRIS levels.

Planned Overall Strategy: The ELC ExceleRate Subcommittee has engaged in an intensive planning process to address these two issues and has proposed a fundamental systemic change. The proposed pilot will test the Subcommittee's recommendation to establish tiered

structural funding levels matched with revised tiered QRIS standards. Child care centers in the pilot will receive funding through grants rather than certificate (voucher) based funding. Grants will support staffing costs based on required staffing patterns and minimum compensation standards for each program's appropriate QRIS tier. The cost modeling performed through the Initial PDG B-5 has informed cost estimates for this project. As soon as a program employs the required staff, T&TA will be available to help programs reach the associated QRIS professional practice standards at that tier. These revised standards include the new focus on CQI and stronger requirements for serving children with special needs and in families experiencing homelessness (advocates for those populations have been deeply involved in the planning). Upon demonstrating performance at each tier, centers will be eligible for the funding increment tied to staffing standards at the next higher tier. Over time, programs will climb the ladder to the highest QRIS levels, where they will meet the standards for layering child care and state ECBG funding or child care and HS/EHS funding. A comparable model was used successfully by the Chicago Public Schools' Community Partnership Programs to bring licensed birth-to-three programs in centers up to state ECBG standards and therefore expand access to high-quality ECCE services.

A companion strategy for home-based child care programs serving infants and toddlers is being developed. GOECD's QRIS Policy Director will spend 20% of his time guiding the revision of standards and state funding enhancements related to that strategy, and pilot funding to test the strategy will be included in the budget for Renewal Year Two. As currently envisioned, revised standards for home-based programs will add CQI items similar to those for centers and schools, except that reflective practice will take place primarily at the community level through family child care networks, hubs, libraries, etc., and state funding will support those hubs.

Working with Erikson Institute, GOECD developed a vision for networks and hubs last year. It is

anticipated that network staff will support positive provider-child interactions through a mix of Play & Learn groups, home visits, and other activities. When planning is completed, Illinois intends to implement this approach using both Child Care Development Fund (CCDF) and PDG B-5 Renewal funds.

Pilot-Testing of Center-Based Model: The proposed pilot will include 25 child care centers in IDHS's child care cost region two, which covers rural counties in the state. These counties have been identified by IDHS as areas underserved by high-quality ECCE options. Grant funding plus additional child care investments from IDHS will make this option available to all eligible centers in cost region two, reaching an estimated 3,000 children including approximately 1,000 children ages birth through two. The initiative will support the State's CCDF goal to increase high-quality options in underserved communities. Pilot program components will consist of: A) revised IDHS child care contracting formulas and format; B) grant funding for staffing patterns and compensation that covers the differential between subsidy rates and the defined costs for meeting QRIS standards at each tier; C) use of a new, test version of QRIS standards including CQI components; D) revised program assessment schedule to provide early baseline data for programs' improvement planning; E) revised T&TA services aligned to the requirements of each QRIS tier; and F) program evaluation to inform future plans for statewide adoption of the system changes. Components B) and C) will entail subgrants to participating child care centers. Components D) through F) will entail subgrants that **indirectly improve quality** through systems enhancement, as described below.

Subgrants to Support Local Programs: All licensed child care centers in the selected counties with at least two operating classrooms for infants, toddlers, and twos will have the opportunity to participate in this pilot. Programs will use the new pilot version of QRIS standards

for improvement planning and execution. A leader from each program will be expected to participate in a leadership development/CQI cohort, CoP, or similar group. As in Illinois' ECBG-funded programs, programs will be required to prioritize children experiencing homelessness.

The project will operate for three years including an initial six-month planning period; it will be supported through implementation and outcomes evaluations over the duration of the project. Ideally, each program will advance one QRIS tier per year, and the pilot will test whether this timeframe is adequate. The project will test changes that could reform the entire IDHS child care system, totaling almost \$1 billion per year, and create a path for centers to improve quality so they can successfully compete for state ECBG and federal HS/EHS funding to layer with child care funds. IDHS is committed to sustaining and expanding the project if it is successful in accomplishing its goals of expanding access to high-quality ECCE.

The following chart summarizes project activities and objectives, showing the roles of state entities, local programs with subgrants, and T&TA providers. Objectives have been drafted to be **SMART** (specific, measurable, achievable, relevant, and time-bound) in nature; the Project Evaluator will periodically revisit the objectives to confirm that they remain SMART. This is true of subsequent Activity Five project objectives as well.

| Project Goal | Test whether new tiered QRIS standards and tiered program funding through grants will create a ladder for programs to advance by approximately one tier each year. | | |
|------------------------|--|--|--|
| Activity | Partners SMART Objective | | |
| Revise Standards & | GOECD | - Staffing and compensation standards and new | |
| Contract | IDHS | QRIS standards finalized by 3/31/2020 and | |
| Requirements | | incorporated in the IDHS contracting format. | |
| Identify Participating | GOECD | - Outreach and selection of programs | |
| Centers & Execute | IDHS | completed by 5/21/2020. | |
| Grants | | - Grants with programs executed by 7/1/2020, | |
| | | 2021, and 2022. | |
| Implement Staffing & | Centers | - Salaries of current center staff adjusted on | |
| Compensation | | 7/1/2020, 2021, and 2022. Additional | |
| Requirements | | required and qualified staff members will be | |

| | | employed within three months after site contract execution. |
|-----------------------|----------------|---|
| Perform Baseline | McCormick | |
| External Assessments | Center | |
| Leadership Training & | McCormick | |
| Capacity Building | Center | - Described in indirect subgrant section below. |
| | T&TA Providers | |
| Formative & | Evaluator | |
| Summative Evaluation | | |

Deliverables specific to local program subgrantees are: A) pay staff members according to State-approved compensation standards; B) employ the contract-specified number of staff members holding required credentials; C) maintain the contract-specified staff-child ratios; D) engage site-based staff team(s) in the CQI reflection, planning, and execution activities specified for the chosen QRIS tier; E) program leader participates in external CQI cohort, CoP, or similar group; and F) provide data to GOECD, IDHS, and evaluator as requested.

PDG B-5 Renewal funding will fill the gap between child care subsidy payments and the actual cost of services required at each QRIS/staffing tier. No federal, state, or local funds will be supplanted. The counties in child care cost region two, the area chosen for the pilot, are primarily rural, and the pilot will give special attention to upgrading infant-toddler services.

Subgrants that Indirectly Improve Quality through Systems Enhancement: This section describes the subgrants for support system enhancements. When the ELC approved the new CQI components to be incorporated into QRIS standards in April 2019, it recommended expanded state supports for program leaders to take ownership of quality improvement. In this pilot, the modified funding system will reduce staff turnover and support adequate staffing for team reflection, planning, and improvement. The subgrants for systems enhancement described below will help program leaders guide staff to meet QRIS professional practice standards.

Subgrant activities, SMART objectives, and deliverables are summarized below:

| Activity | SMART Objective | Partner | Deliverable |
|-------------|--|--------------|---|
| Baseline | Baseline ERS or CLASS assessment | McCormick | Baseline assessments in |
| Program | of at least one third of its classrooms | Center | 40 classrooms by |
| Assessments | by 10/1/2020. | | 10/1/2020. |
| Leadership | Supplemental support needs | McCormick | Inventory of center |
| Training & | identified and services engaged by | Center | needs and requests for |
| Capacity | 10/31/2020. | | supplemental training by |
| Building | | | 10/31/2020. |
| | | Early | Supports for inclusion of |
| | | CHOICES | children with special |
| | | CCR&Rs | needs (described under |
| | | | Activity Four) underway |
| | | | by 1/31/2021. Supports provided by Infant- |
| | | | Toddler Specialists |
| | | | underway by |
| | | | 11/30/2020. |
| | At least one site-based program | McCormick | QRIS "On-Ramp" or |
| | leader per center trained on the | Center | Taking Charge of |
| | Whole Leadership Framework and | | Change training |
| | related skills by 2/28/2021. (Training | | underway for at least 20 |
| | will include state requirements and | | leaders by 2/28/2021. |
| | incentives for serving children with | | |
| | special needs, children birth-to-three, | | |
| | and other ELC-defined priority | | |
| | populations, including children | | |
| | experiencing homelessness, teen | | |
| | parents, families in the child welfare | | |
| ODIC | system, and families in poverty.) | DICCDDA | D :: 4 4 1 1 |
| QRIS | QRIS external and internal | INCCRRA | Revisions to standards |
| Operations | documents updated to reflect the | | tables, accreditation |
| Updates | revised QRIS standards and processes by 12/31/2020. QRIS | | crosswalks, and internal operations manual by |
| | databases and data reports updated | | 12/31/2020. Revised |
| | by 6/30/2021. | | databases and data |
| | by 0/30/2021. | | reports by 6/30/2021. |
| Formative | Evaluator engaged by 8/31/2020. | Program | Reports as specified. |
| & | Evaluation design completed by | Performance | 1 |
| Summative | 9/30/2020. | Evaluation | |
| Evaluation | Interim evaluation reports to inform | Plan Project | |
| | possible project modifications | Evaluator | |
| | received on 12/31/2020 and semi- | | |
| | annually. Final report to inform | | |
| | potential statewide adoption of | | |
| | project components on 12/31/2022. | | |

Illinois will make the evidence-based PD services described in Activity Four available to pilot project sites in response to site-generated improvement plans, including PM, PBC, expanded Early CHOICES supports for inclusion of children with special needs, and others.

A three-year test of all the above enhancements, combined with program data on support system usage and effectiveness, will be sufficient to suggest continuation or changes as the pilot model is brought to scale. *Rationale:* Illinois' QRIS has not met expectations as an engine for program improvement. Tiered funding grants for child care centers will support the revised tiered QRIS standards to address the issue. *Expected Outcome:* By the end of Renewal Year Three, participating programs will have advanced by one or two QRIS tiers, providing higher quality ECCE to approximately 3,000 children including 1,000 infants and toddlers.

B) Community-Based Planning for Expansion: While the tiered funding/tiered QRIS project above is designed to improve quality in existing ECCE programs, this planning project is designed to expand access and develop new high-quality programs. Over the past 20 years, data collected by the IECAM has consistently shown high unmet needs for ECCE services in certain counties and communities. For example, in semi-rural Kane County, IECAM reports a preschool-age slot gap of 6,865, approximately 40% of eligible children, and in rural Woodford County, a preschool gap of 1,273 or 90% unserved. The infant-toddler slot gaps in those two counties range from 80% to 90% of eligible children.

While many high-need communities have reduced their slot gaps through successful funding applications and program expansion, others have been unprepared to compete for and deliver expanded service. Illinois' ECBG and HS/EHS both distribute funds through competitive grant processes; while that process will be reevaluated through the Governor's ECCE Funding Commission, at this time communities interested in expanding access to ECCE services must be

prepared to compete for funds. There are several reasons why communities do not compete successfully (or never apply) for funds, including: A) incomplete understanding of funding streams and funding availability in the mixed delivery system; B) lack of infrastructure to support community-wide planning, including lack of data, absence of a community-level planning entity, or lack of engagement of school district and civic leadership in planning efforts; and C) inadequate facilities to house expanded programs.

Recognizing the issues described above, the ELC has recommended that the State increase support for community systems and to community-level applicants for state funding. Likewise, in its Mixed Delivery System report, *Ensuring Equitable Access to Funding for All Early Childhood Programs* (June 2019), the ELC recommended that the State "strengthen and support robust community-level planning processes." This is a critical time for community-level expansion planning. Illinois has increased funding for the ECBG (pre-k and birth-to-three services) by increments averaging \$50 million per year for the past five years and intends to continue expanding this funding. The Governor's ECCE Funding Commission will develop plans to expand overall ECCE services significantly, and the State has dedicated \$100 million in capital funding for ECCE facilities in its multi-year capital development plan.

This project will provide underserved communities with the systems knowledge, demographic data, and planning capacity they need to take advantage of projected increases in state ECBG and child care funding. Illinois Action for Children (IAFC) will serve as the subgrantee. IAFC is the state's support service provider for community collaborations via ISBE funding to operate the Community Systems Statewide Supports (CS3) program (note: this state funding is part of the required match). IAFC brings expertise in how community systems support enrollment of children from the state's priority populations, including children with special needs

and families experiencing homelessness, and how program linkages to health, homeless services and social services are built. In the proposed project, IAFC will provide supports targeted specifically to the state goal of increasing equitable access to ECCE programs. Five communities with wide slot gaps will be identified for participation each year. The following chart summarizes SMART objectives, deliverables, and activities.

| Goal | Prepare high-need communities underserved by ECCE programs to compete | | | | |
|--|--|---|--|--|--|
| Goal | successfully for projected increases in state ECBG and child care funding. | | | | |
| Phase | SMART Objectives/Deliverables | Activities | | | |
| Community Selection & Engagement | List of communities with the largest slot gaps ranked by absolute number and percentage unserved completed by 2/15/2020 and updated by 11/31/2021 and 2022. | Data gathering, community selection, and agreements with lead organizations. | | | |
| | Five communities with wide slot gaps selected by March 15, 2020 for participation during the first year, including a lead organization in each community. 2021 communities selected by 1/30/2021, repeated by 1/30/2022. | | | | |
| Planning Framework Development | General planning framework for communities finalized by 2/28/2020. | Define a generic process to include data collection guidelines (population, employment, and current service data), focus group guidelines (providers and parents), planning group formation, and vetting plans across a wider audience. | | | |
| Community Planning Group Formation & Orientation | Key stakeholders engaged and oriented by 4/30/2020, 2021, and 2022. Emphasis will be placed on partnerships with local homeless assistance systems to ensure that families experiencing homelessness are engaged and their needs are targeted during capacity building and facilitated planning phases. | Service provider, leader and parent engagement, orientation, and planning. | | | |
| Capacity Building | Capacity-building training scheduled for community leaders such as superintendents, school board members, mayors, and other elected officials by 5/15/2020, 2021, and 2022, | Provide or arrange for workshops on funding streams, layered funding, priority populations, program models, facilities, and more, as indicated in planning process. | | | |

| | and on-going each year as determined in local planning process. | |
|-------------------------------------|---|---|
| Facilitated Planning | Facilitated planning is delivered as defined in the Planning Framework and completed by 9/30/2020, 2021, and 2022. Final community plans for service expansion produced by 10/15/2020, 2021, and 2022. | Facilitate planning that addresses the following questions: - What program models (part-day, full school day, child care, etc.) do families need? - Where are more classrooms and services needed to deliver those models? - What are the construction and renovation needs and plans? - Are there potential partnerships between school districts and community-based organizations? - Are there potential government and private funding partners? - Any administrative and staffing plans? |
| Expansion Application Support | At least one consultation with each community applying for expanded state ECBG, child care, or HS/EHS funding is completed upon release of funding availability notice in 2021 and 2022. | Help applicants connect published requirements for proposals with completed community plans. Answer technical questions. |

GOECD will track progress through monthly check-ins and quarterly reports from IAFC. Any issues with objective completion or timeline will be addressed as they arise. Rationale:

Some high-need communities have not benefitted from expansion of ECCE funding, leaving many children unserved. Expected Outcome: By the end of Renewal Year Three, 15 participating communities will compete successfully for ECCE funding and expand services.

Activity Six: Monitoring, Evaluation, & Data Use for Continuous Improvement

Overview: Through sustained investments over the past decade, Illinois has constructed a longitudinal data system that supports cross-agency data analysis, an initial unduplicated count of children receiving services, and the foundation for performance measurement and monitoring and evaluation to support decision-making and strategic planning. Data and governance challenges have been barriers to greater cohesion and ease of use; Illinois proposes investments

in data standardization and performance measurement that will support execution of the PDG B-5 Renewal as well as upcoming governance and funding decisions.

A) Data Integration, Management, and Data Use: The chart below describes the status of various aspects of data collection, management, and use in Illinois' ECCE system:

|] | Project Description Aspects | Illinois Overview |
|----|---|---|
| | <u> </u> | Already Operational |
| 1. | Development of an integrated data system and collaboration with SLDS grant | Previously funded in part by Illinois' State Longitudinal Data System (SLDS) grant, the Illinois Longitudinal Data System (ILDS) collects demographic data across eight state agencies and uses direct and predictive matching techniques to generate unique identifiers that can be used in inter-agency analytics. |
| 2. | Early childhood integrated data system collects data across a broad set of programs | The ILDS collects data from and generates unique identifiers for children from birth participating in the following programs: - Child Care - IDEA Part B, Section 619 - IDEA Part C (Early Intervention) - Home Visiting (MIECHV, Parents Too Soon, and Healthy Families Illinois) - State pre-k (ECBG for children B-5) - HS/EHS on a local case study basis, planned to expand statewide under PDG B-5 Renewal - Public Primary Education K-12 |
| 3. | Ability of the state's early childhood data system to link across ECCE programs | The current construction of the ILDS allows for unique identifier generation, which facilitates data linkages in future analysis. Enhancements to this system to better inform policy and practice are described below. |
| 4. | The state and local communities collect and use data across programs to inform decision making | Several datasets are constructed and made available to support local decision making, including IECAM, Gateways Registry of early childhood professionals, ExceleRate QRIS, and the KIDS. This data is largely used by ECCE program directors, educators, and families to support informed decision making related to local service saturation, workforce availability, program quality, and kindergarten readiness. |
| 6. | A data governance structure is in place to govern data use across state agencies | Data governance decisions are made on a cross-agency basis by the ILDS Governing Board. Established by Inter-Governmental Agreement (IGA), the Board develops an annual report and plan that documents the current status of intra-agency system enhancements to support ILDS priorities and inter-agency agreements and priorities for data sharing and use. A second IGA establishes the infrastructure that generates cross-agency unique identifiers. The Board has established a standardized data sharing |

| 7. | An annua ach fan | agreement for use on specific inter-agency projects which includes ILDS-related legal terms and conditions and data security requirements across all participating agencies, in compliance with the Family Educational Rights and Privacy Act (FERPA), the Illinois School Students Records Act (ISSRA), the Higher Education Act (HEA), and the Health Insurance Portability and Accountability Act (HIPAA). The ILDS generates unique identifiers across programs in Illinois |
|----|---|--|
| 7. | An approach for using unique identifiers across programs | twice per year and shares them with the eight participating state agencies. Unique identifiers are generated using demographic information. These unique identifiers have been used to generate an unduplicated count of children participating in ECCE services; planned data projects related to children, families, the workforce, and providers are described below. |
| 8. | A distinct, unduplicated count of children participating in ECCE programs | Illinois currently has a distinct, unduplicated count of children participating in all ECCE programs, with the exception of HS/EHS which are currently incorporated on a limited case study basis. This unduplicated count currently supports RFP development for ECCE services to target underserved areas; plans to enhance this unduplicated count are described below. |
| | | Envisioned |
| 2. | Early childhood integrated data system collects data across a broad set of programs | Illinois' proposed investments in a data linkage environment, below, will support linkage and creation of unique identifiers across additional programs external to ECCE, including social service programs such as TANF, WIC, and SNAP and health programs such as Medicaid and Healthy Start. |
| 5. | Assessing the data literacy of key data users | IECAM displays early childhood data and maps across state agencies and HS/EHS for use by local and state stakeholders and agencies. IECAM currently supports community decision-making and applications for additional state ECCE services. Illinois will expand IECAM's ability to support increased data literacy of local decision makers through enhancements described below. |

Over the course of the PDG B-5 Renewal, Illinois plans to enhance its data integration, management, and data use through projects focused on infrastructural support to the ILDS, analysis to expand the unduplicated count of children receiving ECCE services, and infrastructural support to IECAM to improve local data literacy.

i) Enhanced Data Linkage Environment: In collaboration with and building upon work proposed in Illinois' SLDS application, Illinois will use Renewal funds to create child and workforce datasets within the ILDS to support enhanced cross-agency analysis and inform policy

and practice. This process will begin with work at the agency level in Renewal Year One to clean, organize, and standardize data across existing operational systems in preparation for subsequent integration in a centralized data warehouse, all while maintaining privacy and regulatory compliance. Data will be standardized across ISBE (housing state pre-k, IDEA Part B Sec. 619, workforce, and public primary education K-12 data), IDHS (housing child care, HV, IDEA Part C, and social service program data), and INCCRRA (housing workforce data). In Renewal Year Two, this standardized data will be loaded into a common analysis platform.

Tasks required will include creation of data dictionaries, standardization of demographic variables such as race and ethnicity, and data manipulation to create variables of interest such as program participation and teacher of record. In Renewal Year Three, this investment will create an ECCE participation dataset on a common platform that will support replicable and repeatable in-depth analyses of child and workforce trends across systems by resolving ongoing data cleanliness and access issues that currently prevent data integration at a level deeper than the creation of unique identifiers.

Beginning in Renewal Year One, a Data Analytics Director will oversee the standardization and integration process and subsequent analytics and evaluation projects, and an external consultant will support them by serving as a time-limited Project Manager for the ILDS ECCE Working Group and managing coordination and decision-making across agencies through the standardization and integration process. Dedicated data staff capacity at state agencies will ensure timely, coordinated implementation of the process.

ii) Enhanced Unduplicated Count: Illinois' current unduplicated count has been created iteratively, with each successive effort building on the last to become more comprehensive in its scope. At this time, Illinois' unduplicated count includes all B-5 children participating in HV,

Early Intervention, special education, subsidized child care, and state pre-k, with HS/EHS participation included on a case study basis. A lack of standardization across datasets prevents more detailed analysis beyond generation of an unduplicated count, while structural limitations prevent full incorporation of HS/EHS data across grantees into the count. The former issue will be resolved in Renewal Years One and Two through enhancements to the ILDS described above; the latter will require ongoing troubleshooting in Renewal Year One at the local, state, and federal levels. Illinois will work with its Head Start State Collaboration Office within IDHS, the IHSA, and federal partners to resolve issues of data sharing agreements and technological barriers to aggregation within the databases used by HS/EHS grantees. This work will be directly supported by the Data Analytics Director. In Renewal Year Two, upon resolution of data issues and following the above ILDS enhancements to create ECCE participation datasets, Illinois will initiate an analytics project to expand previous unduplicated count efforts to include HS/EHS data statewide. This work will include broader data visualization and analysis of patterns of service designed to inform policy investments and practice, as guided by a stakeholder advisory group, and will support an updated Needs Assessment and decision-making during and following the Governor's ECCE Funding Commission.

iii) Enhanced Data Accessibility and Literacy: In collaboration with and building upon work proposed in Illinois' SLDS application, and leveraging state funds supporting the current version, Illinois will use PDG B-5 Renewal to upgrade IECAM's ability to present accessible, actionable data to local ECCE programs and decision makers. IECAM currently serves as a clearinghouse of ECCE data across agencies, a type of "on-demand needs assessment tool" for state and community decision-making. Enhancements will require back-end structural improvements to align with enhancements to the ILDS described above in Renewal Years One

and Two; an overhaul to the user interface in response to stakeholder feedback with the goal of improving accessibility and supporting data literacy of local community and ECCE program data users in Year Two; and an expansion of T&TA capacity in partnership with CS3 (p. 34) to support local data use and analysis for decision making in Years Two and Three. *Rationale:* Illinois' data systems must be integrated to allow for straightforward analysis without complex, repetitive data cleaning for each project. *Expected Outcomes:* ECCE participation datasets that will create consistency in analysis and speed up the process to support timely, well-informed decision-making.

B) Monitoring, Evaluation, and Continuous Improvement: Illinois has several tools and methods to promote accountability across the state's mixed delivery system, some of which are unique to particular components within the system and some of which are crosscutting. Through the RTT-ELC, Illinois made significant progress in aligning accountability across its mixed delivery system. For example, ExceleRate establishes a common set of tiered program standards. The CCAP program and the state's pre-k program use the same accountability assessments and monitoring contractors to establish ExceleRate ratings. The chart below describes the state's key accountability tools and methods:

| Accountability Tools | Description |
|-------------------------|--|
| Illinois Early | The Illinois Early Childhood Dashboard, housed on the IECAM website and |
| Childhood | supported by the University of Illinois, tracks identified systems outcomes |
| Dashboard | through indicators and metrics designed to be representative of the ECCE |
| | system as determined by previous strategic planning efforts. Current metrics |
| | include data focused on economic security, health, high-quality B-5 ECCE, |
| | coordinated community systems, and the KIDS. Due to ongoing data |
| | accessibility and cleanliness issues, only two of these metrics have been |
| | posted. IECAM will update the dashboard by December 2019 with metrics |
| | aligned to the new Statewide Strategic Plan. |

| ExceleRate | ExceleRate is Illinois' statewide QRIS. All ECCE settings are required to |
|---------------|---|
| Illinois | participate in ExceleRate at the Licensed level at minimum. The State tracks |
| | the number of children (by age and setting) served in each Circle of Quality. |
| DCFS | This website displays licensing violations for ECCE programs licensed |
| Sunshine | through the Department of Children and Family Services (all programs |
| Website | except those based in schools or those deemed license-exempt). |
| Kindergarten | KIDS is an observational tool designed to help teachers, administrators, |
| Individual | families, and policymakers better understand the developmental readiness of |
| Development | children entering kindergarten. The assessment is administered within the |
| Survey (KIDS) | first 40 days of a child's kindergarten year. |

While these tools represent a first step toward ECCE system accountability, they continue to focus mostly on outputs, face data challenges that prevent comprehensive analysis, and do not yet comprise an overarching performance measurement system. Investments in these data systems and in the Program Performance Evaluation Plan described below will maximize the ability of the state to monitor and continuously improve the effectiveness of its system.

The ECCE **mixed delivery system's fragmentation,** and specifically the shortcomings of the state's current approach to blending and braiding funding to increase the quality of community-based programs statewide, was recently described in an ELC report, *Ensuring Equitable Access to Funding for All Early Childhood Programs*. This report identified nine overarching barriers to implementing and accessing a mixed delivery system in Illinois and four recommendations to improve the mixed delivery system to ensure that all children and families have equitable access to high-quality ECCE experiences:

| В | arriers to Implementing and Accessing a | Recommendations to Improve the Mixed |
|----|---|--|
| | Mixed Delivery System in Illinois | Delivery System in Illinois |
| 1. | A lack of timely payments | 1. Develop a stable and adequate funding |
| 2. | Challenges in layering, blending, and | stream that community-based |
| | braiding funding streams | organizations can access to increase |
| 3. | Lack of awareness | quality and meet evidence-based |
| 4. | Lack of funding for non-ECBG programs | performance standards. |
| | to achieve high quality | |

- 5. Lack of supports for child care programs to incrementally increase quality
- 6. Complex grant application process
- 7. Uncertainty about grant funding
- 8. No state goals or accountability for building a mixed delivery system
- 9. Limited community-level planning
- 2. Create a system to support communitybased organizations' participation and retention in ECBG
- 3. Strengthen and support robust community-level planning processes.
- 4. Develop and implement a governance structure with the formal authority and responsibility to lead the State's ECBG.

Addressing Fragmentation and Building on Progress: To build on progress from Initial PDG B-5 activities and to address fragmentation and overlap, Illinois proposes to pilot implementation of recommendations one, two, and three above via Activity Five in PDG B-5 Renewal (p. 26). In addition, recommendations three and four above will be explored over the course of 2020 in the Governor's ECCE Funding Commission. This Commission will leverage the statewide ECCE cost model constructed this year under the Initial PDG B-5 Needs Assessment as well as the effort proposed in Activity One of the PDG B-5 Renewal to fill gaps in data on the needs of families. A likely outcome of this Commission will be a restructuring of funding streams to create greater efficiencies and more unified and holistic program delivery.

Program Performance Evaluation Plan: Illinois' Program Performance Evaluation (PPE) will serve to manage and monitor the implementation of PDG B-5 Renewal, inform a periodically updated Needs Assessment and Strategic Plan, and evaluate the effectiveness and outcomes of both individual pilot projects and the investment as a whole. This will take place on an annual cadence of strategic planning and performance measurement:

| | PDG | 3 B-5 | Renewal Year 1 | | | | Re | enewa | l Year | r 2 | Renewal Year 3 | | | | |
|------------|----------|-------|------------------------|----|----|------|---------|--------|--------|---------------------|----------------|----|----|----|--|
| Activity | Q3 | Q4 | Q1 | Q2 | Q3 | Q4 | Q1 | Q2 | Q3 | Q4 | Q1 | Q2 | Q3 | Q4 | |
| Needs | Complete | | Fill Data Gaps | | | J | Jpdate | Need | S | | | | | | |
| Assessment | | | | | | | Asses | sment | | | | | | | |
| Strategic | Com | nlata | Enhance Strategic | | | | | | | Update Strategic | | | | | |
| Plan | Complete | | Plan | | | | | | | | Plan | | | | |
| PPE Plan | Upo | date | te Execute and Realign | | | Exec | cute ar | nd Rea | align | Execute and Realign | | | | | |

The PPE team will include GOECD's Project Director, Activity Leads, Data Analytic Director, and a contracted Project Evaluator. The Project Evaluator will support execution of the PPE as well as annual updates and enhancements to the PPE Plan over the course of PDG B-5 Renewal. They will select and create impact scorecards for metrics such as return on investment, create those metrics, and measure the likelihood of positive outcomes for key activities. The intended audience of the PPE is the Governor's Office, GOECD, leadership of state agencies involved in grant implementation, and the ELC.

The PPE will include monitoring of inputs (including proposed costs), key activities and processes, and expected outcomes aligned to the Strategic Plan and Logic Model, which will take place in the context of a continuous improvement framework using Plan, Do, Study, Act (PDSA) cycles. GOECD Activity Leads will be responsible for programmatic monitoring of vendors and contractors, including the developed deliverables, deadline adherence, and compliance with program objectives. Contractors will meet with the relevant Activity Lead and other key individuals at least monthly and will develop and submit work plans and quarterly reports.

Approach and Timeline for PPE Implementation: Illinois' previously-developed PPE
Plan will serve as a foundational resource to be updated and evolved throughout PDG B-5
Renewal. In the initial "plan" phase of the first PDSA cycle, the PPE Team will return to this
PPE Plan, alongside the Strategic Plan and Logic Model, and will verify the goals and metrics
for each activity and project. The team will analyze currently available state agency and partner
agency data to better understand the current baseline, and the Project Evaluator will develop
implementation and program evaluation scopes and methodologies for activities and projects.

In the "do" phase, the Project Evaluator will begin execution of the pilot project evaluations scoped previously and will implement a performance measurement system. Activity

Leads will support performance evaluation through project-specific data collection from contractors on identified metrics and monthly written progress reports, which will be housed in a Performance Management Data System designed and maintained by the Project Evaluator and overseen by the Project Director. The data system will track metrics and progress toward completion and will allow the PPE Team to enter data, attach artifacts, and produce summary reports. The Project Evaluator will provide quarterly reports to the Project Director. Illinois will use a combination of binary indicators and counts to monitor progress toward and completion of activities and processes, outputs, and short-term outcomes. Data sources for binary indicators will be artifacts, such as completed deliverables disseminated to target audiences, while data sources for counts will include contractor primary source data collection and state agency administrative data.

In the "**study**" phase, the Project Evaluator will lead analysis of performance measurement data housed in the project management software as well as initial findings from pilot project implementation evaluations. The PPE Team will then identify necessary adaptations and adjustments to project implementation to mitigate challenges and support successful implementation and improvements in short-term outputs and outcomes.

In the "act" phase, Activity Leads will work directly with contractors to implement identified adjustments to scope or practice and update project work plans in accordance with learnings from the "study" phase. GOECD's Executive Director will approve all final changes. The PPE Team will follow this implementation with a planning session to clarify and hone goals and metrics for each Activity and project, beginning a new PDSA cycle. Cycles will occur on a quarterly basis and will be informed annually by an updated Needs Assessment and/or Strategic Plan, per the strategic planning and performance measurement cycle on p. 43.

Existing data that contributes to outcomes measurement across the Strategic Plan and Logic Model (and therefore supports the Needs Assessment) includes the following: IECAM, which tracks system outputs through indicators and metrics designed to represent the ECCE system; ExceleRate Illinois, which tracks data on ECCE program quality; the Department of Children and Family Service's Sunshine website, which tracks licensing violations for ECCE programs; the KIDS assessment, a formative observational tool designed to help teachers, administrators, families, and policymakers better understand the developmental readiness of children entering kindergarten; and the Gateways to Opportunity Registry, which tracks PD, credential, and degree attainment across the ECCE workforce.

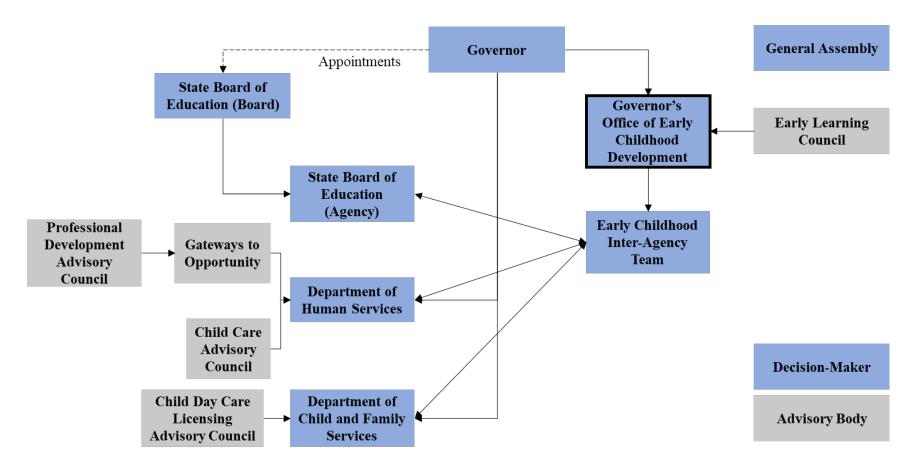
C) Meaningful Governance and Stakeholder Engagement: Illinois' ECCE system is governed by state agencies who receive and disburse federal and state funds, implement statute, and develop administrative rule for ECCE programs to support children, families, and communities. Each of these agencies report to the Governor's Office.

| State Agency | | Program Governance |
|------------------------|---|---|
| ISBE | - | ECBG: Prevention Initiative (center-based and HV care for at- |
| | | risk children birth-to-three), Preschool for All (preschool for |
| (ISBE reports to their | | three and four-year-olds), and Preschool for All-Expansion |
| Board, which is | | (intensive model continued from Illinois' Preschool Development |
| appointed by the | | Grant-Expansion) |
| Governor) | - | Early Childhood Special Education: IDEA Part B Section 619 |
| | - | Public primary education K-12 |
| IDHS | - | Child Care Assistance Program: Illinois' CCDF subsidy program |
| | - | Early Intervention: IDEA Part C |
| | - | HV: Parents Too Soon, Healthy Families Illinois, MIECHV |
| | - | Head Start State Collaboration Office |
| | - | Other human services programs: TANF, Healthy Start, WIC |
| DCFS | - | Child Care Licensing |
| | - | Child welfare |
| Healthcare and Family | - | Medicaid |
| Services (IHFS) | | |

In addition to the state agency governance structure, GOECD leads the State's initiatives to create an integrated system of high-quality ECCE services. This includes management of the ELC, Illinois' State Advisory Council; the Early Childhood Inter-Agency Team, a team of agency program staff convened to streamline implementation and promote cohesion across the ECCE system; ExceleRate, Illinois' QRIS; MIECHV program implementation; and topical initiatives such as workforce development, suspension and expulsion law implementation, PD in social/emotional competence, community systems development, and the PDG B-5. This structure of governance has not changed since the Initial PDG B-5.

This year, PDG B-5 investments were used to study the State's ECCE governance model as well as other promising models around the country. AIR is supporting Illinois by building a fact base around Illinois' current governance structure, researching other state models, interviewing state leaders around the country on governance processes and concerns, and developing recommendations on authority and accountability for ECCE programs and for improved coordination. Further, Illinois is in the process of establishing a Governor's ECCE Funding Commission, which will examine current funding and governance models and consider alternate structures that could support improved outcomes for children and families.

Illinois' Decision-Making Path: Illinois maintains a decentralized governance model, wherein ECCE system components are managed by different state agencies. Below is a visual depiction of Illinois' governance structure as previously described:



Stakeholder Involvement in PDG B-5 Renewal: Illinois has worked to ensure broad stakeholder representation across the ECCE system in the assessment, planning, and implementation of all PDG B-5 activities, Initial and Renewal. The chart below indicates which stakeholders have been or will be involved, the work they will support based on areas of expertise, and how they will provide support (via assessment, planning, or implementation of the projects described under each Activity). Typically, multiple representatives from each organization will be involved, corresponding to individual area of expertise; key contacts are listed.

| Stakeholder and Key Contact | | | Ac | tivity | | Assessment, Planning, or Implementation | | | | | | |
|---|-----------|-----------|-----------|-----------|----|---|------------|-----------|-----------|---|---|---|
| | A1 | A2 | A3 | A4 | A5 | A6 | B 1 | B2 | B3 | A | P | Ι |
| American Institutes for Research: Eboni Howard | | | | | | | | | | | | |
| Child Care Resource & Referral Agencies: Dan Harris | | | | | | | | | | | | |
| Community Systems Statewide Supports: Grace Araya | | | | | | | | | | | | |
| DuPage County ROE: FaKelia Guyton | | | | | | | | | | | | |
| Early Childhood Educators: TBD | | | | | | | | | | | | |
| Early CHOICES: Ann Kremer | | | | | | | | | | | | |
| Early Intervention & EI Training Program: Susan Connor | | | | | | | | | | | | |
| ELC Executive Committee: Phyllis Glink, Irving Harris | | | | | | | | | | | | |
| Foundation; Jesse Ruiz, Governor's Office | | | | | | | | | | | | |
| ELC All Families Served Subcommittee: Carie Bires, | | | | | | | | | | | | |
| Ounce of Prevention Fund; Marquinta Thomas, IAFC | | | | | | | | | | | | |
| ELC Data, Research, and Evaluation Subcommittee: | | | | | | | | | | | | |
| Elliot Regenstein, Foresight Law + Policy Advisors | | | | | | | | | | | | |
| ELC ExceleRate Subcommittee: Teri Talan, National | | | | | | | | | | | | |
| Louis University; Toni Porter, INCCRRA | | | | | | | | | | | | |
| ELC Home Visiting Task Force: Diana Rauner, Ounce of | | | | | | | | | | | | |
| Prevention Fund; Gaylord Gieseke, ICMHP | | | | | | | | | | | | |
| ELC Inclusion Subcommittee: Kristy Doan, ISBE; | | | | | | | | | | | | |
| Chelsea Guillen, Early Intervention Training Program | | | | | | | | | | | | |
| ELC Quality Committee: Dan Harris, INCCRRA: Teri | | | | | | | | | | | | |
| Talan, National Louis University | | | | | | | | | | | | |
| Erikson Institute: Linda Gilkerson | | | | | | | | | | | | |
| Governor's ECCE Funding Commission (in formation) | | | | | | | | | | | | |
| Illinois Board of Higher Education: Stephanie Bernoteit | | | | | | | | | | | | |
| Illinois Community College Board: Marcus Brown | | | | | | | | | | | | |

| Stakeholder and Key Contact | | | Ac | tivity | | Assessment, Planning, or Implementation | | | | | | |
|---|----|----|----|--------|----|---|-----------|-----------|-----------|---|---|---|
| | A1 | A2 | A3 | A4 | A5 | A6 | B1 | B2 | B3 | A | P | I |
| Illinois Department of Children and Family Services: | | | | | | | | | | | | |
| Kimberly Mann | | | | | | | | | | | | |
| Illinois Department of Human Services: Nakisha Hobbs | | | | | | | | | | | | |
| Illinois Early Childhood Asset Map: Dawn Thomas | | | | | | | | | | | | |
| Illinois Early Learning Project: Rebecca Swartz | | | | | | | | | | | | |
| Illinois Head Start Association: Lauri Morrison-Frichtl | | | | | | | | | | | | |
| Illinois State Board of Education: Carisa Hurley | | | | | | | | | | | | |
| Illinois Children's Mental Health Partnership: Collette | | | | | | | | | | | | |
| Lueck | | | | | | | | | | | | |
| Early Childhood Least Restrictive Environment | | | | | | | | | | | | |
| Stakeholders: Ann Kremer, Early CHOICES | | | | | | | | | | | | |
| MIECHV: Lesley Schwartz | | | | | | | | | | | | |
| Northern Illinois University: Charlie Rosemond | | | | | | | | | | | | |
| Ounce of Prevention Fund: Karen Berman | | | | | | | | | | | | |
| Parent Focus Groups: TBD | | | | | | | | | | | | |
| Pyramid Model Consortium: Rob Corso | | | | | | | | | | | | |
| Regional Offices of Education: TBD | | | | | | | | | | | | |
| YWCA of Metropolitan Chicago: FaKelia Guyton | | | | | | | | | | | | |

Logic Model

The Logic Model for the Illinois' PDG B-5 Renewal is shown below. This model assumes that completion of Renewal projects will result in the outputs necessary to achieve **expected outcomes** aligned to the model's objectives, overarching goal, and vision.

Activities and processes target populations including administrators, teachers, providers, and families with children B-5.

Vision: We envision Illinois as a place where every young child – regardless of race, ethnicity, income, language, geography, ability, immigration status, or other circumstance – receives the strongest possible start to life so that they grow up safe, healthy, happy, ready to succeed, and eager to learn.

Goal: Coordinate Illinois' mixed delivery system so that all children and families have access to the services they need to thrive.

Objectives: (A) Increased coordination and collaboration (B) Increased and equitable access (C) Increased quality

| | ř | , | - Increased and equitable access (C | |
|-----------------------------------|---|---|---|--|
| Inputs | Progra | am Activities & Processes | Outputs | Outcomes |
| Funding | 1. Needs Assessment | 1a. Address data gaps through research1b. Update Needs Assessment2a. Stakeholder engagement | 1i. Research reports 1ii. Updated periodic statewide B-5 Needs Assessment (NA) 1iii. Established cadence for NA, Strategic | Cohesive, informed statewide NA, strategic planning, and performance measurement cycle. |
| Personnel | 2. Strategic Planning | 2b. Identify implementation barriers 2c. Revise Year 1 Strategic Plan 3a. Consumer education and | Plan, and Performance Measurement Cycle 2i. Updated Strategic Plan document 3i. Accessible website info 3ii. Family representation on ELC | Increased # of communities participating in coordinated outreach, enrollment, and intake. |
| Data Sharing Agreements | 3. Maximizing Parent & Family Knowledge | engagement 3b. Governance and family collaboration 3c. Family engagement 3d. Priority populations | 3iii. Café pilots/implementation 3iv. Inclusion-focused resources 3v. Links to child/family-serving systems 4i. PD on evidence-based models 4ii. Connect EC and Kindergarten PD | Increased parent/family participation, leadership, & advocacy in ECCE systems. Decreased turnover and |
| Space & Technology | 4. Sharing Best Practices | 3e. Family access to resources4a. Improve PD for ECCE providers4b. Supports for early | 4iii. Aligned Gateways HV Credential & PM/HV Registry 4iv.Postsecondary educator cohorts 4v. Educator scholarships & tuition reimbursement | increased quality of workforce (inclusion, trauma-informed, play-based instruction). Increased consistency and efficiency in licensing, |
| Orientation & Training | 5. Quality Improvement | elementary educators4c. PD registry enhancements4d. Supports for EC educators5a. Tiered funding/ QRIS pilot | 5i. Tiered funding and T&TA to centers based on QRIS tiers 5ii. New networks funded; T&TA provided 5iii. Local slot gap analyses | alignment across credentials, and availability of qualified providers. Increased # of providers |
| Agency & Stakeholder Buy-In | 6. Monitoring, Evaluation, & Data Use | 5b. Local planning6a. Enhance data linkages6b. Enhance unduplicated count6c. Enhance data accessibility and literacy | 5iv. Planning & support in communities 6i. Child & educator participation datasets 6ii. 2 nd generation ECCE longitudinal data system, scorecard/asset map 6iii. Comprehensive ECCE unduplicated count & analysis report | engaged in evidence-based quality improvement. Increased data-driven decisions regarding access to high-quality ECCE services. |

Bonus: Coordinated Application, Eligibility, Enrollment

In Illinois, the 200+ home visiting (HV) programs lack a statewide mechanism for coordinated access and enrollment. As a result, there are missed opportunities to connect priority families to HV from other systems, and there are competitive enrollment processes among local HV programs. Fortunately, the state's 13 MIECHV communities have implemented CI for HV since 2012 through selected health departments, community-based organizations, and a school district, and have built partnerships with child welfare, homeless services, and hospitals.

Driven by **parent input** and learnings from the Initial PDG B-5, the CI pilot will be developed to link evidence-based HV to partners that already connect families to other services, namely CCR&Rs and HS/EHS. Both are recognized as important touchpoints for families and both have indicated interest in CI. CCR&R contracts already include enhanced referrals to priority populations and referrals beyond child care and pre-k (though these provisions are not consistently implemented). HS performance standards include community partnerships and access to comprehensive services. By locating CI for HV within these two systems, the pilot will test two models for streamlined points of access. Sites will be required to **engage families** in design and messaging through existing mechanisms, such as the HS/EHS Parent Committees. Core components are included in the table below:

| Pilot Component | Summary Description | | | | | |
|--------------------|--|--|--|--|--|--|
| CI Site Staffing | CI worker, community systems development (CSD) worker, supervisor | | | | | |
| Professional | Onboarding training, T&TA, peer learning communities, and coaching will | | | | | |
| Development | be provided through the MIECHV CI T&TA system. | | | | | |
| Eligibility | The MIECHV CI assessment tool, referral decision trees, and sample | | | | | |
| Assessment | procedures with timeframes for "closing the loop" will be used as | | | | | |
| Tool and | templates. The CI assessment tool includes eligibility information for | | | | | |
| Referral | multiple HV models (such as income, age of child/stage of pregnancy, | | | | | |
| Procedures | whether this is mom's first pregnancy, etc.). Sites will be required to work | | | | | |
| | with local HV programs to adapt the templates as appropriate. | | | | | |

| Family | Prior to rollout, sites will be required to gain parent input on the above |
|-------------|--|
| Engagement | templates through existing mechanisms such as HS/EHS Policy Councils |
| | and Parent Committees. Ongoing family input will guide CQI. |
| Data System | Data on HV capacity, families engaged, referrals made, status of referrals, |
| | and source of referrals will be collected using the Integrated Referral and |
| | Intake System (IRIS), a web-based application developed by the University |
| | of Kansas for these purposes. IRIS is already used by three communities in |
| | Illinois, with expansion planned for three additional communities this year. |

While the pilot focuses on CI for HV, the vision is to develop a system of multi-directional "warm" referrals between HV and other comprehensive services for which families may be eligible (such as child care, pre-k, behavioral health, OB-GYN/primary care, substance use disorder, Medicaid, SNAP, TANF, and WIC). CI will leverage existing referral networks to avoid duplication of effort, such as Care Coordinators for Medicaid Managed Care, who are responsible for connecting enrollees to behavioral and health care services. The role of the CSD workers will be to develop these multi-sector partnerships, reaching out to any pre-existing local ECCE community collaborations as a starting point. CI workers will recruit families through these systems partnerships as well as through family outreach events and fairs and outreach to parent groups such as HS/EHS Parent Committees.

Rationale: To address the longstanding need for improving family navigation and access to HV and other systems, the proposed pilot will expand CI for HV to multi-county regions in northern, central, and southern Illinois, building on CCR&R and HS/EHS expertise and lessons learned from MIECHV CI communities. Expected Outcomes: The expansion of CI in up to five pilot regions will result in successful enrollment of families from priority populations in HV and other services as well as increased percentages of filled HV slots. By June 30, 2020, the state will have pilot contracts with qualified entities. By June 30, 2021, the first pilot year will have been completed. A report on the pilot's first-year implementation and findings will be completed by December 31, 2021, when opportunities for scale-up will be evaluated.

Bonus: Infant-Toddler Emphasis

I/ECMH consultation is a multi-level, proactive approach that teams multi-disciplinary
I/ECMH professionals with people working with young children and their families to enhance
children's social/emotional development, health, and well-being. The Illinois Children's Mental
Health Partnership is currently working closely with public and private stakeholders to
implement a multi-year I/ECMH Initiative with the goal of developing and testing a universal,
effective, and sustainable Illinois I/ECMHC Model, supported by an expanded and qualified
workforce. In its first three years, the Initiative Leadership Team has: drafted a logic model;
participated in a process evaluation designed to inform Leadership Team practices; adopted the
cross-system Illinois Model; implemented a pilot to test the Illinois Model in 16 sites across four
communities; initiated a comprehensive pilot evaluation; developed a common orientation based
on the Illinois Model and trained 80 consultants; initiated a cross-system searchable consultant
database; and created a sustainability plan.

Enhancing cross-system collaboration and increasing system capacity to implement a quality approach and expand consultation to additional communities is a major goal of the Initiative; this project will expand on this existing effort and expand I/ECMH consultation to ECCE programs by training new consultants to implement the model. Four orientation events will be delivered each year of the PDG B-5 Renewal, as well as two trainings on the FAN and the Diversity Informed Tenets. Finally, we will expand current efforts to systematically collate and analyze the self-assessment that every consultant completes as part of the orientation. Consultants are expected to participate in Reflective Learning Groups (RLGs), which are regional meetings of local consultants that allow for collective problem solving, sharing information and consultation strategies, and reflecting on current practices and approaches. We will nearly triple the number of RLGs from 11 to 30 during the PDG B-5 Renewal.

The consultant database is a central registry for all I/ECMHCs in Illinois that contains information on training, experience, and areas of knowledge and skill and helps to match consultants with programs. Initial PDG B-5 investments supported development of the database; continued investment through the Renewal will support implementation and an expanded database scope. INCCRRA will incorporate a quality improvement function and begin to address the impact of consultation on adults working with children in ECCE settings, including supervisors and administrators, young children, and families. Funding will also be used to develop materials to enhance use of the database, including a Consultation Readiness Assessment, practice guidelines for consultants, guidelines for registering on the database, and instructional materials to help system partners understand how and why to use both a consultant and the database when searching for mental health support. Rationale: The preceding efforts lay the groundwork for measurable expansion of I/ECMH consultation. Expanded opportunities for I/ECMHC orientations and RLGs and an enhanced I/ECMHC database will support professionalization of the field, helping programs match with consultants. Expected Outcome: Increase the number of I/ECMHCs available to ECCE programs.

Note: Illinois' focus on infants and toddlers is also reflected in the Coordinated Intake pilot (p. 52), which focuses on HV (primarily serving infants and toddlers and their families); in the tiered QRIS/tiered funding pilot (p. 26), which restricts eligibility for subgrants to centers that serve at least two classrooms of infants and toddlers; and in the Activity Two efforts (p. 9) to expand access to HV for pregnant women and infants.

Bonus: Collaborative Transition & Alignment from Birth to the Early Grades

To build on efforts to align and smooth the transition between ECCE and the early grades, Illinois will implement eight kindergarten transition community partnership pilots

designed to support local community context and decision-making that includes all involved in the transition to kindergarten.

In 2014, Illinois began using Preschool Development Grant-Expansion (PDG-E) funds to support the Birth to Third Grade (B-3) Continuity Project. This project provided T&TA to communities across eight areas that comprise an aligned B-3 continuum: community partnerships, comprehensive services, family engagement and parent leadership, supported transitions, joint PD, aligned curriculum and instruction, aligned assessments, and data-driven improvement. This work will continue in ISBE following completion of PDG-E and will remain at the level of T&TA provision. In 2018, Illinois' Kindergarten Transition Advisory Committee published a report on promising practices for supporting a successful kindergarten transition. Practices are organized into thematic areas: aligned teaching and learning, aligned assessments and data, and strengthened cross-sector partnerships. These themes are aligned to the eight B-3 project areas. Practices were also classified as critical success factors for different groups involved in the transition: children, families, and communities; educators of children ages birthto-eight; schools and districts educating children birth-to-eight; and the State of Illinois. During the Initial PDG B-5, Illinois funded a partnership of organizations in one county to develop a pilot implementation plan to expand supports for the kindergarten transition. Under the PDG B-5 Renewal, Illinois will expand and scale these efforts while supporting local context and choice.

In Renewal Years One and Two, Regional Offices of Education and their Local Education Agencies, in partnership with local ECCE programs and community organizations, will identify and implement practices aligned to local context that support successful transition to kindergarten. Partnerships may replicate an existing promising practice; implement a recommended practice; expand upon current community practices to be more thorough,

supportive, expansive, or cohesive; or propose a new practice. Examples include aligned PD for ECCE and kindergarten educators on developmentally appropriate practices, or creation of a local transition workgroup including a broad array of stakeholders. Selected practices should support and enhance parent knowledge, collaboration, and partnerships or alignment across curriculum, services and supports, or PD, with the goal of supporting individual children's developmental needs. Partnerships should use funding to coordinate stakeholders to support implementation, develop a plan for implementation and evaluation, and work with stakeholders to implement the practice and evaluate its impact on selected outcomes. Pilots will be accompanied by implementation and outcomes evaluations, and at the end of Renewal Year Two both partnerships and the state will create sustainability plans to support statewide scale-up of successful pilots. Rationale: Support for pilot expansion of kindergarten transition promising practices aligned to local need and context builds upon statewide support by investing in local partnerships to implement transition recommendations. Expected Outcomes: Improved stakeholder perception of the kindergarten transition and improved kindergarten readiness as demonstrated on the KIDS.

Organizational Capacity

GOECD, the lead agency for this application, is the executive office responsible for promoting quality, equity, consistency, and alignment within Illinois' ECCE system. GOECD has successfully managed the administration, implementation, and evaluation of four multi-year federal mixed delivery systems grants: RTT-ELC, PDG-E, and the Initial PDG B-5, all in partnership with ISBE, as well as MIECHV. The core GOECD staff who developed and supported the work under the Initial PDG B-5 will bring continued implementation expertise and vision towards the projects in the Renewal. ISBE, the fiscal agent for this application, is the State Education Agency that administers and supervises IDEA Part B Section 619, State funded

preschool, HV, and center-based birth-to-three programs funded through the ECBG, Title I of ESEA, and the Child and Adult Care Food Program. ISBE awards subgrants to non-federal entities such as Local Education Agencies, institutions of higher education, and nonprofits. The Principal Consultants in ISBE's Division of Early Childhood are competent in budget development, mixed delivery systems, and billing and will provide oversight and programmatic support during PDG B-5 Renewal. For organization charts of GOECD and ISBE's Early Childhood Division, please see "File 2 Appendices ILLINOIS Renewal."

Each partnering organization, contractor, and subrecipient supporting the work of the PDG B-5 has for many years been actively engaged in Illinois' ECCE mixed delivery system and is a vital stakeholder engaged in the ELC and its committees. GOECD has worked closely with the majority of these partners to implement the federal grants described above, and they have demonstrated expertise in key areas in the field as follows:

| Activity Area | Partnering Organization | Area of Expertise |
|---------------------------|-------------------------|--|
| Needs Assessment | TBD | Qualitative methods, focus groups, surveys |
| Strategic Planning | DCFS | State agency (child welfare), HV, Early |
| | | Intervention |
| | AIR | Research, strategic planning |
| | ELC | State Advisory Council, B-5 continuity |
| Maximizing | IAFC | Family and community engagement |
| Parental/Family | Early CHOICES | Inclusion, family engagement, T&TA |
| Knowledge, Choice & | IDHS | State agency (child care), ExceleRate |
| Engagement in their | | website (QRIS) |
| Child's Early Learning & | IHSA | Two-generation family support |
| Development | COFI | Family engagement |
| | ELC Committees | Parent representation, family engagement, |
| | | governance, inclusion, strategic planning, |
| | | ExceleRate |
| Sharing Best Practices in | IBHE and/or ICCB | Two- and four- year higher education |
| PD for the ECCE | Erikson Institute | Reflective practice, trauma, wellness |
| Workforce | INCCRRA | Gateways workforce registry and |
| | | credentials, competency-based education |
| | Early CHOICES | Inclusion, PD |

| | Pyramid Model | PBC, PM practices & implementation, |
|--------------------------|-------------------|--|
| | Consortium | trauma, wellness |
| Improving Quality & | INCCRRA | QRIS, Gateways credentials |
| Service Integration, | IDHS | State agency (child care), subsidy policy, |
| Expanding Access, | | payment rates |
| Developing Programs | McCormick Center | Leadership training, QRIS assessment |
| | IAFC | Community system development training |
| Monitoring, Evaluation | IDHS | State agency (child care), IDHS-managed |
| & Data Use for CQI | | ECCE data |
| | ISBE | State agency (education), ISBE-managed |
| | | ECCE data |
| | IECAM | ECCE data analysis and visualization |
| | Education Systems | ECCE quantitative analysis and modeling |
| | Center | |
| Coordinated Application, | IDHS | State agency (child care), CCR&Rs, HS |
| Eligibility, Enrollment | | State Collaboration Office, MIECHV |
| Infant-Toddler Emphasis | INCCRRA | I/ECMH Consultants and Registry, PD |
| | | coordination and training |
| Birth to Third Grade | ROE and Local | Local community and systems knowledge |
| Transition & Alignment | Partnerships | across ECCE and early elementary years |

The roles and responsibilities of partners are articulated in Letters of Commitment in "File 2 Appendices ILLINOIS Renewal." MOUs will be created for additional collaborators as needed.

Dissemination Plan

The dissemination goal for the PDG B-5 Renewal is to share materials, resources, and lessons learned with families, ECCE professionals, policymakers, advocates, and relevant program implementation entities throughout the state. GOECD's staffing of the ELC, comprised of 65 official members and over 500 representatives from public and private organizations on committees and subcommittees, will facilitate the distribution of the Needs Assessment, Strategic Plan, and other materials developed as a part of the PDG B-5 Renewal. The ELC will help GOECD target appropriate audiences to maximize circulation; currently, GOECD's bimonthly newsletter and email communications reach over 3,500 subscribers around the state.

GOECD's Project Manager, who currently manages the logistics and communications for GOECD, the ELC and its Executive Committee, and the Early Childhood Inter-Agency Team,

will transition into the role of Director of Communications and Dissemination to develop and implement a dissemination plan for all outputs from the Initial PDG B-5 and those to be created in the Renewal. The plan will be developed in collaboration with key GOECD staff and will articulate clear objectives for dissemination, outline strategies to identify and engage key audiences (individuals, organizations, institutions, and dissemination partners), and include a timeline for distribution. Additionally, all dissemination activities, such as website analytics, email reports, and feedback loops built into the framework of the ELC will be tracked as part of the PPE to ensure target audiences have received information as well as support in using that information to inform practice. Staffing a full-time position focused on dissemination will allow Illinois to maximize effectiveness of time, money, and effort spent implementing coordinated efforts under the Initial PDG B-5 and the PDG B-5 Renewal.

Project Sustainability Plan

In Illinois, this Renewal grant supports strategic planning and needs assessment, expansion and scale-up of promising practices, and innovation through pilot projects. Sustaining this work following the period of federal funding will take several forms, including: continued use of a cycle of needs assessment, strategic planning, and performance measurement; incorporation of effectively scaled practices into state systems; and state scale-up of pilot projects whose evaluations have shown positive outcomes for children and families. Illinois will strengthen and leverage partnerships across the ECCE system to support cohesive, data-driven decision making across existing programs and funding streams such as the CCDF State Plan and ECBG (which provides state funds for B-5 services); Illinois will also leverage the upcoming Governor's ECCE Funding Commission to build concrete, unified systems of funding and programs. Below is an outline of sustainability plans for key activities in the PDG B-5 Renewal:

| | Activity | Sustainability Plans | | |
|--------------------------|---|--|--|--|
| 1. | Needs Assessment | A three-year cycle of needs assessments and analytics to fill data | | |
| 2. Strategic Plan | | gaps, strategic planning incorporating needs assessment findings, | | |
| | Strategic Plan | and performance measurement and evaluation aligned to strategic | | |
| | | planning will support unified, data-driven decision-making across | | |
| | the ECCE system; this will be managed by GOECD. | | | |
| 3. Family | | The ELC's FAC will more actively incorporate family knowledge | | |
| | | and voice into policy and practice. State investments will provide | | |
| | • | ongoing support for the FAC, including outreach and information | | |
| | Engagement | dissemination. Ongoing family input in the CI system, and the | | |
| | | investment necessary to continue collecting that input, will be | | |
| | | factored into scale-up costs for CI. | | |
| 4. Workforce Development | | Greater integration across state PD systems and funding streams will | | |
| | | support sustainability in a statewide T&TA inclusion system, | | |
| | | expanded models including PBC, PM, trauma-informed approaches, | | |
| | Workforce | FAN, and Workforce Registry enhancements. Local Education | | |
| | | Agency and ECCE programs will own resources on trauma- | | |
| | Bevelopment | informed approaches and developmental screenings. Following pilot | | |
| | | evaluation, the state will develop a plan for sustainability involving | | |
| | | workforce funding from ECCE, the Workforce Investment | | |
| | | Opportunity Act, and state higher education student assistance. | | |
| 5. | Quality Improvement | IDHS, a key partner in the QRIS pilot, will sustain successful | | |
| ٥. | | funding practices to ECCE programs along with revised and | | |
| | | enhanced QRIS standards. | | |
| | Data Management | Following completion of in-agency data system enhancements and | | |
| 6 | | creation of a second-generation Longitudinal Data System and Early | | |
| 0. | Data Management | Childhood Asset Map, state investments will support ongoing | | |
| | | maintenance as they have in the previous generation. | | |
| 7. | Coordinated Intake, | Results from these pilots will inform state decisions to scale | | |
| | Infant-Toddler, and | practices at the regional or state level. CI pilot findings will also be | | |
| | Collaborative | incorporated into the Governor's ECCE Funding Commission's | | |
| | Transition Bonus | efforts to reimagine a comprehensive ECCE system responsive to | | |
| | Point Projects | family needs. | | |

Execution and sustainability of this work will rely heavily on partnerships and coalitions across the ECCE and other adjacent systems. During and after the Renewal period, Illinois will leverage the ELC and the Governor's ECCE Funding Commission to both ensure sustainability in the grant strategies that have been effective in improving practices and outcomes, as well as

incorporate these practices into any comprehensive restructuring and unification of the ECCE system that may result from the Commission's work. Representation in the ELC and Commission includes state agency leadership and personnel, advocacy organizations, ECCE providers and educators, CCR&Rs from across the state, researchers, and – above all – families and their advocates.

Building on Progress: This work builds on Illinois' decades long commitment to ECCE, from dramatic expansion of services in the PDG-E, to QRIS, workforce registry, and community systems infrastructural development in the RTT-ELC, to cohesive and unified planning and pilots in the PDG B-5. Outputs and initial learnings from the PDG B-5 Renewal will serve as evidence for the Governor's ECCE Funding Commission (whose goals are described on p. 11) and which will guide the continued evolution of Illinois' ECCE system.