In 2013, the Administration for Children and Families (ACF) continued implementation of an integrated early childhood unit under the leadership of the Deputy Assistant Secretary for Early Childhood, which has become a focal point within HHS for early childhood health and development at the Federal level.

ACF’s Office of the Deputy Assistant Secretary for Early Childhood provides oversight to two of the largest federal programs – Head Start and Child Care – while at the same time linking with both health and education – co-administering the Maternal, Infant and Early Childhood Home Visiting Program with HRSA including important Tribal efforts and co-administering our birth-8 Race to the Top - Early Learning Challenge with the Department of Education. In addition to this work, the Office of Early Childhood also focused on enhanced communications and outreach, early childhood homelessness, and the President’s Early Learning Initiative.

This Office promotes coordination with the states through State Advisory Councils and promotes coordination and oversight of ACF Super Storm Sandy grants. Finally, this Office has also launched a wide range of interagency efforts across the federal government.

Within this structure, the Office of Head Start (OHS) and the Office of Child Care (OCC) continue to work closely to best align their programs. This has included regular meetings with the leadership of both Offices, as well as targeted meetings across Policy Divisions, the Training and Technical Assistance (T/TA) Divisions and the Inter-agency office.

This report provides highlights and accomplishments of our efforts as we met our 2013 ACF Early Childhood Goals.

Linda K. Smith, Deputy Assistant Secretary for Early Childhood
President’s Early Learning Initiative

In his State of the Union address, President Obama called on Congress to expand access to high-quality preschool to every child in America. As part of that effort, the President proposed a series of new investments to establish a continuum of high-quality early learning for a child – beginning at birth and continuing to age 5. By doing so, the President would invest critical resources where we know the return on our dollar is the highest: in our youngest children.

The Office of Child Care, the Office of Head Start and the Office of the Deputy Assistant Secretary supported the development of this bold plan to:

- Invest in high-quality infant and toddler early learning and development – Early Head Start – Child Care Partnerships,
- Expand effective parent and family supports through support of home visiting, and
- Provide high-quality preschool for all 4 year olds.

State Advisory Councils Completed Start-Up Grants

In 2013 ACF continued its work with the early childhood State Advisory Councils (SAC) to complete the implementation of states’ 3-year start up grants. The SAC grants enabled states to lead the development and enhancement of high-quality, comprehensive early childhood systems so that children arrive at school ready to learn and prepared to excel. In order to head off challenges, ACF closely partnered with states to help them complete their SAC projects in a timely fashion and expend the no extension funding. Of the $100 million awarded to forty-nine states and territories, SAC grantees successfully expended 97% of the funds in
implementing their early childhood systems development projects.

In April 2013, ACF released the SAC Progress Report. This report covered the period from the award of grants through February 2013. It contained four sections:

- **Background**
- **Update on Required Grant Activities**
- **Advancing Early Childhood Systems Beyond Grant Requirements**
- **Individual State and Territory Profiles**

Now that the federal financial support has ended, states are working on sustaining their SACs by leveraging other state and private dollars, as well as other federal grant programs. In July, ACF convened the SACs in conjunction with the annual child care State and Territories Administrator Meeting for a face-to-face meeting to focus on the topic of sustainability. Over 30 SAC representatives from 24 states attended the face-to-face grantees meeting and brainstormed strategies for advancing their work. In September, ACF sent a letter of support encouraging governors in all grantee states to support SACs in sustaining their work. At this time, all 49 grantees’ project periods have expired.

ACF is in the process of writing up a final report to discuss SAC accomplishments and deliverables to be published later in 2014.

### Office of Child Care

The Office of Child Care (OCC) supports low-income families by providing access to affordable, high-quality early care and afterschool programs. OCC also promotes children’s learning by improving the quality of early care and education and afterschool programs. OCC administers the Child Care and Development Fund (CCDF) and works with state, territory and tribal governments to provide support for children and their families juggling work schedules and struggling to find child care programs that will fit their needs and that will prepare children to succeed in school.

Here are highlights of our work in 2013:

- Awarded over $5 billion through 300 CCDF awards for States, Territories, and Tribes to support access to high quality care
- Reduced the CCDF error rate below the 10% threshold
- On track to meet targets for State QRIS that meet high quality benchmarks
- Improved health for children through Let’s Move Child Care and Partnerships with CACFP
- Captured quality data for the first time on the Quality Performance Report and the ACF 801
- Developed the ground-breaking President’s Early Learning Initiative which features universal preschool and EHS - CC Partnerships
- Published proposed rules for CCDF to ensure the health and safety of children
- Launched a new Child Care TA website that features interactive data reports and other concrete tools for grantees – like the cost of quality estimation tool
- Implemented an individualized TA plan with each state, using the Child Care TA Tracker to allow us to target TA more closely to our desired results
- Helped children, families, and child care providers who were devastated by Super Storm Sandy and Midwest tornados
- Built the disaster response capacity of all our grantees through the Midwest Tabletop Exercise

States submitted Quality Performance Reports (QPR) outlining their quality activities and outcomes (e.g. number of programs advancing quality rating improvement systems, number of scholarships awarded to teachers). The QPR provided the best picture of the ways CCDF is making a difference. Below are interesting facts and figures from the most recent QPR submitted. The Office of Child Care looks forward to updating this information and to sharing new findings each year.

Health and Safety

- 28 States and Territories reported reviewing, revising and strengthening licensing requirements.
- 6 States and Territories updated their use of technology through mobile technology (remote data entry for licensors), improved reporting and e-licensing and paperless training records.

Program Quality – Financial Incentives and QRIS

- 44,733 centers and family child care homes received financial support to achieve and sustain quality (35 States/Territories reporting)
  - 22,105 centers received financial incentives to achieve and sustain quality (31 States/Territories reporting). About half were one-time grants or bonuses and half were ongoing stipends.
  - 22,628 family child care homes received financial incentives to achieve and sustain quality (29 States/Territories reporting). Almost two-thirds were one-time grants or bonuses and one-third were ongoing stipends.
- More than 60,000 centers and family child care homes participated in QRIS or other quality improvement activities (49 States/Territories reporting). These data combine States and Territories who are at different stages of QRIS development – from fully implementing to piloting.
35,323 centers are participating in QRIS or other quality improvement activities (49 States/Territories reporting)

24,681 family child care homes are participating in QRIS or other quality improvement activities (44 States/Territories reporting)

17 States/Territories increased provider participation in QRIS

Program Quality – Targeted Technical Assistance (TA)

49,081 programs received targeted TA on health and safety (29 States/Territories reporting)

17,369 programs received targeted TA on understanding developmental screenings and/or observational assessment tools (28 States/Territories reporting)

The Office of Child Care launched its Child Care Technical Assistance Network (CCTAN) Web site, now live at childcare.gov. The Web site is a one-stop shop for all materials from the CCTAN National Centers and features resources created by OCC’s technical assistance (TA) network on a variety of topics related to the administration of the Child Care and Development Fund (CCDF) program.

Highlights of the site include:

- **CCDF Data Explorer**—The interactive data explorer allows you to compare data among States and Territories and to track changes over time. Charts can also be downloaded for sharing.

- **State Profiles**—The profiles include detailed demographic information about the children, families, and child care in each State and Territory as well as contact information for the agencies involved in child care.

- **Fundamentals of CCDF Administration Website**—Broken down by topic and subtopic, the site is both a helpful resource for new CCDF lead agency program staff and a quick reference for a specific question.

Workforce

- Approx. 40,000 child care professionals received TA (14 States/Territories reporting)

- 57,259 child care professionals received scholarships to meet and maintain standards and qualifications (45 States/Territories reporting)

- 24,182 child care professionals had their training expenses reimbursed (17 States/Territories reporting)

- 28,688 child care professionals received wage supplements (15 States/Territories reporting)

Early Learning Guidelines

- 49,472 child care professionals in child care centers and family child care homes received some training or orientation on Early Learning Guidelines.
• 11 States/Territories made progress aligning their ELGs with kindergarten and grades 1 to 3 standards; 7 States/Territories made progress adopting the Head Start Child Development and Early Learning Framework and in aligning their ELGs with those of Head Start.

**Improving Safety and Quality of Child Care**

In 2013, helping to answer President Obama’s call to ensure quality early education for every American child, the Office of Child Care proposed a new regulation for public comment that will better ensure children’s health and safety in child care and promote school readiness. Under the proposed rule, states, territories and tribes would be required to strengthen their standards to better promote the health, safety and school readiness of children in federally funded child care.

The proposed rule would only apply directly to child care providers who accept Child Care and Development Fund (CCDF) funds. Under the proposed rule, states would require that all CCDF-funded child care providers:

- Receive health and safety trainings in specific areas
- Comply with applicable state and local fire, health and building codes
- Receive comprehensive background checks (including fingerprinting)
- Receive on-site monitoring

The rule would also require states to share information with parents through user-friendly websites about provider health, safety and licensing information. While some states already post health and safety reports online, the new rule would bring all states up to this standard.

Next steps following the review of public comments will be presented in 2014 by the Office of Child Care.

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**Office of Head Start**

**Program Integrity**

The Office of Head Start made a significant investment of time working on the Department’s Program Integrity Initiative. This work primarily focused on strengthening federal fiscal oversight of grantees and developing training, tools and data systems to ensure proper tracking and use of funds and timely recovery of misspent funds. The work done related to A-133 audits that included webinars targeted to CPAs, Governing Boards and CFOs has been widely recognized as a model practice for the agency.
• Internal to ACF was the completion of the matrix delineating the roles of the RPM and the GMO, which increased accountability by eliminating role confusion and reduced redundancy and streamlined internal controls and processes.

• OHS created and launched the Monitoring Disallowance Review Board that convenes to review monetary findings across regions to ensure federal staffs’ consistency and accountability of their oversight of grantees.

• OHS successfully received a waiver of the requirement to conduct the annual Erroneous Payments Study because OHS had successfully had significantly reduced its error rate and sustained a very low error rate for more than two years.

• The Office of Head Start developed and implemented a rigorous system to ensure SuperStorm Sandy funds are used for the purpose intended. Onsite technical assistance, tracking, oversight and documentation of these efforts assured that the recovery funds efficiently and fully benefit the ravaged communities. The Deputy Director guided this process. OHS is participating in prospective planning and preparation for future events.

As part of the change from an indefinite project period to five year grant periods OHS developed a 5 Year Oversight Plan for providing effective program oversight at the local, state, regional and national levels. OHS provided on-site training for 11 of 12 regional office program (OHS) and fiscal (OGM) staff on the 5 year oversight plan and engaged regional staff on their perspective, ideas and potential challenges in implementing the 5 year oversight plan, presented presentations on the oversight plan to the OHS National Leadership Institute, NHSA conference, the Region 7 HSA conference in Kansas City, the Region 11 AIAN conference in Spokane and the OCC conference in Washington, DC. Webinars were also held with each of the following groups T/TA grantee specialists, Regional T/TA manager, National Center Liaisons and HSSC on the 5 year oversight plan.

**Monitoring**

In 2013 OHS conducted over 560 reviews which included review of every type as follows:

- Triennial reviews: 425
- Follow up review: 80
- First year review: 8
- AIAN reevaluations: 16
- Other review: 31

Other highlights include:

- With support of other OHS division staff, OHS developed tools to meet the NOA conditions for all grantees entering into year one of a five year project period (Health & safety screener and certification format, governance screener).
Developed a Head Start Key Indicators (HSKI) tool for the purpose of screening incumbent Head Start agencies that successfully re-competed in DRS in the first year of a 5 year project period. The HSKI was developed in partnership with Dr. Richard Fiene of Penn State University. Pilot testing of the key indicator tool was done in the first quarter of the FY 2014 monitoring year (November-December 2013). When fully implemented the HSKI screener could be used by a region with any grantee to assess risk mitigation in determining if a full review is needed.

OHS finalized and presented a 2014 Monitoring Protocol webcast for HS/EHS programs to be reviewed in FY 2014.

OHS increased turn-around time on Monitoring reports to the field in the FY 2013 monitoring year - on average reports were issued within 30 days.

In coordination with OHS Policy division drafted responses to internal control items on external overall monitoring items and letters requesting reconsideration of identified deficiencies.

Data and Information Systems

The Office of Head Start successfully managed a large number of complicated grant awards by leveraging Head Start data systems to support the federal staff working on these grants. OHS accounted for the reduction of funds due to the Budget Control Act of 2011 (sequestration) across all grants, including capturing details and quantifying the impacts of these reductions on enrollment and services. The Head Start Enterprise Data System was used to support determinations on the seven conditions of the Designation Renewal System and the information necessary to complete the grants and manage new five year awards. The usefulness of the Head Start Enterprise System to Head Start programs increased in the last year by making available news feeds, monitoring reports, award information, and mapping features of Census data on poverty. Programs can now create and manage their own users in the System.

The Office of Head Start increased transparency to the public by making available new data, data sets and information, and increasing our social media presence. For example, grantee-level monitoring and services reports were published on the Early Childhood Learning and Knowledge Center (ECLKC) website, the Head Start Fact Sheets were redesigned to be more informative and visually appealing, and the Head Start Locator now includes a feature that provides downloads of .csv files and a mapping widget that can be embedded on external websites. In addition, OHS began publishing national data on the results of monitoring related to the Classroom Assessment Scoring System (CLASS™). The OHS social media presence has grown steadily, with Facebook reaching an average of over 16,000 people weekly and Twitter growing by 3,000 followers and reaching an average potential audience of over 100,000 weekly.

Designation Renewal System Implementation
The Improving Head Start for School Readiness Act of 2007 requires HHS to establish a system for determining which Head Start and Early Head Start Programs may be designated for renewal without having to compete with other entities in their community. Only those Head Start and Early Head Start agencies that are found under this system to be delivering high-quality and comprehensive Head Start and Early Head Start programs that meet the educational, health, nutritional, and social needs of the children and families they serve, and meet applicable program and financial management requirements and standards, may be designated for renewal and receive continued funding automatically, without having to compete. All other grantees must compete with other entities for renewed funding.

- The Designation Renewal System (DRS) specifies seven conditions that HHS will consider when determining whether a grantee is delivering a high-quality and comprehensive program and, thus, whether the grantee may be renewed without having to compete for continued funding. If a grantee is found to meet any of those seven conditions, then that grantee will be required to compete for continued funding.

- In 2013 as part of the first DRS cohort, 125 Head Start grantees required to compete for continued federal funding. In this first round of competition, all competitors had to submit proposals detailing how they would achieve Head Start’s goal of delivering high-quality early childhood services to infants, toddlers and preschoolers. These proposals were subjected to an extensive evaluation process, including review by a panel of independent early childhood professionals and assessment by Certified Public Accountants to determine a potential grantee’s ability to implement Head Start’s mission and standards in their community. As a result more than 150 agencies received grants to provide Head Start or Early Head Start services in their communities for the next five years.

- A second DRS group of 124 Head Start and Early Head Start grantees was notified in January 2013 that the grants for their service areas would also be open to competition.

- In addition, the Office of Head Start (OHS) launched a pilot funding opportunity in five communities with the goal of providing a continuum of care in a birth to five Head Start program, including services for expectant families. The pilot approach was conducted in Detroit, Baltimore, Washington D.C., Jersey City, and Sunflower County, Mississippi. For the first time in Head Start’s history, this “birth to five” funding opportunity gave applicants new flexibility to create a seamless birth to five approach, incorporating both Head Start and Early Head Start funding. Through this pilot project OHS encouraged applicants to design a birth to five program according to their community’s needs and their organizational capacity. The funding announcement also allowed applicants to apply to serve as only a Head Start or an Early Head Start grantee.

“So what drives me as a grandson, a son, a father – as an American – is to make sure every striving, hardworking, optimistic kid in America has the same incredible chance this country gave me. “

President Barack Obama, December 4, 2013
In addition, as part of the DRS process for American Indian Alaska Native (AIAN) programs, the deputy director and the AIAN Branch Chief set the stage for a respectful and positive consultative process that has resulted in tribal grantees receptivity and collaboration throughout the consultations.

Policy and Planning

The Division Director worked with others in Department to develop the President’s Early Childhood Initiative and provided feedback to Congress on subsequent legislation and the funding for EHS-CC Partnerships in the FY2014 Omnibus Appropriations. The Division developed principles for Head Start Reauthorization and administrative actions HHS can take in absence of reauthorization. Information and technical assistance to Congress was provided regarding Head Start policy and funding and responds to inquiries. In addition, this year OHS finished writing all outstanding reports to Congress.

The Division oversaw two regulation projects in 2013 - the drafting of the Final Rule on Head Start Eligibility and the revision of the Head Start Program Performance Standards (HSPPS). To continue the overhaul of the HSPPS, the division director led a team of 5 staff and consultants to structure and write the regulations. This work included pulling together internal OHS and ACF staff and consulting with external experts. Further, she has participated in the ACF Basic health and safety standards development with other ACF staff to ensure alignment with HS requirements.

Education and Comprehensive Services & Training and Technical Assistance

The ability to hire a division director for our state and national T/TA division increased collaboration and coordination both internally within OHS central and regional offices. OHS developed and disseminated to the field The Way Forward: OHS Priorities which articulated OHS priorities, T/TA System Goals and OHS Outcomes to serve to continue to focus the field. OHS also launched a regional professional development plan process that strengthened the efficient and efficacy of the work that regional offices carry out in conjunction with the national office, the National centers and the state-based TA system. The process took into account the evolving efficient spending requirements.

Within and across TTA and comprehensive services OHS:

- Increased recognition of critical role of parent and family engagement in early childhood education. The Parent, Family and Community Engagement Framework has resulted in more intentional and systemic efforts to engage parents as teachers of and advocates for their young children. This work has spread beyond Head Start as several states have adopted the framework and it is being used by early childhood educators programs throughout the country. OHS had put forward a number of extremely useful tools for the field to improve parent, family and community engagement, most recently a Fall to Fall series via the ECLKC.
o Increased Focus on School Readiness. The specific requirements embedded in the Designation Renewal System have resulted in improved intentionality and increased use of evidence based practices. Virtually all Head Start and Early Head Start grantees have established school readiness goals for children and are assessing child progress and individualizing instruction. Programs are implementing evidenced based curricula and instructional practices. Considerable TA efforts have been directed towards this effort.

o Use of evidence based instrument to assess teacher-child interaction. The CLASS instrument has been used to assess preschool Head Start classrooms nationwide. The standardized approach, evidence base and link to child outcomes has allowed the development of specific training and technical assistance resources designed to improve specific instructional practices and interactions. Considerable effort has also included looking at the CLASS data by region, state and grantee at the federal and TA level in order to plan continuous improvement and practice change within grantees. This work is driving a sea change in the early childhood field from historic reliance on environment as a proxy for quality and efficacy to a focus on instructional practices and relationships.

o Collaborated with the Office of Planning Research and Evaluation (OPRE) to increase evidence base and fill specific needs. Recent work included the commissioning of a measure of teacher-infant or toddler interaction that can be used in mixed age settings, an Early Head Start University Partnership grant to study buffering children from toxic stress and the development of a measure of family-provider relationship quality. Additionally the Office of Head Start is working with OPRE to revise the FACES to study to allow specific targeted studies and yield more frequent reports of certain data and findings. OHS continues to provide programmatic insights across all content areas with members of OHS staff assigned to particular research projects and with the OPRE team.

o OHS continued to lead the field in supports to EHS programs nationwide through response TA via webinars, face to face and through telephone consultation. The OHS lead served as a valuable resource on numerous ACF wide workgroups addressing a number of areas related to infants and toddler. OHS provided one of the few acceptable models of evidence based home visiting with the (Early Head Start) Maternal, infant and Early Childhood Home Visiting Program (MIECHV). The EHS home visiting model has been implemented by several states and OHS staff both model development and implementation leadership to the States.

In the areas of health OHS contributed considerably to ACF collaboration including regular meetings and planning on Let’s Move Child Care, Developmental and Behavioral Screening, Oral Health. In addition, OHS health lead carried out dissemination and support with regards to ACA. OHS also transitioned all of the materials from Indian Health Service as their TA contract came to a close. There is additional work tailoring messages and TA to AIAN and Migrant and Seasonal Head Start with the broader effort of the National Center on Health.
In conjunction with the 5 year oversight plan OHS worked with their National Center on Program Management and Fiscal Operations to develop on program governance, governing body development and program self-assessment resources. PMFO staff worked with several regional offices and held cluster groups within regions for HS/EHS program on both governance and effective ongoing monitoring systems. OHS is also piloting a revised self-assessment tool with selected grantees.

**Race to the Top Early Learning Challenge (RTT-ELC)**

Since 2011 ACF's Early Childhood Development (ECD) Office has been working closely with the Department of Education’s (ED) Office of Early Learning (OEL) to develop, award and administer the Race to the Top-Early Learning Challenge (RTT-ELC) program.

The purpose of the RTT-ELC is to improve the quality of early learning and development and close the achievement gap for children with high needs. RTT-ELC grants focus on improving early learning and development programs for young children by supporting each State's efforts to:

- Increase the number and percentage of low-income and disadvantaged children in each age group of infants, toddlers, and preschoolers who are enrolled in high-quality early learning programs;
- Design and implement an integrated system of high-quality early learning programs and services; and
- Ensure that any use of assessments conforms with the recommendations of the National Research Council's reports on early childhood.

In round one, ACF’s ECD staff partnered with ED’s OEL staff to project-manage the nine states awarded RTT-ELC funds: California, Delaware, Maryland, Massachusetts, Minnesota, North Carolina, Ohio, Rhode Island and Washington. Because of limited funding, and because it came in 9th in the scoring, California received only 50% of its requested funding.

In round two, moving down the slate from the previous competition, five additional states were awarded RTT-ELC funds: Colorado, Illinois, New Mexico, Oregon and Wisconsin. These five states received 50% of the amount for which they had originally applied. When additional funding later became available, these five states and California received additional funding bringing their awards up to 75% of their originally requested amount.
2013 brought a new competition for the RTT-ELC. ACF’s ECD Office worked with the ED’s OEL to develop and implement all aspects of this new competition including policy development and outreach, peer review recruitment, the panel review process, and selection of six additional states: Georgia, Kentucky, Michigan, New Jersey, Pennsylvania, and Vermont.

During this entire time each HHS-ED project manager team has held monthly call - meetings with its assigned round one and round two states and has reviewed and approved detailed scopes of work submitted and periodically updated by each state. Round three states have just begun this process of monthly meetings and are actively working on developing their detailed scopes of work.

On August 3, 2010 the U.S. Secretaries of ED and HHS announced the formation of the Interagency Policy Board (IPB) to improve the quality of early learning and development programs and outcomes for young children; increase the coordination of early learning and development research, technical assistance and data systems; and advance the effectiveness of the early learning and development workforce among the major federally-funded early learning and development programs across the two departments.

The IPB, made up of senior staff from ED/HHS/DPC/OMB, meets quarterly and acts in an advisory capacity, focusing on reducing duplication and maximizing resources across the federally-funded early learning and development programs at ED and HHS and coordinating efforts across the agencies to improve early learning and development program effectiveness, especially for children with high needs.

**Program Annual Performance Report Briefs**

To highlight the important work being done in RTT-ELC grantee states, the Office of the Deputy Assistant Secretary for Early Childhood Development (ODAS-ECD) in the Administration for Children and Families developed a series of three Annual Performance Report (APR) Briefs. The Briefs covered the cross-cutting areas of Workforce Initiatives and Quality Rating and Improvement Systems, as well as additional initiatives within the RTT-ELC reform areas. The Briefs are by no means an exhaustive collection of all of the early childhood work being done in a particular state, but rather are a compilation of the work highlighted and documented by grantees themselves as being supported by RTT-ELC funds and meeting the stated RTT-ELC goals. More information is available in the Additional Resources section here [http://www.acf.hhs.gov/programs/ecd/programs/race-to-the-top](http://www.acf.hhs.gov/programs/ecd/programs/race-to-the-top).

**HHS webinar series**

As part of the Department of Health and Human Services’ 50 State Technical Assistance Strategy, the Office of the Deputy Assistant Secretary and Inter-Departmental Liaison for Early Childhood Development and the Offices of Child Care and Head Start presented a series of webinars on topics of interest to state and national early childhood leaders. The purpose of this series was to highlight innovative work in the states on key pieces of the Early Childhood Education (ECE) infrastructure that link to the Race to the Top Early Learning Challenge framework. In 2013, webinar topics included:
New findings about the state of Quality Rating and Improvement Systems: Results of an Evaluation of State CCDF Plans
Progress on State Advisory Councils
Strengthening Health Outcomes
Implementing effective family engagement strategies
Improving Teacher-Child Interactions: CLASS results and outcomes in early childhood settings
Child Care and Early Education Research Connections: A Demonstration of the Web Site


Tribal Early Childhood Programs

Tribal Maternal, Infant, and Early Childhood Home Visiting (Tribal MIECHV)

- In 2013, the Tribal MIECHV program launched a 3rd “Cohort” of grantees, adding 6 grantees for a total of 25 Tribal MIECHV grantees in 14 states. Over the past year, ACF worked closely with these new Cohort 3 grantees as they conducted needs and readiness assessments, selected their home visiting models, and developed implementation, benchmark data collection, and rigorous evaluation plans. Cohort 3 grantees will be approved for implementation much more quickly than past cohorts due to both the hard work of grantees and ACF’s intentional and focused technical assistance strategies.

- Our TA system, including the Tribal Home Visiting Evaluation Institute (TEI) and Tribal Home Visiting Technical Assistance Center (VisTA), has also been leveraged to better support Cohort 1 and 2 grantees as they implement their programs, collect data, and begin their rigorous evaluations. One of our major TA priorities was the development of a TA strategy to support Cohort 1 and 2 grantees in benchmark data collection, analysis, and reporting and supporting grantees in documenting their program operations.

- ACF worked to disseminate more information about the Tribal MIECHV program and grantees’ accomplishments to interested stakeholders. This includes a session at the International Meeting on Indigenous Child Health, a session at the Native Children’s Research Exchange, a session at the National Indian Child Welfare Association meeting, and two sessions at the American Evaluator’s Association. ACF also developed a Tribal MIECHV dissemination strategy and brought on a dissemination specialist to help execute this strategy, including distributing more information about the program to the broader public and assisting grantees with their own strategic dissemination activities. Tribal MIECHV will also be attending the 2014 Pew Summit on Quality in Home Visiting Programs in January 2014, which includes a session on cultural adaptation and enhancement in tribal home visiting programs and a poster session where tribal grantees will share posters about their projects and evaluations with the broader home visiting field.
**Tribal Early Learning Initiative (TELI)**

- ACF launched the [Tribal Early Learning Initiative (TELI)](https://www.acf.hhs.gov/programs/te-li), a partnership between ACF and four American Indian tribes: Choctaw Nation of Oklahoma, Confederated Salish and Kootenai Tribes (MT), Pueblo of San Felipe (NM), and White Earth Band of Chippewa (MN). The purposes of the TELI are to: support tribes to fully and effectively coordinate tribal early learning and development programs to meet the needs of communities, children, and families; create and support seamless quality early childhood systems across programs serving young children and families; and raise the quality of services to children and families across the prenatal to age 5 continuum. In the year since we began the TELI, we have seen the participating tribes make great strides in strengthening collaboration across Head Start/Early Head Start, Child Care and Development Fund (CCDF), and Tribal MIECHV programs. In 2013, ACF provided incentive funds, guidance, and support (including in-person site visits) to the TELI tribes as they conducted self-assessments of their early childhood systems, identified opportunities for collaboration and partnership, and developed and began to implement detail workplans. In January, ACF will be bringing the four TELI tribes together to reflect on their efforts to date and plan for the future. We plan to release a report on the progress of the TELI grantees in 2014 and expect that the TELI tribes will serve as models for other communities and tribes that wish to build and sustain partnerships and improve the quality of early childhood services.

**Tribal Early Childhood Research Center (TRC)**

- The [Tribal Early Childhood Research Center (TRC)](https://www.acf.hhs.gov/programs/trc), awarded by ACF’s Office of Planning, Research, and Evaluation with Tribal MIECHV, Head Start, and CCDF funds, seeks to address gaps in early childhood research with American Indian and Alaska Natives (AIANs) through partnerships with tribal Head Start, Early Head Start, child care, and home visiting programs. The goals of the TRC are to engage in a participatory research process and build capacity for researchers to work effectively with early childhood programs in AIAN communities. In 2013, the TRC engaged in the following activities:

  - In the summer of 2013, the TRC hosted the first TRC Summer Institute, titled “Early Childhood Research with Tribal Communities”, at Johns Hopkins University. Over 40 students registered for the week-long course; 15 competitively-awarded scholarships were provided to tribal Head Start, home visiting, and child care program staff and graduate students to participate in the course.
  
  - The TRC continued research and measurement activities within the context of Communities of Learning (CoL). CoL are forums for tribal home visiting, Head Start, child care, and early childhood program leaders, researchers and others with diverse perspectives and backgrounds to gather through conference calls, email, and in-person to explore shared interests related to early childhood development in tribal communities and to accomplish tasks related to defining research priorities and to assisting in the interpretation and dissemination of research findings.
The TRC began a feasibility study entitled “The Survey of Well-Being for Young Children (SWYC): Study of Community Readiness for Implementation in Tribal Early Childhood Programs.” The SWYC is a new surveillance tool designed to screen for social-emotional and developmental delays among children aged 0-5 years. ACF and the TRC are interested in exploring the utility of this screener for use in tribal communities, including interest, cultural appropriateness, and administrative feasibility. Input has been sought from early childhood stakeholders in tribal communities, including Head Start, Home Visiting, and Child Care program staff: pediatricians, nurses, mental health providers, parents, and community elders. The TRC has been working with seven tribal communities across the country, in both reservation and urban settings. Results of this study, to come in 2014, will inform potential adaptations to the SWYC for use in tribal settings and will guide recommendations for a potential subsequent study to validate the SWYC for use with American Indian and Alaska Native children.

Part of the Bill Emerson National Hunger Fellowship program

In the spring and summer of 2013, ACF was fortunate to bring on a fellow as part of the Bill Emerson National Hunger Fellowship program. The fellow, Elaine Albertson, was charged with identifying opportunities for ACF Early Childhood Development programs to support AIAN child and family health and nutrition. Elaine conducted a literature review, interviewed a wide range of stakeholders, and developed a report that discusses the health needs of AIAN children and families, identifies federal programs that exist to meet those needs, and proposes points of consideration for ACF Early Childhood Development programs to take into account in future planning around AIAN child well-being. We plan to release this report in 2014.

Super Storm Sandy

Oversight of ACF SANDY Supplemental Funded Activities

- Site visits to New Jersey (November 6, 2013) and New York (November 12 and 13, 2013) were held to meet with State officials and discuss their SSBG spend plans and consider approaches for developing improper payment measurement plans.

- Worked with Division of Financial Integrity staff to understand improper payment measurement methodology issues and reporting requirements, and communicate key issues to program staff.
External Reporting

- Oversaw the process for ACF staff to respond to multiple requests for information from OIG, OMB, and ASFR.
  - Two separate OIG Investigations include:
    - Office of Audit Services (OAS) – ACF staff have responded to multiple requests for information on grants management award processes, internal controls, and audit and oversight processes.
    - Office of Evaluation and Inspections (OEI) – ACF staff consulted with OIG/OEI staff regarding their forthcoming evaluation approach for the SSBG program so that ACF could proactively plan for data collection activities, as needed.
  - Gathered information on progress-to-date from ACF programs (Head Start, SSBG, and Family Violence Prevention Services) on the one-year anniversary of Hurricane Sandy to meet reporting requirements to OMB and HUD.
  - Provided liaison services between external stakeholders (HHS Departmental officials from ASFR and ASPR) and ACF staff.
  - Presented on the status of ACF’s Sandy Supplemental funded activities to the New York Children’s Issue Task Force.

Early Childhood Health

Developmental and Behavioral Screening Initiative

Recent statistics indicate that as many as 1 in 4 children, ages 0-5, are at moderate or high risk for developmental, behavioral, or social delay (National Survey of Children’s Health, 2011-12). In addition, the Centers for Disease Control and Prevention report that about 1 in 6 children, ages 3-17, has a parent-reported diagnosis of developmental delay or disability such as autism, intellectual disability, attention deficit hyperactivity disorder (ADHD), hearing or vision impairment, or other developmental delay (CDC, 2011). Early identification of developmental delays is a critical step in providing children and families with the services and support they need to prevent further delay. Making sure our youngest children are screened and given support early is a priority for the Departments of Health and Human Services and Education. With Early Childhood Development (ECD) as the lead, ACF is partnering with ACL, CDC, CMS, HRSA, NIH, SAMHSA, and OSEP on a three-pronged approach to promote developmental and behavioral screening, including:
a) Launching a coordinated public outreach campaign to promote developmental and behavioral screening and follow-up. This launch will include:
   - A compendium of screening instruments that meet specific validity and reliability criteria;
   - Companion guides, designed for providers from multiple sectors as well as the communities in which they live (e.g. early care and education providers; home visitors, pediatricians; social workers; behavioral health providers; early intervention specialists), to assist in selecting screening instruments;
   - A collection of resources, including CDC’s “Learn the Signs. Act Early.” program, to bring awareness to parents and providers about typical and atypical child development. We have developed new resources such as a Screening Passport for families to record screenings, referrals, and follow-up actions and Everyday Tips to Promote Child Development that include easy tasks to perform with children from leading researchers.

A website that will house this joint initiative is currently under development. We have also been presenting to multiple stakeholders and have cultivated partnerships with Autism Speaks and the American Academy of Pediatrics as well as the Center on Law and Social Policy. Webinars are scheduled in the coming weeks to support the launch.

b) Working with public and private partners to validate a comprehensive, developmental and behavioral screening tool (Survey of Well-Being for Young Children (SWYC)) for use in the public domain. The tool should be validated in a variety of diverse populations and settings, including with child care/Head Start children, American Indian children, foster children, English language learners, and children enrolled in home visiting programs.
   - ACF is currently funding a small study on Native American reservations to determine the cultural appropriateness of a public domain screening instrument in American Indian populations.
   - ACF, with CDC, is funding the conversion of the SWYC into electronic format. ACF will be comparing the administrative feasibility of the eSWYC with the paper version in Spanish-speaking Head Start families. Results of this work will help to inform the possible integration of the SWYC into future versions of FACES.
   - ACF is working with Palm Beach, Miami/Dade, Alameda, and Orange Counties to build on the aforementioned eSWYC and create a more user friendly format that can be easily integrated in multiple data systems. This group will also be creating a technical assistance manual for the SWYC before launching a validation study in non-clinical settings. There will also be validation of the tool in multiple non-English-speaking populations including Spanish and Creole. Finally, systems level outcomes will be examined to determine if using the same tool across multiple settings results in greater efficiencies and effectiveness.

c) Working on the range of interventions and prevention strategies to support children and families with developmental concerns but who are not eligible for Early Intervention; do not have access to
adequate or appropriate services; or have yet to be evaluated and receive appropriate services. The disability subgroup of the Interagency Policy Board between HHS and ED will be leading this effort.

Caring for Our Children Basics: National Health and Safety Standards for Early Care and Education Settings

Early Childhood Development, in partnership with OHS and OCC as well as outside experts, has been working on the creation of consistent, baseline health and safety standards for use across child care programs, Head Start, and pre-K across the country. Because true quality care cannot be achieved without consistent, basic health and safety assurances in place, we are attempting to work towards setting a floor across ECE from which programs would aspire/move to higher quality and upon which parents can rely. These standards will be adopted in the new Head Start performance standards.

ACA Outreach to Early Care and Education Programs and the Families They Serve

The Office of Early Childhood Development worked on behalf of the 48 million uninsured Americans who will have new opportunities for health insurance coverage in 2014 through the Health Insurance Marketplace. Health and school readiness begin long before a child enters a classroom. Health is a foundational aspect of children’s ability to develop, learn, and thrive. No one plans to get sick or hurt, but most people need medical care at some point. Children who have health insurance generally have better health throughout their childhood and into their teens. They are less likely to get sick and more likely to:

1. Get the treatment they need when they are sick or injured;
2. Receive needed shots that prevent disease;
3. Get treatment for recurring illnesses such as ear infections and asthma; and
4. Get preventative care, like immunizations and comprehensive screenings, to keep them well.

Early Head Start, Head Start, and child care programs can play a vital role in making sure people learn how to get coverage and how to get help applying. Many more family members — including parents, older siblings and grandparents under age 65 — may qualify for coverage. To that end, ODAS/OHS/OCC has created a website to provide resources and frame new ACA opportunities for ECE providers. We have created new resources such as Ten Ways for Head Start Providers to Promote New Health Insurance Opportunities and Frequently-Asked Questions about Medicaid. Partnering with NAEYC, NAFCC, and NHSA, ODAS/OHS/OCC have hosted webinars that included representatives from the Small Business Association, IRS, CMS, and the ACF Office of the Chief Medical Officer to answer live questions from ECE providers. We have also presented at conferences, such as the NHSA Leadership Institute.
Autism Awareness and Acceptance in Early Childhood Education

To support the mission of awareness and acceptance of Autism Spectrum Disorder (ASD), a developmental disability that affects communication, social, and behavioral development, ACF created a web page with resources about ASD made specifically for early childhood providers. The web page, which includes ASD fact sheets, tips written for early childhood providers, and links to many other sites that offer free, high quality resources for families and providers, was an excellent gateway to learn more about and support our youngest children with ASD and other developmental disabilities.

In April, ACF also gained representation on the Interagency Autism Coordinating Committee (IACC), when Deputy Assistant Secretary for Early Childhood, Linda K. Smith was confirmed as a member. The IAAC is an advisory committee consisting of Federal and private partners that coordinates all efforts related to ASD within the Department of Health and Human Services (HHS).

As a member on the IAAC, Linda Smith brings the early childhood perspective and makes sure to keep the issue of preparing and supporting the early childhood workforce on the forefront. In a world where 1 in 6 children have a developmental disability and 1 in 88 is affected by ASD, it is imperative that the early childhood workforce attains the preparation and support they need to effectively work with all children. ACF is proud to be a member of the IAAC and a contributor to the ongoing discourse about how to best support children with ASD, their families, and the people who educate and care for them.

The web page also includes video presentations to highlight autism awareness and acceptance in both English and Spanish by Linda Smith, Deputy Assistant Secretary and Wilma Pastrana Jimenez, First Lady of Puerto Rico.

Expanding Early Care and Education for Homeless Children

Ensuring the well-being of our youngest children is essential to the work of the Administration for Children and Families (ACF) and is especially urgent when considering the vulnerability of young children experiencing homelessness.

In the United States, more than 1.6 million children, many under the age of six, live on the streets, in homeless shelters, in campgrounds, temporarily doubled up with others, or are otherwise without a stable home. Research shows that children who experience homelessness also experience higher rates of chronic illness, developmental delays, anxiety and depression than children who live in stable homes.

This year, ACF reached out to partners with a Letter from the Administration of Children and Families, the Office of Head Start, and the Office of Child Care with recommendations, some of which are required for Head Start, for increasing ECE services for homeless children:

- Prioritize Access to Services for Homeless Families
- Have Policies in Place for Families who are Temporarily Homeless after a Disaster
- Offer Flexibility to Homeless Families
- Coordinate with Homeless Education State Coordinators and Local Liaisons
- Work with Homeless Coalitions
- Coordinate between Head Start and CCDF Policies

Additional materials were also provided:
- Policies and Procedures to Increase Access to ECE Services for Homeless Children and Families
- Strategies for increasing ECE Services for Homeless Children
- Early Childhood and Family Homelessness Resource List

ACF is a participating member of the Workgroup to End Family Homelessness. The U.S. Interagency Council on Homelessness (USICH) provided clarity in its Amendment to *Opening Doors* on what needs to be done specifically for youth and children if we are to reach the goal of ending homelessness among families, children and youth by 2020, and early childhood members from multiple agencies and departments developed an action plan for the future to work toward these goals.

ACF partnered with the Department of Housing and Urban Development (HUD) to present a webinar, *Working Together: Increasing Early Childhood Education Services for Homeless Children*, for Communities of Care (CoC) grantees. Enhanced public information and improved access to services are key to success. Therefore, ACF also presented Home Visiting and Working with Families Experiencing Homelessness at a national conference, worked with the Department of Education on a new brief *Early Care and Education for Young Children Experiencing Homelessness* as part of the McKinney-Vento Law Into Practice Brief Series by ED-OESE-SASA I Homeless, Neglected or Delinquent Education Programs. Lastly, ACF participated in a November Roundtable Discussion on Early Childhood Development and Education: Reaching Homeless Children with the National Alliance to End Homelessness, the National Association for the Education of Homeless Children and the Urban Institute.

**Work Initiated with the National Academies of Science**

The Department of Health and Human Services led the development of a new study with the National Academies of Science. The Office of the Deputy Assistant of Early Childhood worked with the Department of Education and key players in the philanthropic community to fund a study titled “The Science of Children Birth to Age 8: Deepening and Broadening the Foundation for Success”. The study, executed via the National Academies of Science, will result in a consensus report on how the science of children's health, learning and development from birth to age 8 can inform how we prepare a workforce to seamlessly support children’s development and education, including standards and expectations, instructional practices, preparation and professional development, and family engagement across diverse contexts (e.g. rural/urban) and populations (e.g. immigrant children, dual language learners, children at risk for developmental delays and disabilities).
Based on currently available evidence, the report will include findings on all the above and pay particular attention to research on: 1) poverty, racial inequities and disadvantage; 2) learning environments in the home and in schools; 3) adult learning processes as they relate to teaching children; and 4) leadership/management skills as they relate to developing the skills of a highly effective workforce designed to support children’s learning, growth and development from birth to age 8. The report will provide research and policy recommendations to specific agencies and organizations, both governmental and non-governmental, as well as inform institutions serving children birth to age 8.

The philanthropies partnering to fund the study are the Bill and Melinda Gates Foundation, the Kellogg Foundation, the David and Lucille Packard Foundation, and the McCormick Foundation.

**Communications and Outreach**

The Office of the Deputy Assistant Secretary supports early childhood communications and outreach efforts with additional supports implemented this year.

Highlights included:

- An updated website with new pages including [The President’s Early Learning Initiative](#), [Early Childhood Disaster-Related Resources](#), [The Affordable Care Act: What It Means for Children, Families, and Early Childhood Programs](#) and others,
- Early childhood [blogs](#),
- [ECD Newsletter](#) started in August,
- Social media,
- Development of a listserv for ongoing communication,
- Presentations at conferences and state and national events, and
- Meetings and webinars with stakeholders and philanthropy.

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