



**FY 14-15 Business Plan for
School Readiness and
Voluntary Pre-kindergarten Services**

Investing in children- investing in our future....

Note: all statutory references to Ch 411 F.S. are referenced as 1002 F.S. Part VI- School Readiness Programs effective 7.1.13

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Part 1. Coalition Identification and Information

Coalition Name: Early Learning Coalition of Florida's Heartland
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Chairperson's Name
Address (if different than above): Ashley Cooney, Board Chair

Executive Director's Name: Anne Bouhehent

Counties represented by Coalition: Charlotte, DeSoto, Hardee and Highlands

I hereby attest that all information provided in this plan is accurate and complete to the best of my belief and knowledge, and once approved, ensure that all services will be conducted in accordance with the approved plan. I also ensure that the local services will be in compliance with all applicable Florida Statutes and Regulations, Florida Administrative Codes, Federal Statutes and Regulations, and any other requirements as stipulated by Florida's Office of Early Learning.

Printed Name: Ashley Coone,
ELCFH Board Chair

Printed Name: Anne Bouhehent,
Executive Director

Date: July 1, 2014

Date: July 1, 2014

Part 2. Community Plan

Community Plan (s. 411.01(5)(c)1.g., F.S.)

Section 1. Vision

The vision of the ELCFH is that each child will have a strong early foundation to promote a lifetime of success.

Section 2. Mission

The mission of the Early Learning Coalition of Florida's Heartland, Inc. is to support families and children in accessing high quality early care and education services via School Readiness and Voluntary Pre-kindergarten programs. The ELCFH also serves as a point of access to resources and referrals for health care and family support services.

Section 3. Community Needs Assessment

The Early Learning Coalition of Florida's Heartland, Inc is located in the heart of Florida and is comprised of four counties: Charlotte, DeSoto, Hardee and Highlands Counties. These counties extend over 1900 square miles. Hardee, Highlands and DeSoto Counties are located inland and are contiguous with Polk County to the north, Manatee County to the west and Okeechobee County to the east. Charlotte County is considered a coastal county with the Gulf of Mexico and Charlotte Harbor bordering on the west. Glades and Lee Counties surround Charlotte's south and eastern boundaries.

ELCFH Service Area- Population by Race:

	Charlotte	DeSoto	Hardee	Highlands	Florida
White	90.0%	66.2%	72.2%	81.0%	75.0%
Black or African American	5.7%	12.7%	7.0%	9.4%	16.0%
American Indian and Alaska Native	0.3%	0.4%	0.6%	0.5%	0.4%
Asian	1.2%	0.5%	1.1%	1.5%	2.4%
Native Hawaiian and Other Pacific Islander	0.0%	0.0%	0.0%	0.0%	0.1%
Reporting Some Other Race	1.1%	17.7%	17.1%	5.5%	3.6%
Reporting Two or more Races	1.1%	2.4%	2.0%	2.2%	2.5%
Hispanic or Latino	5.8%	29.9%	42.9%	17.4%	22.5%
White, not of Hispanic or Latino Origin	86.0%	56.1%	48.0%	70.7%	57.9%

Source: U.S. Census Bureau 2010

Charlotte County

Charlotte County is the most populous segment of the Coalition service area. Its population averages just under 160,000 and ranks at 55 (13.9% of residents) of the 67 Florida counties for persons living in poverty. Known for its beautiful waterways and coastal boundaries, Charlotte County has experienced strong infrastructure growth since the significant destructive impact of a Category 4 hurricane in 2004. Punta Gorda is the only incorporated city in Charlotte County.

DeSoto County

DeSoto County is one of two rural counties within the Coalition service area. With a population of 34,862, this community is comprised of two small towns, Arcadia and Nocatee. DeSoto County has a large, seasonal migrant community as agriculture is the largest employment industry. Cattle, citrus and vegetables are the top commodities farmed and exported. Within the State of Florida, DeSoto County ranks first (32.9%) in the number of persons living in poverty. The American Community Survey (2009-2011 estimates) profile of DeSoto County, as disseminated by the U.S. Census Bureau, reports 44% of the population 16 and over were employed; 50% were not currently in the labor force.

Hardee County

Hardee County, population 27,731, is the second most rural county in the Coalition service area. Its population fluctuates during the seasonal months as agriculture is also this county's largest employment industry. Hardee County has the third highest ranked level of residents living in poverty (30.3% of population).

Highlands County

Highlands County is the second largest county within the Coalition service area. Its population of 98,786 experiences a large fluctuation during winter and springs months, due to the migration of retirees and agricultural workers. Avon Park, Sebring and Lake Placid are the incorporated cities that make up Highlands County. Other unincorporated areas are found on its eastern borders. Highlands County labor market is driven by entrepreneurs and local government. The Florida poverty ranking places Highlands County 24th highest out of 67 with 20.7% of the population living in poverty influenced by the many low income families working in the citrus industry and caladium fields of Lake Placid. Two major hospitals are also major employers in this county. Highlands County is classified as contiguous rural due to its population size and proximity to neighboring rural counties.

Household Income by County:

Statistic	Charlotte	DeSoto	Hardee	Highlands
Number of Household	73,370	11,445	8,245	42,604
Average Household Size	2.14	2.71	3.12	2.28
Median Household Income	\$45,037	\$35,979	\$37,466	\$34,946

Source: U.S. Census Bureau 2010

Quick Facts:

- More than half the children in the elementary schools in DeSoto, Hardee and Highlands Counties are on free or reduced price lunch (Florida Department of Education, “Education Information & Accountability Services Data Report”, July 2010, Series 2011-03D.” In DeSoto County alone over the past decade there has been a 12.28% increase in participation in the free/ reduced-price lunch program for PK-12 students.
- The ELCFH served 2,650 unduplicated children through the School Readiness in FY 11-12; through the Voluntary Prekindergarten Program (VPK), the ELCFH served 2,281 unduplicated children.
- Protective Services children under the Department of Children and Families (DCF) Eligible clients with referrals from DCF receive child care services for up to six months. Coalition staff reviews these files every two months to ensure the need for continued care. Abuse and neglect is considered to be one of Florida’s greatest threats to children. Abuse experienced early in life may cause developmental delays or behavior problems. As an extra layer of protection, the Coalition partners with DCF to place At Risk children in licensed facilities only. Without the requirement of being placed on a waitlist, immediate care is granted to DCF clients with valid referrals.
- Temporary Assistance for Needy Families (TANF) or Wages clients fall into the minority category as it relates to number of children served. TANF and Wages clients are eligible to receive up to two years of child care services. These cases are reviewed by the referring agency with correspondence forwarded to the Coalition. These cases are also given preferential referrals and are not placed on a wait list.

Enrollment Priorities: *The ELCFH adheres to the eligibility priorities mandated in 1002.87 F.S. (effective July 1, 2013).*

COALITION Priorities effective until 6.30.13	
1 st Priority	TANF Clients
2 nd Priority	At Risk Clients
3 rd Priority	Working Poor Birth to One year old
4 th Priority	Working Poor Toddlers
5 th Priority	Working Poor Two Year Olds
6 th Priority	Working Poor Three Year Olds
7 th Priority	Working Poor Four year Olds
8 th Priority	Working Poor Five Year Olds prior to Kindergarten entry
9 th Priority	Working Poor School Age-youngest to oldest age category
Note: All Working Poor category children are placed by income, beginning with those families below the 100% FPL: 1. below 100% FPL 2. then 100-150% FPL 3. then 150-200% FPL	

Care and educational services for infant and toddlers within the Coalition service area is insufficient. Providers generally offer child care beginning at age two and older. This is attributed to the required smaller staff to child ratio, as well as the actual cost of care for infants and toddlers. Many families find it very difficult to place their infant and/or toddler, and the Coalition realizes this as a need. Recruitment at all levels, (colleges, universities, Coalition offices and DCF offices) is on going. Start up mini-grants for family child care homes are used as incentives to increase infant and toddler slots.

The need for a variety of child care options is very evident. Medical staff, agriculture workers, phosphate mine employees and public service employees have a need for extended day, weekend coverage, and 24-hour child care. Their work schedules are outside normal business hours; therefore non-traditional hours of care are vital. Coalition staff work closely with Department of Children and Families to ensure contact is made to new providers after a new business is open to the public. Redland Christian Migrant Association (RCMA), East Coast Migrant Head Start Project, (ECMHSP), and Charlotte County Public Schools operate Head Start, Early Head Start and/or Migrant Head Start programs within the four county service area.

Availability of Child Care Services:

County	Number of children age 5 and younger	Number of families in poverty	Number of licensed child care programs	Number of programs exempt from licensing	County capacity of child care spaces	Number of Accredited Child Care Provider Sites
Charlotte	5,545	3,953	66	10	4,776	14
DeSoto	2,278	1,310	18	2	1,195	1
Hardee	2,227	1,438	17	2	1,490	2
Highlands	4,988	2,819	40	5	3,079	10

Source: 2011 American Community Survey- US Census/ ELCFH Resource and Referral database

Teen pregnancy is steadily increasing within the Coalition service area. For the past five years, Hardee and DeSoto Counties have been among the top ten counties for high teen pregnancy rates. Hardee County is currently number three in the state, falling behind Franklin and Hamilton Counties (Community Health Assessment Resource Tool Set (CHARTS), Nov. 2004). Coalition staff works collaboratively with the Teen Pregnancy Prevention Association to address this concern.

Edison State College, Polk State College, and South Florida State College are the resources that exist for higher education. Both institutions offer an array of two and four year degrees. Charlotte Technical Center, Polk State College and South Florida State College offer vocational and technical certificates in various fields.

The Coalition plans to strengthen parent involvement in their child’s education. We believe strongly in empowering parents as the child’s first and most important teacher. During the eligibility interview process, parents are educated on choosing a quality center and encouraged to participate in their child’s educational activities at the provider site. Coalition staff will work to assist providers in obtaining materials and resources to engage our parents into actively participating in their child’s education.

The Coalition works collaboratively with community partners to ensure that families are aware of special education services. Listed below are some of the agencies in which developmental concerns are referred.

- Florida Diagnostic Learning and Research Services
- Child Find
- Early Steps
- Public School Districts
- Youth and Families Alternatives

Health and Social Services

Within the four county areas, residents have access to a variety of quality health care and social service agencies. Three Florida Hospital facilities are located in Hardee and Highlands Counties and are a part of the Adventist Health System Network throughout the state. Highlands Regional Medical Center, Fawcett Memorial, Peace River Hospital, and Charlotte Regional Hospital are all privately owned and operated hospitals. Florida Department of Health facilities are located in each county. These facilities are state funded and meet health, nutrition and social services needs for the whole family. Care for indigent families is also available at Central Florida Health Care in Hardee and Highlands Counties, Charlotte County Homeless Coalition and Saint Vincent De Paul in Charlotte County. Head Start programs, Healthy Start agencies, and Redlands Christian Migrant Associations also provide an array of health, dental, and social services to families within our Coalition service area.

The Early Learning Coalition of Florida's Heartland, Inc. (Coalition) was established in 2000 as a 501(c) (3) and as of July 1, 2005 due to coalition mergers includes Charlotte, DeSoto, Hardee and Highlands Counties. The Coalition acts as its own service provider and fiscal agent. Services include: Resource and Referral, Eligibility determination, provider trainings, parent support and involvement, inclusion warm line, provider reimbursement, VPK eligibility and reimbursement, and VPK child certification. As the Coalition continues to provide these services "in-house", the focus to enhance the quality of our early childhood education programs is foremost. Being readily accessible, and providing frequent on site training to our providers, has helped our providers understand the Coalition is a partner in the education field.

The Coalition is an active member in all four communities. The Coalition staff and board members work collaboratively with local agencies, are represented on various boards, and are local members of numerous organizations. The Coalition understands the importance of networking with community agencies to assist in caring for the needs of all children. Strong working relationships have been established between the Coalition, school boards, state college personnel and other early education providers. The Coalition Board of Directors consists of members that represent the health department, school districts, Work Force Development Boards, and Head Start. These entities work collaboratively to address the whole child.

Part 3. Coalition Governance

Section 0.1 Board Operation

0.1.1. Does the Board membership (included in **Attachment 1**) adhere to statute and policy requirements?
(s. 411.01(5)(a)4-7., F.S.)([OEL File # 206.01](#), [OEL File # 206.02](#), [OEL file # 206.03](#), [OEL file # 206.04](#))

Yes

No, and the following describes how the Coalition will completely conform to the requirement:

0.2.1. Is the Coalition organized as a corporation? (s. 411.01(5)(d)4.i, F.S.) ([OEL File # 206.10](#))

Yes, and copies of the bylaws, articles of incorporation, and organizational chart are included in **Attachment 2**.

No

0.3.1. Does the Coalition have a process in place to address board and personnel complaints?

Yes, **Attachment 3**.

No, and the following describes how the Coalition will develop a process:

Part 4. Program Elements

Section 1. Program Administration

1.1 Support Services

1.1.1 Does the Coalition directly provide for or does the Coalition contract for the following services: systems support services, such as, an early learning resource and referral, eligibility determinations, training of providers, Inclusion Warm Line and parent support and involvement?(s. 411.01(5)(d)4.g., F.S.) (s. 402.3018(2), F.S.)

Yes, the Coalition maintains overall control of systems support services provided by the Coalition or other entity(ies).

No, and the following describes how the Coalition will completely conform to the requirement:

Service	Provided by Coalition	Provided by other Entity(ies), (NAME)s
Resource and Referral	<input checked="" type="checkbox"/>	
Eligibility Determination	<input checked="" type="checkbox"/>	
Provider Training	<input checked="" type="checkbox"/>	
Parent Support and Involvement	<input checked="" type="checkbox"/>	
Inclusion Warm Line	<input checked="" type="checkbox"/>	
Reimbursement	<input checked="" type="checkbox"/>	
Other (List all) 1. VPK provider certification, eligibility and reimbursement. 2. All quality initiatives are provided by the Coalition	<input checked="" type="checkbox"/>	

1.2 Single Point of Entry and Unified Waiting List

1.2.1. Does the Coalition adhere to the single point of entry and unified waiting list established in statute and rule(s. 411.01(5)(c)1.e., F.S.; s. 1002.53(4)(a), F.S.)(60BB-4.300)

Yes

No, and the following describes how the Coalition will completely conform to the requirement:

1.2.2. Do parents apply for School Readiness services for their children through the single point of entry system? (s. 411.01(5)(c)1.e., F.S.; s. 1002.53(4)(a), F.S.)

Yes

No, and the following describes other points of entry and how the Coalition will completely conform to the single point of entry requirement.

1.3 Eligibility and Enrollment Processes

1.3.1. Does the Coalition adhere to eligibility priorities established in statute and rule? (s. 411.01(5)(d)4.d., F.S.; s. 411.01(6), F.S.)(60BB-4.200-207,209)

Yes

No, and the following describes how the Coalition will completely conform to the requirement:

1.3.2. Has the Coalition established additional eligibility priorities?

Yes

No

1.3.5. Does the coalition offer School Readiness Transportation services to at-risk children and has the coalition received prior approval of the Agency for this service? (s. 411.01014, F.S.)

Yes

X No

1.3.6. Does the coalition serve at least the minimum number of children required? (s. 411.01(5)(a)2., F.S.)

Yes

X No, and the following describes how the coalition demonstrates its ability to implement the School Readiness Program efficiently and effectively and that it can perform its duties in accordance with law:

Routine budget reviews are conducted by ELCFH management and the ELCFH Finance Committee throughout the year to compare usage of operational funds, with adjustments made and additional funding reallocated to the slot budget. In addition, the ELCFH Finance Committee and Board of Directors carefully evaluates the ELCFH budget, comparing earmarks with expenses and activities as stipulated in the ELCFH Plan. As the Board prepared the budget for FY 10-11, decreases were applied to programmatic activities and operational expenses so that additional funds could be moved to the slot budget. To date, an average of 72 % of ELCFH School Readiness funding is allocated to slots.

The ELCFH actively pursues alternate funding sources through grants and donations. During FY 09-10, the ELCFH secured \$255,306 of the required \$264,320 match from 14 funders and donors. These funds were used either as cash match for slots or applied to programmatic activities (ultimately alleviating additional School Readiness funds to be moved into slots or providing enhanced programmatic activities for children served through contracted School Readiness providers). In the current fiscal year, the ELCFH has met its 6% local match obligation through aggressive grant writing.

1.5 Payment Rates

1.5.1. Coalitions are required to establish payment rates that encompass all programs funded by the Coalition and take into consideration the most current market rate survey. A copy of the most current payment rate is included in **Attachment 5**. (s. 411.01(5)(e)2, F.S.)([OEL File # 400.02](#))

1.6 Sliding Fee Scale

1.6.1. A sliding fee scale, which is used to determine each family's contribution to the cost of early learning, must vary based on income and the size of the family. A copy of this sliding fee scale for early learning services is provided as **Attachment 6**. (s. 411.01(5)(d)4.a, F.S.)(45 CFR 98.42)

Does the Coalition use factors in addition to income and the size of the family to determine the Sliding Fee Scale?

Yes, and the following describe any additional factors that will be used:

No

1.7 Extended Day and Extended Year Services to Support Self-Sufficiency

1.7.1. Describe the Coalition process for providing, coordinating, and increasing the availability of extended day and extended year services. (s. 411.01(5)(c)1.b., F.S.) Extended day and extended year service is offered to eligible families through the Coalition via contracted child care provider facilities.

Identify expected results relative to this element in the chart below:

Required Element	Current Situation	Objective	Activities	Outcome
1.7.1. Extended Day and Extended Year Services	The ELCFH has recruited child care providers who offer extended day (evening, weekend and overnight care), as well as provider who offer extended year (school age) services in all four counties.	To continue to recruit and increase the number of providers locally who offer extended day and extended service to parents as needed.	The COALITION will continue to fund extended day/extended year services for eligible families. The COALITION continues to recruit providers for extended day, extended year services to meet the needs of hard-to-serve and under-served populations, such as special needs, low income, migrants and teen parents.	Continue to recruit extended day/ extended year programs to accommodate parental choice.

1.9 Program and Service Evaluation

1.9.2. Describe how the Coalition evaluates the effectiveness of school readiness programs and services. (s. 411.01(5)(g), F.S.) The Coalition Board and the Executive Director create a Plan for the Coalition that addresses the requirements pertaining to the School Readiness Statutes. The effectiveness of the Plan's progress throughout the year is evaluated through reports, presentations and discussion of items in board meetings and committee involvement. The Executive Director provides guidance to the Coalition staff in the development of the Plan and how it is implemented. Ongoing in-house monitoring and FOEL monitors determine the Coalition's ability to meet the Plan, explore any deficiencies and then create a corrective action to address any deficiencies. All progress is reported at the Coalition Board level throughout the life of the Plan. Meeting with outside agencies, such as Department of Children and Families, State coordinating training agencies and the various county wide health departments, who also monitor child care providers, allows the Coalition insight to determine adherence to statutory and programmatic requirements. These requirements include, but are not limited to, instructional staff training, licensure status, health and safety environments and classroom ratios.

The Coalition will utilize the ELCFH Board approved School Readiness Provider Contract Monitor tool to evaluate the effectiveness of the School Readiness services. Per ELCFH Board approved policy, ELCFH staff facilitates an assurance check with newly applying providers prior to issuance of the School Readiness Provider Contract. Once contracted, the monitor tool is facilitated with each contracted School Readiness Provider within the ELCFH service area on an annual basis. The results of the check/ monitor demonstrate the provider's ability to adhere to the provisions of the School Readiness Provider Contract and FS 411.01, thus showing the level of delivery of service to children. Deficiencies are addressed as defined by ELCFH Board approved policy including contractual review, probation and, if deemed necessary, contract termination. The LAP-3 and E-LAP child assessments are also used to assess overall child development of children age birth to five years who are receiving services from contracted School Readiness Providers. Data/ information collected from the LAP-3/ E-LAP sample is solely used to assess individual child development and identify needed technical assistance support for the provider.

The Environment Rating Scale and/ or CLASS Program assessment instruments is offered annually to all ELCFH School Readiness Contracted providers (as training and ELCFH staff reliability permits) who are within the ELCFH service area as a comprehensive technical assistance activity. As a result of this activity, assessments, areas where additional focus is needed is identified for the individual provider.

RE	Current Situation	Obj	Activities	Outcome
1.9.2. Evaluation Plan	The Plan is reviewed bi-annually by the Coalition Board and the Executive Director, with input from Coalition staff in the form of reports, monitors and discussion.	To evaluate the effectiveness of the School Readiness and VPK programs	<ol style="list-style-type: none"> 1. The Plan will serve as the framework for all ELCFH work. The Plan is written collaboratively with Coalition Staff, the Coalition Board, with discussion from the child care field. The Plan is reviewed twice a year with reports to the Coalition board. The Board may amend the Plan as needed, with FOEL plan amendment approval. 2. ELCFH staff will facilitate an assurance check with newly applying providers prior to issuance of the School Readiness Provider Contract 3. Contracted SR provider sites are monitored annually using the ELCFH School Readiness Provider Contract monitor tool. The Coalition will measure the quality and delivery of each provider's program in the areas of health and safety, developmentally appropriate curriculum and appropriate environments. 4. Contracted SR provider sites will be offered the ERS and/or CLASS program assessments as a comprehensive technical assistance activity. Results will be used to provide individualized technical assistance to provider sites 5. A sampling of SR funded children will be assessed using the LAP/ E-LAP child assessment tool. Assessment scores will be used for the purposes of measuring ongoing child progress and the provision of TA to the provider. 	<ol style="list-style-type: none"> 1. 100% of contracted SR providers will receive TA visits proportionate to their need (ie struggling providers might have TA visits once per week, while providers who demonstrate quality competencies may be visited once per month). 2. 100% of newly contracted SR providers will demonstrate preparedness for the terms of the contract. 3. 100% of contracted SR providers will receive individualized technical assistance based program monitor, CLASS and child assessment results. 4. 100% of contracted SR providers will demonstrate progress via the monitor results by either maintaining or increasing their overall score. 5. 100% of parents whose children are assessed will receive the assessment results. 6. 100% of parents whose children are assessed and the results indicate a possible need for further evaluation will receive information regarding referral to Early Steps or FDLRS. 7. The ELCFH will follow-up with 100% of applicable parents requesting generation of a referral or additional ELCFH ECE staff observation of their child.

1.9.3. Coalitions are required to implement a comprehensive program of school readiness services that enhance the cognitive, social, and physical development of children. (s. 411.01(5)(c)2., F.S.)

Does the coalition maintain a provider agreement which requires providers to implement s. 411.01(5)(c)2, F.S.?

Yes, and a copy of the provider agreement is attached.

No, and the following describes how the coalition will establish and maintain a provider agreement which requires providers to implement all of the elements of s. 411.01(5)(c)2, F.S.

1.9.4. Monitoring Tools

Does the coalition's provider agreement contain language that would exclude a group of providers (other than those which do not meet the requirements of s.411.01, F.S.) or limit parental choice? (411.01(7)(a), F.S.)

Yes, and a copy of the provider agreement monitoring tool; a description of the reasons that such language is included in the provider agreement; a description of the method by which the coalition determines that a provider should be excluded; and list of the number, types, and locations of providers which have been excluded as a result of the language are included in Attachment

No, and the coalition has attached as Attachment 3 the **procedures and policies** by which the coalition guarantees that providers comply with section 411.01, Florida Statutes.

1.10 Grievance Policies

1.10.1. Does the Coalition have grievance policies or procedures to address parent, provider, and Coalition staff issues?

Yes, and attached is a sample of the grievance policies or procedures included as **Attachment 8**.

No, and the following describes how the collations will develop a procedure(s):

Section 2. Community Coordination

2.1 School-age Care

2.1.1. Does the Coalition coordinate with other community agencies to address the need for school-age care? (45 CFR 98.20(a)(1))

Yes, and the following describes the Coalition’s partner agencies and the services provided:

The Coalition supports using School Readiness Funds for school age care. School Readiness providers care for school age children up to 13 years of age. School age programs are implemented in private, faith based and school district sites throughout all counties by providing year round services including after school and summer child care for scholarship children. The Coalition encourages community partners, including the Cooper Street Recreation Center and local YMCAs, and to expand availability of services to school age children. The Coalition reviews utilization and enrollment reports monthly for the number of children in school age programs (ages 5-13) and special needs children ages 13 to 19.

No, and the following describes why:

2.3 Coordination with the Department of Children and Families

2.3.1. Does the Coalition coordinate monitoring activities with the Department of Children and Families to minimize duplication, including adherence to the Standard Levels of Service? (s. 1002.67(3)(d), F.S.)(s. 411.01(2)(c), F.S.)

The Coalition coordinates monitoring services with the Department of Children and Families in accordance with the Standards Levels of Service by meeting regularly with licensing staff to discuss issues, exchange information and to minimize duplication. Phone contact is also conducted as needed. The Coalition maintains a “designated reporter” confidential log/file of complaints referred to DCF licensing.

No, and the following describes how the Coalition will completely conform to the requirement:

2.4 Coordinated Staff Development and Training

2.4.1. Describe how the Coalition ensures the provision of coordinated staff development and training (s. 411.01(5)(c)1.c., F.S.), including helping VPK providers meet educational goals. (s.1002.65, F.S.)

The Coalition ensures the provision of coordinated staff development and training by offering and promoting trainings provided by South Florida State College, Edison College and the Coalition office. A variety of trainings are offered at the local colleges and also college credit classes at locations in all four counties. The Coalition offers monthly trainings at all four offices that are geared to early childhood educators and offers inservice certificates and CEUs. The Coalition distributes TTAS/OEL sponsored statewide trainings that are open to all early care providers.

Identify expected results relative to this element in the **chart A** below:

Required Element	Current Situation	Objective	Activities	Outcome
2.4.1. Coordinated Staff Development and Training	<p>South Florida State College (SFSC) and Edison College offer trainings for early childhood educators on a continual basis. The Coalition offers inservice trainings and workshops on a regular basis.</p> <p>The Coalition establishes a monthly training calendar that identifies a variety of training opportunities available to School Readiness and VPK providers. The trainings are designed to provide in-service opportunities to child care educators with available CEU credits.</p>	<p>1. To ensure that early care educators have options in regard to necessary and needed training locally at reasonable cost and to ensure that up to date information is readily accessible to providers and child care staff.</p>	<p>1. The Coalition will collaborate with respective colleges to assist in development of early childhood training calendars. Teachers will attend in-service trainings, college courses and/or workshops offered locally by the colleges and/or the Coalition.</p>	<p>1. The majority of participating teachers will have increased their knowledge and skill as demonstrated in pre/ post training survey results.</p>

Identify the elements of the Coalition’s coordinated staff development and training plan in **chart B** below:

Does the Coalition’s coordinated staff development and training plan include:	Yes	No	Responsible Entity *	Which Groups Participate
A link to Early Learning Guidelines	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Coalition, DOE/VPK Facilitator, SFSC, Polk State College and Edison State College	SR/ VPK Approved Providers
Continuum of training and education to form a career path	<input checked="" type="checkbox"/>	<input type="checkbox"/>	SFSC, Edison State College and Polk State College	SR/VPK Approved Providers
Articulation from one type of training to the next	<input checked="" type="checkbox"/>	<input type="checkbox"/>	SFSC, Edison State College and Polk State College	SR /VPK Approved Providers
Quality assurance through approval of trainers	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Child Care of SW Florida, Coalition and Polk State College	SR/VPK Approved Providers
Quality assurance through approval of training content	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Child Care of SW Florida, Coalition and Polk State College	SR/VPK Approved Providers

A system to track practitioners' training	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Child Care of SW Florida, DCF website	SR/VPK Approved Providers
Assessment or evaluation of training effectiveness	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Child Care of SW Florida, and Coalition	SR/VPK Approved Providers
Administrators' Credential	<input checked="" type="checkbox"/>	<input type="checkbox"/>	SFSC, Edison State College, Polk State College	SR/VPK Approved Providers
Specialized strategies to reach informal providers	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Coalition	Potential SR providers
Other (explain):	<input type="checkbox"/>	<input type="checkbox"/>		

* Please designate whether the entity is performing services for VPK and /or School Readiness.

2.5 Collaboration and Coordination of Services with Other Entities

2.5.1. Does the Coalition consult with representatives of local governments, health agencies and organizations, employment agencies and organizations, public education, child welfare agencies and organizations, Head Start, programs that promote inclusion of children with special needs, and other local private entities providing early childhood development services in developing and implementing programs?

Yes

Local Government: Charlotte County provides matching dollars for direct child care services provided to working parents who are income eligible. The Highlands County Hospital District Board, under the auspices for the Highlands County BOCC, provides funding to support child assessment and optimal health and nutrition.

School Districts: The School Districts in all four counties are involved in the Summer VPK program and the Charlotte and DeSoto School Districts participate in the Year round VPK program. The DeSoto School District also participates in the year round school readiness program.

Head Start Programs: The Head Start programs in all four counties, whether operated by the local school district, Redlands Christian Migrant Association, RCMA or East Coast Migrant Head Start Project, ECMHSP, partner with the Coalition to include children with special needs. Educational trainings are also developed and conducted for the Head Start programs.

Child Welfare Agencies: The Coalition works in collaboration with the Department of Children and Families, the Safe Child Coalition, the Ruth Cooper Center and Kids Hope United to serve at risk children. For child related referrals the Coalition works directly with either FDLRS or Early Steps, depending on the age of the child.

Workforce Development: The Coalition continues to receive TANF referrals, from all local Workforce Development offices.

Public Education: The Coalition provides VPK standards training and technical assistance to public school teachers annually, with emphasis on the referral process for ESE students.

Higher Institutes of Learning: The Coalition continues to support local higher institutes of learning to provide annual Early Childhood Education conferences with CEUs offered, and to sponsor educational scholarships for state mandated courses and other needed trainings.

Health Agencies and Organizations: All four county health offices provide immunization and physicals to families of scholarship children. The Coalition collaborates with community partners to promote, and participate in, events with a focus on quality services. Teen Parent alliance groups meet monthly and educational materials are distributed. The Coalition partners with Healthy Families and Healthy Start to distribute education and outreach materials.

No, and these are the agencies that are not consulted with and why:

2.5.2. Describe Coalition activities to encourage private partnerships that promote private-sector involvement in meeting early care and education needs. (45 CFR 98.16(d))

Identify expected results relative to the promotion of private-sector involvement in meeting early learning needs in the chart below:

Required Element	Current Situation	Objective	Activities	Outcome
2.5.2. Coordination of Services – Public-private partnerships	By networking with entities like the local Chambers of Commerce, and advertising the Coalition services in local child care publications, the exposure of the Coalition is visible in all four counties.	To market the business of the Coalition and to seek connections for opportunities that will serve the Coalition and its mission.	Membership in all local Chambers of Commerce, local advertising and networking with private sector business and board members to assist in promoting the Coalition locally.	Annually one new funding opportunity and/or partnership with a private sector entity will be presented to the Coalition Board for review and approval.

2.5.3. Describe Coalition efforts and activities to meet Match requirements?

Match is received from a variety of local sources including United Way of Charlotte County, Charlotte County Board of County Commissioners, City of Punta Gorda, the United Way of Central Florida and the Highlands County Hospital District Board. Match is also sought from private foundations and other sources. As needed, a match waiver is requested for DeSoto County.

Identify expected results relative to securing match in the chart below:

Required Element	Current Situation	Objective	Activities	Outcome
2.5.3. Coordination of Services – match	The Coalition of Florida’s Heartland is responsible for securing 6% in local matching funds. Funds may be secured from United Way of Charlotte County, the Charlotte County Board of Commissioners, DeSoto County Board of Commissioners, United Way of Central Florida and the Highlands County Hospital District Board.	To research and increase the number of funders that are able to support the Coalition with matching funds for the working poor category.	The local Coalition offices in each county will actively participate in seeking new matching fund contributors either in the private sector or in the remaining county commissioner arenas.	Increase the number of local matching fund contributors by one per year, to support the funds used to serve low income working families.

Section 3. Processes with Parents

3.1 Consumer Education

3.1.1. Does the Coalition ensure that early learning resource and referral services identified in the *Standard Levels of Service* provide consumer education to promote informed early education and care choices by parents, as identified in the Standard Levels of Service? (s. 411.01(5)(c)2.g., F.S.)(45 CFR 98.33)

Yes

No, and the following describes how the Coalition will completely conform to the requirement:

3.2 Choice of Settings

3.2.1. Does the Coalition ensure that parents are offered a choice of settings in legally operating programs; licensed, registered, religious-exempt, school-based, and informal programs, including access through certificate options, as identified in the *Standard Levels of Service*? (s. 411.01(5)(d)4.b, F.S.; s. 411.01(7)(a), F.S.)(45 CFR 98.1 & 98.30)

Yes

No, and the following describes how the Coalition will completely conform to the requirement:

3.3 Parent Access

3.3.1. Does the Coalition have an established policy that ensures parents have unlimited access to their children whenever children are in the care of School Readiness providers? (CFR 45 Part 98.31)

Yes

No, and the following describes how the Coalition will completely conform to the requirement:

3.4 Parent Involvement and Skill-building

3.4.1. Describe how the Coalition ensures the provision of parent involvement and skill-building/education opportunities. (s. 411.01(4)(o), F.S.) Each Coalition office has a resource library for providers and parents to use. The goal of having the resources is to encourage reading and literacy, and to offer books that concentrate on parent-skill building and developmentally appropriate toys and activities. Educational materials are available in both English and Spanish. Parents participate in the Ages and Stages Questionnaire, ASQ. The parent is the child’s first teacher and this screening was created with this concept in mind. At provider sites, children are assessed using the E-LAP and LAP-3 assessment tool, which requires parent input, suggested work plans and success reporting to each child’s parent. Parents are provided with the screenings and assessment results and referrals are provided as needed. The screening and assessment tools offer opportunities for parent involvement, and provide activities parents can do to help their child enter public school ready to learn. Coalition staff provide on -site technical assistance to child care providers on effective ways to communicate with parents, parent training topics, and how to help parents stay involved in their child’s education Coalition staff encourage providers to use group parent meetings, early morning breakfasts, parent bulletin boards, parent/teacher conferences and the provider handbook as means to encourage parent involvement.

Identify expected results relative to this element in the chart below:

Required Element	Current Situation	Objective	Activities	Outcome
3.4.1. Parent Involvement and Skill-building	Parents are involved with their child’s screenings and assessments through the ASQ and LAP. Technical assistance is offered by Coalition staff to provide training to child care providers on how to involve parents at the provider sites.	1. To provide scheduled technical assistance to both providers and parents to promote understanding of their child’s development based on Florida Birth to Three Learning and Developmental Standards, Florida School Readiness Performance Standards for Three-, Four-, Five Year Old Children and Florida Voluntary Pre Kindergarten Education Standards and other parent involvement trainings at the child care provider site thus promoting parent involvement.	1. The Coalition staff will schedule and promote provider trainings within each Coalition communities and continue to provide technical assistance regarding Florida Birth to Three Learning and Developmental Standards, Florida School Readiness Performance Standards for Three-, Four-, Five Year Old Children and Florida Voluntary Pre Kindergarten Education Standards and other parent involvement activities as requested by providers and parents.	1. Providers will report increased parent involvement as a result of facilitating the ASQ and LAP with children age birth to five years based on SR monitoring results.

3.4.2. Describe how the Coalition provides family literacy opportunities. (s. 411.01(4)(o), F.S.)

Identify expected results relative to this element in the chart below:

Required Element	Current Situation	Objective	Activities	Outcome
3.4.2. Family Literacy	The Coalition continues to expand the existing literacy programs through the use of curriculum resources including literacy bags, the lending library and other family literacy materials that are lent or given to providers.	All approved school readiness programs will be offered materials such as books, and teaching guides, to help implement family literacy programs	<p>Offer a variety of literacy related activities and/or opportunities to providers to enhance their understanding, or to share with parents. These may include, but are not limited to, children’s books, formal classes for providers or parents, and classroom or parent meeting observations and feedback.</p> <p>Books are chosen and ordered by Coalition staff and then distributed to providers as funding permits.</p>	Each county office will offer technical assistance to all of contracted SR/ VPK providers regarding best practices to encourage parent involvement at provider sites.

3.5 Family Support Services

3.5.1. Describe how the Coalition ensures the provision of family support services to help achieve economic self-sufficiency. (s. 411.01(5)(c)1.d., F.S.)

The funding through the CCDF grant is used to offer eligible families assistance with the cost of child care, allowing families to continue their education, continue working and use their earned dollars towards other expenses. The largest percentage of scholarship dollars spent in the four county regions is to help working poor families with the cost of child care. Some families can work out of the program due to salary increases and can become self sufficient. The majority of working poor families remains within the income scale of the parent fees as their child progresses through their early childhood years. Families are re-determined annually once they become eligible for services. Eligibility is based on the family income, and work or educational activities.

Referrals that originate from the local Workforce offices secures funding so that families can gain job seeking skills, this securing gainful employment and becoming self sufficient. Transitional Child Care (TCC) is one of the child-care related support services offered to help clients achieve self sufficiency. TCC is a main stay of support services for families who receive some type of cash assistance including Temporary Assistance to Needy Families, Upfront Diversion of Relocations Services. Each group has specific eligibility criteria, and each client is required to demonstrate financial need. When a client becomes eligible for TCC, services can be provided for up to two years.

Resource and Referral services, offered at all four Coalition offices, are reviewed regularly to determine if we are meeting the needs of the families served. The Coalition analysts are dedicated to assisting parents find community resources such as housing, food, assistance with housing costs, employment, counseling and other support services the would assist families in becoming self sufficient. Training provided to child care providers includes understanding the Resource and Referral process, and knowledge regarding how to connect families to community resources, The Resource and Referral services are a combined service that the Analysts perform in concert with scholarship eligibility.

Identify expected results relative to this element in the chart below:

Required Element	Current Situation	Objective	Activities	Outcome
3.5.1. Family Support Services	Funding for child care is offered through the Coalition, for working poor clients based on eligibility and by referral from local Workforce offices. Resource and Referral services are free and available to all families who need information of support services, child care providers and scholarship services.	To provide support services to help families achieve economic self sufficiency.	The Coalition’s Resource and Referral analysts will continue to meet with families to meet their individual needs for support services.	At least 90% of families who respond to the survey regarding satisfaction with the Resource and Referral services that referrals assessed resulted in utilization of support services, as evidenced by documentation in the client file.

3.6 Unique Population Groups 3.6.1. Describe how the Coalition ensures that support services are provided to families from unique population groups, as identified in the Standard Levels of Service. (s. 411.01(5)(d)4.j., F.S.)(45 CFR 98.44; 45 CFR 98.50(a)). Redlands Christian Migrant Association, RCMA, meet the specific needs of seasonal and migrant farmworker families in DeSoto, Hardee and Highlands Counties. RCMA contracts with the Coalition to provide continuity of child care to families who continue to remain eligible for school readiness services, but who no longer qualify for BG7 funds. Early Steps and FDLRS serve families who have children with special needs, based on referrals from the Coalition. Each Coalition office employs staff who are bilingual in order to communicate with providers and parents whose first language is not English.

Identify expected results relative to this element in the chart below:

Required Element	Current Situation	Objective	Activities	Outcome
3.6.1. Unique Population Groups	<p>RCMA provides significant and specialized services for the seasonal and migrant farmworker population in DeSoto, Hardee and Highlands Counties.</p> <p>Early Steps/FDLRS serve the special needs population.</p> <p>All office staff assists unique populations of families, whose first language is not English.</p>	<p>1. To meet the specific needs of seasonal and migrant farmworker families who need child care services.</p> <p>2. To meet the specific needs of special needs children and their families.</p> <p>3. Make communication more respectful for non-English speaking families by hiring bilingual staff. The Coalition staff will offer Spanish, Creole, Polish, Russian, Hearing Impaired and other language translator services.</p>	<p>1. Provide child care and family support services to seasonal and migrant farmworker families assisting families to become self sufficient.</p> <p>2. ELCFH staff work with Early Steps and FDLRS staff, child care providers and parents of special needs children to screen/assess and offer recommendation and/or referral services. This collaborative effort assures non-duplication of services.</p> <p>3. Client interviews will be conducted by bilingual Coalition staff and documents will be translated verbally as well as written in client’s preferred language. Coalition staff will access the Language Line and the Florida Relay TDD line to assist clients. Each Coalition office has a toll free Warm line as an additional resource for providers.</p>	<p>1. 100% of seasonal and migrant farmworker families seeking child care services are referred to RCMA.</p> <p>2. 100% of families with children with special needs who are seeking services are referred to Early Steps/FDLRS as documented.</p> <p>3. 100% of families, whose first language is not English, will receive some service or materials in their preferred language, as documented in history notes and in the file copy of the needs survey.</p>

Section 4. Processes with Providers

4.1 Health Screenings

4.1.1. Does the Coalition conduct health screenings and referrals or coordinate with an entity(ies) to conduct health screenings and referrals on school readiness children including license exempt and faith-based providers? (s. 411.01(2)(a), F.S)(45 CFR 98.41)

Yes, and those entities include:

Entity(ies)	Immunization Requirements	Type(s) of Screening Administered (For Demonstration Purposes Only)	Referral Method (For Demonstration Purposes Only)
Health Departments of Charlotte, DeSoto, Hardee and Highlands Counties; local pediatricians and health clinics	<input checked="" type="checkbox"/>	Provides immunizations and physicals.	Every child has to have updated immunizations and a current physical to enter child care centers, child care family homes and public school. Referrals are made to the local Department of Health or to private doctors for immunization and physicals.
Coalition Staff/ local partnerships	X	Vision and hearing screenings, height, weight measurement and BMI	If the screening reveals a concern, Coalition staff follow up with the provider and the parent to ensure an appointment with the family doctor or health department is made.

No, and the following describes how the Coalition will completely conform to these requirements:

4.1.2. Does the Coalition require registered and informal providers to adhere to health and safety requirements in addition to the state required child abuse and neglect screenings? (45 CFR 98.41)(s.411.01(5)(c)2.f., F.S.)

Yes, and the following describe the requirements established by the Coalition within the following health and safety categories:

Currently the Coalition does not have any written contracts with informal child care providers. Registered providers, who do not contract with the Coalition, must complete training required by the Department of Children and Families, adhere to health and safety requirements and comply with child abuse and neglect screenings. Informal providers, if they wish to serve scholarship children, must pass the Coalition health and safety process prior to child placement.

- The prevention and control of infectious disease (including age-appropriate immunizations)

All child care providers, including informal providers, are required to comply with all applicable federal, state and local laws and regulations, including but not limited to, local fire and building codes and 65C-22 the Florida Administrative Code.

- Building and physical premises safety

All child care providers, including informal providers, are required to comply with all applicable federal, state and local laws and regulations, including but not limited to local fire and building codes and 65C-22 the Florida Administrative Code.

- Health and safety training

All child care providers, including informal providers, are required to comply with all applicable federal, state and local laws and regulations, including but not limited to local fire and building codes and 65C-22 the Florida Administrative Code.

No, and the following describes how the Coalition will completely conform to the requirement:

4.2 Age-appropriate Screening and Assessments

4.2.1 Describe how the Coalition ensures that all children birth to five years old in school readiness programs receive an age-appropriate developmental assessment(screening) (s. 411.01(5)(c)2.c., F.S.) The description should also include information on how children with screening results outside the developmental norm receive further evaluation and services, if needed.

The Coalition trains child care providers and their staff how to facilitate the ASQ screening tool with children and families. All materials needed to implement the screenings are provided to the child care providers by the Coalition, with ongoing training and one-on-one technical assistance provided as needed. Screenings are offered to School Readiness funded families at the start of the program year or within 45 days of enrollment (for new families). Children with areas of concern will then be referred to the assigned Child Screening and Assessment Specialist at the Coalition, who will provide referral services and/or technical assistance to the child care provider including in-field support services for the individual child (with parental consent). The Specialist may recommend that children developmental areas of concern be referred to a partner agency for additional evaluation(s).

Identify expected results relative to this element in the chart below:

Required Element	Current Situation	Objective	Activities	Outcome
4.2.1. Age-appropriate screening	All children in approved school readiness programs will be screened using the ASQ tool. This includes children between the ages of birth to kindergarten entry. Providers will score the ASQ and share the results with the families and the Coalition.	To ensure that all children in approved school readiness programs, birth through kindergarten entry receive age appropriate screenings with follow up referrals as needed.	Continue to offer trainings on the ASQ tool-to all approved school readiness providers and to provide on site technical assistance as requested.	1. 100% of all School Readiness funded children will have the opportunity to be screened using the ASQ screening system (per parental choice). 2. 100% of children with areas of developmental concern will be recommended for referral (if criteria is met), offered activities, and/or in-field support services.

4.2.2 Describe how the Coalition ensures that a pretest (child assessment) is administered to children when they enter a program and a posttest (child assessment) is administered to children when they leave the program. (s. 411.01(5)(c)2.d., F.S.)

Assessments are facilitated by ELCFH staff with a sampling of School Readiness funded children two times (pre/post) during the fiscal year. Contracted providers may also elect to assess children age birth to five who are not part of the sample. In order to ensure that the pre and post tests are administered the Coalition will monitor the LAP assessments as all data is entered into the web based program either at the provider site or with the assistance of Coalition staff.

Identify expected results relative to this element in the chart below:

Required Element	Current Situation	Objective	Activities	Outcome
4.2.2 Pretest and Posttest	A sample set of School Readiness funded children will be assessed twice annually using the age appropriate LAP assessment tool. The pre and post assessment allows for ongoing measurement of the individual child's progress. This includes children between the ages of birth to kindergarten entry.	A sampling of children in approved school readiness programs will be assessed two times (pre/post) during the fiscal year.	The Coalition will develop and implement a process to ensure that a sampling of children attending approved school readiness programs will complete a uniform pre and post assessment on an annual basis.	<ol style="list-style-type: none"> 1. A sample set of School Readiness funded children with signed parental permission forms will receive a developmental assessments that is logged and tracked. 2. 100% of children who score below the typically developing range will be recommended for referral (if criteria is met), offered activities, and/or in-field support services. 3. 75% of all School Readiness Children that participate in LAP assessments will demonstrate learning gains as evidenced by their pre and post test scores. 4. 100% of all parents of participating children will receive information about the LAP Assessments.

4.3 Developmentally Appropriate Curriculum

4.3.1. Has the Coalition identified and implemented developmentally appropriate curricula? (s. 411.01(5)(c) 2.a., F.S.)

Yes--Attachment 11

No, and the following describes how the Coalition will completely conform to the requirement:

4.3.2. Has the Coalition identified and implemented character development program(s)? (s. 411.01(5)(c) 2.b., F.S.)

Yes **Attachment 11**

No, and the following describes how the Coalition will completely conform to the requirement:

4.3.3. Describe how the Coalition ensures that school readiness providers use developmentally appropriate curricula.

The Coalition supports a developmentally appropriate, research based, curriculum which includes a character development component. The Coalition ensures providers use appropriate curriculums when they perform the annual review.

Identify expected results relative to this element in the chart below:

Required Element	Current Situation	Objective	Activities	Outcome
4.3.3. Developmentally appropriate curricula	The Coalition requests the provider to indicate their current choice of developmentally appropriate curriculum. This creates a baseline of information for the Coalition staff.	To verify that approved SR providers use developmentally appropriate curriculum.	The Coalition will survey all approved school readiness providers to identify which providers are currently using a developmentally appropriate curriculum. To the providers who did not respond, or who are not using a developmentally appropriate curriculum, Coalition staff will offer technical assistance Ongoing curricula training will be available to providers as needed.	100% of all approved school readiness providers have indicated their choice of a developmentally appropriate curriculum. Evidence of usage is documented on the ELCFH School Readiness Program Monitor.

4.4 Confidentiality of Records

4.4.1. Has the Coalition established policy and procedures to ensure the confidentiality of individual child records and early learning provider records, as identified in the Standard Levels of Service? (s. 411.011, F.S.)(s.1002.72, F.S.)

Yes

No, and the following describes how the Coalition will completely conform to these requirements:

Section 5: Quality Activities and Services

5.1 Quality Activities

5.1.1. Describe activities the Coalition will implement with quality funds utilizing the chart with descriptive headings listed below. Coalitions are **not** required to develop activities for each heading. (45 CFR 98.51)

The Coalition understands that providing quality activities and initiatives will result in higher quality environments for more age appropriate learning and better working environments for child care staff. Our hope is that our efforts result in a lower percentage of staff turnover and parents who become more involved in their child’s education and child care center. The Coalition meets, and always exceeds, the minimum 4% of total grant dollars for quality expenses. It is our belief that better qualified and trained child care staff, owner/operators who structure their child care business as a business, and rich, developmentally appropriate environments, create the wonder of learning, and the need to inquire. The result is success for the children, providers, staff and families involved.

Category	Description
Comprehensive consumer education	A parent who contacts the Coalition inquiring about child care will be connected to a Resource and Referral analyst who will provide comprehensive information on choosing a quality child care provider. The analyst will provide the parent with information on the variety of programs available, options for child care, and referral them to services they may need. Consumer education is available to all parents in the resource area. Parents can choose videos, books, brochures, pamphlets, magazines and other materials that can assist the parent in being their child’s first teacher.

Gold Seal Differential	The Coalition currently pays the maximum rate of 20% of the Gold Seal differential to Gold Seal Providers.
Grants or loans to providers to assist in meeting State and local standards	Start-up grants are available to family child care providers. Funding from local partners may also be available to provide needed resources to providers.
Professional development, including training, education, and technical assistance	The ELCFH supports those seeking FCCPC credentials or higher degrees through partnering institutions by providing scholarship reimbursements for successful completion of class work. The ELCFH offers numerous in-service trainings- the highlights of the scheduled trainings offered by ELCFH staff include Business Administration Scale/ Program Administration Scale Training for Directors and Owners, Outdoor Playground Safety, Positive Behavior Support, and Building a Healthy Brain. Conferences are provided/ supported as funding permits.
Improving salaries and other compensation for early learning providers	The Coalition works with the local state colleges and partnering agencies to develop and implement a career ladder for child care staff. We also collaborate to promote higher education, additional training and increased compensation for child care staff. In the Quality Initiatives budget, there are funds earmarked for child care staff for college level coursework.

<p>Activities in support of early language, literacy, pre-reading, and early math concepts development</p>	<p>The following literacy programs are routinely offered in at least one of the four counties:</p> <ul style="list-style-type: none"> • Exploring the Infant/ Toddler World • Florida’s Standards for four-year-olds • Literacy for the Whole Classroom- three-part workshop that focused on integrating literacy based activities throughout the classroom environment. • VPK Emergent Literacy – consisted of a 10 hour hands-on training that focused on developmentally appropriate literacy skills for children in VPK programs. • Phonological Awareness <p>For early math development, two workshops are provided:</p> <ul style="list-style-type: none"> • VPK Standards - three hour workshop that introduced VPK teachers to the standards and how to use the book as a guide and resource in planning their curriculum activities to ensure opportunities for children to learn expected concepts and skills. Strong emphasis on math and science. • Making Math Count- two part workshop focused on hands-on strategies for teaching math concepts to young children.
<p>Activities to promote inclusive early learning</p>	<p>ECE Specialists who are on staff at the Coalition, provide training and technical assistance in the areas of inclusion and behavioral issues to providers who may call with requests for assistance.</p> <p>The Coalition contacts Early Steps and FDLRS for child referrals. Early Steps supports families to enhance the development of infant and toddlers’ ages’ birth to 36 months. FDLRS provides these services to children 36 month to kindergarten entry age. Services must be provided to the maximum extent possible, in natural environments, which typically include early care settings. The Coalition believes in placing children in the least restrictive environment and promotes inclusion.</p>

<p>Health activities including those designed to promote the social and emotional development of children</p>	<p>The E-LAP and LAP-3 Assessments include comprehensive educational information regarding the each child’s developmental level. The LAP assessment also includes a social and emotional component for the child assessed.</p> <p>Training for providers assist the child care staff to create safe and healthy environments for all children. Funding from local partners may be utilized to provide needed health and safety training for providers.</p>
<p>Quality activities that increase parental choice and improve the quality and availability of early learning. (§98.51(a)(1) and (2))</p>	<p>The Resource and Referral program, through the Coalition, provides complete information for parents and family members on determining quality child care environments. Resource and Referral provides customized child care options, child care center openings, public assistance information, tax credit and financial aid, quality indicators and guidance on selecting child care, along with everyday tips for a child care search, child care referrals and any other referral that a parent might seek.</p> <p>ELCFH staff may also display and present at county fairs, Business Expos, Chamber of Commerce events and any community events that appear to draw the early childhood and/or early childhood advocate audience.</p>
<p>Other</p>	<p>Not applicable</p>

Identify expected results relative to this element in the chart below:

Required Element	Current Situation	Objective	Activities	Outcome
<p>5.1.1. Quality and Availability Enhancement Activities</p>	<p>The Coalition currently pays the maximum 20% Goal Seal Differential rate to accredited child care providers.</p> <p>Start up grants are available to new family child care programs.</p> <p>Resource libraries are available to child care providers and parents to use and borrow materials.</p> <p>Child Care professional conferences as funding permits.</p> <p>ELCFH staff are available to provide technical assistance to child care providers who are ready to begin the process and reach Gold Seal Status.</p> <p>Training, technical assistance and professional development programs are available to all child care providers to support child care programs in obtaining a high level of quality</p>	<p>To support early child care programs and staff, and to increase the quality and availability of child care services within the Coalition service delivery area.</p>	<p>Professional development conferences/ opportunities are available annually as funding permits.</p> <p>Pay the Gold Seal Differential rate, recruit new providers especially in the infant/toddler age groups,</p> <p>Offer training and technical assistance to providers, their staff and parents,</p> <p>Encourage providers, staff and parents to use the resource and lending libraries</p> <p>The ELCFH will provide outreach venues (ie the ELCFH website) and materials (ie Look Before You Lock initiative) to further inform the public about ELCFH services.</p>	<p>Child Care providers will have improved the quality and effectiveness of their program as evidenced by increased scores on subsequent program evaluations over a three year period.</p>

5.2 Discretionary Funds Related to Early Learning Resource and Referral and School-age Care

5.2.1. Describe activities the Coalition will implement to enhance the quality of early learning resource and referral and school-age care. (45 CFR 98.51(2)(i)) (ACYF-PI-CC-99-05) The Coalition provides Resource and Referral services throughout the four counties and is provided to all interested parents at no cost, and regardless of income. Parents can access Resource and Referral services in person, over the phone, fax and also by email. The Coalition continues to offer a high quality of Resource and Referral services to the public through regular in-house monitoring, state monitoring, attending all Child Care Resource and Referral training and through feedback received from surveys. The Coalition continues to offer select services to all children under the age of 13 and to children up to the age of 19 who are considered special needs.

Identify expected results relative to this element in the chart below:

Required Element	Current Situation	Objective	Activities	Outcome
5.2.1. CCR&R and School-age Quality Improvement Activities	Customized Resource and Referral information is provided either in person, by phone, fax or email, or mail to all parents and families who request it.	1. Improve access and information to child care resource and referral services by parents, regardless of income.	<p>1. The Coalition will continue to provide parents with child care R&R services and information by using the medium best preferred by the parent. All R&R Specialist will achieve Level I Certification within 4 months of hire date in order to provide good service.</p> <p>2. Continue enrollment of eligible school age children into before and after school programs. Children will be enrolled based on the Coalition’s established priorities. A wait list is established when the Coalition determines that enrollment has reached capacity. Referrals for school age children are completed following the normal process, not based on the age of the child.</p>	1. The ELCFH will respond to client requests for CCR&R within 3 business days of the individual’s request.

5.3 Discretionary Funds Related to Infant and Toddler Early Learning

5.3.1. Describe activities the Coalition will implement to enhance the quality of infant and toddler early learning. (ACYF-PI-CC-99-05)

Infant and Toddler Care, and Quality Infant and Toddler Care has decreased Coalition wide. This may be due to the implementation of the VPK program and also the higher ratios and cost of infant/toddler care. Recruitment for infant/toddler slots is ongoing in all four counties.

Identify expected results relative to this element in the chart below:

Required Element	Current Situation	Action	Activities	Outcome
5.3.1. Infant and Toddler Quality Improvement Activities	In all four counties there is an inadequate number of infant and toddler care sites. Additionally, there is a need for providers to understand how to appropriately interact with very young children.	1. Provide trainings on appropriate interactions with infants and toddlers to directors and teachers.	1. Provide technical assistance to contracted programs serving infants and toddlers. 2. Provide CLASS Toddlers observer for toddler programs.	1. Increase in quality of care given to infants and toddlers as evidenced by ECE staff on-site observations.

5.4 Discretionary Funds Related to Inclusive Early Learning

5.4.1. Describe activities the Coalition will implement to enhance inclusive early learning. (ACYF-PI-CC-99-05)

The Coalition, as the service provider for the four counties, also provides the Warm Line services and on site technical assistance and training to child care providers in providing inclusive services as an integral part of their daily program.

Identify expected results relative to this element in the chart below:

Required Element	Current Situation	Action	Activities	Outcome
5.4.1. Inclusive Early Learning Quality Improvement Opportunities	ELCFH ECE Specialists support, and train, child care providers to be able to provide services for children with special needs. The Warm Line is available to child care providers 24 hours a day with a required one day call back limit.	Increase the availability of child care providers capable of caring for children with special needs through the use of technical assistance and Warm Line access.	Provide technical assistance to providers who care for children with special needs and need assistance to meet the behavioral needs of the children. Provide immediate technical assistance through the Warm Line to providers. Provider Inclusion training to child care providers on an ongoing basis.	Early educators will show an increase in understanding and knowledge of incorporating inclusion activities by ensuring that their classroom environments provide reasonable accommodation for all children. This will be evidenced by ECE and CSAS staff on-site observations.

Section 6: Florida's Voluntary Pre-kindergarten Program (VPK):

Below are listed ELCFH responsibilities as an administrator of VPK funds and per the guidance/ direction of Florida's Office of Early Learning (OEL):

VPK Child Enrollments:

1.3.3. The ELCFH adheres to the VPK eligibility documentation requirements as outlined in policy OEL-PI-0013-05.

1.3.4. The ELCFH has established VPK eligibility determination and enrollment procedures (OEL-PI-0014-05).

1.4.1. The ELCFH adheres to statutes and policy regarding verification of attendance for VPK (s.1002.71(6)(b), F.S.)(OEL File # 510.04).

VPK Provider Participation Criteria:

1.8.1. The ELCFH adheres to provider eligibility verification requirement to assure that VPK Programs in the ELCFH service area are approved and contracted (s.1002.55(3), F.S.) (AWI-VPK Form 10).

1.9.1. The ELCFH adheres to VPK program verification requirements (s. 1002.75(2)(e), F.S.). **VPK Readiness Rates and Contract Monitors:** The readiness rates are determined by the Department of Education via the FLKRS which is completed within the first 30 days of kindergarten. The ELCFH reviews the rates to determine support needed. Providers who do not meet the approved readiness rate are monitored for compliance in acknowledging their rate, submission of an improvement plan, compliance with stated plan (approved curriculum purchase and training or staff development plan) and completion of required VPK child assessments three times during the program session. All VPK providers who meet or exceed the approved readiness rate, are monitored for completion of the pre- and post-VPK child assessment. The VPK monitor validates classroom information, ratios, attendance, compliance with Standards, director and teacher information and the program environment.

2.2.1. The ELCFH coordinates with each school district within the Coalition's county(ies) or region for each school-year and/or summer VPK program (s. 1002.53(4)(c), F.S.).

Parental Choice of VPK Provider Program:

3.2.2. The ELCFH assists parents in finding eligible VPK providers through the frequently updated, county specific PROVIDER PROFILES.

Profiles are available on the ELCFH website and/or are handed to parents at the time of the eligibility determination appointment. (s. 1002.53(5), F. S.).