

# **Kansas Early Childhood Program Inventory**

## **Working Draft**

**March 31, 2023**



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**Section One:**  
**KANSAS**  
**DEPARTMENT OF**  
**EDUCATION**

## Kansas Parents as Teachers (KPAT)

<b>Category</b>	Home Visiting & Parent Education
<b>Program Name</b>	Kansas Parents as Teachers (KPAT)
<b>State Administering Agency</b>	Kansas State Department of Education (KSDE)
<b>Federal Administering Agency</b>	N/A
<b>Purpose and Delivery</b>	The Parents as Teachers® (PAT) evidence-based affiliate model provides parents with the skills and knowledge they need to help make informed decisions regarding their child’s education. The program includes personal visits, group connections, health, vision, hearing and developmental screenings, and supports family connections with other community services.
<b>Number of KS children/families served</b>	2021-22: 8,128 children and 6,114 families served
<b>Statutory Authority</b>	<a href="#">K.S.A. 72-4161 et seq.</a> authorizes districts to offer parent education programs. <a href="#">K.S.A. 72-4163</a> designates the State Board of Education as responsible for awarding parent education grants to school districts.
<b>FY23 Funding</b>	\$8,437,635 appropriated for parent education grants from the Children’s Initiatives Fund. A budget proviso requires a minimum of .50 cents local match for each \$1 of state grant funding. <i>Note: this does not include Family First Prevention Services Act funding granted from DCF to the Kansas Parents as Teachers Association.</i>
<b>Current staffing</b>	1.0 FTE KSDE Early Childhood team staff dedicated as the Kansas Parents as Teachers state coordinator; 2.0 FTE KSDE Early Childhood team staff provides shared leadership and administrative support for the team. Fiscal, auditing, IT, and other operational support is provided agencywide. This includes processing of grant payments and annual audits of district expenditures.
<b>Opportunities for improvement/reform under a consolidated agency structure.</b>	<ul style="list-style-type: none"> <li>• Improved ability to document the statewide reach of home visiting/parent education services across models.</li> <li>• Increased ability to direct funding to address gaps so that Kansas families can receive seamless access to services that best fit their needs and preferences.</li> </ul>
<b>Potential gaps, inefficiencies, and/or redundancies that might be addressed/eliminated within a consolidated agency.</b>	<ul style="list-style-type: none"> <li>• Kansas PAT affiliates (programs) may need to utilize funding from multiple agencies to provide Parents as Teachers services (for example, Early Childhood Block Grant, Family First).</li> <li>• KSDE currently coordinates with state agencies responsible for administering other home visiting and parent education programs via the State Home Visiting Leaders Group.</li> </ul>
<b>Does this program undergo any type of formal evaluation or compliance monitoring?</b>	Yes, each affiliate is required to participate in a monitoring process to ensure fidelity to the PAT

	<p>model; KSDE partners with the Parents as Teachers National Center in this. See the <a href="#">2021-2022 Kansas Parents as Teachers Affiliate Performance Report</a>. KSDE performs fiscal audits of grant expenditures; see the <a href="#">Parents as Teachers (PAT) Audit Guide FY23</a>.</p>
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## Preschool-Aged At-Risk

<b>Category</b>	Preschool
<b>Program Name</b>	Preschool-Aged At-Risk
<b>State Administering Agency</b>	Kansas State Department of Education (KSDE)
<b>Federal Administering Agency</b>	N/A
<b>Purpose and Delivery</b>	The Kansas school finance formula provides State Foundation Aid to school districts based on each district's enrollment and various weighting factors. Qualifying students who meet at-risk eligibility criteria and who attend approved preschool-aged at-risk programs are each counted as a ½ student (0.5FTE) in calculating a school district's enrollment and accompanying weightings. See <a href="#">2023-2024 Preschool-Aged At-Risk Program Requirements</a> .
<b>Number of KS children/families served</b>	2021-22: 9,513 preschool-aged at-risk students enrolled on Sept. 20, 2021
<b>Statutory Authority</b>	<a href="#">K.S.A. 72-3215</a> authorizes local boards of education to operate preschool programs. <a href="#">K.S.A. 72-5154</a> establishes the preschool-aged at-risk education fund in each school district. <a href="#">K.S.A. 72-5132</a> defines "preschool-aged at-risk student" and determines that each preschool-aged at-risk student receiving services under an approved at-risk student assistance plan is counted as a ½ student in calculating a school district's enrollment and accompanying weightings in the school finance formula.
<b>FY23 Funding</b>	For 2021-22, the state enrollment aid generated by 9,513 preschool-aged at-risk students multiplied by 0.5FTE multiplied by the BASE (\$4,706) would be \$22,384,089. <ul style="list-style-type: none"> <li>This estimate does not include school finance formula revenue generated by accompanying weightings for these preschool students.</li> </ul>
<b>Current staffing</b>	1.0 FTE KSDE Early Childhood team staff is responsible for Preschool-Aged At-Risk, Kansas Preschool Pilot, and Kansas Early Learning Standards; 2.0 FTE KSDE Early Childhood team staff provides shared leadership and administrative support for the team. Fiscal, auditing, IT, and other operational support is provided agencywide. This includes processing of school finance payments and annual audits of district enrollment.
<b>Opportunities for improvement/reform under a consolidated agency structure.</b>	<ul style="list-style-type: none"> <li>During the 2021-2022 school year, 7,105 preschool students were enrolled in preschool in public schools but did not generate school finance formula funding.</li> <li>Kansas school districts typically utilize multiple funding sources to operate preschool (including Head Start, Early Childhood Block Grant).</li> <li>School districts may partner with licensed child care facilities to deliver preschool services.</li> <li>School districts may operate licensed child care to provide full-day care for preschool students.</li> </ul>

	<ul style="list-style-type: none"> <li>• Children may attend half-day preschool programs operated by school districts and utilize other types of care for the remainder of the day.</li> <li>• KSDE directs questions related to whether programs require child care licensure to KDHE.</li> <li>• KSDE coordinates with the Kansas Head Start Collaboration Office (DCF) and the Kansas Head Start Association to provide assistance to local programs seeking to meet requirements of both state and federal funding.</li> </ul>
<p><b>Potential gaps, inefficiencies, and/or redundancies that might be addressed/eliminated within a consolidated agency.</b></p>	
<p><b>Does this program undergo any type of formal evaluation or compliance monitoring?</b></p>	<p>KSDE annually reviews Preschool-Aged At-Risk plans and the Kansas State Board of Education annually approves districts' Preschool-Aged At-Risk programs. KSDE performs fiscal audits of district enrollment (see the <a href="#">Enrollment Handbook FY23</a>).</p>



## Kansas Preschool Pilot

<b>Category</b>	Preschool
<b>Program Name</b>	Kansas Preschool Pilot
<b>State Administering Agency</b>	Kansas State Department of Education (KSDE)
<b>Federal Administering Agency</b>	U.S. Department of Health and Human Services, Administration for Children and Families is responsible for administering the TANF block grant (DCF is the Kansas lead agency)
<b>Purpose and Delivery</b>	In 2006, Gov. Kathleen Sebelius proposed a pilot for a mix of school- and community-based programs to demonstrate the effectiveness of high-quality preschool. All classrooms in the pilot were required to meet teacher qualification requirements, implement a research-based curriculum, maintain low teacher-child ratios, complete at least 15 hours of teacher training annually, and provide referrals to additional community services for families that need them. While the statewide context for funding preschool and the sources of funding for the Kansas Preschool Pilot have changed over time, the requirements remain largely the same. The Kansas Preschool Pilot provides supplemental grant funding to deliver preschool services. At least 50% of children served by each grantee must meet Kansas Preschool Pilot at-risk criteria.
<b>Number of KS children/families served</b>	2021-22: 4,963 children served. <i>Note: The Kansas Preschool Pilot supplements other district funding to expand early childhood programming; most children served by the Kansas Preschool Pilot are included in counts for Preschool-Aged At-Risk, Early Childhood Special Education, or unfunded preschool students.</i>
<b>Statutory Authority</b>	The “Pre-K Pilot” Children’s Initiatives Fund line-item has been included in the state budget since Fiscal Year 2007. Temporary Assistance for Needy Families is authorized by <a href="#">42 U.S.C. 601-617</a> .
<b>FY23 Funding</b>	<ul style="list-style-type: none"> <li>• \$4,200,000 appropriated for the Kansas Pre-K Pilot from the Children’s Initiatives Fund.</li> <li>• \$4,132,317 in TANF funding per interagency agreement with DCF since 2018-19</li> <li>• 2022-23 only: \$2,585,540 of Governor’s Emergency Education Relief (GEER) funding funded additional grant awards that otherwise would not have received funding.</li> </ul>
<b>Current staffing</b>	1.0 FTE KSDE Early Childhood team staff is responsible for Preschool-Aged At-Risk, Kansas Preschool Pilot, and Kansas Early Learning Standards; 2.0 FTE KSDE Early Childhood team staff provides shared leadership and administrative support for the team. Fiscal, auditing, IT, and other operational support is provided agencywide. This includes processing of grant payments and annual audits of district expenditures. KSDE collaborates with DCF staff regarding requests for TANF reimbursement and with DCF/Children’s Cabinet staff regarding annual reporting.

<p><b>Opportunities for improvement/reform under a consolidated agency structure.</b></p>	<ul style="list-style-type: none"> <li>• Competitive grant programs create significant administrative cost at both the local and state level. If the state addressed preschool financing in a more comprehensive way, that could eliminate the need for competitive grant funding to fill gaps.</li> <li>• KSDE, in consultation with the Kansas Children’s Cabinet and Trust Fund and the Kansas Department for Children and Families, collaborated to align requirements and application processes for the Kansas Preschool Pilot grant with the Early Childhood Block Grant for the 2022-2023 school year.</li> <li>• To increase grantee flexibility to serve children who do not meet at-risk criteria, each local grant consists of 50% CIF funds and 50% TANF funds. Grantees spend and report CIF and TANF funds separately.</li> </ul>
<p><b>Potential gaps, inefficiencies, and/or redundancies that might be addressed/eliminated within a consolidated agency.</b></p>	
<p><b>Does this program undergo any type of formal evaluation or compliance monitoring?</b></p>	<p>KSDE performs fiscal audits of grant expenditures; see the <a href="#">Kansas Preschool Pilot (KPP) Audit Guide FY23</a>.</p> <p>Grantees annually report on the number of children served and program results. KSDE shares this data with DCF, and with the Children’s Cabinet as part of the annual Children’s Initiatives Fund accountability process. In 2021-22 grantees reported serving 4,963 total students. Grantees implement evidence-based assessments in the areas of literacy, mathematics and social emotional development to measure children’s developmental growth upon entry and exist of the program. 93.55% showed improvement in literacy; 94.43% showed improvement in mathematics; 92.93% showed improvement in social emotional development.</p>

## State Enrollment Aid For Preschool Students With Disabilities

<b>Category</b>	Preschool
<b>Program Name</b>	State enrollment aid for preschool students with disabilities
<b>State Administering Agency</b>	Kansas State Department of Education (KSDE)
<b>Federal Administering Agency</b>	U.S. Department of Education, Office of Special Education Programs oversees IDEA
<b>Purpose and Delivery</b>	The Kansas school finance formula provides State Foundation Aid to school districts based on each district's enrollment and various weighting factors. Preschool students with Individualized Education Programs (IEPs) are each counted as a ½ student (0.5FTE) in calculating a school district's enrollment and accompanying weightings.
<b>Number of KS children/families served</b>	2021-22: 5,961 preschool students with disabilities enrolled on Sept. 20, 2021.
<b>Statutory Authority</b>	<ul style="list-style-type: none"> <li>• <a href="#">K.S.A. 72-3215</a> authorizes local boards of education to operate preschool programs.</li> <li>• The <a href="#">Individuals with Disabilities Education Act (IDEA)</a> and <a href="#">K.S.A. 72-3410</a> require the provision of a free appropriate public education to students with disabilities.</li> <li>• <a href="#">K.S.A. 72-5132</a> defines “preschool-aged exceptional children” and determines that each preschool-aged exceptional child is counted as a ½ student in calculating a school district's enrollment and accompanying weightings in the school finance formula.</li> </ul>
<b>FY23 Funding</b>	<p>For 2021-22, the state enrollment aid generated by 5,961 preschool students with disabilities multiplied by 0.5FTE multiplied by the BASE (\$4,706) would be \$14,026,233.</p> <ul style="list-style-type: none"> <li>• This estimate does not include school finance formula revenue generated by accompanying weightings for these preschool students.</li> <li>• This estimate does not include categorical aid reimbursement for staff providing special education services to preschool students.</li> <li>• This estimate does not include federal special education aid provided to local education agencies.</li> </ul>
<b>Current staffing</b>	1.0 FTE KSDE Early Childhood team staff serves as the state Part B, Section 619 Coordinator, and works closely with the KSDE Special Education and Title Services team to support district compliance with special education law, including required data reporting. 2.0 FTE KSDE Early Childhood team staff provides shared leadership and administrative support for the team, including help desk services for Early Childhood Special Education data systems. Fiscal, auditing, IT, and other operational support is provided agencywide.
<b>Opportunities for improvement/reform under a consolidated agency structure.</b>	<ul style="list-style-type: none"> <li>• Federal funds available under IDEA Part B, Section 619 must be distributed to local</li> </ul>

	educational agencies by the state education agency.
<p><b>Potential gaps, inefficiencies, and/or redundancies that might be addressed /eliminated within a consolidated agency.</b></p>	<ul style="list-style-type: none"> <li>• An MOU between KSDE and KDHE outlines coordination regarding Part C (early intervention services for children birth to 3) and Part B (special education for children once they turn 3 years old).</li> <li>• KSDE coordinates with other state agencies on topics related to children with or at risk of developmental delay via the State Interagency Coordinating Council; this includes coordination with the Kansas Head Start Collaboration Office (DCF).</li> </ul>
<p><b>Does this program undergo any type of formal evaluation or compliance monitoring?</b></p>	<p>KSDE performs fiscal audits of district enrollment (see the <a href="#">Enrollment Handbook FY23</a>) and special education expenditures (see <a href="#">Special Education Reimbursement Guide FY23</a>).</p> <p>The Individuals with Disabilities Education Act (IDEA) requires states to develop a State Performance Plan and Annual Performance Report (SPP/APR). This evaluates the State’s efforts to implement the requirements of IDEA and describe how the state will improve its special education programs. The State of Kansas has attained the highest level of achievement (“Meets Requirements”) in providing services to children and youth with disabilities for the previous 15 years. See the <a href="#">KSDE SPP and APR website</a>.</p>

**State Interagency Coordinating Council (SICC)/Local Interagency Coordinating Councils (LICCs)**

<b>Category</b>	Governance
<b>Program Name</b>	State Interagency Coordinating Council (SICC) and Local Interagency Coordinating Councils (LICCs)
<b>State Administering Agency</b>	Kansas State Department of Education (KSDE)
<b>Federal Administering Agency</b>	U.S. Department of Education, Office of Special Education Programs
<b>Purpose and Delivery</b>	The SICC mission is to ensure a comprehensive service delivery system of integrated services is available in Kansas to all children with or at risk for developmental delays from birth through age 5 and their families. The SICC advises and assists the Governor and state agencies on these issues.
<b>Number of KS children/families served</b>	N/A
<b>Statutory Authority</b>	<a href="#">K.S.A. 74-7801 et. seq.</a> establishes the Kansas Coordinating Council on Early Childhood Developmental Services. <a href="#">K.S.A. 75-5648</a> defines local interagency coordinating councils. <a href="#">K.S.A. 75-5649</a> directs KDHE to adopt rules and regulations regarding the duties of local councils ( <a href="#">K.A.R. 28-4-565</a> ). <a href="#">P.L. 108-446 § 641</a> requires the establishment of a State Interagency Coordinating Council to receive federal funding under IDEA Part C.
<b>FY23 Funding</b>	Per interagency contract with KSDE (effective FY23-27) KDHE provides \$43,000 annually (CFDA 84.181A United States Department of Education-Grants for Infants and Families) and DCF provides \$7,000 annually (CFDA 93.575 Child Care and Development Block Grant). KSDE pays for 70% of the State ICC staff member’s salary/benefits; funds from the interagency contract pay for the remainder of the staff position and support the work of the SICC and LICCs.
<b>Current staffing</b>	1.0 FTE KSDE Early Childhood team staff coordinates the SICC, supports LICCs, supports Part C coordinators in implementing the ASQ, and supports interagency coordination and collaboration. 2.0 FTE KSDE Early Childhood team staff provides shared leadership and administrative support for the team. Fiscal, auditing, IT, and other operational support is provided agencywide.
<b>Opportunities for improvement/reform under a consolidated agency structure.</b>	<ul style="list-style-type: none"> <li>• The statewide network of LICCs offers opportunity to implement early childhood systems work at the local level.</li> <li>• <i>From the SICC website: No single agency is capable of meeting all of the needs of these young children. Interagency collaboration is essential. These services should be multi-disciplinary and delivered in settings which are typical for young children.</i></li> <li>• State and federal statute outline required membership of the SICC, and there are currently several unfilled positions for parent, provider, and legislative members.</li> </ul>

<b>Potential gaps, inefficiencies, and/or redundancies that might be addressed/eliminated within a consolidated agency.</b>	
<b>Does this program undergo any type of formal evaluation or compliance monitoring?</b>	The SICC is required by state law to submit an annual report to the Governor. <a href="#">Annual reports are posted on the SICC website.</a>

## Ages & Stages Questionnaires (ASQ)

<b>Category</b>	Developmental Screening
<b>Program Name</b>	Ages & Stages Questionnaires (ASQ)
<b>State Administering Agency</b>	Kansas State Department of Education (KSDE)
<b>Federal Administering Agency</b>	N/A
<b>Purpose and Delivery</b>	Developmental screening identifies children’s developmental milestones and potential needs so that children can be connected to supports and services. The Ages & Stages Questionnaires, Third Edition (ASQ-3®) and Ages & Stages Questionnaires: Social-Emotional, Second Edition (ASQ:SE-2®) are parent-completed development and social-emotional screeners for young children. The screeners are culturally specific, easy, reliable, and cost effective. A statewide ASQ Online infrastructure supports access and utilization of developmental screening by increasing access for families to complete questionnaires via an online portal while reducing associated costs and staff time for local programs using the state system.
<b>Number of KS children/families served</b>	Statewide, there were 88,104 screenings completed in 2022 using the statewide ASQ Online system <i>(45,033 ASQ-3 and 43,071 ASQ:SE-2)</i>
<b>Statutory Authority</b>	<a href="#">K.A.R. 91-31-32</a> requires education systems seeking accreditation to have in place a method of data collection approved by the State Board for collecting kindergarten-entry data.
<b>FY23 Funding</b>	The KSDE-Brookes Publishing contract is approximately \$165,000 annually. This does not include associated supports provided by the Help Me Grow Kansas project.
<b>Current staffing</b>	0.0 KSDE FTE dedicated to this project; administration of Kindergarten Readiness Snapshot is absorbed in duties of FTE managing other early childhood projects, including 0.15FTE of the SICC staff member’s position; 2.0 FTE KSDE Early Childhood team staff provides shared leadership and administrative support for the team. The KSDE contract with Brookes Publishing includes contracted project management and implementation support. Fiscal, auditing, IT, and other operational support is provided agencywide. This includes KSDE Research & Evaluation staff analysis of Kindergarten Readiness Snapshot data.
<b>Opportunities for improvement/reform under a consolidated agency structure.</b>	<ul style="list-style-type: none"> <li>In March 2021, KSDE and KDHE executed an MOU outlining roles and responsibilities regarding the implementation of the statewide ASQ Online system. Local Part C programs are responsible for administration of community-level accounts that allow partners that are not school systems to access ASQ Online. KDHE has embedded requirements for local Part C programs into those program’s contracts.</li> </ul> <p>All In For Kansas Kids strategic plan:</p>

	<ul style="list-style-type: none"> <li>• <b>Goal 2, Community-Level Coordination,</b> Strategy 2.1: Develop localized comprehensive resource and referral networks that meet community-specific needs to drive quality referrals, coordinate care, and ease navigation for families. <ul style="list-style-type: none"> <li>• Tactic 2.1.3 Use evidence-based, standardized screenings such as the Ages &amp; Stages Questionnaires (ASQ) and the Edinburgh Postnatal Depression Scale to identify need and connect families to the right services as early as possible.</li> </ul> </li> <li>• <b>Goal 5, Capacity &amp; Access,</b> Strategy 5.4: Support communities, educational environments, families, and children to ensure that each child entering kindergarten at age five is socially, emotionally, and academically prepared. <ul style="list-style-type: none"> <li>• Tactic 5.4.1 Provide information to families and technical assistance to school systems to increase the number of students who participate in the Kindergarten Readiness Snapshot (the Ages and Stages Questionnaires).</li> </ul> </li> </ul>
<p><b>Potential gaps, inefficiencies, and/or redundancies that might be addressed/eliminated within a consolidated agency.</b></p>	
<p><b>Does this program undergo any type of formal evaluation or compliance monitoring?</b></p>	<p>The Preschool Development Grant Birth through Five has supported this initiative since that grant was first awarded to the state in 2019, and this work has been included in regular grant reporting and evaluation.</p>



## Child and Adult Care Food Program (CACFP)

<b>Category</b>	Food
<b>Program Name</b>	Child and Adult Care Food Program (CACFP)
<b>State Administering Agency</b>	Kansas State Department of Education (KSDE)
<b>Federal Administering Agency</b>	United States Department of Agriculture (USDA)
<b>Purpose and Delivery</b>	The Child and Adult Care Food Program (CACFP) is a federal program that provides reimbursement for healthful meals and snacks served to children and adults. Because CACFP participants' nutritional needs are supported on a daily basis, the program plays a vital role in improving the quality of child care and making it more affordable for families.
<b>Number of KS children/families served</b>	In FY2022, 310 CACFP sponsors served: 3,870,480 breakfast; 4,090,361 lunch; 876,292 supper; and 5,020,735 snacks.
<b>Statutory Authority</b>	<a href="#">K.S.A. 72-17.132</a> et seq. authorizes the State Board of Education to receive and distribute state and federal funds for food service programs. <a href="#">Federal law establishes the Child and Adult Care Food Program.</a>
<b>FY23 Funding</b>	Federal reimbursement is received for actual meals and snacks served to CACFP participants. \$29,371,945 federal funds distributed in FY2022.
<b>Current staffing</b>	KSDE Child Nutrition & Wellness team: 26.0 FTE. This team implements all Child Nutrition Programs in Kansas and CACFP cannot be easily defined separately since job duties overlap between programs. Fiscal, auditing, IT, and other operational support is provided agencywide.
<b>Opportunities for improvement/reform under a consolidated agency structure.</b>	The KSDE Child Nutrition and Wellness team maintains strong partnerships with Child Care Aware of Kansas (for example, completing the CACFP needs assessment and CACFP promotional campaign), Links to Quality (participates in the Health and Safety Link Development Work Group), and the Kansas Breastfeeding Coalition (participates in the child care section and public health section).
<b>Potential gaps, inefficiencies, and/or redundancies that might be addressed/eliminated within a consolidated agency.</b>	KSDE should maintain administration of all Child Nutrition Programs including the CACFP due to complexity of federal regulations.
<b>Does this program undergo any type of formal evaluation or compliance monitoring?</b>	Yes, Management Evaluations are conducted by the USDA Food & Nutrition Services division per federal regulatory requirements of the state agency administration of the CACFP. KSDE Child Nutrition & Wellness Consultants complete monitoring of Kansas Child Care Centers and Sponsoring Organizations that administer the CACFP at the local level. KSDE is in compliance with all federal regulations per the last ME.

While the following have not been included as identified early childhood “programs” for the purposes of this inventory, KSDE is glad to provide additional information on the following work that impacts the state early childhood system:

- [Teacher Licensure](#) (including Early Childhood Unified and Early Elementary teaching licenses)
- [Higher Education Educator Preparation Program Accreditation](#)
- [Career and Technical Education \(CTE\), including the Early Childhood Development and Services pathway](#)
- KSDE partners with other agencies to review, update, adopt and disseminate the [Kansas Early Learning Standards](#).
- [Early Literacy/Dyslexia](#)
- The KSDE Special Education and Title Services team administers the [Technical Assistance System Network \(TASN\)](#). The purpose of the Kansas Technical Assistance System Network (TASN), as a system, is to increase the capacity of districts to implement and sustain the use of evidence-based practices addressing Kansas State Department of Education Special Education and Title Services (KSDE SETS) identified priority areas and practices. These contracted projects include several that provide professional development and technical assistance related to early childhood topics, including the [Kansas Parent Information Resource Center \(KPIRC\)](#), [Kansas MTSS and Alignment](#), and the [Technical Assistance Team](#).

**Section Two:**  
**KANSAS CHILDREN'S  
CABINET & TRUST  
FUND**

### CIF Grants (Early Childhood Block Grants)

<b>Category</b>	Early Childhood Care and Education
<b>Program Name</b>	CIF Grants (Early Childhood Block Grants) (CIF line item)
<b>State Administering Agency</b>	KCCTF
<b>Federal Administering Agency</b>	N/A
<b>Purpose and Delivery</b>	ECBG recipients provide services to at-risk children, ages 0-5, and their families. Grants from the Kansas Children’s Cabinet are distributed across the state through a competitive process. ECBG programs include care and education for children birth to age 3, Pre-K services, social emotional consultation, home visiting, literacy activities, and parent education. ECBG programs are community-directed. Services vary according to local needs.
<b>Number of KS children/families served</b>	FY22 – 6,719 children/5,968 families
<b>Statutory Authority</b>	K.S.A. <a href="#">38-1901</a> - The 1999 Kansas Legislature created the Children’s Initiatives Fund (CIF) to focus investment of Tobacco Master Settlement Agreement funds, as directed by the Children’s Cabinet, in programs and services devoted to early childhood care and education, health screening, home visiting, and parent education.
<b>FY23 Funding</b>	\$21,017,930
<b>Current staffing</b>	0.5 FTE funded by this program  The KCCTF operates under a lean management structure of 7 FTEs (one currently posted for hire) and 1 FTE of KSDE fiscal staff to oversee a portfolio that has ranged from \$51 million to \$112 million over the past 4 years. Cabinet staff are funded across the portfolio and are not assigned to one funding source.  KU-CPPR provides backbone support (see administration)
<b>Opportunities for improvement/reform under a consolidated agency structure.</b>	ECBG could be a statewide mechanism to distribute holistic ECCE funds based on community needs. Consolidation could blend and braid funds through a common application to reduce community burden. Single-site distribution could provide a consolidated look at expenditures across communities.
<b>Potential gaps, inefficiencies, and/or redundancies that might be addressed/eliminated within a consolidated agency.</b>	There are varying Federal eligibility, compliance, and reporting requirements that could pose challenges at the outset. Mapping of select funding streams, Federal requirements, and technological needs would be needed to set the new agency up for success.  Consolidated programs and funding streams would allow a statewide approach to funding, eliminating gaps in the state and allowing a more equitable way of awarding funds.  In the current RFP process, under-resourced communities struggle to submit competitive grants and/or do not have the capacity to launch and staff new programming.
<b>Does this program undergo any type of formal evaluation or compliance monitoring?</b>	Kansas statute directs the Kansas Children’s Cabinet to conduct an annual assessment of the CIF investments. The University of Kansas Center for Public Partnerships and Research conducts the annual Accountability Process for the CIF funded programs. The Center for Applied Research and Evaluation at Wichita State University also provides support and analysis around the Common Measures Initiative for participating CIF grantees. <a href="#">The Children’s Cabinet 2022 Annual Report</a> , and the <a href="#">2021-2022 ECBG Evaluation</a> document results.

## Imagination Library of Kansas (Dolly Parton's Imagination Library)

<b>Category</b>	Child Development / Early Childhood Education / Early Childhood Literacy
<b>Program Name</b>	Imagination Library of Kansas (Dolly Parton's Imagination Library) (CIF line item)
<b>State Administering Agency</b>	KCCTF
<b>Federal Administering Agency</b>	N/A
<b>Purpose and Delivery</b>	The program sends a free, age-appropriate book monthly to every child enrolled in the program from birth to age 5. The Children's Cabinet partners with local community programs to provide a 50% financial match and promote enrollment in the program.
<b>Number of KS children/families served</b>	48,051 Kansas children receive free books monthly (as of 3/8/23).
<b>Statutory Authority</b>	CIF Budget Line Item
<b>FY23 Funding</b>	Budget-Line Item  \$500,000 from CIF, Early Childhood Infrastructure line item will supplement FY23 shortfall. FY24 budget line item has enhanced funding subject to appropriation by legislature.
<b>Current staffing</b>	0.0 funded by this program  The KCCTF operates under a lean management structure of 7 FTEs (one currently posted for hire) and 1.0 FTE of KSDE fiscal staff to oversee a portfolio that has ranged from \$51 million to \$112 million over the past 4 years. Cabinet staff are funded across the portfolio and are not assigned to one funding source.  KU-CPPR provides backbone support (see administration)
<b>Opportunities for improvement/reform under a consolidated agency structure.</b>	Universal enrollment upon entry through any agency door.
<b>Potential gaps, inefficiencies, and/or redundancies that might be addressed/eliminated within a consolidated agency.</b>	None identified.  Should be noted that the Children's Cabinet is seeking statutory authority to create a 501c3 nonprofit to meet expectations of the Dollywood Foundation.
<b>Does this program undergo any type of formal evaluation or compliance monitoring?</b>	The program is subject to the Kansas Children's Cabinet Accountability Process. Evaluation is underway, as this is the first year the program is included in the Accountability Process.

## Early Childhood Infrastructure

<b>Category</b>	Early Childhood Care and Education System Building
<b>Program Name</b>	Early Childhood Infrastructure (CIF line item)
<b>State Administering Agency</b>	KCCTF
<b>Federal Administering Agency</b>	N/A
<b>Purpose and Delivery</b>	<p>The funding improves state-level coordination of all early childhood programs, including those not currently being supported by a federal grant, maximizes interagency cooperating, and emphasizes innovation to best serve children and families.</p> <p>Current expenditures include:  Dolly Parton Imagination Library FY23 costs in excess of DPIL budget line item, integration for story adventure trails; Kansas Kindergarten Readiness Kits; Longitudinal maintenance and inclusion of annual data for Data Trust Authorization Project #1 for foster care; Kansas Families Foresight Brief and documentation of driving forces that will impact children and families for inclusion in MySidewalk Community Profiles; Outreach and community readiness technical assistance for IRIS communities; Initiation of Kansas Home Visiting 10-year Plan—Phase I. KCCTF will support 1-800-CHILDREN annual maintenance out if this fund with additional financial support from DCF and KDHE.</p>
<b>Number of KS children/families served</b>	NA
<b>Statutory Authority</b>	CIF budget Line Item
<b>FY23 Funding</b>	\$1,400,773
<b>Current staffing</b>	<p>0.5 FTE</p> <p>The KCCTF operates under a lean management structure of 7 FTEs (one currently posted for hire) and 1 FTE of KSDE fiscal staff to oversee a portfolio that has ranged from \$51 million to \$112 million over the past 4 years. Cabinet staff are funded across the portfolio and are not assigned to one funding source.</p> <p>KU-CPPR provides backbone support (see administration)</p>
<b>Opportunities for improvement/reform under a consolidated agency structure.</b>	A consolidated agency structure could provide vision, development, and implementation of common infrastructure needs from a family user-experience. Modernization could be informed by the PDG Family Experience Mapping. Economies of scale could be realized, and families could experience a smoother, more streamlined interaction with ECCE services.
<b>Potential gaps, inefficiencies, and/or redundancies that might be addressed/eliminated within a consolidated agency.</b>	Currently, most infrastructure is agency or funding stream driven, rather than family-driven. Housing under one agency could result in a more streamlined family experience.
<b>Does this program undergo any type of formal evaluation or compliance monitoring?</b>	The program will be included in the Children’s Cabinet Accountability Process and Annual Report.

## Children's Cabinet Accountability Fund

<b>Category</b>	Evaluation and Accountability
<b>Program Name</b>	Children's Cabinet Accountability Fund (CIF line item)
<b>State Administering Agency</b>	KCCTF
<b>Federal Administering Agency</b>	N/A
<b>Purpose and Delivery</b>	All programs receiving funding from the Children's Initiatives Fund (CIF) participate in an annual Accountability Process. The Kansas Children's Cabinet works with researchers at the University of Kansas Center for Public Partnerships and Research (KU-CPPR) to interview grantees, complete site visits, compile data, and analyze service delivery and outcomes for each program. Researchers provide ongoing technical assistance in interpreting and using results for program improvement. See the <a href="#">2022 Children's Cabinet Annual Report</a> for overview and results.
<b>Number of KS children/families served</b>	N/A
<b>Statutory Authority</b>	This process, which began in 2006, is responsive to <a href="#">K.S.A. 38-2102</a> and <a href="#">38-2103</a> requiring that the Kansas Children's Cabinet "review, assess, and evaluate all uses of the monies in the Children's Initiatives Fund (CIF)" as part of annual allocations. The Kansas children's cabinet shall review, assess and evaluate all uses of the moneys in the children's initiatives fund. The Kansas children's cabinet shall study and shall initiate studies, assessments and evaluations, by contract or otherwise, through institutions of higher education and other appropriate research entities to identify best practices and to measure and otherwise determine the efficiency and efficacy of practices that are utilized in programs, projects, improvements, services and other purposes for which moneys are allocated or appropriated from the children's initiatives fund. The costs of such reviews, assessments and evaluations shall be paid from the children's initiatives accountability fund.
<b>FY23 Funding</b>	\$375,000
<b>Current staffing</b>	0.0 positions funded by this program  The KCCTF operates under a lean management structure of 7 FTEs (one currently posted for hire) and 1 FTE of KSDE fiscal staff to oversee a portfolio that has ranged from \$51 million to \$112 million over the past 4 years. Cabinet staff are funded across the portfolio and are not assigned to one funding source.  KU-CPPR provides backbone support (see administration)
<b>Opportunities for improvement/reform under a consolidated agency structure.</b>	The Accountability Process is unique to the Children's Cabinet, however it could be adopted and applied across the ECCE system. There is potential to build on the DAISEY system for EC integrated data.
<b>Potential gaps, inefficiencies, and/or redundancies that might be addressed/eliminated within a consolidated agency.</b>	Moving to new agency would maintain the independent evaluation function that the accountability process has set up.
<b>Does this program undergo any type of formal evaluation or compliance monitoring?</b>	The Accountability Process results and Annual Report are presented to the Kansas Children's Cabinet and Trust Fund board. Upon acceptance, the Annual Report is submitted to the Governor.

## Community-Based Child Abuse Prevention

<b>Category</b>	Prevention
<b>Program Name</b>	Community-Based Child Abuse Prevention (recurring federal grant)
<b>State Administering Agency</b>	KCCTF
<b>Federal Administering Agency</b>	Department of Health and Human Services' Administration for Children and Families, Children's Bureau
<b>Purpose and Delivery</b>	Support community-based efforts to develop, operate, expand, and enhance initiatives to prevent child abuse and neglect; coordinate resources and activities to support families to reduce the likelihood of child abuse and neglect; and foster understanding and knowledge of diverse populations effective in preventing and treating child abuse and neglect. Funds are granted to organizations to administer programs and services.
<b>Number of KS children/families served</b>	1600 Children, 700 Caregivers (2022)
<b>Statutory Authority</b>	Child Abuse Prevention and Treatment Act (CAPTA) (federal), <a href="#">Victims of Child Abuse Reauthorization Act</a>
<b>FY23 Funding</b>	\$1,453,531
<b>Current staffing</b>	0.5 FTE funded by this program  The KCCTF operates under a lean management structure of 7 FTEs (one currently posted for hire) and 1 FTE of KSDE fiscal staff to oversee a portfolio that has ranged from \$51 million to \$112 million over the past 4 years. Cabinet staff are funded across the portfolio and are not assigned to one funding source.  KU-CPPR provides backbone support (see administration)
<b>Opportunities for improvement/reform under a consolidated agency structure.</b>	Consolidation under a single agency could lead to a robust prevention continuum of family supports, including home visiting, early intervention, child care, etc. Families are too often reluctant to ask for help or access services through a child welfare agency. By creating a streamlined and comprehensive array of prevention services, families may develop stronger trusting relationships with helping services, which could then scaffold onto DCF Child Welfare services.
<b>Potential gaps, inefficiencies, and/or redundancies that might be addressed/eliminated within a consolidated agency.</b>	Currently, prevention services are fragmented, and accessibility depends on where you live in the state. The state lacks a coherent vision for what is included in prevention services. For example, TANF and SNAP are not considered as prevention services even though research shows that basic needs are a preventive measure. While TANF and SNAP would not be included in the new agency, fewer points of entry to access needed services could lead to better outcomes for children and families.
<b>Does this program undergo any type of formal evaluation or compliance monitoring?</b>	All CBCAP grantees participate in a formal evaluation. The PFS-2 Retro is a questionnaire completed by parents or caregivers receiving family support services. The tool measures protective factors within a family that reduce the risk of child maltreatment. Results from the PFS-2 Retro and Ripple Effects Mapping Evaluation can be found in the <a href="#">2022 Children's Cabinet Annual Report</a> .



## Child Care Capacity Accelerator (one-time pandemic relief program)

<b>Category</b>	Child Care
<b>Program Name</b>	Child Care Capacity Accelerator (one-time pandemic relief program)
<b>State Administering Agency</b>	KCCTF
<b>Federal Administering Agency</b>	US Department of the Treasury for State Fiscal Recovery funds and Department of Health and Human Services' Administration for Children and Families, Office of Child Care for DCF CCDF ARPA funds
<b>Purpose and Delivery</b>	The <a href="#">Child Care Capacity Accelerator Grant Opportunity</a> will support Kansas communities in creating sustainable and high quality child care solutions that meet the local needs of their families with young children. Awards will support construction and capital enhancements to physical child care facilities, launch operational support, and implement sustainable solutions. Communities will utilize the funding to build or make critical capital improvements that create additional licensed child care seats that align with health and safety requirements and address systemic challenges to sustaining those child care seats.
<b>Number of KS children/families served</b>	TBD
<b>Statutory Authority</b>	Approved by the State Finance Council in December 2022 and part of pandemic relief efforts
<b>FY23 Funding</b>	<p>\$20 million SPARK - State Fiscal Recovery Funds to cover capital construction or enhancements to physical licensed child care facilities.</p> <p>\$20 million DCF CCDF ARPA Discretionary Relief Funds - Funds to support communities with start-up and operation costs not covered by capital funds (e.g., furnishings, supplies, staffing/wages). Funds to implement strategies for sustainable child care solutions.</p> <p>PDG Implementation Grant Funds – Funds to cover GO Team, support for communities (i.e. Communities-in-Action and Community Engagement), and Family Navigation supports.</p> <p>PDG Planning Grant Funds -Funds to implement workforce-specific strategies for sustainable child care solutions</p>
<b>Current staffing</b>	<p>1 FTE (federal SFRF funds)</p> <p>The KCCTF operates under a lean management structure of 7 FTEs (one currently posted for hire) and 1 FTE of KSDE fiscal staff to oversee a portfolio that has ranged from \$51 million to \$112 million over the past 4 years. Cabinet staff are funded across the portfolio and are not assigned to one funding source.</p> <p>KU-CPPR provides backbone support (see administration)</p>
<b>Opportunities for improvement/reform under a consolidated agency structure.</b>	The Accelerator establishes an approach that is structured to provide consistent expectations and evaluation, yet flexible enough to meet the unique needs of communities. Because this is being funded by one-time pandemic relief funding, this question is likely moot. However, we believe in the approach and would seek to apply the principles of this program in future funding opportunities.
<b>Potential gaps, inefficiencies, and/or redundancies that might be</b>	The Accelerator addresses fragmented approaches and provides a comprehensive way to track investments in the establishment of child

<b>addressed/eliminated within a consolidated agency.</b>	care slots. A streamlined process removes redundant administration and inefficient compliance requirements.
<b>Does this program undergo any type of formal evaluation or compliance monitoring?</b>	All grantees will participate in a multi-site evaluation analyzing the impact of multiple strategies on expansion of child care access using quantitative measures of child care capacity. The evaluation will meet all federal reporting requirements.

## Preschool Development Implementation Grant Birth-5

<b>Category</b>	Early Childhood Care and Education
<b>Program Name</b>	Preschool Development Implementation Grant Birth-5 (non-recurring federal grant)
<b>State Administering Agency</b>	KCCTF
<b>Federal Administering Agency</b>	Department of Health and Human Services' Administration for Children and Families
<b>Purpose and Delivery</b>	The Preschool Development Implementation Grant was a three-year implementation grant awarded in 2020, which has been used to amplify and expand a continuum of services and supports to better serve and meet the needs of families. Funding supports the implementation of the All In for Kansas Kids strategic plan for early childhood in Kansas. Funding supports activities to update the statewide needs assessment and strategic plan, maximize parent and family knowledge of early care and education options, the sharing of best practices among the early childhood care and education workforce, improvement of the overall quality and service integration of early childhood services, and monitoring, evaluation and data use.
<b>Number of KS children/families served</b>	As of Year 1 (2020-21), 134K children were served as part of the ECCE services included in the All In plan. ACF changed the reporting function in Year 2 to be narrative in format rather than number of children and families served.
<b>Statutory Authority</b>	Preschool Development Grants were funded by the U.S. Department of Education in 2014-2018 and co-administered by ED and HHS 2019 to present.
<b>FY23 Funding</b>	\$8,943,000 per year for 3-year total of \$26,829,000
<b>Current staffing</b>	1 FTE funded by this program.  The KCCTF operates under a lean management structure of 7 FTEs (one currently posted for hire) and 1 FTE of KSDE fiscal staff to oversee a portfolio that has ranged from \$51 million to \$112 million over the past 4 years. Cabinet staff are funded across the portfolio and are not assigned to one funding source.  KU-CPPR provides backbone support (see administration)
<b>Opportunities for improvement/reform under a consolidated agency structure.</b>	The Kansas Children's Cabinet serves as the lead among four state agencies for PDG. A consolidated agency structure would streamline interagency agreements, planning, and implementation processes currently required for the diverse array of programs PDG funds.
<b>Potential gaps, inefficiencies, and/or redundancies that might be addressed/eliminated within a consolidated agency.</b>	The PDG artifacts provide a launching pad for the new agency and demonstrates the need for an agency with authority over programmatic, delivery, and funding decisions. The multiple agencies and review processes required now for joint decisions does not move at the pace necessary to address the needs of children and families.
<b>Does this program undergo any type of formal evaluation or compliance monitoring?</b>	The program performance evaluation plan (PPEP) will guide the collection, analysis, and dissemination of information through an iterative process.

## Preschool Development Planning Grant Birth-5

<b>Category</b>	Early Childhood Care and Education
<b>Program Name</b>	Preschool Development Planning Grant Birth-5 (non-recurring federal grant)
<b>State Administering Agency</b>	KCCTF
<b>Federal Administering Agency</b>	Department of Health and Human Services' Administration for Children and Families
<b>Purpose and Delivery</b>	PDG Planning Grant funds states to develop, update, and implement a strategic plan to strengthen the state's integrated early childhood system to prepare low-income and disadvantaged children to enter kindergarten and have a seamless, high-quality early childhood experience from birth through third grade.
<b>Number of KS children/families served</b>	TBD
<b>Statutory Authority</b>	Preschool Development Grants were funded by the U.S. Department of Education in 2014-2018 and co-administered by ED and HHS 2019 to present.
<b>FY23 Funding</b>	\$4 million
<b>Current staffing</b>	<p>1 FTE funded by this program</p> <p>The KCCTF operates under a lean management structure of 7 FTEs (one currently posted for hire) and 1 FTE of KSDE fiscal staff to oversee a portfolio that has ranged from \$51 million to \$112 million over the past 4 years. Cabinet staff are funded across the portfolio and are not assigned to one funding source.</p> <p>KU-CPPR provides backbone support (see administration)</p>
<b>Opportunities for improvement/reform under a consolidated agency structure.</b>	The planning grant includes several activities that could inform the new agency, including an updated needs assessment, Family Experience Mapping, gap analysis and comprehensive review of child care licensing rules and regulations.
<b>Potential gaps, inefficiencies, and/or redundancies that might be addressed/eliminated within a consolidated agency.</b>	The planning grant provides the template for consolidated and aligned services, however the current ECCE structure and lack of dedicated decision-making authority strains the ability of the state director's team to efficiently make decisions and navigate existing agency administrative structures.
<b>Does this program undergo any type of formal evaluation or compliance monitoring?</b>	The program performance evaluation plan (PPEP) will guide the collection, analysis, and dissemination of information through an iterative process.

## Cabinet Administration

<b>Category</b>	Administration
<b>Program Name</b>	Cabinet Administration
<b>State Administering Agency</b>	KCCTF
<b>Federal Administering Agency</b>	N/A
<b>Purpose and Delivery</b>	<p>The Cabinet has been able to scale up and down quickly and effectively because of the backbone support and evaluation services provided by the University of Kansas Center for Public Partnerships and Research (CPPR) and the Wichita State Community Engagement Center (CEC). CPPR backbone support has enabled the Cabinet to focus on systems alignment design of policies, practices, and infrastructure. The CEC and CPPR evaluation and accountability process have established consistent data across programming to better understand the impact of investments in early childhood and make data-driven decisions. CPPR backbone and evaluation efforts consist of approximately 10.5 FTEs with an available bank of hours in the areas of strategic framing, research and evaluation, and systems capacity development that provides expertise and capacity to optimize current offerings and build the foundation for future initiatives.</p>
<b>Number of KS children/families served</b>	N/A
<b>Statutory Authority</b>	<p>K.S.A. <a href="#">38-1901</a> - The 1999 Kansas Legislature created the Children’s Initiatives Fund (CIF) to focus investment of Tobacco Master Settlement Agreement funds, as directed by the Children’s Cabinet, in programs and services devoted to early childhood care and education, health screening, home visiting, and parent education.</p>
<b>FY23 Funding</b>	\$404,647 (KEY)
<b>Current staffing</b>	<p>1.5 FTE funded by this program</p> <p>The Cabinet operates under a lean management structure of 7 FTEs (one currently posted for hire) and 1 FTE of KSDE fiscal staff to oversee a portfolio that has ranged from \$51 million to \$112 million over the past four years. Cabinet staff are funded across the portfolio and are not assigned to one funding source.</p>
<b>Opportunities for improvement/reform under a consolidated agency structure.</b>	<p>Under a new consolidated agency, the statutory charge of the Cabinet could be actualized, and the needs and best interests of the Early Childhood Care and Education system represented by— recognizing the Secretary of the agency as a Cabinet-level position; vesting decision-making authority to the new agency over core components of the ECCE mixed delivery system; and maintaining the Cabinet as the liaison for public-private initiatives and independent oversight over the Children’s Initiatives Fund.</p> <p>The Children’s Cabinet currently operates under an MOU with KSDE. The agreement defines the support provided by KSDE including Fiscal Services, Information Technology support, and Human Resources support. This relationship allows the Children’s Cabinet to operate with a bare bones staff, however the relationship also has</p>

	<p>inherent conflicts of interest. The Children’s Cabinet operation would benefit from realignment within an agency focused on early childhood.</p>
<p><b>Potential gaps, inefficiencies, and/or redundancies that might be addressed/eliminated within a consolidated agency.</b></p>	<p>In statute, the Kansas Children’s Cabinet is charged with assisting the Governor in developing and implementing a coordinated, comprehensive delivery system to serve children and families. During the current administration, the Cabinet has embraced this role and is recognized as a leader, facilitator, and decision maker by both political parties, community leaders, and current state agency secretaries. However, the Cabinet has no formal or binding decision-making authority with the other agencies and must rely on diplomacy and relationships to move work forward.</p> <p>The most glaring gap in the MOU between the Children’s Cabinet and KSDE is legal services which are expressly excluded. The Children’s Cabinet is forced to engage outside counsel when legal advice is required. The Children’s Cabinet does not show up on the Executive Branch organizational chart which creates a gap – the state Department of Administration does not recognize the Children’s Cabinet in its own right, requiring KSDE to sign off for many functions.</p> <p>The procurement process is outdated and cannot move at the pace needed for anticipatory and innovative solutions. Aligning similar functions, i.e. technical assistance, evaluation, professional development, etc. could lead to streamlined procurement and consistency and stability for the ECCE system.</p> <p>State employees are experiencing fatigue and frustration from the pandemic, public scrutiny and disrespect, the extra workload absorbed by them because of the tight labor market and high job vacancy rate, and the political gridlock. The development of a new agency could capitalize on the current public interest in child care and early care and education solutions. A solution-focused agency could revitalize trust and create momentum to make Kansas the best place in the nation to raise a child—a commitment that is good for all.</p> <p>There is sometimes a disconnect between state and local needs and Federal guidelines. A consolidated agency voice could bolster the state’s ability to navigate barriers and seek alternatives that optimize the current system and foster innovation.</p>
<p><b>Does this program undergo any type of formal evaluation or compliance monitoring?</b></p>	<p>Yes, the Cabinet’s administration, budget, and grant making decisions are approved by the governing board.</p>

## Workforce Registry

<b>Category</b>	Early Childhood Care and Education System Building
<b>Program Name</b>	Workforce Registry (special project)
<b>State Administering Agency</b>	KCCTF
<b>Federal Administering Agency</b>	Department of Health and Human Services' Administration for Children and Families, Office of Child Care
<b>Purpose and Delivery</b>	The purpose of an Early Childhood Professional Development Workforce Registry (Registry) is to provide professionals with an online repository for their professional accomplishments. A robust workforce registry will enable professionals to document, validate, and verify their professional learning, credentials, certificates, degrees, and experience. Additionally, the Registry is intended to support professionals in accessing ongoing professional development opportunities, resources, and employment that align with career goals (as supported by the Career Pathway), and provide rich data reporting elements related to demographics, recruitment, retention, sustainability, and overall workforce trends.
<b>Number of KS children/families served</b>	N/A
<b>Statutory Authority</b>	Supplemental Child Care and Development Fund (CCDF) Discretionary Funds Appropriated in the American Rescue Plan (ARP) Act of 2021 (Public Law 117-2) signed into law March 11, 2021 and the Child Care and Development Block Grant (CCDBG) Act (42 U.S.C. 9857 et seq.); 45 CFR Parts 98 and 99; Consolidated Appropriations Act, 2021; and CRRSA Act, 2021 (Public Law 116-260).
<b>FY23 Funding</b>	\$3 million DCF CCDF ARPA and CRRSA Discretionary Relief Funds
<b>Current staffing</b>	0.0 FTEs funded by this program  The KCCTF operates under a lean management structure of 7 FTEs (one currently posted for hire) and 1 FTE of KSDE fiscal staff to oversee a portfolio that has ranged from \$51 million to \$112 million over the past 4 years. Cabinet staff are funded across the portfolio and are not assigned to one funding source.  KU-CPPR provides backbone support (see administration)
<b>Opportunities for improvement/reform under a consolidated agency structure.</b>	If managed by a consolidated early childhood agency, the inputs and verifications required to make the Workforce Registry function (i.e., information about professional requirements, competencies, goals, opportunities for professional learning and supports) would be governed by one agency, versus multiple. This would maximize the efficiency and functionality for professionals to maintain an up-to-date professional profile and use the Workforce Registry to determine and accomplish their professional goals, as well as for the consolidated agency use workforce data to make decisions about programs and workforce investment opportunities. Consolidation would also address the question of long-term governance for the Workforce Registry.
<b>Potential gaps, inefficiencies, and/or redundancies that might be addressed/eliminated within a consolidated agency.</b>	Currently, professional requirements for the early childhood workforce (e.g., educational and health and safety) are governed by different agencies. However, these requirements are of equal importance when an early childhood professional wants to present their professional accomplishments and determine goals for advancement. There is risk of redundancy when featuring data from multiple agencies in both the uploading and verification process. Any inefficiencies in this process

	could discourage use of the Workforce Registry. Currently, there are gaps in knowledge about the early childhood workforce in Kansas. A Workforce Registry that operates efficiently and is highly used by the workforce could overcome those gaps in knowledge.
<b>Does this program undergo any type of formal evaluation or compliance monitoring?</b>	This program is currently in development and the State Director's Team provides ongoing input.



**Early Childhood Integrated Data System (ECIDS) - Distinct Count of Children Served in Early Childhood Programs**

<b>Category</b>	Early Childhood Care and Education System Building
<b>Program Name</b>	Early Childhood Integrated Data System (ECIDS) - Distinct Count of Children Served in Early Childhood Programs (special project)
<b>State Administering Agency</b>	KCCTF
<b>Federal Administering Agency</b>	Department of Health and Human Services' Administration for Children and Families, Office of Child Care
<b>Purpose and Delivery</b>	To ensure access to early care and education services and for the services themselves to be equitable and effective in meeting the needs of children and families, the Kansas Early Childhood Data Trust will be working with state agencies and several data systems to identify the distinct number of children being served in programs at the state and local level. This work reflects the commitment of five state agencies to share data and information to improve the quality, effectiveness, and equity of programs and services for Kansas children and families.
<b>Number of KS children/families served</b>	N/A
<b>Statutory Authority</b>	Interagency Agreement to transfer funds from Temporary Assistance for Needy Families (TANF)
<b>FY23 Funding</b>	\$800,000 TANF Funds
<b>Current staffing</b>	0.0 positions funded by this program  The KCCTF operates under a lean management structure of 7 FTEs (one currently posted for hire) and 1 FTE of KSDE fiscal staff to oversee a portfolio that has ranged from \$51 million to \$112 million over the past 4 years. Cabinet staff are funded across the portfolio and are not assigned to one funding source.  KU-CPPR provides backbone support (see administration)
<b>Opportunities for improvement/reform under a consolidated agency structure.</b>	Modernization of data infrastructure specific to and focused on early childhood is critical for a more efficient system and alignment of programming, funding, and resources. Consolidation and/or integration of data or systems that are scalable and can be appropriately staffed is fiscally sound and helps drive alignment of effort. Recommendations and improvements of such an approach can be found <a href="#">here</a> .  A dedicated chief data strategy officer to oversee and lead the early childhood data system efforts to align with new agency charge/mission, drive design and fiscal resource allocation necessary for efficiencies and consolidation of IT/data asset contracts, build analytic capabilities, and produce timely, public or agency-facing reports.
<b>Potential gaps, inefficiencies, and/or redundancies that might be addressed/eliminated within a consolidated agency.</b>	The Kansas Early Childhood Data Trust oversees our state's ECIDS resources and implementation. The intent is to derive value and efficiency in sharing and integrating early childhood data across four state agencies to inform impact, effectiveness, fiscal ROI, and equitable access to services. <ul style="list-style-type: none"> <li>Accurate and quality data on children served in child care, home visiting, public Pre-K, Part B/C, and other ancillary child serving programs falls into three categories: 1) non-existent; 2) captured and stored in multiple data systems in different formats with different requirements and differing levels of quality; 3) high quality data collected and stored in one system.</li> </ul>

	<ul style="list-style-type: none"> <li>• The average time it takes to identify data for a data sharing request, develop a data sharing agreement, conduct multiple legal counsel review and agency sign off, process data requests, integrate data, analyze it, and produce actionable insights is typically 8-12 months or more. This time-consuming life cycle creates data utility and insight lags – by the time results are available, it may be too late to act.</li> <li>• Different agency oversight and interpretation of legal considerations delays or stalls data sharing.</li> <li>• Different agency’s IT and data system staff have varied capacity to respond and have competing priorities outside of early childhood specific data.</li> <li>• Different agencies have on-prem or legacy data systems or contract with a vendor/partner for data system and support</li> <li>• There are 7 distinct data systems with disparate data specifications across the four public agencies.</li> <li>• There are more than 8 funding sources (federal and state) for which compliance and impact data is required.</li> </ul> <p>Consolidated IT/Data system resources and staff focused on early childhood data can:</p> <ul style="list-style-type: none"> <li>• Ensure prioritization and focus on early childhood data, programming, impact, fiscal mapping, and federal requirements</li> <li>• Identify true data system and architecture needs for a data solution that is not reliant upon outdated legacy data systems or that maintain outdated or unneeded data reporting requirements</li> <li>• Create and maintain standardized data collection and quality requirements with a single administrative interpretation and legal counsel source.</li> <li>• Build and maintain productionized and streamlined data pipelines to integrate/aggregate/analyze data from within an interconnected and secure modern cloud infrastructure.</li> <li>• Reduce the burden on local providers by consolidating data requirements, setting up more automated secure data transfer protocols or tools to eliminate dual data entry into multiple systems</li> <li>• Build a comprehensive early childhood data strategy tailored to needs of the future rather than relying on historical or past data and infrastructure decisions/solutions</li> </ul>
<p><b>Does this program undergo any type of formal evaluation or compliance monitoring?</b></p>	<p>Depending upon funding source, federal reporting requirements are in place for PDG, CCDF, and CIF.</p>

# **Section Three:**

# **KANSAS DEPARTMENT FOR CHILDREN AND FAMILIES**

## Child Care Assistance

<b>Category</b>	Child Care
<b>Program Name</b>	Child Care Assistance
<b>State Administering Agency</b>	Kansas Department for Children and Families
<b>Federal Administering Agency</b>	Office of Child Care
<b>Purpose and Delivery</b>	<p>Child Care Assistance is a program that provides financial assistance to families with the goal to promote family economic self-sufficiency. It is intended to provide access to affordable, high-quality early care and education and after-school programs to help children succeed in school and in life. To initially qualify for Child Care Assistance, a family must include at least one child under the age of 13, or age 13 to 18 and incapable of caring for themselves. The family must have countable income below 250% of the federal poverty level, an allowable need for child care, and must select a DCF enrolled child care provider. As of October 2022, 756 licensed center-based programs, 1255 licensed family child care homes, 53 in-home relative providers, and 341 out-of-home relative providers were enrolled with DCF to provide care to children who receive Child Care Assistance. Child Care Aware of Kansas supports families in locating a DCF enrolled provider. In September 2022, Child Care Assistance was made available to 12,434 children in Kansas.</p> <p>DCF Economic and Employment Services' (EES) Child Care Provider Enrollment unit enrolls providers and works closely with KDHE Child Care Licensing, through an interagency agreement, to share information. DCF's Office of Background Investigations assists in the fingerprinting process for child care providers. The EES division at DCF interacts with other divisions to complete the background check process including requesting data from the child-abuse neglect registry check and the adult abuse, neglect, exploitation registry.</p> <p>At least once every three years, DCF EES contracts with an organization to conduct a Market Rate Survey to analyze the local market rates of regulated child care throughout the State of Kansas. DCF EES uses the information to determine if maximum rates and county groupings are adequate to allow subsidized families the purchasing power equal to private pay families. DCF EES also contracts with an organization to complete a Narrow Cost Analysis to determine the true cost of meeting the Child Care and Development Funds (CCDF) Health and Safety requirements and other levels of quality.</p> <p>DCF EES relies on partners to meet some of the CCDF Health and Safety requirements in the regulations. Through an interagency agreement DCF EES transfers CCDF funds to KDHE Child Care Licensing to help with the cost of ensuring CCDF Health and Safety standards are met including through the establishment of licensing requirements and standards and the monitoring and enforcement of policies and practices. To meet CCDF requirements, KDHE also provides the public information regarding inspection findings through their system. DCF EES also uses CCDF funds to support a workforce development agreement to help ensure providers have access to professional development necessary to meet the needs of Kansas children, including the CCDF Health &amp; Safety training requirements.</p> <p>Although DCF EES eligibility staff primarily make Child Care Assistance eligibility determinations, DCF EES maintains partnerships to increase access to subsidy. Kansas Early Head Start Child Care Partnership grantees assist in determining eligibility for Child Care Assistance with the children they serve, as</p>

does the federal Early Head Start Child Care Partnership program in Kansas. DCF EES Employment Services workers help determine eligibility for Child Care Assistance for families receiving TANF and Food Assistance (SNAP) and participating in employment services. The DCF EES Foster Care Child Care unit collaborates with DCF Prevention and Protection Services in delivering child care to children in foster care. The DCF EES Program Integrity unit uses the Public Assistance Reporting Information System (PARIS) interstate match to identify families who may be receiving benefits in more than one state simultaneously.

Numerous partners and agreements help with the administration of the Child Care Assistance program, including the following. Benefits are issued using the Electronic Benefits Transfer (EBT) system. EBT services are provided through a contract between DCF EES and FIS. SNAP, TANF and Child Care benefits are all issued through the EBT system using separate accounts on one card. FIS also contracts with approved DCF EES child care providers to enable them to receive the payments made by parents. Various interfaces are used through agreements to assist with the eligibility determination. Some of these agreements include use of KAECSES-Kansas Automated Eligibility Child Support Enforcement System to access child support income and cooperation, Electronic Access to Social Security system for Social security information and supplemental social security income information, Kansas Department of Labor Unemployment Compensation information and previous employers information, Department of Revenue motor vehicle files, Public Assistance Data Exchange (SWDX), LexisNexis used to verify identity, Systematic Alien Verification for Entitlements (SAVE), KPERS interface, KDHE's Office of Vital Statistics and The Work Number.

Kansas Eligibility Enforcement System (KEES) is the integrated eligibility determination system that is used and is shared with Medicaid, Food Assistance, TANF, Low Income Energy Assistance Program, some DCF PPS programs and others. This shared system delivery also allows for shared verification of various person level data and income, such as adoption assistance. With many shared policies, this shared system reduces duplication of verification requests across programs.

Child Care Assistance eligibility is determined and supported mainly in the DCF EES field offices by DCF EES staff including regional directors, assistant regional directors, performance improvement and training administrators and case readers, EES program administrators and assistant program administrators, EES human services supervisors, EES human services specialists, EES human services administrators, EES trainers, EES community relations workers, and career navigators. Within DCF EES Administration, there are also training staff, integrity staff, KEESM staff (KEESM is the policy manual), an EES data analyst, EES Business Process Management (BPM) staff, and business analysts for connected systems and KEES, quality assurance staff, performance improvement staff, child care program integrity staff who randomly audit and educate providers to monitor and ensure assistance is being used accurately. Additional staff are dedicated to the benefit card system needs.

Various staff in our DCF operations, audits and finance units ensure the internal controls are in place for the administration of the funds, including appropriate accounting, cost allocation, financial reporting supports and various reasonableness tests. Our fraud investigators and integrity related units are in place to provide reasonable assurance that federal, state, and agency policies and procedures are followed.

	<p>Other supporting units within DCF that are needed to administer the Child Care Assistance program include DCF Payables, Grants and Contracts unit, Purchasing, Property Management, Facilities and Emergency Management (COOP plans), Background Investigations, IT, General Council, Organizational Health and Development, PPS, and Rehabilitation Services.</p>																																																				
<p><b>Number of KS children/families served</b></p>	<table border="1"> <thead> <tr> <th>Month</th> <th>Program</th> <th>Cases</th> <th>Children</th> </tr> </thead> <tbody> <tr> <td>Mar-22</td> <td>CC</td> <td>6,935</td> <td>11,789</td> </tr> <tr> <td>Apr-22</td> <td>CC</td> <td>7,069</td> <td>12,035</td> </tr> <tr> <td>May-22</td> <td>CC</td> <td>7,225</td> <td>12,343</td> </tr> <tr> <td>Jun-22</td> <td>CC</td> <td>7,250</td> <td>12,492</td> </tr> <tr> <td>Jul-22</td> <td>CC</td> <td>7,219</td> <td>12,421</td> </tr> <tr> <td>Aug-22</td> <td>CC</td> <td>7,300</td> <td>12,538</td> </tr> <tr> <td>Sep-22</td> <td>CC</td> <td>7,338</td> <td>12,517</td> </tr> <tr> <td>Oct-22</td> <td>CC</td> <td>7,471</td> <td>12,737</td> </tr> <tr> <td>Nov-22</td> <td>CC</td> <td>7,325</td> <td>12,462</td> </tr> <tr> <td>Dec-22</td> <td>CC</td> <td>7,250</td> <td>12,290</td> </tr> <tr> <td>Jan-23</td> <td>CC</td> <td>7,188</td> <td>12,177</td> </tr> <tr> <td>Feb-23</td> <td>CC</td> <td>7,246</td> <td>12,273</td> </tr> </tbody> </table>	Month	Program	Cases	Children	Mar-22	CC	6,935	11,789	Apr-22	CC	7,069	12,035	May-22	CC	7,225	12,343	Jun-22	CC	7,250	12,492	Jul-22	CC	7,219	12,421	Aug-22	CC	7,300	12,538	Sep-22	CC	7,338	12,517	Oct-22	CC	7,471	12,737	Nov-22	CC	7,325	12,462	Dec-22	CC	7,250	12,290	Jan-23	CC	7,188	12,177	Feb-23	CC	7,246	12,273
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<p><b>Statutory Authority</b></p>	<p>CFDA Number 93.575, 93.596</p> <p>KSA 39-709(b)(16) requires DCF to adopt rules and regulations for the Child Care Subsidy Program. DCF is the Lead Agency designated to administer the CCDF program.</p> <p>42 USC 618 provides Child Care and Development mandatory and matching funds for State Child Care Assistance programs.</p> <p>42 USC 9857 et seq. provides Child Care and Development discretionary funds for State Child Care assistance programs.</p>																																																				
<p><b>FY23 Funding</b></p>	<p>Lead Agencies may spend up to 5% of the aggregate CCDF funds (Mandatory, Matching and Discretionary) from each fiscal year's allotment on administrative costs. Of the aggregate funds expended, at least 9% of funds must be use for quality child care activities, and an additional 3% must be used for quality activities for infants and toddlers. From the remainder of the discretionary allotment the Lead Agency must use at least 70% to fund direct child care services. A substantial portion of direct child care services must be used to support direct child care services for low-income families who are working or in training or education including families who are receiving TANF, making efforts through work activities to transition off TANF or at risk of becoming dependent on TANF.</p>																																																				

	<p>Child Care Subsidy Payments:</p> <table border="1" data-bbox="516 216 1427 611"> <thead> <tr> <th>Program</th> <th>Funding Source</th> <th>Budgeted</th> </tr> </thead> <tbody> <tr> <td>TANF Eligible Child Care</td> <td>State General Funds</td> <td>4,000,000</td> </tr> <tr> <td>Employed Child Care</td> <td>State General Funds</td> <td>6,429,859</td> </tr> <tr> <td>Employed Child Care</td> <td>Children's Initiative Funds</td> <td>5,033,679</td> </tr> <tr> <td>Employed Child Care</td> <td>CCDF Discretionary</td> <td>24,680,597</td> </tr> <tr> <td>Employed Child Care</td> <td>Social Services Block Grant</td> <td>188,877</td> </tr> <tr> <td>Employed Child Care</td> <td>CCDF Mandatory</td> <td>2,077,987</td> </tr> <tr> <td>Employed Child Care</td> <td>CCDF Matching</td> <td>14,941,975</td> </tr> <tr> <td></td> <td>Total</td> <td>57,352,974</td> </tr> </tbody> </table> <p>In addition, the budget includes the following:</p> <ul style="list-style-type: none"> <li>• Eligibility and Determination and Case Management Staff and other operating expenses (OOE) in the regional offices – CCDF Mandatory Funds - \$4,075,594.</li> <li>• Child Care Determination for Foster Care Kids FTE and OOE – CCDF Discretionary - \$309,790.</li> <li>• Child Care Direct Administrative FTE and OOE - CCDF Discretionary - \$662,029.</li> <li>• EBT Contract - CCDF Discretionary - \$51,335.</li> <li>• Identity Verification Contract - CCDF Discretionary - \$4,730.</li> <li>• Employment and Wage Verification Contract - CCDF Discretionary - \$50,718.</li> <li>• EES program indirect costs - CCDF Discretionary - \$254,566.</li> <li>• Agency Indirect costs - CCDF Mandatory - \$476,235.</li> <li>• ITS Services - CCDF Discretionary and Mandatory - \$1,289,738.</li> </ul>	Program	Funding Source	Budgeted	TANF Eligible Child Care	State General Funds	4,000,000	Employed Child Care	State General Funds	6,429,859	Employed Child Care	Children's Initiative Funds	5,033,679	Employed Child Care	CCDF Discretionary	24,680,597	Employed Child Care	Social Services Block Grant	188,877	Employed Child Care	CCDF Mandatory	2,077,987	Employed Child Care	CCDF Matching	14,941,975		Total	57,352,974
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<b>Current staffing</b>	<p>FTE - There are 57.32 FTE in the DCF regional offices responsible for eligibility and case management activities related to child care subsidy. There are an additional 6 FTE in EES Administration in the Child Care Eligibility for Foster Care Unit with responsibility for these activities. An additional 9.9 FTE provide administrative support and guidance to the program in EES Administrative Services.</p> <p>Contractors – The following contracts provide services directly related to child care subsidy benefits and eligibility determination: FIS – EBT vendor payments for eligible families Lexus Nexus – Identity verification services Equifax – Income information for eligibility determination Accenture – Kansas Eligibility Enforcement System (KEES)</p>																											
<b>Opportunities for improvement/reform under a consolidated agency structure.</b>	<p>Implications of removing Child Care Assistance from the existing system will need to be explored further, as DCF has integrated eligibility for Child Care, TANF, SNAP, etc. using the KEES system, eligibility network in the agency and CCDF funding is used to support a percentage of the current eligibility and EES system in many ways outside of staffing.</p>																											

	<p>A consolidated agency may provide opportunities for improved service delivery with shared goals. Processes may be streamlined and may be more effective due to better collaboration and communication leading to a more comprehensive approach to child care and education.</p>
<p><b>Potential gaps, inefficiencies, and/or redundancies that might be addressed/eliminated within a consolidated agency.</b></p>	<p>Better communication when reporting on the entire EC child care related system in the ACF-118 and ACF-218.</p> <p>A consolidated agency may lead to a united Early Childhood brand and can decrease miscommunication among agencies.</p> <p>There is a possibility for increased redundancies if Child Care Assistance eligibility is moved away from other programs that use similar requirements and verifications. There are many intertwined services and systems that are used by the shared programs in KEES, both medical and non-medical. Cost sharing involved across many of these supports.</p>
<p><b>Does this program undergo any type of formal evaluation or compliance monitoring?</b></p>	<ul style="list-style-type: none"> <li>• Monthly required status calls with Region VII Office of Child Care</li> <li>• CCDF Federal Onsite Monitoring (conducted triennially) <ul style="list-style-type: none"> <li>○ Ensure compliance with CCDF Regulations and the approved CCDF Plan</li> <li>○ Identify technical assistance needs to meet CCDF requirements</li> <li>○ Identify promising practices to inform continuous quality improvement</li> </ul> </li> <li>• ACF-118: CCDF State Plan (submitted triennially) <ul style="list-style-type: none"> <li>○ Describes how the Lead Agency administers CCDF programs in conformance with legislative regulations</li> </ul> </li> <li>• ACF-218: Quality Progress Report (submitted annually) <ul style="list-style-type: none"> <li>○ Captures the Lead Agency’s progress on how CCDF quality funds were expended</li> </ul> </li> <li>• ACF-696: Financial Report (submitted quarterly) <ul style="list-style-type: none"> <li>○ Reports estimates and expenditures for the Mandatory Fund, the Matching Fund, and the Discretionary Fund</li> </ul> </li> <li>• ACF-800: Aggregate Data Report (submitted annually) <ul style="list-style-type: none"> <li>○ Provides unduplicated counts of children and families served through the CCDF</li> </ul> </li> <li>• ACF-801: Case-Level Data Report (submitted quarterly) <ul style="list-style-type: none"> <li>○ Provides case-level data on the families and children served through the CCDF</li> </ul> </li> <li>• ACF-901: American Rescue Plan (ARP) Stabilization Grants Provider-Level Data (submitted quarterly) <ul style="list-style-type: none"> <li>○ Allows Office of Child Care to collect and report critical information about the numbers of and characteristics for child care providers receiving stabilization grant awards, including whether funds have been distributed equitably and are reaching historically underserved communities.</li> </ul> </li> <li>• Error rate reports to measure, calculate and report improper payments and identify strategies for reducing future improper payments <ul style="list-style-type: none"> <li>○ SDAP: Sampling Decisions, Assurances, and Fieldwork Preparation Plan</li> <li>○ ACF-403: Record Review Worksheet</li> <li>○ ACF-404: State Improper Payments Report</li> <li>○ ACF-405: State Improper Payments Corrective Action Plan</li> </ul> </li> </ul>



## Child Care Quality

<b>Category</b>	Child Care
<b>Program Name</b>	Child Care Quality
<b>State Administering Agency</b>	Kansas Department for Children and Families
<b>Federal Administering Agency</b>	Office of Child Care
<b>Purpose and Delivery</b>	<p>As the Child Care Development Fund Lead Agency, DCF's assessments of quality activities include internal reviews of current expenditures, performance outcomes of contracts and grants funded through CCDF, the status of our Quality Rating and Improvement System (QRIS) development, and statewide quality initiatives. CCDF is the federal government's funding source for child care subsidies to help eligible low-income families access child care and improve the quality of child care for all children. A review of CCDF-funded quality programs is completed annually as contracts are renewed. Fiscal and program outcomes are reviewed as part of this annual review. A review of all quality efforts is assessed every three years in conjunction with the completion of the CCDF state plan.</p> <p>Of the aggregate CCDF funds (Mandatory, Matching and Discretionary) from each fiscal year's allotment, Lead Agencies must expend at least 9% of funds for quality child care activities, and an additional 3% must be used for quality activities for infants and toddlers.</p> <p>Agreements used to satisfy these requirements include:</p> <ul style="list-style-type: none"> <li>• <b>Child Care Consumer Education Resource and Referral Services</b>, currently contracted with Child Care Aware of Kansas (CCAAS). Resource and Referral Consumer Education services include providing customized referrals to families for child care, consumer education on what to look for in quality child care, resources to providers to encourage quality improvement and meet family's needs, and outreach and partnership with businesses and community organizations to build capacity for high-quality child care programs. This agreement allows us to meet the approved use of CCDF quality funds for establishing or expanding a statewide system of CCR&amp;R services, as part of our leadership collaboration.</li> <li>• <b>Statewide Infant and Toddler Specialist Network (ITSN)</b>, currently granted to Kansas Child Care Training Opportunities (KCCTO). The purpose of ITSN is to help strengthen the care of infants and toddlers through technical assistance. This agreement allows us to meet the approved use of CCDF quality funds for improving the supply and quality of child care services for infants and toddlers. It also allows us to meet the infant and toddler CCDF quality spending requirements.</li> <li>• <b>Child Care Workforce Professional Development</b>, currently granted to KCCTO. Workforce Development services are funded to provide child care professional development activities that include instruction and educational opportunities to strengthen the child care workforce, support quality improvement efforts, and collaborate with other key child care quality partners. In addition to online and virtual training, Kansas Child Care Training Opportunities Workforce Development staff have launched additional quality building supports for child care programs to guide them in their professional advancement, including these Training and Technical Assistance instructional activities:</li> </ul>

	<p>-Online training includes information about available technical assistance, including evidence-based information about its benefit, supports to help providers work with children and families, and all the ways to access technical assistance. Each trainer’s homepage includes contact information for each professional development specialist and how to access their appointment-scheduling calendar. Technical assistance is also built-in to some trainings.</p> <p>-Professional Development Partner program is an additional optional Technical Assistance support available to all child care professionals. Professionals who opt-in to this program have access to support individualized to their preferences, needs and interests as well as their preference for level of support. Examples of support include but are not limited to the following: finding professional development opportunities, specific challenges of early childhood work, resources, toolkits, and strategies, and identifying or connecting with local, state, and national organizations such as DCF, KCCTO-KITS ITSN, or Tiny-K.</p> <p>-A CDA, Child Development Associate, resource center is provided through the Kansas Child Care Training Opportunities Workforce Development agreement. The webpage provides information about the CDA program, types of credentials, and information regarding financial supports offered. This webpage has been accessed by 2515 unique individuals, with 4878 total page views.</p> <p>-Kansas Child Care Training Opportunities Facebook Peer Networking Community of Practice continues as a form of optional TA available to all professionals with access to Facebook. The group is moderated by a team of PD Specialists who provide TA through the platform, such as Facebook live conversations on relevant topics, sharing resources, and engaging with the community members in each guide topic group. Guide topics will continue to be driven by the community members. There are currently 173 members in the peer group.</p> <p>-Virtual Toolkits are a simple resource that professional development specialists’ email to child care professionals as a follow-up to other TA or through the Canvas system with participation with online training. Currently there are 90 virtual toolkits available, with 45 (WFD) and 21 (ITSN) on general education topics, 6 (WFD) and 9 (ITSN) for program directors and administrators, and 5 (WFD) for business practices, and 4 (WFD) in Spanish.</p> <p>-Kids These Days is a weekly podcast that cover topics relevant to early education professionals.</p> <p>- The Individualized Professional Development Plans (IPDP) is a tool staff and providers can use to track their professional education and training and set goals for future professional growth. Individualized Professional Development Plans are available to providers who utilize Kansas Child Care Training Opportunities training and can be used to provide guidance on self-assessments, setting goals and tracking professional education. The Workforce Development Advisory Group is in the process of revising the IPDP to be adopted by statewide TA partners with the goal of integration into a future registry system.</p>
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This agreement allows us to meet the approved use of CCDF quality funds for supporting the training and professional development of the child care workforce.

- **Kansas Interagency Coordinating Council on Early Childhood Developmental Services (SICC).** DCF provides funding and representation to the SICC through CCDF quality funds to support a comprehensive delivery system of integrated services are available in Kansas for all children with or at risk of developmental delays from birth to age five and their families. The SICC serves as a liaison with Local Interagency Coordinating Councils (LICCs) and advises and assists KDHE, the lead agency, for Part C of the federal Individuals with Disabilities Education Act (IDEA). Objectives include coordination with state agencies; collaboration with the leadership of the Special Education Advisory Council (SEAC); advising and assisting the lead agencies for Part B and B 619 as related to state and federal performance measures; providing an annual report to the governor; and submitting an Annual Performance Report (APR) to the Office of Special Education Programs of the US Department of Education. This work is part of CCDF's goal of quality improvement activities that the state provides to improve the quality of child care services for infants and toddlers, preschool-aged, and school-aged children, which may include consumer and provider education activities; and also describe the measurable indicators of progress for each activity relevant to this use of funds that the state/territory will use to evaluate its progress in improving provider preparedness, child safety, child well-being, or kindergarten entry, and the data on the extent to which the state or territory has met these measures.
- **Kansas Enrichment Network**, currently contracted with the University of Kansas Center for Public Partnership and Research. The purpose of this agreement is to help build and expand school-based programs with the expected result to enhance learning opportunities for students and provide technical assistance to new and established programs. DCF also has staff that serves on the Kansas Enrichment Network Executive Committee. This agreement allows us to meet the approved use of CCDF quality funds for supporting the positive development of school-age children.
- **Links to Quality (QRIS)**, currently granted to CCAKS. Links to Quality, the state's quality rating and improvement system, strives to increase access to quality child care for all Kansas families. The purpose is to design and implement a statewide system that defines and recognizes quality child care. This agreement allows us to meet the approved use of CCDF quality funds for developing, implementing, or enhancing a tiered quality rating and improvement system. Additionally, it supports the training and professional development of the child care workforce.
- **Kansas Early Head Start Child Care Partnerships** provides services to Kansas children through the Kansas Early Head Start (KEHS) program, delivered by KEHS grantees. Kansas Early Head Start (KEHS) provides comprehensive services to child care partner programs that exhibit the need, and desire to participate, and show a willingness to follow enhanced program regulations and requirements related to quality KEHS services including those related to child development, continuity of care, parent involvement, and professional development. KEHS offers parents opportunities for individual and parental growth, as well as support in identifying and

	<p>meeting goals, including a goal of self-sufficiency. KEHS programs offer family strengthening and father engagement activities and education. KEHS programs also provide financial literacy and health literacy education. This program also allows us to meet the infant and toddler CCDF quality spending requirement. (A separate program inventory form was completed for KEHS Child Care Partnerships.)</p> <ul style="list-style-type: none"> <li>• <b>KDHE Licensing</b> is an interagency agreement with Kansas Department of Health &amp; Environment (KDHE). This agreement ensures the CCDF requirement of establishing standards and monitoring processes to ensure the health and safety of child care settings is met. The purpose of child care licensing is to reduce the risk of preventable harm and ensure a minimum standard level of care and protection to children while in out-of-home care settings through regulation of licensed child care facilities. The licensing surveyors serve to ensure child care providers maintain compliance with the CCDF lead agency (DCF) licensing, inspection, monitoring, and health and safety standards and training. (KDHE may complete a separate program inventory form.)</li> </ul>
<p><b>Number of KS children/families served</b></p>	<p>Numbers pulled from the FFY22 Quality Progress Report:</p> <ul style="list-style-type: none"> <li>• The major performance measures in the <b>Consumer Education/Resource and Referral</b> agreement include the following results. <ul style="list-style-type: none"> <li>-Unduplicated number of families receiving a list of licensed child care facilities for assistance in finding child care : 10,359</li> <li>-Number of these families that were receiving Child Care Assistance, the Kansas CCDF subsidy program: 1,736</li> <li>-Percent of parents/families satisfied with referral services provided: 96%</li> <li>-Percent of parents/families that report the referral list they were given was accurate: 97%</li> <li>-Number of parents/families able to secure child care from the referrals provided: 834</li> <li>-Percent of parents/families able to secure child care from the referrals provided: 36%</li> <li>-Number of families who received consumer education materials: 10,359</li> <li>-Percent of providers in the state that have provider profile data in the child care search system: 100%</li> <li>-Percent of total providers that had their profile data updated in the FFY22: In our contract year, which dates July 1, 2021, through June 30, 2022, 94% of providers had their profile updated. In the first quarter of the current contract year, which dates July 1, 2022, through September 30, 2022, 34% of providers have updated their profiles.</li> <li>-Percent of counties in Kansas that received assistance through this agreement for their community work: 89% of counties received community engagements during the federal fiscal year 2022</li> </ul> </li> <li>• The major performance measures in the <b>Kansas Child Care Training Opportunities Infant Toddler Specialist Network</b> agreement include the following and the following results: <ul style="list-style-type: none"> <li>-Number of written TA plans and the number of completions: 160 and 62</li> <li>-Number of on-site TA visits and number of virtual visits: 1067 and 101. Additional 385 visits conducted via phone or email not included in these counts</li> </ul> </li> </ul>

	<ul style="list-style-type: none"> <li>-Number of In-person and virtual trainings and number of enrollments: 183 and 4532. An additional 90 online trainings with 1888 enrollments. -Number of trainings on incorporating appropriate health policies, procedures, and guidelines: 1 and 12 online health &amp; safety trainings.</li> <li>-Number of Quality Improvement financial incentives to providers with intensive TA plan: 95</li> <li>-Number of trainings offered related to infant and toddler mental health, number of participants, and % increase in knowledge: 64, 1534, and 15%. Increase in knowledge reflects online infant and toddler mental health courses only. Pre and post assessments are not collected for in-person or virtual trainings.</li> <li>-Number of providers served: 253</li> <li>-Total number of children reached: 6370</li> </ul> <ul style="list-style-type: none"> <li>• The major performance measures in the <b>Kansas Child Care Training Opportunities Workforce Professional Development</b> agreement include the following and the following results: <ul style="list-style-type: none"> <li>-Number of providers earning credit toward degrees: 14</li> <li>-Number of providers assisted with IPDPs: 123</li> <li>-Number of scholarships recipients: 253</li> <li>-Number of providers supported on CDA training track: 212</li> <li>-Number of providers completing CDA training track: 52</li> <li>-Number of CDA Scholarships issued: 123 (CDA training scholarships), 23 (CDA application fee scholarships)</li> <li>-Number of providers who received professional development and/or technical assistance in business practices (2,435), mental health (2,273), DEI (766), emergency preparedness planning (0), and other (26,507)</li> <li>-Number of early childhood professionals who have opted into the professional development partner program: 1,844</li> </ul> </li> <li>• The major performance measures in the <b>University of Kansas Center for Public Partnership and Research Kansas Enrichment Network</b> agreement include the following and the following results. <ul style="list-style-type: none"> <li>-Number of After School/Out of School providers that collected 8-10 service provider clock hours through KEN: 25. Number of above offerings through virtual meetings: 25</li> <li>-Number of After School/Out of School provider site visits conducted: 100. Number of counties included in site visits: 36</li> </ul> </li> <li>• The major performance measures in the <b>Links to Quality</b> agreement included the following results (These numbers represent participation from the Program Administration Support program). <ul style="list-style-type: none"> <li>-Number of programs working through PAS: 351 -Center-based: 54, Home-based: 288, School-age Programs: 5, Preschool: 4</li> <li>-Number of children served by these programs: 1,924</li> <li>-Number of these programs enrolled with DCF: 28</li> <li>-Number of children receiving Child Care Assistance enrolled in these programs: 370</li> <li>-Number of counties these programs are in: Program Administration Support: 72 Total number of completed self-assessments aligned with the Program Administration Link: 409 (some completed a self-assessment more than once)</li> <li>-Number of programs receiving technical assistance through coaching visits: 380 programs, 2,478 TA visits</li> </ul> </li> </ul>
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	<p>-Number of monetary awards issued: 399 Program Administration Support Awards issued. (Award #1:208, Award #2: 191)</p> <p>-Number of Quality Improvement Plans (QIP) completed for an award request: 216; 208 submitted first award request, 191 submitted a second award request</p> <ul style="list-style-type: none"> <li>• The major performance measures in the <b>KDHE Licensing</b> agreement included the following results. <ul style="list-style-type: none"> <li>-Total number of licensed child care providers: 3,918</li> <li>-Licensed center-based programs: 1,301</li> <li>-Licensed family child care homes: 3,918</li> <li>-Number of initial child care licenses: 534</li> <li>-Number of initial, annual, and compliance inspections: 5,254</li> <li>- Investigated and provided technical assistance in approximately 2,158 incidents of communicable diseases in child care settings involving about 4,202 children and 1,926 adults.</li> </ul> </li> </ul>
<b>Statutory Authority</b>	<p>CFDA Number 93.575, 93.596</p> <p>Mandatory and matching funds were enacted by the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (PRWORA) and are appropriated under Section 418 of the Social Security Act (42 U.S.C. 618). Discretionary funds are 100% federal funds and are allocated to states using a proportional formula. PRWORA made discretionary funding subject to the requirements of the CCDBG Act, as amended. Each state is also required to continue to expend its own funds at the level at which it was matching the former AFDC-linked child care programs in FY 1994 or FY 1995, whichever was greater; these funds satisfy the required maintenance of effort.</p>
<b>FY23 Funding</b>	<p>Budgeted Amounts:</p> <p>Child Care Quality – CCDF Discretionary - \$4,954,241.  KDHE Transfer – CCDF Discretionary - \$4,246,245</p>
<b>Current staffing</b>	<p>There are 4 FTEs in DCF EES administration directly responsible for these programs. A supervisory position is partially funded by CCDF quality dollars. There are additional FTEs that are considered indirect and include an FTE allocation to this program that are not listed here.</p> <p>These FTEs do not include all staff funded through agreements to plan and implement quality activities.</p>
<b>Opportunities for improvement/reform under a consolidated agency structure.</b>	<p>A consolidated agency may provide opportunities for improved service delivery with shared goals. Processes may be streamlined and may be more effective due to better collaboration and communication leading to a more comprehensive approach to child care and education. A consolidated agency under a single branding may allow providers and families to better identify services, information, and opportunities related specifically to child care.</p>
<b>Potential gaps, inefficiencies, and/or redundancies that might be addressed/eliminated within a consolidated agency.</b>	<p>A consolidated agency may lead to a united Early Childhood brand and can decrease miscommunication among agencies. Minimize the potential for duplication or similar work between partners and agencies.</p>
<b>Does this program undergo any type of formal evaluation or compliance monitoring?</b>	<p>In general, programs submit a monthly status report, monthly budget transaction report, monthly budget itemization report, quarterly performance and outcome report and data for the annual Quality</p>

	<p>Progress Report, ACF 218, as required by Office of Child Care. Audits are conducted in accordance with the provisions contained in 2 CFR Chapter I, Chapter II, Part 200, et al. Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards; Final Rule. The grantees are responsible for obtaining an independent audit. DCF Audit Services has the authority, under the provisions of DCF's agreements, and federal and State law, to conduct audits in addition to those conducted by an entity's contracted audit firm.</p>
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## Healthy Families America

<b>Category</b>	Home Visitation
<b>Program Name</b>	Healthy Families America
<b>State Administering Agency</b>	KS Department for Children and Families
<b>Federal Administering Agency</b>	Administration for Children and Families
<b>Purpose and Delivery</b>	<p>This program strengthens and preserves families and maximizes community engagement/collaboration organizations and is funded under TANF Purpose 3, preventing out-of-wedlock pregnancies. Under this purpose of TANF, this grant will educate children at their appropriate developmental level, strengthen, and preserve families. Program services are currently delivered by Kansas Children’s Service League (KCSL). Services provided follow the Healthy Families America model which is a nationally recognized evidence-based home visitation program designed to work with overburdened families who are at-risk for adverse childhood experiences, including child maltreatment. KCSL’s Healthy Families program is an accredited Healthy Families America program (a program of Prevent Child Abuse America. Services provided by KCSL include an initial assessment, home visits begin weekly, for approximately 1-1.5 hours each week (more intensive schedules can be provided if warranted) and can decrease in frequency as risk factors are reduced and goals are achieved. Specific services include the use of reflective strategies to build confidence in parenting and decision-making, child-development information and regular screenings, referral for a variety of services as determined by the family’s needs such as transportation to medical appointments, tracking of medical needs, immunizations, health insurance, and goal setting to improve family functioning and support for the parent child relationship. The program addresses specific risk factors that each family faces and supports the family in those efforts to reduce those risk factors and increase protective factors, not limited to parental resilience, social connections, concrete supports, knowledge of parenting and child development, social and emotional competence of children and economic mobility. Each family develops a goal plan and identifies resources that can help them accomplish those goals. This program is accessed by continual building of connections with hospitals, clinics, medical providers, DCF, local health departments, community-based leaders, and others interested in the needs of low-income children and families, and potential participants can also make a self-referral to the program. The counties served through this grant include Allen, Barton, Bourbon, Butler, Chase, Cherokee, Coffey, Crawford, Greenwood, Harvey, Jefferson, Johnson, Labette, Leavenworth, Lyon, Marion, McPherson, Miami, Montgomery, Neosho, Osage, Pawnee, Reno, Rice, Shawnee, Sedgwick, Stafford, Sumner, Wilson, and Wyandotte.</p>
<b>Number of KS children/families served</b>	The target population served includes at-risk families with children whose income does not exceed 200% of the Federal Poverty Level (FPL). 2,014 at-risk families with children were served for SFY 22.
<b>Statutory Authority</b>	<p>There is no current statutory authority regarding this program.</p> <p><a href="#">ccrb hb2002 03 0000.pdf (kslegislature.org)</a></p> <p>Through a budget proviso impacting SFY18 and SFY19, DCF was directed to use Temporary Assistance for Needy Families funds for the intensive home visitation program, Healthy Families, operated by Kansas Children's Service League. DCF continues to fund this program.</p>



<b>FY23 Funding</b>	\$2,997,916.86 (100% TANF)
<b>Current staffing</b>	Two partially funded positions in DCF EES administration, a position directly responsible for overseeing the agreement funding this program and a supervisory position support this program. These FTEs do not include all staff funded through the agreement to plan and implement activities.
<b>Opportunities for improvement/reform under a consolidated agency structure.</b>	A consolidated agency may provide opportunities for improved service delivery with shared goals.
<b>Potential gaps, inefficiencies, and/or redundancies that might be addressed/eliminated within a consolidated agency.</b>	A consolidated agency minimize the potential for duplication or similar work between partners and agencies.
<b>Does this program undergo any type of formal evaluation or compliance monitoring?</b>	<ul style="list-style-type: none"> <li>• ACF-196R: Financial Report Form (submitted quarterly) <ul style="list-style-type: none"> <li>○ Cumulative transfers, expenditures, and unliquidated obligations</li> </ul> </li> <li>• ACF-204: Report on TANF and State MOE Programs (submitted annually) <ul style="list-style-type: none"> <li>○ Information on benefits and services</li> </ul> </li> </ul> <p>In general, programs submit a monthly status report, monthly budget transaction report, monthly budget itemization report, quarterly performance and outcome report. Audits are conducted in accordance with the provisions contained in 2 CFR Chapter I, Chapter II, Part 200, et al. Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards; Final Rule.</p>

## Head Start Collaboration Office

<b>Category</b>	Child Care and Home Visiting
<b>Program Name</b>	Head Start Collaboration Office
<b>State Administering Agency</b>	KS Department for Children and Families
<b>Federal Administering Agency</b>	Office of Head Start
<b>Purpose and Delivery</b>	Develop partnerships between Head Start agencies & other state or tribal entities that provide services to benefit children from families of low income. Delivered and accessed through a collaboration of services & initiatives that recognize, and support Head Start as a partner in state initiatives. Service providers include but are not limited to: KDCE, KDHE, KDSE, KCCTF, KHSA, R7HSA, KCCTO, & CCAK
<b>Number of KS children/families served</b>	In KS, Head Start (HS) & Early Head Start (EHS) programs serve a combined total 7,758 children and 6,865 families. HS programs alone serve 5,034 children ages 3-5 and 4,597 families. EHS programs serve 2,724 children ages 0-3 and 2,268 families.
<b>Statutory Authority</b>	42 USC 9837(b) authorizes Head Start grants to States to improve coordination between Head Start and State early learning programs
<b>FY23 Funding</b>	Head Start Collaboration Grant - \$102,551 State General Funds - \$34,184
<b>Current staffing</b>	1 FTE & portion of supervisors salary  There are additional FTEs that are considered indirect and include an FTE allocation to this program that are not listed here.
<b>Opportunities for improvement/reform under a consolidated agency structure.</b>	A consolidated agency may provide opportunities for improved service delivery with shared goals. Processes may be streamlined and may be more effective due to better collaboration and communication leading to a more comprehensive approach to child care and education.
<b>Potential gaps, inefficiencies, and/or redundancies that might be addressed/eliminated within a consolidated agency.</b>	A consolidated agency may lead to a united Early Childhood brand and can decrease miscommunication among agencies.
<b>Does this program undergo any type of formal evaluation or compliance monitoring?</b>	Collaboration Offices are required to conduct an annual needs assessment to analyze and address the local agency collaboration and coordination needs and up-date the 5-year strategic plan based on the needs assessment findings. In addition, the collaboration office is required to apply annually for renewal of the federal grant.

## Kansas Early Head Start Child Care Partnership & Kansas Early Head Start Home Visitation

<b>Category</b>	Child Care and Home Visitation
<b>Program Name</b>	KEHS-Child Care Partnership and KEHS-Home Visitation
<b>State Administering Agency</b>	KS Department for Children and Families
<b>Federal Administering Agency</b>	KEHS-HV: Office of Family Assistance (TANF) KEHS-CCP: Office of Child Care
<b>Purpose and Delivery</b>	<p><b>KEHS-HV:</b> The purpose of this program is to implement home visitation services to families. KEHS grantees are required to follow the Federal Head Start Program Performance Standards and to demonstrate a collaborative approach in their service delivery including partnerships with Parents as Teachers, Healthy Families, Part B and Part C providers, Training and Technical Assistance, local school districts and other community services and agencies. Early, individualized child development and parent education services must be provided to infants, toddlers and their families according to a plan jointly developed by the parents and staff. These services are to be provided through home visits with home-based providers. KEHS grantees are required to ensure their program is supportive and nurturing of families and responds to their needs. Care given must meet the needs of the individual child and be sensitive to the cultural, linguistic and familial needs. In addition, care must promote health, safety, continuity of care and must include comprehensive child development and family support. Further, grantees will work with families who are unemployed to seek employment, return to school, or to enter a TANF approved training program.</p> <p>KEHS grantees are required to recruit, train, and supervise high quality staff to ensure the kind of warm and continuous relationships between caregivers and children that are crucial to infant and toddler learning and development. Grantees are required to ensure parent involvement in policy and decision making. Services are delivered by 10 grantees across the State of Kansas that operate federally funded head start programs.</p> <p><b>KEHS-CCP:</b> The purpose of KEHS-Child Care Partnership services is to expand the continuum of early care and education services and enhance the network of supports by meeting the following objectives for children and families, practitioners, providers, and the community:</p> <p>Objectives for Children and Families:</p> <ul style="list-style-type: none"> <li>• Increase comprehensive supports in high quality infant and toddler child care centers, group child care homes and family child care services in high-risk, high-need communities.</li> <li>• Build protective factors for vulnerable children and families.</li> <li>• Connect families to health and wellness services.</li> <li>• Support families as they move toward self-sufficiency.</li> </ul> <p>Objectives for Practitioners, Providers, and Communities:</p> <ul style="list-style-type: none"> <li>• Increase the quality of child care providers through recruitment and participation.</li> <li>• Build a cadre of qualified, effective infant-toddler teachers with deep infant and toddler expertise and experience.</li> <li>• Gather, analyze, and offer programs access to data that will assist them in improving their practice, supports, and outcomes for infants, toddlers and their families.</li> </ul>

	<ul style="list-style-type: none"> <li>• Enhance the statewide network of resources and supports by improving cross-systems professional development and systems linkages.</li> <li>• Coordinate local early childhood systems to successfully link infant-toddler and preschool.</li> <li>• Positively impact regional/state economy.</li> </ul> <p>KEHS-Child Care Partnership grantees must fully meet the requirements of the Head Start Program Performance Standards and Kansas Child Care Licensing Regulations. For purposes of KEHS-Child Care Partnerships, children receiving Child Care Assistance and who meet the low-income definition which is defined as 100% of the Federal Poverty Guidelines at the time of application will be prioritized for enrollment. The Child Care Assistance is a requirement for participation, as it serves as the base payment for the family's participation. Services are delivered by 10 grantees across the State of Kansas.</p>
<b>Number of KS children/families served</b>	For SFY24, funding will be made available for 563 KEHS-HV slots and for 387 KEHS-CCP slots across Kansas.
<b>Statutory Authority</b>	There is no statutory authority for this program, however the program helps DCF meet the CCDF requirements in 45 CFR 98.50(b)(2) stating that no less than three percent of the funds shall be used to carry out activities related to the quality of care for infants and toddlers.
<b>FY23 Funding</b>	Home Visitation – TANF Funded - \$5,233,327 Child Care - CCDF Discretionary Funded - \$7,506,797
<b>Current staffing</b>	1 FTE and part of a supervisor's salary. This does not include the staffing used by the grantees who administer the programs.  There are additional FTEs that are considered indirect and include an FTE allocation to this program that are not listed here.
<b>Opportunities for improvement/reform under a consolidated agency structure.</b>	A consolidated agency may provide opportunities for improved service delivery with shared goals. Processes may be streamlined and may be more effective due to better collaboration and communication leading to a more comprehensive approach to child care and education.
<b>Potential gaps, inefficiencies, and/or redundancies that might be addressed/eliminated within a consolidated agency.</b>	A consolidated agency may lead to a united Early Childhood brand and can decrease miscommunication among agencies.
<b>Does this program undergo any type of formal evaluation or compliance monitoring?</b>	The grantees receive federal monitoring for the Head Start Program Performance Standards from the Office of Head Start for any classrooms that contain federally funded children. Programs submit monthly status report, monthly budget transaction reports, monthly budget itemization reports, are subject to CCDF Child Care Assistance program auditing and included in the population pulled for those auditing requirements, Quarterly Performance and outcome reports are required. Audits are conducted in accordance with the provisions contained in 2 CFR Chapter I, Chapter II, Part 200, et al. Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards; Final Rule. The grantees are responsible for obtaining an independent audit. DCF Audit Services has the authority, under the provisions of this grant, and federal and State law, to conduct audits in addition to those conducted by an entity's contracted audit firm. The Kansas Early Head Start Program Management may do a desk audit and/or site visit to each grantee annually. Grantees must

	<p>engage in program planning and management that includes consultation with the governing body, policy groups, program staff, and other community organizations that serve low-income families with young children. The governing body has legal and fiscal responsibility for the Head Start entity and is required to have members with that expertise in its membership. The governing body must also reflect the community served and include parents of current or former Head Start children. In addition, each grantee is required to have a policy council which is responsible for the day-to-day and long-term direction of the program. This council is elected by and consists of a majority of parents of Head Start children. Community members are also part of the policy council.</p>
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**Parent Skill-Building – Family First Prevention Services Act (Parents as Teachers)**

<b>Category</b>	<i>Parent Skill-Building- Family First Prevention Services Act</i>
<b>Program Name</b>	Parents as Teachers Bright Futures Program
<b>State Administering Agency</b>	DCF /Kansas Parents as Teachers Association
<b>Federal Administering Agency</b>	N/A
<b>Purpose and Delivery</b>	<i>Provides in-home early childhood parent education, to strengthen family support and well-being. Parent educators work with parents to strengthen protective factors to ensure young children are healthy, safe, and ready to learn. The purpose is to improve child health and development, reduce rates of child abuse and neglect, increase school readiness, and increase parent involvement in children’s care and education.</i>
<b>Number of KS children/families served</b>	<i>205 Referrals (Feb. 2022- Feb. 2023 data)</i>
<b>Statutory Authority</b>	<i>The Federal Family First Prevention Services Act provides matching federal funding to provide evidence based services to prevent entry into foster care. The program serves all ages – only those programs that focus on early childhood are included here. PAT is a <a href="#">well-supported program</a> under the Title IV-E Prevention Services Clearinghouse, which allows the Title IV-E agency (DCF) to draw down 50% of expended funding for the program. To claim IV-E reimbursable funds, referrals to the program must be made from DCF as the Title IV-E agency. (See <a href="#">ACYF-CB-PI-18-09</a>)</i>
<b>FY23 Funding</b>	<i>\$999,473 All Funds SGF \$499,736.50; Prevention IV-E \$499,736.50 (FY24, 7/1/23, \$1,000,000 All Funds SGF \$500,000; Prevention IV-E \$500,000)</i>
<b>Current staffing</b>	<ul style="list-style-type: none"> <li>• Full time employees - 1</li> <li>• Part time employees - 10</li> <li>• Contractors/consultants – 38 school districts, 1 consultant</li> <li>• Administrative/finance and/or other agency staff supporting this program – 2</li> </ul>
<b>Opportunities for improvement/reform under a consolidated agency structure.</b>	Collaboration with other Early Childhood programs
<b>Potential gaps, inefficiencies, and/or redundancies that might be addressed/eliminated within a consolidated agency.</b>	Potential to consolidate funding to help program grow and offer robust coverage for community access to services however with Family First funding DCF would need to make the referral.
<b>Does this program undergo any type of formal evaluation or compliance monitoring?</b>	As a federally funded grant, this program is evaluated by an external evaluator who provides a rigorous, responsive, and comprehensive approach as part of the Family First Prevention Services Act guidance.

**Parent Skill-Building – Family First Prevention Services Act (Healthy Families America)**

<b>Category</b>	<i>Parent Skill-Building – Family First Prevention Services Act</i>
<b>Program Name</b>	Healthy Families America
<b>State Administering Agency</b>	DCF /Kansas Children’s Service League
<b>Federal Administering Agency</b>	N/A
<b>Purpose and Delivery</b>	<i>Home visiting model that works with families that have mental health, histories of trauma, partner violence, or substance use disorder issues. Purpose is to promote child well-being, prevent abuse and neglect, nurture families to lead productive and healthy lifestyles, and cultivate community partnerships.</i>
<b>Number of KS children/families served</b>	<i>42 Referrals (Feb. 2022- Feb. 2023 data) (FY24, 7/1/23, expansion would increase these approximately 120 referrals annually)</i>
<b>Statutory Authority</b>	<i>HFA is a <a href="#">well-supported program</a> under the Title IV-E Prevention Services Clearinghouse, which allows the Title IV-E agency (DCF) to draw down 50% of expended funding for the program. To claim IV-E reimbursable funds, referrals to the program must be made from DCF as the Title IV-E agency. (See <a href="#">ACYF-CB-PI-18-09</a>)</i>
<b>FY23 Funding</b>	<i>\$795,613 All Funds SGF \$397,806.50; Prevention IV-E \$397,806.50 (FY24 \$1,555,000 SGF \$777,500; Prevention IV-E \$777,500)</i>
<b>Current staffing</b>	<ul style="list-style-type: none"> <li>• Full time employees – 6.97</li> <li>• Part time employees - 0</li> <li>• Contractors/consultants – 0</li> <li>• Administrative/finance and/or other agency staff supporting this program – .1</li> </ul> <p><i>(FY24 expansion below)</i></p> <ul style="list-style-type: none"> <li>• Full time employees – 15.42</li> <li>• Part time employees -0</li> <li>• Contractors/consultants- 0</li> <li>• Administrative/finance and/or other agency staff supporting this program- 1.34</li> </ul>
<b>Opportunities for improvement/reform under a consolidated agency structure.</b>	Collaboration with other Early Childhood programs
<b>Potential gaps, inefficiencies, and/or redundancies that might be addressed/eliminated within a consolidated agency.</b>	Potential to consolidate funding to help program grow and offer robust coverage for community access to services, however with Family First funding DCF would need to make the referral.
<b>Does this program undergo any type of formal evaluation or compliance monitoring?</b>	As a federally funded grant, this program is evaluated by an external evaluator who provides a rigorous, responsive, and comprehensive approach as part of the Family First Prevention Services Act guidance.

**Parent Skill-Building – Family First Prevention Services Act (Healthy Families America - 2)**

<b>Category</b>	<i>Parent Skill-Building – Family First Prevention Services Act</i>
<b>Program Name</b>	Healthy Families America
<b>State Administering Agency</b>	DCF /Great Circle (changing to KVC 4.1.23)
<b>Federal Administering Agency</b>	N/A
<b>Purpose and Delivery</b>	<i>Home visiting model that works with families that have mental health, histories of trauma, partner violence, or substance use disorder issues. Purpose is to promote child well-being, prevent abuse and neglect, nurture families to lead productive and healthy lifestyles, and cultivate community partnerships.</i>
<b>Number of KS children/families served</b>	<i>50 Referrals (Feb. 2022- Feb. 2023 data) FY23 Service areas include 16 counties in the Southeast, Northeast and Kansas City Regions (FY24, 7/1/23, decrease in service area to 7 counties in the Northeast Region with the ability to serve 195 families annually)</i>
<b>Statutory Authority</b>	<i>HFA is a <a href="#">well-supported program</a> under the Title IV-E Prevention Services Clearinghouse, which allows the Title IV-E agency (DCF) to draw down 50% of expended funding for the program. To claim IV-E reimbursable funds, referrals to the program must be made from DCF as the Title IV-E agency. (See <a href="#">ACYF-CB-PI-18-09</a>)</i>
<b>FY23 Funding</b>	<i>\$1,352,335 All Funds SGF \$676,167.50; Prevention IV-E \$676,167.50 (FY24 \$395,475 SGF \$197,737.50; Prevention IV-E \$197,737.50)</i>
<b>Current staffing</b>	<ul style="list-style-type: none"> <li>• Full time employees – 14.0</li> <li>• Part time employees - 0</li> <li>• Contractors/consultants – 0</li> <li>• Administrative/finance and/or other agency staff supporting this program – 2.75</li> </ul> <p><i>Note: Gradually decreasing staff to 3.5 FTE &amp; .7 Administrative</i></p> <p><i>(FY24 expansion below)</i></p> <ul style="list-style-type: none"> <li>• Full time employees – 4.0</li> <li>• Part time employees -0</li> <li>• Contractors/consultants- 0</li> <li>• Administrative/finance and/or other agency staff supporting this program- .40</li> </ul>
<b>Opportunities for improvement/reform under a consolidated agency structure.</b>	Collaboration with other Early Childhood programs
<b>Potential gaps, inefficiencies, and/or redundancies that might be addressed/eliminated within a consolidated agency.</b>	Potential to consolidate funding to help program grow and offer robust coverage for community access to services, however with Family First funding DCF would need to make the referral.



<b>Does this program undergo any type of formal evaluation or compliance monitoring?</b>	As a federally funded grant, this program is evaluated by an external evaluator who provides a rigorous, responsive, and comprehensive approach as part of the Family First Prevention Services Act guidance.
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## Family Preservation

<b>Category</b>	Prevention Services
<b>Program Name</b>	Family Preservation
<b>State Administering Agency</b>	Department for Children and Families
<b>Federal Administering Agency</b>	<i>(If applicable)</i>
<b>Purpose and Delivery</b>	<p>Family Preservation is a voluntary service provided to families with a child at risk of entering foster care.</p> <p>Provides in-home services with the goal of keeping the family together.</p> <p>May also serve pregnant women using substances, to help the mother find and maintain substance use treatment.</p> <p>Each contractor selects an evidence-based program as a service model</p> <p>Services are available in all 105 Kansas counties.</p>
<b>Number of KS children/families served</b>	Estimate number of families to be served is 1,500/year. As of 3/10/23 there have been 1,089 Family Preservation referrals.
<b>Statutory Authority</b>	Kansas Code for Care of Children
<b>FY23 Funding</b>	<p>DCF's Family Preservation Program is funded by:</p> <p>SGF-Youth Aid &amp; Asst 8.19%</p> <p>CIF- Family Preservation 27.0%</p> <p>IV-B Safe and Stable Families (PSSF) 5.40%</p> <p>IV-B Child Welfare Services (CWS) 15.26%</p> <p>TANF 37.46%</p> <p>IV-E Foster Care 6.68%</p>
<b>Current staffing</b>	<ul style="list-style-type: none"> <li>• Contractors/consultants</li> </ul> <p>Full time-88 Part time- 4</p> <ul style="list-style-type: none"> <li>• DCF Administrator- 1 full-time</li> <li>DCF Regional Support Staff- 3</li> </ul>
<b>Opportunities for improvement/reform under a consolidated agency structure.</b>	Unknown/speculation
<b>Potential gaps, inefficiencies, and/or redundancies that might be addressed/eliminated within a consolidated agency.</b>	Unknown/speculation
<b>Does this program undergo any type of formal evaluation or compliance monitoring?</b>	Family Preservation is reviewed by the Federal Child and Family Service Review (CFSR) and Annual Progress and Services Report (APSR). Internal case reads are ongoing. Referral utilization and allocation reports are completed weekly.

**Section Four:**

**KANSAS**

**DEPARTMENT OF**

**HEALTH AND**

**ENVIRONMENT**

## Early Youth Care Programs & Child Care Licensing

<b>Category</b>	Child Care Licensing
<b>Program Name</b>	Early Youth Care Programs & Child Care Licensing
<b>State Administering Agency</b>	Department for Children and Families (DCF)
<b>Federal Administering Agency</b>	Administration for Children and Families (ACF)
<b>Purpose and Delivery</b>	<p>To reduce the risk of preventable harm and ensure a minimum standard level of care and protection to children while in out of home care settings through regulation of licensed child care facilities</p> <p><b>Delivery</b> Program delivered and accessed through current licensing system (CLARIS) that provides current process and regulation tools.</p> <p><b>Partnerships</b> Department for Child and Families (DCF) Kansas Child Care Training Opportunities (KCCTO) Child Care Aware of Kansas (CCAK) Child and Adult Food Care Program</p>
<b>Number of KS children/families served</b>	Licensed Facility Count: 4,507 Total Capacity to serve: 140,994
<b>Statutory Authority</b>	<p>Federal Law (funded through the Child Care Development Block Grant/CCDF)</p> <p><i>Note: DCF is grantee, KDHE CCL program receives funds from DCF to fulfill the Health and Safety portion of the CCDF state plan</i></p>
<b>FY23 Funding</b>	<p>\$4,246,245 – Aid to Local and Operating expenses \$290,720 – State General Fund for Aid to Local \$215,621 – State General Fund for Operations</p>
<b>Current staffing</b>	<ul style="list-style-type: none"> <li>• Full time employees – 27 Current (33 full if fully staffed)</li> <li>• Part time employees - 0</li> <li>• Contractors/consultants – 3 current for limited time</li> <li>• Administrative/finance and/or other agency staff supporting this program – None currently</li> </ul>
<b>Opportunities for improvement/reform under a consolidated agency structure.</b>	None
<b>Potential gaps, inefficiencies, and/or redundancies that might be addressed/eliminated within a consolidated agency.</b>	The Department for Children & Families (DCF) is the lead state agency for the Child Care and Development Block Grant (CCDBG) and Child Care Development Fund (CCDF); however, KDHE is the agency responsible for regulating provisions of child care and carrying out CCDF State Plan (2022- 2024) requirements for health and safety, including licensing facilities and monitoring compliance with

	<p>CCDF requirements. The program is appropriately housed within KDHE as a public health initiative driver and provides needed oversight out of DCF as the agency providing monetary support to licensed child care facilities.</p>
<p><b>Does this program undergo any type of formal evaluation or compliance monitoring?</b></p>	<ul style="list-style-type: none"> <li>• Federal <ul style="list-style-type: none"> <li>- Yearly reports to Administration for Children and Families (federal report)</li> <li>- CCDF monitoring</li> </ul> </li> <li>• State <ul style="list-style-type: none"> <li>- Health Department quarterly reports</li> </ul> </li> <li>• Internal <ul style="list-style-type: none"> <li>- Ongoing program review using database of record, CLARIS.</li> </ul> </li> </ul>

## Kansas Early Childhood Developmental Services

<b>Category</b>	Early Intervention
<b>Program Name</b>	Kansas Early Childhood Developmental Services
<b>State Administering Agency</b>	KDHE
<b>Federal Administering Agency</b>	Office of Special Education Programs (OSEP)
<b>Purpose and Delivery</b>	Early intervention services for infants and toddlers with Disabilities and/or developmental delays and their families; Provides funding to 29 local programs that are providing the 17 federally required services.
<b>Number of KS children/families served</b>	11,000
<b>Statutory Authority</b>	Part C of the Individuals with Disabilities Education Act. Federal Public Law 108-446, FAR 34 §303. Kansas Statutes Chapter 75, Article 56, Sections 48 and 49 and Chapter 74, Article 78, Sections 2 and 3. KAR 28.4 Sections 550-573.
<b>FY23 Funding</b>	Direct allocations: SGF \$6,000,000 CIF \$5,800,000 Fed \$4,400,000
<b>Current staffing</b>	<ul style="list-style-type: none"> <li>• 6 Full time employees</li> <li>• About 500 Contractors/consultants/providers</li> </ul>
<b>Opportunities for improvement/reform under a consolidated agency structure.</b>	N/A
<b>Potential gaps, inefficiencies, and/or redundancies that might be addressed/eliminated within a consolidated agency.</b>	N/A
<b>Does this program undergo any type of formal evaluation or compliance monitoring?</b>	Yes, we report annually to OSEP and review our local programs throughout the year. Reports are here: <a href="https://www.kdhe.ks.gov/DocumentCenter/View/25675/Annual-Performance-Report-and-State-Performance-Plan-2020">https://www.kdhe.ks.gov/DocumentCenter/View/25675/Annual-Performance-Report-and-State-Performance-Plan-2020</a> <a href="https://www.kdhe.ks.gov/720/Local-Program-Determinations">https://www.kdhe.ks.gov/720/Local-Program-Determinations</a>

## Newborn Hearing Screening Program

<b>Category</b>	<i>Screening and Surveillance</i>
<b>Program Name</b>	Newborn Hearing Screening Program
<b>State Administering Agency</b>	Kansas Department of Health & Environment (KDHE)
<b>Federal Administering Agency</b>	N/A
<b>Purpose and Delivery</b>	To improve the quality of life with children identified hearing loss and their families by reducing the number of infants who are lost to follow up to newborn hearing screening, ensuring timely audiological evaluations and referrals to early intervention services to optimize language, literacy, cognitive, social and emotional development.
<b>Number of KS children/families served</b>	SFY2022 <ul style="list-style-type: none"> <li>• 35798/36207 screened</li> <li>• 920 not screened or failed need follow-up</li> <li>• 61 cases of hearing loss</li> </ul>
<b>Statutory Authority</b>	KSA 65-1,157a Chapter 65.--PUBLIC HEALTH Article 1.-- SECRETARY OF HEALTH AND ENVIRONMENT, ACTIVITIES 65-1,157a. Newborn infant hearing screening; informed consent; confidentiality of information; application for and receipt of grants; rules and regulations.  State of Kansas Department of Health and Environment Permanent Administrative Regulations Article 4 - MATERNAL AND CHILD HEALTH Newborn Infant Hearing Screening Act
<b>FY23 Funding</b>	\$ 250,000 (SFY2023) HRSA  \$ 100,000 (SFY2023) CDC
<b>Current staffing</b>	3 Full time employees (3 FTE)
<b>Opportunities for improvement/reform under a consolidated agency structure.</b>	
<b>Potential gaps, inefficiencies, and/or redundancies that might be addressed/eliminated within a consolidated agency.</b>	Lost to Follow-Up (infants who have not completed the hearing screening process). A State health Information repository could reduce the number lost.
<b>Does this program undergo any type of formal evaluation or compliance monitoring?</b>	YES Program staff monitor through quarterly reports, hospital trainings and site visits, and national data survey of the program annually.

## Critical Congenital Heart Defect Program

<b>Category</b>	<i>Screening and Surveillance</i>
<b>Program Name</b>	Critical Congenital Heart Defect Program
<b>State Administering Agency</b>	Kansas Department of Health & Environment (KDHE)
<b>Federal Administering Agency</b>	N/A
<b>Purpose and Delivery</b>	To improve the quality of life of infants screened for critical heart defects before hospital discharge and to ensure early treatment and prevention of disability or death early in life.
<b>Number of KS children/families served</b>	SFY2022 <ul style="list-style-type: none"> <li>● 36207 screened</li> <li>● 919 Not screened Follow Up</li> <li>● 40 failed and needed follow up</li> <li>● 4 Confirmed CCHD, 20 other condition</li> </ul>
<b>Statutory Authority</b>	Regulations on screening and reporting not completed. Awaiting completion of Metabolic Newborn Screening Regulation revision.
<b>FY23 Funding</b>	Newborn Fee Fund/MCH money  Note: There isn't dedicated funding for this program. NBS Fee Fund is there to support it, however, there weren't any follow up activities taking place before it was moved under the umbrella with the NBS Hearing program.
<b>Current staffing</b>	2 Part time employees  Note: NBS Hearing staff (1 f/u coordinator and the program administrator) carry out the activities for CCHD as well since there isn't dedicated funding for that program and the f/u activities are minimal.
<b>Opportunities for improvement/reform under a consolidated agency structure.</b>	Consolidated within last two years to align with NBS Hearing program.
<b>Potential gaps, inefficiencies, and/or redundancies that might be addressed/eliminated within a consolidated agency.</b>	State Health Information Repository and Newborn Screening reporting system that could be utilized to reduce lost to follow up numbers.
<b>Does this program undergo any type of formal evaluation or compliance monitoring?</b>	No



### Birth Defects Program

<b>Category</b>	<i>Screening and Surveillance</i>
<b>Program Name</b>	Birth Defects Program
<b>State Administering Agency</b>	Kansas Department of Health & Environment (KDHE)
<b>Federal Administering Agency</b>	N/A
<b>Purpose and Delivery</b>	The program strives to provide high-quality education to prevent birth defects and facilitate referral for intervention and treatments for those identified, specifically with referrals to internal public health service delivery programs. The program is responsible for the surveillance and monitoring of reportable birth defect conditions (e.g., congenital anomalies, stillbirths, abnormal conditions of newborns).
<b>Number of KS children/families served</b>	FY 2022 - Birth to age 5  Over 680 birth defects verified
<b>Statutory Authority</b>	KS Statutes & Regulations (unfunded state mandated programs)
<b>FY23 Funding</b>	Currently, funded through NBS Fee Fund  Note: This comes from the Fee Fund, so we pull our Birth Defects Coordinator salary from the \$1.2M that is allocated to NBS f/u. We don't receive additional funding for this program/position.
<b>Current staffing</b>	1 FTE
<b>Opportunities for improvement/reform under a consolidated agency structure.</b>	N/A - recent reorg increased coordination and collaboration with KS NBS programs
<b>Potential gaps, inefficiencies, and/or redundancies that might be addressed/eliminated within a consolidated agency.</b>	
<b>Does this program undergo any type of formal evaluation or compliance monitoring?</b>	No

## Newborn Screening Metabolic Follow-Up Program

<b>Category</b>	<i>Screening and Surveillance</i>
<b>Program Name</b>	Newborn Screening Metabolic Follow-Up Program
<b>State Administering Agency</b>	Kansas Department of Health & Environment (KDHE)
<b>Federal Administering Agency</b>	<i>(If applicable)</i>
<b>Purpose and Delivery</b>	<p>A public health service provided at no charge to families to provide early detection of genetic and metabolic conditions. Early detection allows for prompt treatment and intervention before severe morbidity and/or death occurs from these conditions. Specimens are collected at the birth facility or by the birth attendant shortly after birth.</p> <p>Specimens are then shipped to the Kansas Health and Environmental Laboratories for analysis. The Follow Up Program informs primary care physicians and families of out of range results and follows these cases through to resolution (diagnosed, excluded, rescreen/normalized).</p>
<b>Number of KS children/families served</b>	<p>Newborns &amp; Infants ages 0-1 year of age. Numbers served in SFY22:</p> <ul style="list-style-type: none"> <li>• 36270 served (all infants served) <ul style="list-style-type: none"> <li>○ 35974 served (born in Kansas)</li> </ul> </li> <li>• 3858 required follow up <ul style="list-style-type: none"> <li>○ 179 not screened and Followed Up</li> <li>○ 3679 screened and followed up</li> </ul> </li> <li>• 63 confirmed diagnoses (377 still pending)</li> <li>• 99 confirmed carriers (20 unconfirmed likely carriers)</li> </ul>
<b>Statutory Authority</b>	K.A.R 65-101, K.A.R 65-180, K.A.R 65-181
<b>FY23 Funding</b>	<p>Newborn Screening Fund – appropriated from the Medical Assistance Fee Fund</p> <p>SFY23: \$5M proviso - \$1.2M allocated for NBS F/U activities (KHEL and shared activities receive the remaining \$3.8M allocation)</p>
<b>Current staffing</b>	<ul style="list-style-type: none"> <li>• 3 Full time employees (3 FTE)</li> <li>• 1 Contracted Medical Director (0.1 FTE)</li> <li>• 4 positions providing administrative or other support to the program (3 FTE; (1) .5 FTE) <ul style="list-style-type: none"> <li>○ 2 Administrative Staff</li> <li>○ Education &amp; Outreach Coordinator</li> <li>○ Data Manager</li> </ul> </li> </ul>
<b>Opportunities for improvement/reform under a consolidated agency structure.</b>	
<b>Potential gaps, inefficiencies, and/or redundancies that might be addressed/eliminated within a consolidated agency.</b>	Lost to Follow-Up (infants who have not completed the screening or diagnostic process). A State health information repository could reduce the number lost to follow up.
<b>Does this program undergo any type of formal evaluation or compliance monitoring?</b>	Yes. Program performance metrics are reviewed at least annually with the Kansas Advisory Council on Newborn Screening. Annual performance metrics are also reported to the New STEPs national newborn screening data repository.

## Special Supplemental Nutrition Program for Women, Infants and Children (WIC)

<b>Category</b>	Nutritional Health
<b>Program Name</b>	Special Supplemental Nutrition Program for Women, Infants and Children (WIC)
<b>State Administering Agency</b>	Kansas Department of Health & Environment (KDHE), Bureau of Family Health
<b>Federal Administering Agency</b>	United States Department of Agriculture (USDA), Food and Nutrition Service (FNS)
<b>Purpose and Delivery</b>	<p>The purpose of WIC is to improve the nutritional wellbeing and health status of Women who are pregnant, postpartum, or breastfeeding; Infants up to age one and Children up to age five.</p> <p>Services are accessed through 115 KDHE contracted WIC clinics located in county health departments and community health clinics. Services include a nutritional status assessment, client directed nutrition counseling including breastfeeding promotion and support, healthy foods to supplement participant's diet, and referrals to needed health services such as immunizations, lead screening, and smoking cessation resources.</p> <p>WIC stakeholders include local clinic staff (registered dietitians RNs administrative support), health care professionals, 375 approved retail grocery stores and their staff.</p>
<b>Number of KS children/families served</b>	FFY 2022 Unduplicated Counts: Total Women: 22,505 Total Infants: 22,952 Total Children: 34,956 Grand Total: 80,413
<b>Statutory Authority</b>	Federal Law: Child Nutrition Act of 1966, as amended. Code of Federal Regulations: Title 7, Part 246
<b>FY23 Funding FFY 2022</b>	\$30,118,076 Federal funds allocated for food purchases. \$11,886,265 infant formula manufacturer rebates used for food purchases. \$ 19,020,911 federal funds allocated for program services and program administration. \$61,025,252 Total funds allocated and available
<b>Current staffing</b>	<ul style="list-style-type: none"> <li>• 16 Full time KDHE employees</li> <li>• 5 Contractors (Management Information System, EBT Transaction Processing, WIC Shopper Mobile App, Project Management,</li> <li>• 400 Local Agency Staff</li> <li>• Other KDHE administrative, finance, legal, and management staff spend a portion of their time supporting the WIC program</li> </ul>
<b>Opportunities for improvement/reform under a consolidated agency structure.</b>	The Child Nutrition Act requires that the WIC program be administrated within a state's health agency. WIC's public health mission aligns closely with KDHE's mission to protect and improve the health of Kansans.

## Title V

<b>Category</b>	Maternal and Child Health (MCH)
<b>Program Name</b>	Title V
<b>State Administering Agency</b>	KDHE BFH
<b>Federal Administering Agency</b>	HRSA MCHB
<b>Purpose and Delivery</b>	<p>Provides access to comprehensive services through local agencies for all individuals (ages birth through adulthood) with low income or limited access to health services through partnerships with local agencies.</p> <p>*MCH Populations include Pregnant and Postpartum Women, Women of Reproductive Age, Infants, Children, Adolescents, and Children with Special Health Care Needs</p>
<b>Number of KS children/families served</b>	As most of this money is passed through to local agencies, there is no tracking at the state level of children/families served but we will be looking to change this.
<b>Statutory Authority</b>	Title V of the Social Security Act of 1935
<b>FY23 Funding</b>	Federal: \$4,781,390 State: \$7,274,594 Total: \$12,055,984
<b>Current staffing</b>	<ul style="list-style-type: none"> <li>• 1 FTE</li> <li>• A variety of contractors and Aid to Local Grantees across that state</li> <li>• 6 .5 FTE for administrative &amp; policy support, fiscal, &amp; BFH Director</li> </ul>
<b>Opportunities for improvement/reform under a consolidated agency structure.</b>	Hiring of an Early Childhood Director would help to increase the capacity of the BFH and MCH especially as the Help Me Grow infrastructure grows and Community HUBs are established.
<b>Potential gaps, inefficiencies, and/or redundancies that might be addressed/eliminated within a consolidated agency.</b>	Title V MCH is an integral part of the Bureau of Family Health (BFH). All Title V programs and services have direct cross over with other BFH programs and services (WIC, Childcare, screening and surveillance programs) allowing for collaboration within the Bureau and across other public health Bureaus in the agency.
<b>Does this program undergo any type of formal evaluation or compliance monitoring?</b>	Yes, each year a Block Grant review is conducted by HRSA. All aspects of the program are reviewed and discussed at that time followed by a written findings report later. Each program does data monitoring and compliance checks regularly. The Community Check Box is used to enter data and activities and pulled quarterly for a team Sensemaking session for further evaluation and to identify gaps and barriers that need to be addresses.

**Health Start/Home Visitor (Maternal and Child Health (MCH) Home Visiting)**

<b>Category</b>	Home Visiting; Prenatal/Postpartum support
<b>Program Name</b>	Health Start/Home Visitor (Maternal and Child Health (MCH) Home Visiting)
<b>State Administering Agency</b>	Kansas Department of Health & Environment (KDHE)
<b>Federal Administering Agency</b>	N/A
<b>Purpose and Delivery</b>	Provides a strengths-based home visiting model where families receive individualized services before, during, and after pregnancy, based on each family's needs. Pregnant women, Postpartum women, and infants to age one. Safety net home visiting services with no eligibility requirements.
<b>Number of KS children/families served</b>	SFY2022 <ul style="list-style-type: none"> <li>• 2,047 total number of women unduplicated</li> <li>• 4,074 total number of visits</li> </ul>
<b>Statutory Authority</b>	N/A
<b>FY23 Funding</b>	\$ 1,650,000 (SFY2023) \$ 250,000 (SFY2022)
<b>Current staffing</b>	<i>Planning to create a full-time employee position to manage/oversee the program. There will also be two partially funded positions for a total of 1.6 FTE.</i>
<b>Opportunities for improvement/reform under a consolidated agency structure.</b>	The Healthy Start Home Visitor which has been renamed Maternal and Child Health (MCH) Home Visiting. The MCH Home Visiting funded under the Kansas Children's Cabinet and Trust Fund (KCCTF) is the same program under the Kansas Department of Health and Environment (KDHE) Universal Home Visiting, which is also supported by State General Funds, MCH Block Grant and Local Program Matching funds.
<b>Potential gaps, inefficiencies, and/or redundancies that might be addressed/eliminated within a consolidated agency.</b>	NONE
<b>Does this program undergo any type of formal evaluation or compliance monitoring?</b>	YES, Local agencies are monitored on-site in a 3-5-year cycle. State staff monitor programs through virtual check-ins, progress reporting, and technical assistance.  Program evaluation will be available starting in SFY2023.

## Universal Home Visiting

<b>Category</b>	Home Visiting; Prenatal/Postpartum support
<b>Program Name</b>	Universal Home Visiting
<b>State Administering Agency</b>	Kansas Department of Health & Environment (KDHE)
<b>Federal Administering Agency</b>	N/A
<b>Purpose and Delivery</b>	Provides a strengths-based home visiting model where families receive individualized services before, during, and after pregnancy, based on each family's needs. Pregnant women, Postpartum women, and infants to age one. Safety net home visiting services with no eligibility requirements.
<b>Number of KS children/families served</b>	SFY2022 <ul style="list-style-type: none"> <li>• 2,047 total number of women unduplicated</li> <li>• 4,074 total number of visits</li> </ul>
<b>Statutory Authority</b>	N/A
<b>FY23 Funding</b>	\$ 1,650,000 (CIF SFY2023) \$ 250,000 (CIF SFY2022)
<b>Current staffing</b>	<i>Planning to create a full-time employee position to manage/oversee the program. There will also be two partially funded positions for a total of 1.6 FTE.</i>
<b>Opportunities for improvement/reform under a consolidated agency structure.</b>	The Healthy Start Home Visitor which has been renamed Maternal and Child Health (MCH) Home Visiting. The MCH Home Visiting funded under the Kansas Children's Cabinet and Trust Fund (KCCTF) is the same program under the Kansas Department of Health and Environment (KDHE) Universal Home Visiting, which is also supported by State General Funds, MCH Block Grant and Local Program Matching funds.
<b>Potential gaps, inefficiencies, and/or redundancies that might be addressed/eliminated within a consolidated agency.</b>	NONE
<b>Does this program undergo any type of formal evaluation or compliance monitoring?</b>	YES, Local agencies are monitored on-site in a 3-year cycle. State staff monitor programs through virtual check-ins, progress reporting, and technical assistance.  Program evaluation will be available starting in SFY2023.

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

<b>Category</b>	Home Visiting; Prenatal/Postpartum support	
<b>Program Name</b>	Maternal, Infant, and Early Childhood Home Visiting (MIECHV)	
<b>State Administering Agency</b>	Kansas Department of Health & Environment (KDHE)	
<b>Federal Administering Agency</b>	Health Resources and Services Administration (HRSA)	
<b>Purpose and Delivery</b>	Funding source for evidenced based home visiting programs in Kansas; WY County and 5 Counties (CK, LB, MO, NO, WL) in Southeast Kansas.	
<b>Number of KS children/families served</b>	125 Pregnant Participants 431 Caregivers – Female 10 Caregivers – Male 566 Total Caregivers	309 Children – Female <u>322</u> Children – Male 631 Total Children
<b>Statutory Authority</b>	HRSA MIECHV Program - Formula Awards are authorized by 42 U.S.C. § 711(c) (Title V, § 511(c) of the Social Security Act) to support the provision of home visiting services to eligible families by states, nonprofit organizations serving states, and U.S. jurisdictions. The Bipartisan Budget Act of 2018 (Pub. L. 115-123) (BBA) extended appropriated funding for the MIECHV Program and includes new MIECHV provisions. The BBA includes a requirement that states conduct an updated statewide needs assessment, authority for use of funds by recipients for a Pay for Outcomes (PFO) initiative (subject to certain conditions), a requirement that HRSA develop data exchange standards, and a requirement that recipients demonstrate improvements in benchmark measures. The Consolidated Appropriations Act, 2021 (P.L. 116-260) includes authority for recipients to use MIECHV grant funds during the declared COVID-19 public health emergency period.	
<b>FY23 Funding</b>	FY23 funding has not been awarded. FY22 funding: \$ 4,748,053	
<b>Current staffing</b>	3 Full time employees; 1 Partially funded employee (.4 FTE) Multiple Contractors/consultants	
<b>Opportunities for improvement/reform under a consolidated agency structure.</b>	N/A	
<b>Potential gaps, inefficiencies, and/or redundancies that might be addressed/eliminated within a consolidated agency.</b>	N/A	
<b>Does this program undergo any type of formal evaluation or compliance monitoring?</b>	YES, Formal Program Evaluation is conducted through a Coordinated State Evaluation by the University of Kansas Center for Public Partnerships and Research (KU-CPPR) Compliance Monitoring is provided annually on-site.	

### Maternal Community Health Worker Pilot Project

<b>Category</b>	Community Health Workers
<b>Program Name</b>	Maternal Community Health Worker Pilot Project
<b>State Administering Agency</b>	Kansas Department of Health & Environment (KDHE)
<b>Federal Administering Agency</b>	N/A
<b>Purpose and Delivery</b>	Provision of robust, holistic, and coordinated CHW services to pregnant women and parents with children up to age 3 in Wyandotte, Johnson, Leavenworth, and Miami Counties.
<b>Number of KS children/families served</b>	No current complete year of data. SFY2023 was the first year of funding this pilot project.  From April 1- December 31st, 2022: <ul style="list-style-type: none"> <li>• 304 Total families Served</li> </ul>
<b>Statutory Authority</b>	No state/federal requirements; Funded through PDG and MCH Block Grant
<b>FY23 Funding</b>	\$ 696,425.00
<b>Current staffing</b>	Contract through Community Health Council of Wyandotte County
<b>Opportunities for improvement/reform under a consolidated agency structure.</b>	N/A
<b>Potential gaps, inefficiencies, and/or redundancies that might be addressed/eliminated within a consolidated agency.</b>	N/A
<b>Does this program undergo any type of formal evaluation or compliance monitoring?</b>	YES, Program Evaluation will be conducted at the conclusion of the contract period ending June 30, 2023.  Monthly monitoring of project is conducted virtually



## Kansas Special Health Care Needs Program

<b>Category</b>	<i>Family Health</i>
<b>Program Name</b>	Kansas Special Health Care Needs Program
<b>State Administering Agency</b>	Kansas Department of Health and Environment (KDHE)
<b>Federal Administering Agency</b>	N/A
<b>Purpose and Delivery</b>	Promotes the functional skills of persons, who have or are at risk for a disability or chronic disease. Planning, development, and promotion of the parameters and quality of specialty health care in Kansas. Provides specialized medical services to infants, children and youth up to age 21 to who have eligible medical conditions.
<b>Number of KS children/families served</b>	281 total children enrolled on our program
<b>Statutory Authority</b>	Kansas Statutes: 28-4-406 65-5a01 65-5a05 65-5a08 to 65-5a16 65-101 65-180
<b>FY23 Funding</b>	Title V MCH Block Grant Funding - \$642,089 estimated for administration, salaries, and program function
<b>Current staffing</b>	6 FTE @ the state and some services are supported through aid-to-local structure through satellite offices.
<b>Opportunities for improvement/reform under a consolidated agency structure.</b>	More closely integrated with other sections who have overlapping demographic could prove to be great referral sources and providing more support to those families identified.
<b>Potential gaps, inefficiencies, and/or redundancies that might be addressed/eliminated within a consolidated agency.</b>	It is difficult to evaluate how a shift might look. SHCN serves 0-21 whereas other sections providing support focus on only the early interventions. SHCN should be very closely tied to newborn screening and part C services. If one of these programs moves to a new agency, I would argue that this could further separate the alignment if each of them are not also moved.
<b>Does this program undergo any type of formal evaluation or compliance monitoring?</b>	No.

## Bridges

<b>Category</b>	Health
<b>Program Name</b>	Bridges
<b>State Administering Agency</b>	KDHE
<b>Federal Administering Agency</b>	HRSA
<b>Purpose and Delivery</b>	In collaboration with the KECDS, the Bridges program provides holistic care coordination to transitioning children and their families to assist them in navigating the complex systems of care for a smooth and stress-free transition experience. KECDS networks referral children prior to their third birthday to Bridges Care Coordinators (BCC) to begin providing services. Children may remain on the program until age 8. This is currently located in 5 counties of the state.
<b>Number of KS children/families served</b>	Children identified with Developmental Delays ages 3-8. Currently 30 clients are being served. Additional clients added regularly.
<b>Statutory Authority</b>	None – listed as a pilot through the Title V Action Plan and aligns with All in for Kansas Kids Strategic Plan
<b>FY23 Funding</b>	Currently supported through the Preschool Development Grant Approximately \$50,000.00
<b>Current staffing No FTE</b>	5 part time employees (.10 FTE) – one located in each of the 5 counties. CSHCN Director is leading program – .15 FTE – development, monitoring, supervision, training etc.
<b>Opportunities for improvement/reform under a consolidated agency structure.</b>	Uncertain.
<b>Potential gaps, inefficiencies, and/or redundancies that might be addressed/eliminated within a consolidated agency.</b>	There is no other program like this to fill the gap families experience as the child ages out of KECDS.
<b>Does this program undergo any type of formal evaluation or compliance monitoring?</b>	Gather feedback from the KECDS and BCC staff for program improvements  Current review of Action Plan data and BCC tie and activities currently underway.

## Holistic Care Coordination

<b>Category</b>	Health
<b>Program Name</b>	Holistic Care Coordination
<b>State Administering Agency</b>	KDHE
<b>Federal Administering Agency</b>	HRSA – Block Grant
<b>Purpose and Delivery</b>	The Holistic Care Coordination (HCC) work is an expansion of the KS- Special Health Care Needs (KS-SHCN) program HCC work. This work is geared to provide support for providers and training on what HCC work is and how beneficial it is to quality care in alignment with the National Standards of Care Coordination. Through this work a HCC TA Center is being developed to support providers across that state. ECHO format trainings are one way that provider training continues to occur. Partnerships for the ECHOs have occurred with KAAP. This work also includes the development of an HCC Tool kit and informational videos.
<b>Number of KS children/families served</b>	Provider training – over 100 through the ECHO Series – TA Center still to be determined Unsure on tool kit and videos. 224 Total clients receiving care coordination services
<b>Statutory Authority</b>	Part of the Title V Action Plan and based on Needs Assessment findings in 2019 and aligns with All in for Kansas Kids Strategic Plan
<b>FY23 Funding</b>	Currently supported through the Preschool Development Grant, but will move to MCH funding in FY 2024; Title V MCH Block Grant Funding: \$57,600 estimated in direct assistance costs for families
<b>Current staffing</b>	1 FTE with support from the CSHCN Director (FTE) and KS-SHCN Care Coordinators (3 FTEs); additional services provided by satellite offices located in local health departments and contracted partners.
<b>Opportunities for improvement/reform under a consolidated agency structure.</b>	More closely integrated with other sections who have overlapping demographic could prove to be great referral sources and providing more support to those families identified.
<b>Potential gaps, inefficiencies, and/or redundancies that might be addressed/eliminated within a consolidated agency.</b>	No other program like it currently other than the KS-SHCN; It is difficult to evaluate how a shift might look. SHCN serves 0-21 whereas other sections providing support focus on only the early interventions. SHCN should be very closely tied to newborn screening and part C services. If one of these programs moves to a new agency, I would argue that this could further separate the alignment if each of them are not also moved.
<b>Does this program undergo any type of formal evaluation or compliance monitoring?</b>	No

**Primary Care Provider Care Coordination Expansion Project**

<b>Category</b>	<i>Health</i>
<b>Program Name</b>	Primary Care Provider Care Coordination Expansion Project
<b>State Administering Agency</b>	KDHE
<b>Federal Administering Agency</b>	HRSA
<b>Purpose and Delivery</b>	This work directly ties to the Holistic Care Coordination (HCC) work. Through this project provider offices were supporting for a current staff or newly hired staff person to do HCC work for their patients. Support was provided in addressing social determinants of health needs through the use of a Shared Plan of Care.
<b>Number of KS children/families served</b>	3 provider offices were assisted
<b>Statutory Authority</b>	Part of the Title V Action Plan and based on Needs Assessment findings in 2019
<b>FY23 Funding</b>	Currently supported through the Preschool Development Grant and aligns with All in for Kansas Kids Strategic Plan
<b>Current staffing</b>	The staff person is the same one for the HCC work since the tie together.
<b>Opportunities for improvement/reform under a consolidated agency structure.</b>	Uncertain.
<b>Potential gaps, inefficiencies, and/or redundancies that might be addressed/eliminated within a consolidated agency.</b>	None.
<b>Does this program undergo any type of formal evaluation or compliance monitoring?</b>	

## Supporting You

<b>Category</b>	Family Consumer Partnership
<b>Program Name</b>	Supporting You
<b>State Administering Agency</b>	Kansas Department of Health and Environment (KDHE)
<b>Federal Administering Agency</b>	HRSA
<b>Purpose and Delivery</b>	A peer-to-peer support program designed by parents for parents. The goal is to connect people who share experiences to support one another around a specific topic or need. This program is for those that want to learn from another with a similar experience. The Family Advisory Council (FAC) developed the program. Additional partners can become SY entity within the system for a variety of other supports. Current partners are School for the Deaf, KS- SHCN program, and Foster to Adopt Connect.
<b>Number of KS children/families served</b>	<i>77 support peers and 33 connected peers</i>
<b>Statutory Authority</b>	Part of the Title V Action Plan and based on FAC request and development and aligns with All in for Kansas Kids Strategic Plan
<b>FY23 Funding</b>	Currently supported through the Preschool Development Grant but will move to MCH funding in SFY 2024- annual cost \$ 45,000 (including FTE salary)
<b>Current staffing</b>	.50 FTE – this person also leads the FAC work and is supported by the CSHCN Director
<b>Opportunities for improvement/reform under a consolidated agency structure.</b>	Uncertain.
<b>Potential gaps, inefficiencies, and/or redundancies that might be addressed/eliminated within a consolidated agency.</b>	None.
<b>Does this program undergo any type of formal evaluation or compliance monitoring?</b>	Steps for monitoring and evaluation are still being developed, but the systems have a variety of reports that can be pulled as part of the monitoring and evaluation process.

## Help Me Grow

<b>Category</b>	Health/Resources and Connections
<b>Program Name</b>	Help Me Grow
<b>State Administering Agency</b>	CPPR but moving to KDHE in April 2023
<b>Federal Administering Agency</b>	HRSA
<b>Purpose and Delivery</b>	Designed to build a solid foundation for Kansas children and families. When children and families have a solid foundation of services and support, and the early childhood system is aligned and coordinated, children will thrive. This is designed to be a one stop shop to help families trying to navigate the complex systems of care. This system consists of four core components. 1. Family and community outreach 2. Centralized access point 3. Data Collection and Analysis 4. Provider outreach. Partnership with DCF, CPPR, KCSL, KSDE and the Children’s Cabinet. Community HUBs across Kansas will be established for a no wrong door approach to services and supports.
<b>Number of KS children/families served</b>	<i>This data is held by CPPR</i>
<b>Statutory Authority</b>	Part of the Title V Action Plan and aligns with All in for Kansas kids Strategic Plan
<b>FY23 Funding</b>	Currently supported through the Preschool Development Grant but will move to a blending of state agency funding in SFY 2024 to support the centralized access point. Approximately \$700,000
<b>Current staffing</b>	CSHCN Director is working with CPPR to transition to KDHE - Will be led by the Systems of Support team with partnership from other agencies listed above.
<b>Opportunities for improvement/reform under a consolidated agency structure.</b>	Making sure all agencies are part of this system structure and promoting it with all Kansas Families.
<b>Potential gaps, inefficiencies, and/or redundancies that might be addressed/eliminated within a consolidated agency.</b>	Might help increase collaborations and insure a no wrong door approach for families.
<b>Does this program undergo any type of formal evaluation or compliance monitoring?</b>	Yes, but that data would need to come from CPPR as they are currently gathering and reporting that.

### School Based Health Center Program

<b>Category</b>	Health
<b>Program Name</b>	School Based Health Center Program
<b>State Administering Agency</b>	Kansas Department Health and Environment (KDHE)
<b>Federal Administering Agency</b>	None
<b>Purpose and Delivery</b>	To provide direct supports to students, K- 12, to improve access to COVID-19 services including testing, vaccinations and behavioral health, by decreasing systemic barriers to care
<b>Number of KS children/families served</b>	Unknown
<b>Statutory Authority</b>	Title V
<b>FY23 Funding</b>	Workforce Development - \$3,621,527
<b>Current staffing</b>	Collaboration with Genesis Family Health and Community Health Center of SEKS
<b>Opportunities for improvement/reform under a consolidated agency structure.</b>	None
<b>Potential gaps, inefficiencies, and/or redundancies that might be addressed/eliminated within a consolidated agency.</b>	None
<b>Does this program undergo any type of formal evaluation or compliance monitoring?</b>	None

## CARE Program

<b>Category</b>	Health
<b>Program Name</b>	CARE Program
<b>State Administering Agency</b>	Kansas Department Health and Environment
<b>Federal Administering Agency</b>	N/A
<b>Purpose and Delivery</b>	To provide referrals, technical assistance, training, certification and reimbursement to CARE providers (forensic exams for physical child abuse and neglect)
<b>Number of KS children/families served</b>	36 exams have been reimbursed (3/17/2023)
<b>Statutory Authority</b>	Pending assignment of HB2034 amending KSA 38-2002 and KSA 38-2226
<b>FY23 Funding</b>	SGF \$757,000
<b>Current staffing</b>	Currently .5 staffing for administrative duty ie: reimbursement processing Fully executed 2 FTE are budgeted  Department of children and families Local participating physicians (28 CARE Providers) KU Wichita Children's Mercy
<b>Opportunities for improvement/reform under a consolidated agency structure.</b>	Better data tracking, training, provider network development, invoicing and referral process
<b>Potential gaps, inefficiencies, and/or redundancies that might be addressed/eliminated within a consolidated agency.</b>	No tracking system currently in place
<b>Does this program undergo any type of formal evaluation or compliance monitoring?</b>	None



### Kansas Perinatal Community Collaborative (KPCC)

<b>Category</b>	Perinatal System of Care
<b>Program Name</b>	Kansas Perinatal Community Collaborative (KPCC)
<b>State Administering Agency</b>	Kansas Department of Health & Environment (KDHE)
<b>Federal Administering Agency</b>	Health Resources and Services Administration (HRSA)
<b>Purpose and Delivery</b>	KPCCs use a collective impact framework that supports a coordinated perinatal system of care across public and private partners. A core component of a local KPCC is facilitation of the March of Dimes' Becoming a Mom® (BaM) prenatal education curriculum (available in English and Spanish). There are currently 19 established KPCC communities, and BaM classes are offered in a variety of settings including community-based organizations, hospitals, health departments, clinical care settings, faith-based communities, and worksites. This program is free to pregnant individuals. The holistic approach and coordinated system of care established through the KPCC paired with the education and support offered through BaM classes has contributed to improved maternal and child health outcomes.
<b>Number of KS children/families served</b>	2019 – 901 individuals served 2020 – 582 individuals served 2021 – 543 individuals served  *Program activities were affected by the COVID-19 pandemic, resulting in a decline in the number of participants compared to earlier years.
<b>Statutory Authority</b>	N/A
<b>FY23 Funding</b>	This is an unfunded program at the state and local levels. The BaM Prenatal Education classes provided by KPCC partners are funded through the Title V MCH Block Grant. KDHE staff time to support community implementation, training, and other support is also supported by the Title V MCH Block Grant.
<b>Current staffing</b>	2 FTEs – roles/responsibilities include KPCC and BaM but are not 100% dedicated to KPCC or BaM
<b>Opportunities for improvement/reform under a consolidated agency structure.</b>	N/A
<b>Potential gaps, inefficiencies, and/or redundancies that might be addressed/eliminated within a consolidated agency.</b>	N/A
<b>Does this program undergo any type of formal evaluation or compliance monitoring?</b>	Yes  Annual BaM State Aggregate Report is developed based on program participant surveys and birth outcomes.