

Statewide Needs Assessment Summary

Preschool Development Grant Birth to 5

October 2020



The Preschool Development Grant Birth to 5 (PDG B-5) is a one-year federal grant administered by the Department of Children and Families (DCF) in collaboration with the Department of Public Instruction (DPI) and additional partners. PDG is Wisconsin's opportunity to "connect the dots" across the early care and education (ECE) field.

The grant focuses on the following activities:

- Sharing best practices
- Maximizing parental choice and knowledge
- Developing a comprehensive Needs Assessment
- Creating a Birth to 5 Statewide Strategic Plan



Wisconsin Department of
Children and Families

Table of Contents

Statewide Needs Assessment Summary	3
Needs Assessment Findings Summary	4
Background Indicators: Health, Employment, Poverty, Education	5
Early Care and Education Indicators: Birth to 5 Programs	6
Early Care and Education Indicators: Focus on Child Care	7
Access	8
Affordability	9
Quality	10
Workforce	11
SWOT Analysis: Strengths, Weaknesses, Opportunities, Threats	12–13
Collaborative Partners, Data Sources, and Next Steps	14



Statewide Needs Assessment Summary

The Statewide Needs Assessment Summary includes:

- Background Indicators: Health, Education, Poverty and Employment
- Early Care and Education Indicators: Birth to 5 Programs
- Early Care and Education Indicators: Focus on Child Care
 - Key Early Care and Education Quantitative Data
 - Listening Session Summary: PDG held Listening Sessions February-August, 2020 with participants from across the state. Participants shared their ideas on challenges impacting families of children birth to age 5, ECE programs and communities. Participants included Tribal leaders, community leaders and government leaders; parents and caregivers; ECE professionals; related service organizations; and business leaders. PDG held 10 virtual regional sessions, two virtual tribal sessions, one virtual Spanish-language session and four in-person sessions (pre-COVID-19). Participants were asked a series of semi-standard questions. Results were evaluated and analyzed.
 - Community Interviews Summary: UW-Madison Center for Community and Nonprofit Studies interviewed 52 caregivers and child care providers representing Black, Hmong, Latinx and rural White populations. Interviewees were asked similar questions to those asked at the PDG Virtual Listening Sessions. Interviewees were located across Wisconsin. Interviewers each had similar racial, ethnic and/or language backgrounds to one of the four interview populations.
- SWOT Analysis (Strengths, Weaknesses, Opportunities, Threats)



DCF divides Wisconsin's 72 counties into five regions: Northeastern (NER), Northern (NR), Southeastern (SER), Southern (SR) and Western (WR).

Wisconsin is home to 11 federally recognized Indigenous Tribes: Bad River Band of Lake Superior Chippewa, Forest County Potawatomi, Ho-Chunk Nation, Lac Courte Oreilles Band of Lake Superior Chippewa, Lac du Flambeau Band of Lake Superior Chippewa, Menominee Indian Tribe of Wisconsin, Oneida Nation, Red Cliff Band of Lake Superior Chippewa, Mole Lake (Sokaogon Chippewa Community) Band of Lake Superior Chippewa, Saint Croix Chippewa Indians of Wisconsin and Stockbridge-Munsee Community Band of Mohican Indians.



Needs Assessment Findings Summary:

Wisconsin families struggle to **Access** early care and education, particularly in child care deserts, predominantly located in rural areas. Access to care for infants, toddlers, during non-standard hours and for children with special needs is a void impacting families across the state.

Wisconsin families struggle to **Afford** early care and education. This is especially true for single-parent families and families of color. Families who qualify for child care financial subsidies often experience additional barriers to accessing them and are unable to take advantage of supports. The cost of providing quality care far exceeds families' ability to pay.

Quality early care and education exists in Wisconsin, but families may not be able to access or afford it. Families and communities also have varying definitions of quality. Early care and education professionals and stakeholders expressed a need to systemically address equity, inclusion, trauma, mental health, social-emotional learning, family engagement and other best practices to support quality ECE programs.

The Wisconsin ECE **Workforce** is lacking professional respect, adequate pay, benefits and diversity. ECE programs are unable to retain their best workers. Members of the workforce seek opportunities to meaningfully connect with one another, receive coaching/mentorship, peer-to-peer support and to engage in professional learning.

Note: COVID-19 has exacerbated all existing challenges. Early care and education is in crisis. As of September 2020, almost \$51 Million in aid has been paid to 2,712 child care providers. An additional round of funding (\$30 million) will be disseminated by DCF as part of the [Child Care Counts COVID-19 Emergency Payment Program](#).

According to Listening Session participants, this aid does not begin to address the additional expenses, financial losses, or emotional burden felt by ECE professionals, parents, and families as a result of this public health crisis.

Wisconsin's Vision for Early Care and Education Birth to Age 5:

By 2023, all Wisconsin families will have equitable access to high quality, affordable, local early care and education opportunities.





Background Indicators: Health, Employment, Poverty, Education

The overall health and well-being of Wisconsin communities impacts the needs of children and families and the providers caring for them. PDG and DCF identified background indicators as Health, Employment, Poverty and Education. Factors within these indicators include: health insurance coverage, vaccination rates, employment, median household income, high school completion rates and socioeconomics.

Background indicators help bring to light underlying issues impacting communities, including:

- access to or utilization of care and services, such as health care or WIC
- availability or access to higher paying jobs (indicating a greater ability to afford child care)

Differences between regions throughout the state are minimal. However, county comparisons vary greatly. For example, while 11% of Wisconsin overall lives below the Federal Poverty Line, the percentage of people living in poverty ranges from 4% in Ozaukee County to 27% in Menominee County. Ozaukee County and Menominee County are both in the Northeastern Region and represent the extremes for many indicators.

Racial, ethnic, geographic and socioeconomic disparities exist across all indicators. Wisconsin's communities of color are particularly impacted by historical and systemic inequity.



- In 2014, Wisconsin was the only state in which the life expectancy gap between Blacks and Whites grew significantly over a ten year period. This gap was even worse for women.
- Wisconsin has the highest infant mortality rate in the nation for babies born to Black mothers.
- Wisconsin children living in poverty varies drastically by race/ethnicity:
 - 13% of White Children
 - 30% of Hispanic Children
 - 37% of Black Children

WI Health Indicator: 6% of Wisconsin adults 65 and older are without health insurance



WI Health Indicator: 72% of children 19-35 months are fully vaccinated



WI Employment Indicator: 3% of the population over 18 are without employment



WI Employment Indicator: Median Household Income is \$60,779



WI Education Indicator: 92% of Wisconsin 9th Graders Complete High School in Four Years



WI Poverty Indicator: 11% of Wisconsin residents lives below the Federal Poverty Line



WI Poverty Indicator: 14% of Wisconsin children live below the Federal Poverty Line



WI Poverty Indicator: 38% of families struggle to make ends meet (ALICE/Asset Limited Income Constrained Employed)





Early Care and Education Indicators: Birth to 5 Programs

Birth to 5 is the most critical time in a child’s development. During their first five years, Wisconsin’s children can potentially be involved with multiple programs across multiple agencies. Wisconsin Departments of Children and Families (DCF), Health Services (DHS) and Public Instruction (DPI) all support families and young children along the continuum of care from Birth to 5. Programs and services include:

Home Visiting: [Family Foundations Home Visiting \(FFHV\)](#) supports pregnant women and families with young children. In 2018, FFHV reached 2,000 families in 31 Counties and 5 Tribes. Children and families also have access to a variety of non-FFHV home visitation programs.

Parent Support & Service Navigation:

<p>Resources & Navigation: helps families to connect with community resources in their area and navigate accessing services.</p>	<ul style="list-style-type: none"> • Child Care Resource & Referral Agencies • Family Resource Centers • FAST (Families and Schools Together) • 2-1-1 • Wisconsin Well Badger • Regional Centers for Children and Youth with Special Health Care Needs (CYSHCN)
<p>Family Support Programs: support parents, families and/or professional partners. Focusing on specific issues including, special health care needs or behavioral health.</p>	<ul style="list-style-type: none"> • Trauma and Recovery Project • Connections Count • Family Voices of Wisconsin • Wisconsin Family Ties • WI FACETS • Wisconsin Statewide Parent-Educator Initiative • Condition-specific programs, such as Autism Society of Greater Wisconsin, Wisconsin Families for Hands & Voices, Niemann-Pick Disease Foundation, Wisconsin Chapter of the Cystic Fibrosis Foundation and many more. • Many local agencies throughout the State provide parenting support programs, such as The Parent Outlet in Winnebago County, Canopy Center in Madison, Parent Connection in the Fox Valley, The Parenting Place in La Crosse and Adams/Juneau County Family Resource Center.
<p>Peer Parent Support Programs: connects parents with other parents to develop peer support.</p>	<ul style="list-style-type: none"> • Parent to Parent: a statewide program run by DHS • Condition-specific parent matching programs, such as DHS’ Parents Reaching Out and DPI’s Parent Mentor Program for families of children with hearing loss. • Parent Cafes held by Supporting Families Together Association and local partners support parents through peer-to-peer learning. Available in 19 counties.

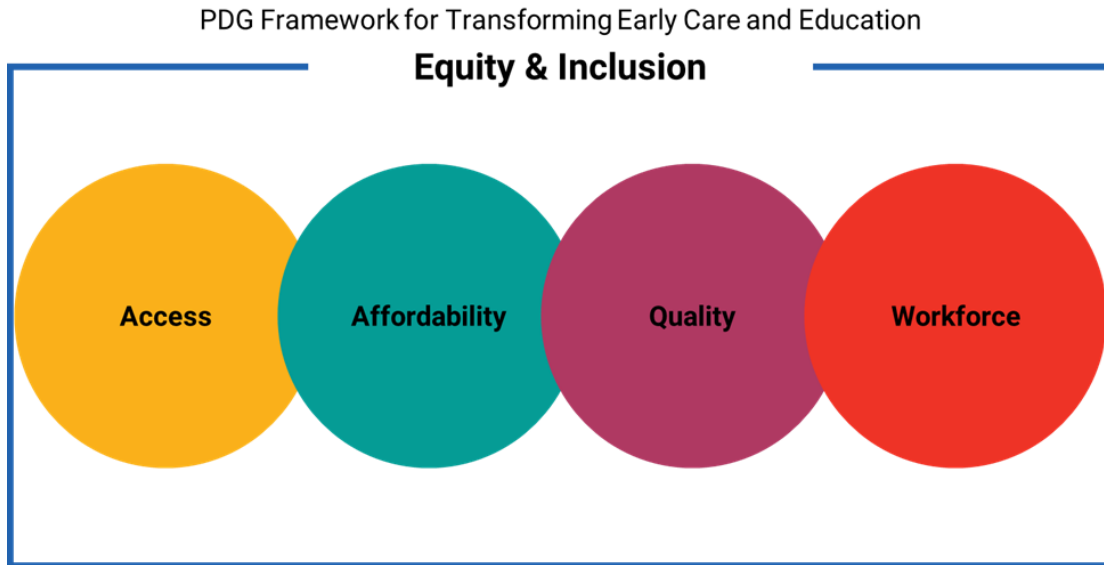
Health Programs: Every county has a [WIC](#) office providing nutrition, pregnancy and breastfeeding support. [Prenatal Care Coordination](#) is available through local health departments. Many nonprofit programs address maternal child health disparities, including Harambee Village Pregnancy, Birth and Breastfeeding Care, Promotoras de Salud and the African American Breastfeeding Network.

Early Intervention and Early Childhood Special Education: Children who qualify have access to public early intervention and/or special education through the Individuals with Disabilities Education Act Part C ([Birth to 3 Program](#)) and Part B ([Early Childhood Special Education](#)) programs. In 2017, 5,800 children had an Individualized Family Services Plan for Part C services. In the 2018-2019 school year, 16,403 children had an Individualized Education Plan for Part B services.

Head Start: Early Head Start serves children 0-3 and Head Start 3-5 year olds. According to the Wisconsin Head Start Association, 6% of children under 3 living in poverty had access to Early Head Start and 29% of children 3-5 living in poverty had access to Head Start. In 2019, 15,440 children were enrolled, including 1,100 tribal children and 500 children of migrant or seasonal workers.

4-Year-Old-Kindergarten (4K): Publicly funded 4-year-old Kindergarten is available in 99% of all districts in Wisconsin. Models range from school based to a community approach to 4K, providing 4K services in a child care, preschool and/or Head Start environment. In 2019-2020, 406 school districts offered 4K with 111 districts offering Community Approach to 4K.

The Preschool Development Grant uses **Access, Affordability, Quality and Workforce** within the Lens of Equity and Inclusion as a framework for evaluating and transforming Early Care and Education in Wisconsin.



Child Care ECE Indicators are presented within this framework and include:

- ECE quantitative data (pre-COVID-19)
- Listening Session qualitative data
- Community Interview qualitative data

The DCF PDG team, along with our collaborating partners, are working to provide the most comprehensive view of the state of early care and education in Wisconsin. PDG Listening Sessions and Community Interviews were held to gather input from across the state in an effort to hear from as many community members as possible. The qualitative information presented in this section is intended to provide a regional, community and family context for issues that families and providers in Wisconsin are facing. The information is not intended to represent all ECE experiences.

COVID-19: The public health pandemic has greatly impacted child care, Head Start/Early Head Start and Public education, families and the ECE workforce. DCF and its partners are working to gather data to wholly evaluate the depth and breadth of COVID-19's impact. This work is ongoing. More information regarding COVID-19 will be included in the complete needs assessment.



Over the last decade:

Regulated family child care programs declined by 68%.

Licensed group child care centers declined by 9%.

Fewer providers are participating in YoungStar.

- This disproportionately impacts families participating in Wisconsin Shares who must enroll their children with YoungStar-participating provider.
- Families participating in WI Shares may be at an even greater disadvantage finding child care near their home or work.

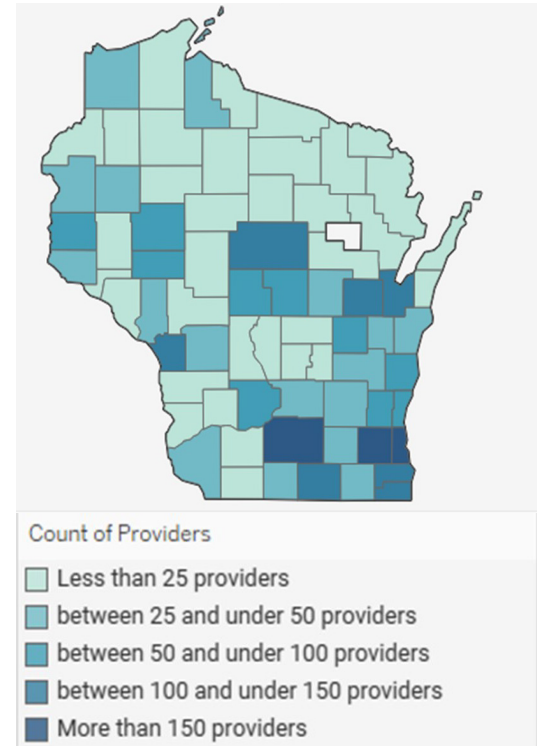
Listening Sessions

- Participants described a lack of child care available across Wisconsin and a lack of access to the care that does exist.
- Access disproportionately impacts families with infants and toddlers, children with special needs, children of color and families working non-standard hour care.
- Access issues included: transportation; wait lists of more than a year or with more than 100s of families; COVID-19's impact on child care access; affordability is a significant barrier.
- During the Virtual Regional Listening Session, 92% of participants said child care was not accessible.
 - The SER had the highest percentage of responses indicating that quality care was accessible (18%) while the WR had the lowest (3%).

Community Interviews

- Interviewees expressed needing more accessible hours that match parents' work schedules, including earlier start times, extended after-school hours and evening hours.
- Providers across all demographic groups described issues with the complexities and lack of transparency across child care systems and partner agencies (i.e. Registry, YoungStar, DCF, DPI).
- Caregivers described difficulties navigating child care systems, particularly for children with special needs.
- Rural White families described a lack of child care within easy distance of home.
- Hmong parents and providers noted the lack of cultural resources including Hmong foods, books and cultural holidays incorporated into the ECE setting.

Active Child Care Provider Map



“Quality care does not exist for everyone. There are pockets of it, but it is part of a larger problem that has to do with structural racism and classism and who has access to opportunities. Early childhood centers can change some policy, explore internal bias, but the larger structures of opportunity still exist-it is bigger than individual centers. Who is at the table making policy decisions? At the school, who is doing outreach? Who is hiring teachers? Does the staff reflect the community? There are so many variables that are tied into larger societal structures.”

- Listening Session Participant

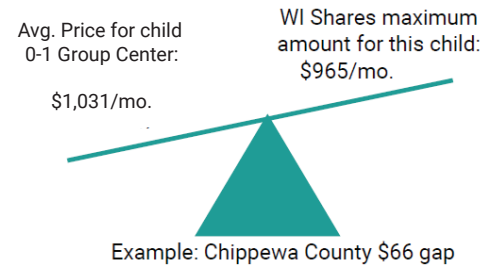
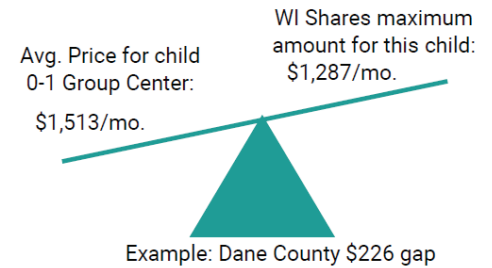
- The average price of infant care is more than \$12,000 per year.
- In 2018, 36,851 children 0-5 received Wisconsin Shares child care subsidy. The majority of children receiving Wisconsin Shares live in the Madison and Milwaukee areas.
- The gap between the Wisconsin Shares subsidy rate and the price of care may still leave families unable to afford care.
- Children receiving Wisconsin Shares must enroll in YoungStar-participating child care. Families unable to access a YoungStar participating provider may be unable to access Wisconsin Shares.
- Households making less than median income, particularly single parent households and families of color, pay an even greater percentage of their income for child care.
- Not all families who qualify for Wisconsin Shares participate.

Listening Sessions

- The majority of Listening Sessions reported that quality care is not affordable. During the Virtual Regional Listening Sessions, participants in the Northern and Southeastern Regions reported that affordable care does not exist at all.
- Several themes emerged, including: the discrepancy between the price of child care and the amount families receive from Wisconsin Shares; the difficulty families on the borderline of poverty have affording care when they don't qualify for subsidies or other assistance; linkages between access and affordability; the lack of support for unlicensed child care; the difficulty providers have maintaining a high quality business that parents can afford; parents being forced to make job decisions based on child care availability and subsidy qualifications.

Community Interviews

- Interviewees described child care as too expensive, noting that teachers, providers and family caring for children should get paid more, but that parents can't afford to pay more.
- Primary caregivers were often unaware of resources available to help cover the price of child care. Rural White families who were lower middle class and above the income cut-off didn't qualify for aid programs but couldn't afford care. Black families applying for subsidies described the requirements as a barrier.
- For primary caregivers receiving Wisconsin Shares, interviewees reported that participation meant greater oversight of their personal life and the requirements for aid didn't make sense in the context of their every day realities. Taking a raise or better paying job could mean the loss of subsidy, moving the price of care further out of reach.



“One of the reasons people don’t become certified or licensed is because of the wage gap. If you have a high quality daycare in Ashland or Oneida, you can’t afford it, the cost of living up here doesn’t match that. So many jobs have a lower wage. It’s tough to hit that gap, even with subsidies.”
- Tribal Listening Session Participant

“[Child Care] costs the same as my mortgage for one child, I can’t imagine if I were to put both of my kids into care.”
- Interviewee

“Child support is counted as income, but I don’t get the payments. Therefore, I don’t qualify for aid.”
- Interviewee

- High-quality care is defined as a 3-5 Star YoungStar rating.
- In February 2020, 69% of children participating in Wisconsin Shares were enrolled in 3-5 Star child care.
- 41% of programs have a 3-5 Star rating, the majority of which are Licensed Group providers (67%).
- High-quality providers are not equally distributed across the state, inherently leading to access issues.
- The majority of high-quality rated providers are center-based, which typically costs more, leaving some families unable to afford high-quality care even if it is available in their area.
- 19% of programs do not participate in YoungStar and so are not rated.

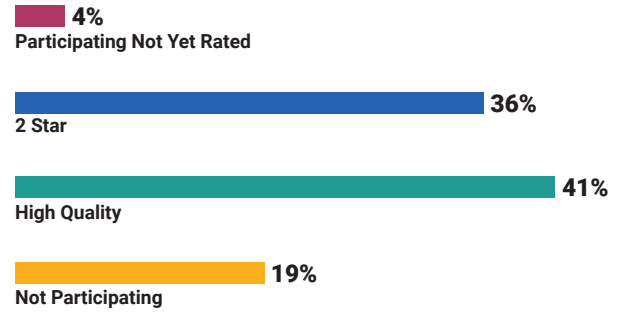
Listening Sessions

- The majority of regional participants believed that quality care exists in their area. Tribal participants however described both a lack of access to care overall and a lack of access to high-quality care.
- Key themes related to quality that emerged from Listening Sessions, included: school readiness, developmentally appropriate, play-based, whole-child approach, safe, clean, trained/qualified staff, supported staff, culturally responsive, diverse, representative of community, access, transportation, affordability, community connections, social-emotional health/development, social interactions, trauma-informed care, family engagement, family-teacher relationships, trust, infant mental health and culture.

Community Interviews

- Themes included trust, safety, culture and relationships.
- Caregivers wanted assurance that providers would take good care of their children. Interviewees expressed that they trusted family more than outside providers and that they were likely to trust providers of their own race or ethnicity more than providers who weren't.
- Quality was described as safe spaces with well-trained staff, including a safe neighborhood and supportive of emotional well-being.
- Black, Latinx and Hmong caregivers wanted to see more diverse providers and more representation of culture and identity, including language.
- Caregivers felt that the provider-family relationship could become an extension of the family and/or community.

Quality Rating



“Besides all of the criteria we have with YoungStar, personally the #1 thing I look for is the relationship between provider and the family, teacher and children.

That relationship to me is the foundation. ‘Bells and whistles’ and wonderful equipment--they’re great--but if we don’t have that relationship, we can’t go forward.”

- Listening Session Participant

“Quality is comprehensive child, emotional well being, effective communication with parents and center leadership. Holistic perspective – autonomy and creativity given to children and staff.”

- Listening Session Participant

“It’s very hard to give my child to a stranger in their home.”

- Interviewee

“Trato de mantenemos unidos para que ellos no sufran lo que yo sufrí.” [I try to keep us together so that they don’t suffer what I suffered.]

- Interviewee

- The average hourly wage for a Wisconsin Child Care worker is \$10-13.
- The average annual income of Wisconsin Child Care workers was \$2,000 less than the national average.
- A Wisconsin provider with an Associate Degree in Early Childhood Education earns less than other professions with a similar degree.
- Staff at child care programs with 50% or more children receiving Wisconsin Shares had lower wages, were less likely to have a degree and had a higher turn over rate.
- The Southeastern Region has more racially/ethnically diverse child care professionals compared to the rest of the state. In Milwaukee, 41% of child care professionals identify as Black and 11% identify as Hispanic.

Listening Sessions

- Participants discussed issues including wages, benefits, training, community respect for ECE and staff retention.
- Participants in the Spanish-language session discussed the lack of trainings available in Spanish.
- Tribal participants discussed the need for more inclusive care for indigenous children, including incorporating more community knowledge, such as Tribal Elders story telling, into child care settings.

Community Interviews

- Providers expressed issues including wages, benefits, training, staff retention and culture.
- Black providers noted inequities in salary with Black staff being paid less than their White counterparts.
- Caregivers and providers noted the lack of racial/ethnic and gender diversity across the ECE system. Hmong, Black and Latinx interviewees expressed the need for greater cultural humility or awareness among White child care staff/administrators as well as the need or fundamental respect for cultural differences, being self-aware and integrating cultures into child care systems.



“It is not realistic to expect child care programs to continually take on more to meet the ever growing demands of quality. Providers are at capacity.”

- Listening Session Participant

“I lose quality staff to factory work. They make more money at the factories. Wages and benefits. They start out at \$18/hour at the factory. They deserve more than I can pay. All have at least an associates degree. Half of them have a bachelor’s degree. They have tears when they leave my center. They can’t make it work. I can’t keep them. I feel like I can’t help my community if I can’t keep staff.”

- Listening Session Participant

“I work 10 hours a day and I don’t have time to go to talk with other providers to discuss issues, suggestions or what they’re doing that’s working. If I had a support group or a substitute to go to a support group, that’d help a lot.”

- Interviewee



SWOT Analysis: Strengths, Weaknesses, Opportunities, Threats



PDG developed a SWOT analysis to evaluate the Strengths, Weaknesses, Opportunities, Threats for ECE in Wisconsin. This SWOT analysis will help guide PDG Strategic Planning.

STRENGTHS

Positive factors within ECE that are the basis for continued success of the field and will help Wisconsin achieve its 2023 vision.

Access

- Some non-child-care-related Birth to 5 programs (WIC, Prenatal Care Coordination, Early Intervention, Early Childhood Special Education) are available in every county in Wisconsin
- Free 4K offered in 406 school districts across Wisconsin; 3K in Milwaukee
- Home visitation programs and Head Start widely available

Affordability

- Most non-child-care-related Birth to 5 programs do not charge families for services

Quality

- YoungStar offers funding, technical assistance, training, resources for participating providers
- WI Early Childhood Collaborating Partners support resource sharing and quality improvement supports
- Robust Infant Mental Health (IMH) system in Wisconsin to support ECE

Workforce

- Engaged child care providers
- State recognition of importance of early care and education
- Strong higher education institutions to prepare the workforce
- T.E.A.C.H. and REWARDS financial support for professional development

WEAKNESSES

Factors that prevent ECE field from attaining Wisconsin’s vision, factors that negatively impact ECE’s success and growth.

Access

- Child care deserts
- Non-desert areas still lack equitable access and family choice
- Lack of child care to meet all needs (non-standard hours, infants, children under age 2, children with special needs)
- Non-child-care-related Birth to 5 programs may only be able to serve a limited number of people

Affordability

- Cost of providing quality care is higher than what families are able to pay
- Equity and affordability issues regarding Wisconsin Shares, YoungStar
- Funding for non-child-care-related Birth to 5 programs and services may be grant-based

Quality

- Differing definitions of quality
- Wisconsin Shares subsidies can only be used for YoungStar participating care

Workforce

- Lack of respect for the field as a profession
- Low wages and lack of benefits
- Lack of opportunities for professional development and support
- Support and regulatory services for providers are spread out across many agencies—complex system



SWOT Analysis: Strengths, Weaknesses, Opportunities, Threats

OPPORTUNITIES

The environment within which ECE operates, factors that have the potential to support ECE in reaching Wisconsin's vision.

Access

- Demand for child care is high
- Potential for opening new programs, collaboration and partnership with families and communities
- Transitioning Family/Friend/Neighbor (FFN) care to regulated system
- Opportunities to expand 4K Community approach

Affordability

- New sources of funding and flexibility around use of funds
- Business community more aware of child care issues and its impact on employees

Quality

- YoungStar workforce available to connect and support providers interested in participating
- Collaboration with school districts, business community, health care, other ECE programs and partners

Workforce

- Professional development, mentorship, coaching, staff wellness
- Partnerships to increase wages and financial support
- Desire to build capacity to address issues related to poverty and/or trauma
- Communications campaign to increase recognition and value of field

THREATS

Factors that exist in the environment that jeopardize the ECE field or risk factors for the stability and survival of ECE; negative factors that may prevent Wisconsin from achieving its vision.

Access

- Decrease in certified programs and family child care programs
- COVID-19-related closures and reduced slots
- Transportation challenges, including distance to available child care
- Increase in the number of children in Wisconsin with behavior issues/special needs requiring support services

Affordability

- Poverty/ALICE: families unable to pay for child care/find sustainable employment
- Loss of family wages or employment due to COVID-19

Quality

- Trauma: children and families experiencing ACEs, mental health issues, behavior issues
- Increase in utilization of FFN care
- Lack of participation in YoungStar

Workforce

- Lower salaries and less benefits for workers compared to similarly educated/trained professionals in other fields
- Shortage of workers entering the field
- Unfunded and inequitable expectations related to quality ratings, training and professional development
- COVID-19 changes (i.e. lower enrollment, loss of revenue, staff turnover)

Racial inequity and social justice issues are significant threats to Access, Affordability, Quality and Workforce



Collaborative Partners, Data Sources, and Next Steps

The PDG Needs Assessment was developed in collaboration with:

- ♥ DCF Regional Workgroups that compiled local data sources and reviewed drafts of the PDG Needs Assessment deliverables
- ♥ DCF staff from a variety of Bureaus and Divisions
- ♥ Department of Public Instruction
- ♥ University of Wisconsin-Madison Partners
- ♥ Great Lakes Inter-Tribal Council
- ♥ Community ECE Professionals and Organizations

Data presented in this Needs Assessment Summary are from:

- DCF Administrative Data regarding active child care providers, Wisconsin Shares and YoungStar
- 2018 United Way ALICE Report
- 2020 County Health Rankings
- Labor Force Data, 2018 Annual Averages
- 2017 and 2018 Market Rate Survey
- CDC National Center for Health Statistics Data Brief, January 2018, infant mortality disparities
- Health Affairs, Vol 33, No 8, Trends in Black–White Life Expectancy
- DHS Healthiest Wisconsin 2020 Baseline Health Disparities Report
- Wisconsin Head Start Association
- DHS and DPI

Coming Soon: Information, outcomes and results from the following PDG activities still in progress will be included in the final Needs Assessment report and available online in the PDG Sandbox:

- ♥ Health Policy Scan: survey of child care providers' health policies
- ♥ Unduplicated Count: PDG will evaluate a cohort of unique children under age 5 and the Birth to 5 services they received across DCF, DHS and DPI
- ♥ Community Interviews: interviews with members of Wisconsin's Indigenous Tribes
- ♥ Pilot programs: new or expanded programs promoting best practice in underserved areas
- ♥ Child Care Access Mapping: additional maps demonstrating child care access

For More Information:
wipdg@wisconsin.gov
www.dcf.wisconsin.gov/childcare/pdg