

Pima Early Education Program (PEEP) Framework

Overall Goals:

To increase the number of 3-5 year-old children from low-income families attending high quality preschools in Pima County, and to increase the number of high quality preschools in Pima County.

Low-Income Preschool-age Population in Pima County

Estimated number of children age 3-5 in Pima County ¹	28,076
Estimated number of low-income children age 3-5 in Pima County ²	12,915
Estimated number in a subsidized high quality seat ³	3,864
Estimated number unserved ⁴	9,051
Estimated target number based on 60% uptake rate ⁵	5,430

¹ Source: 2019 US Census 2015-2019 estimates, and assuming 33% of 5-year olds have birth dates after Sept. 1 Kinder deadline.

² Source: Calculation using 2019 US Census 2015-2019 estimates assuming a 46% rate of children ages 0-5 living under 200% FPL

³ Source: Child Parent Centers, DES, FTF. Excludes Tribal Head Start programs.

⁴ Source: Calculation

⁵ Source: Calculation using 60% uptake rate of number unserved based on other communities' universal PreK programs

Family and Preschool Provider Eligibility:

1. Families with three or four-year-old children (and five-year-olds not in Kindergarten), with a household income at or below 200 percent of the Federal Poverty Level.
2. Preschool providers must be located in Pima County, operate at least 6 hours a day for 10-12 months of the year, be contracted with DES to accept DES subsidies for eligible children, and be considered "high-quality" according to the State definition of high quality (Quality First rating of 3-5 stars; Head Start provider, or nationally accredited.) Providers not yet rated must design their program to attain high-quality standards, be pursuing Quality First rating, and have an active quality improvement plan.
3. Preschool providers include the existing mixed delivery system of school districts, centers and home-based licensed/certified family childcare providers.

Guiding principles:

1. Increase high-quality preschool capacity while addressing existing need, by allocating scholarships to preschool providers that can add new classes for eligible children, increasing the number of high quality providers, and allocating scholarships to providers that can serve more eligible children in existing classes.
2. Distribute scholarships efficiently and effectively through existing programs and partners.
3. Do not supplant existing public assistance for preschool and utilize local funding as a "last dollar in" approach. Families eligible for a DES subsidy, FTF scholarship or Head

Start assistance should continue to receive assistance through those programs where available, and these agencies should not reduce their level of assistance.

4. Coordinate with existing agencies that provide public assistance for high-quality preschool to establish baseline need and simple system-level benchmarks, monitor progress and refine collaborative efforts to improve the system as a whole.
5. Establish scholarship rates that cover the full cost of providing high-quality preschool per child (salaries, classroom space, furniture and supplies, snacks and meals), based on accepted cost of quality and local market rate studies, considering wages necessary to attract quality teachers, and accounting for current DES subsidy rates and school district in-kind contributions, as well as increased costs related to the pandemic.
6. Ensure that participating preschool providers are geographically dispersed, with priority given to preschools serving lower income/higher need neighborhoods, tribal and rural areas.
7. Connect eligible families to high-quality preschools and financial assistance, including parents in local workforce development programs.
8. Collaborate with partners to connect participating families with other community resources to accelerate family and community wide benefits.
9. Maximize multi-year partner contributions to make the program more sustainable.
10. Advocate with partners for a long-term state-wide solution.
11. Remain flexible as providers and families recover and rebuild from the pandemic.
12. Review, reevaluate, revise, and report regularly with input from stakeholders, including outputs, outcomes and academic progress for this program and the system as a whole.