

EARLY LEARNING FUNDING FOR KEY PROGRAMS										
PROGRAM		FY19 FUNDING LEVEL (CURRENT)	FY20 PRESIDENT'S BUDGET REQUEST	FY20 ECE COMMUNITY ASK	FY20 HOUSE LABOR/HHS BILL	FY20 SENATE LABOR – HHS – EDUCATION BILL*	FY20 LHHS FINAL FUNDING LEVELS			
HEAD START/ EARLY HEAD START	TOTAL PROGRAM FUNDING	\$10.06 billion	\$10.06 billion	\$11.11 billion	\$11.563 billion	\$10.11 billion	\$10.613 billion			
	Funding Increase	+\$200 million (over FY18)	Level	+\$1.5 billion	+\$1.5 billion	+\$50 million	+\$550 million			
	Early Head Start – Child Care Partnerships (EHS-CCP) & Expansion	\$805 million	\$805 million	Not specified	\$1.33 billion	\$805 million	\$905 million			
	EHS-CCP & Expansion Increase	+\$50 million (over FY18)	Level	Not specified	+\$525 million	Level	+\$100 million			
PRESCHOOL DEVELOPMENT GRANTS	TOTAL PROGRAM FUNDING	\$250 million	Eliminated	\$250 million	\$350 million	\$250 million	+\$275 million			
	Funding Increase	Level (with FY2018)		Level	\$100 million	Level	+\$25 million			
CHILD CARE AND DEVELOPMENT BLOCK GRANT	TOTAL PROGRAM FUNDING	\$5.276 billion	\$6.276 billion	\$10.276 billion	\$7.676 billion	\$5.301 billion	\$5.826 billion			
	Funding Increase	+\$2.45 billion (maintains FY18 funding increase + \$50 million)	+\$1 billion	+\$5 billion	+\$2.4 billion	+\$25 million	+\$550 million			

EARLY LEARNING FUNDING FOR KEY PROGRAMS										
PROGRAM		FY19 FUNDING LEVEL (CURRENT)	FY20 PRESIDENT'S BUDGET REQUEST	FY20 ECE COMMUNITY ASK	FY20 HOUSE LABOR/HHS BILL	FY20 SENATE LABOR – HHS – EDUCATION BILL*	FY20 LHHS FINAL FUNDING LEVELS			
NATIONAL CHILD TRAUMATIC STRESS INITIATIVE	TOTAL PROGRAM FUNDING	\$63.887 million	\$63.887 million	Not specified	\$70.887 million	\$63.887 million	\$68.887 million			
	Funding Increase	+\$10 million	Level		+\$7 million	Level	+\$5 million			
IDEA GRANTS TO STATES	TOTAL PROGRAM FUNDING	\$12.36 billion	\$12.36 billion	Not specified	\$13.36 billion	\$12.36 billion	\$12.764 billion			
	Funding Increase	+\$86.54 million	Level		+\$1 billion	Level	+\$400 million			
IDEA PRESCHOOL GRANTS (PART B)	TOTAL PROGRAM FUNDING	\$391.12 million	\$391.12 million	Highest Feasible Funding	\$403.4 million	\$391.12 million	\$394.12 million			
	Funding Increase	+\$10 million	Level		+\$12.28 million	Level	+\$3 million			
IDEA GRANTS FOR INFANTS AND TODDLERS (PART C)	TOTAL PROGRAM FUNDING	\$470 million	\$470 million	Highest Feasible Funding	\$491.3 million	\$470 million	\$477 million			
	Funding Increase	Level	Level		+\$21.3 million	Level	+\$7 million			

^{*} Reflects DRAFT Senate Appropriations Bill Amounts



DIVISION A-DEPARTMENTS OF LABOR, HEALTH AND HUMAN SERVICES, AND EDUCATION, AND RELATED AGENCIES APPROPRIATIONS ACT, 2020

Bill Statement of the Managers (Report Language)

Early Head Start Expansion (EHS) and EHS-Child Care Partnerships.

The agreement modifies bill language to simplify the administration of EHS Expansion and EHS-Child Care Partnerships (EHS-CCP) grants, but does not otherwise change the use of funds provided for such purposes. The agreement continues to strongly support EHS Expansion and EHS-CCPs, and accordingly, the agreement includes at least \$905,000,000 for such purposes, an increase of \$100,000,000. Since fiscal year 2014, these funds have supported both the expansion of traditional EHS and the establishment of partnerships between EHS providers and local child care programs. The agreement directs ACF to continue to prioritize equally EHS Expansion and EHS-CCP, as determined by the needs of local communities. The agreement expects that any funds used for EHS Expansion and EHS-Child Care-Partnership grants that are re-competed would continue to be used for such purposes. Finally, the agreement directs ACF to include in the fiscal year 2021 Congressional Justification and each Congressional Justification thereafter, the actual and estimated number of funded slots for each of the following: Head Start, EHS, and EHS-Child Care Partnerships.

Quality Improvement Funding for Trauma-Informed Care.

The agreement provides \$250,000,000 in quality improvement funding, including a prioritization on addressing the rise of adverse childhood experiences attributable to increased prevalence of substance use, economic hardship, home and community violence, and other traumatic experiences that can negatively impact child development and lead to disruptions in classroom environments. The agreement directs the Administration to allow flexibility to meet local needs while focusing these funds on staff training for trauma-informed care and identification of signs of addiction and hardship; mental health consultation services to provide expert care and counseling to families and the Head Start workforce; and additional staffing to 113 Head Start classes in high-risk substance use communities to maintain high-quality learning environments while providing individualized care to children expressing disruptive and challenging behaviors.

<u>Designation Renewal System.</u>

ACF is encouraged to continue to consider the unique challenges faced by Head Start grantees in remote and frontier areas when reviewing such grantees' compliance with health and dental screening requirements as part of the designation renewal system.

Preschool Development Grants.

The agreement includes an increase of \$25,000,000 for Preschool Development Grants and expects these additional funds to be managed in conjunction with funds appropriated in fiscal year 2019 that will be awarded in December 2019.



National Child Traumatic Stress Network

Mental Health Services.-The agreement encourages ORR to continue collaborating with the National Child Traumatic Stress Network and notes that no less than \$4,000,000 is included in this agreement through SAMHSA for such efforts. ACF is directed to keep the Committees informed of additional resources necessary to support children and families who may need access to these services. In addition, the agreement directs ORR to provide a briefing to the Committees within 120 days of enactment of this Act on HHS' and grantees' coordination of health and mental health services, including training requirements for staff providing those services and any challenges to providing adequate care for children.

