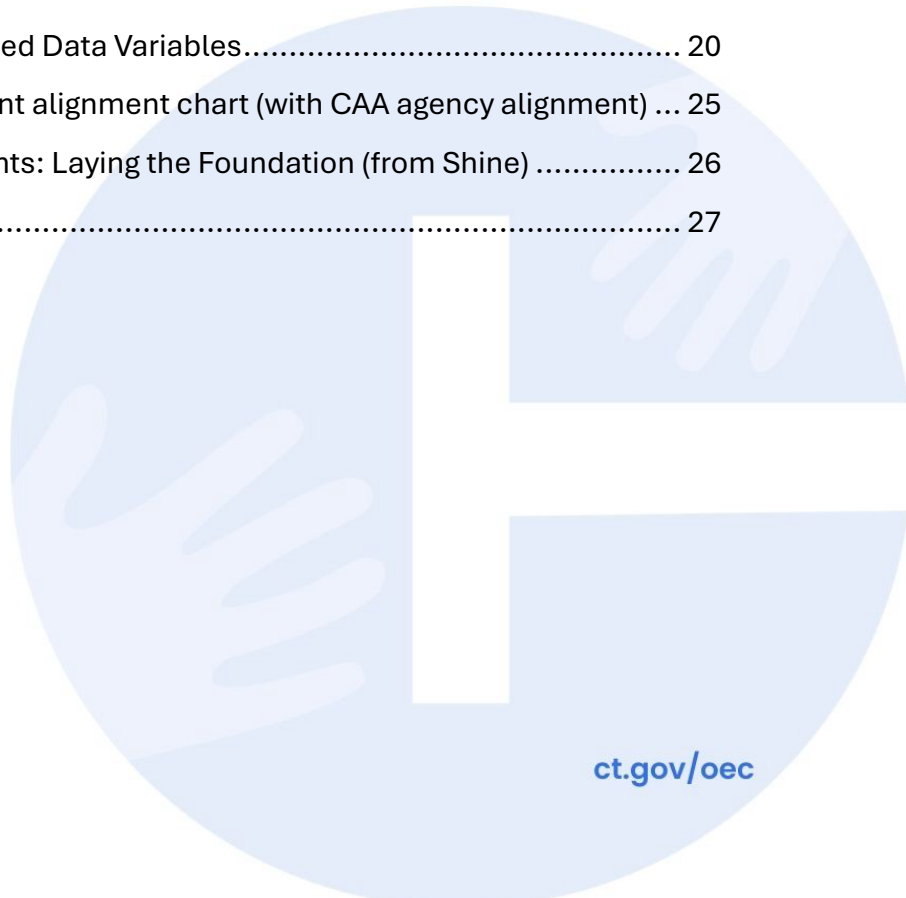


Local Needs Assessment (LNA) Guidance

Spring 2026

Table of Contents

Letter from Interim Commissioner Trueworthy.....	1
Purpose.....	2
Timeline	2
Step-by-Step Process.....	4
Step 1: Plan and Organize.....	4
Step 2: Design the Work.....	7
Step 3: Gather Data.....	9
Step 4: Analyze and Make Decisions	15
Step 5: Communicate and Incorporate.....	16
Looking Ahead: Guidance for the Community Plan	17
Available TA and Supports	18
Appendix 1: Overview of OEC-Provided Data Variables.....	20
Appendix 2: Head Start grant recipient alignment chart (with CAA agency alignment) ...	25
Appendix 3: Local Needs Assessments: Laying the Foundation (from Shine)	26
Appendix 4: Glossary.....	27



Letter from Interim Commissioner Trueworthy

Dear Local Governance Partners,

The Connecticut Office of Early Childhood (OEC) is pleased to share a Local Needs Assessment (LNA) Toolkit designed to support your community in assessing the holistic strengths, gaps, and emerging priorities affecting young children and their families.

This toolkit provides guidance, a customizable framework, and compiled datasets by town to assist you in conducting a thoughtful, data-informed, and community engaged assessment process with providers and families. Our goal is to streamline the needs assessment process while allowing flexibility for communities to incorporate local context, stakeholder input, and additional data as appropriate.

Your leadership and insight are critical to ensuring that this effort meaningfully reflects the needs and assets of the families you serve. By leveraging the shared tools and data, we can build together a clearer, more consistent understanding of community needs across the state while honoring local perspectives and expertise.

Importantly, the LNA is intended to be a foundation for your LGP's Community Plan. Findings from the LNA should be used to identify shared priorities and outline strategies that will guide the ongoing work of your LGP. Your Community Plan will then serve as a living roadmap, informing continuous improvement, aligning stakeholders, and helping you track progress and adjust course over time as community needs and conditions evolve.

We appreciate your continued partnership and commitment to improving outcomes for Connecticut's youngest learners and look forward to supporting you in this work.

Sincerely,



Elena Trueworthy
Interim Commissioner
Connecticut Office of Early Childhood

Purpose

Each Local Governance Partner (LGP) is required by legislation to complete a Local Needs Assessment (LNA) to build a holistic understanding of the early childhood landscape in their community. The LNA is designed to identify local strengths, gaps, and needs across early childhood services and family well-being, using shared data and community input to create a clear picture of what families and providers need most.

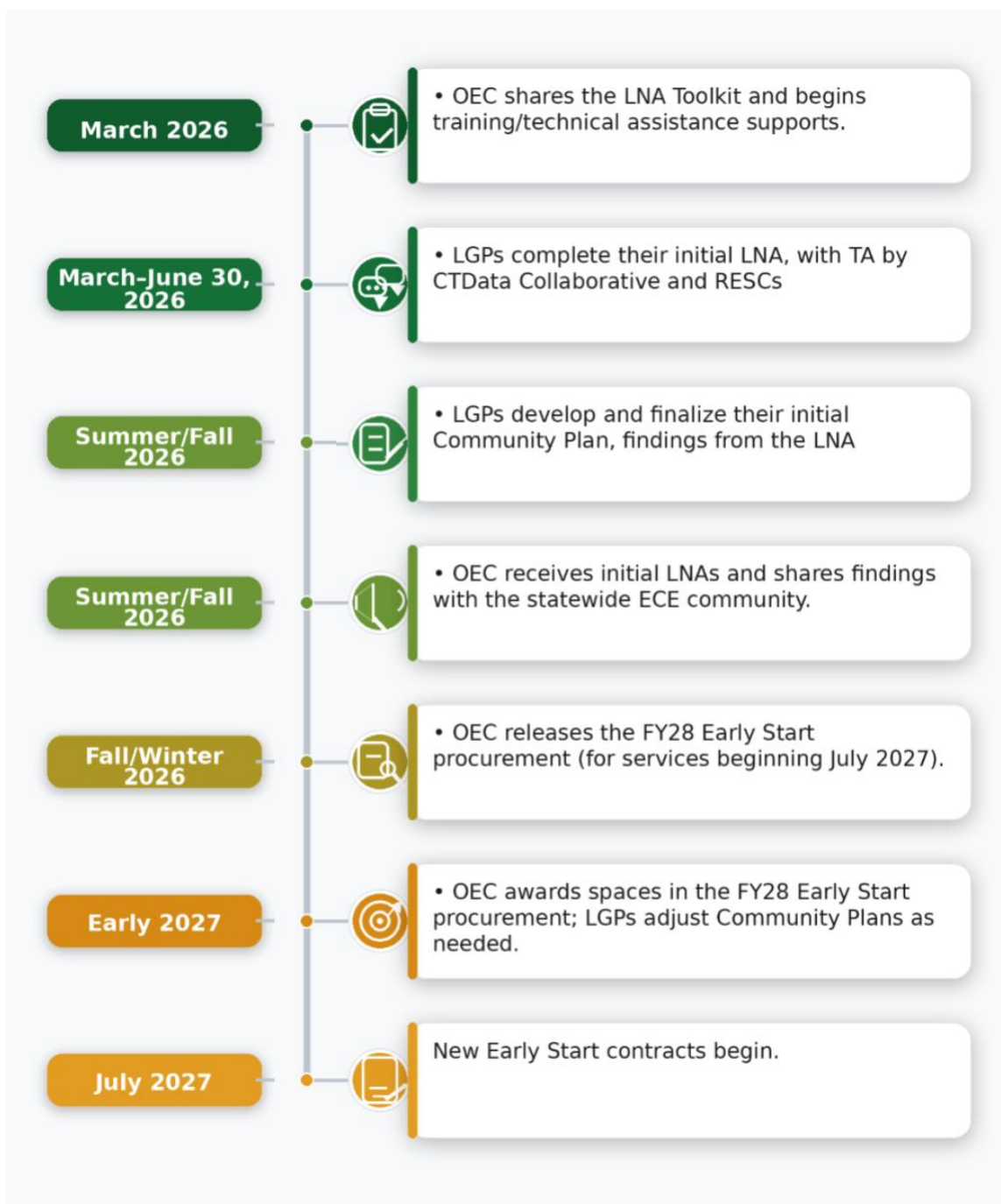
LNAs will be used for a variety of purposes, including to:

- Build a holistic picture of the early childhood landscape in the community, grounded in shared data and community input.
- Use findings to set local priorities and measurable goals for access, quality, and engagement, including priorities by age group, setting/service option, geography, and priority populations.
- Serve as the foundation for the Community Plan (drafted in Summer/Fall 2026) and support an ongoing cycle of updating priorities as local/regional needs change. Your Community Plan should capture what you will do as an LGP, and what you include in your Community Plan should be rooted in your LNA.
- Inform Early Start CT planning and applications over the coming years (beginning with the procurement for services beginning in July 2027) by clarifying family and provider child care needs, while not determining awards to specific towns or providers.

Timeline

LNAs are intended to be living assessments that guide local planning and course-correction, not one-time reports. The LNA **process** is what builds the shared understanding needed to act: it brings partners and families together to surface community strengths, identify needs, test assumptions, and align on priorities. While the final written report is a useful milestone and reference point, the real value comes from the engagement, inquiry, and reflection that happens along the way. That process is what strengthens relationships, creates buy-in, and drives meaningful, sustainable change over time.

Your LGP's initial LNA should cover, at minimum, the duration of your LGP's subcontract (through June 30, 2027), which is aligned with the Early Start CT contract period.



LGPs should note emerging needs and longer-term opportunities where relevant in their LNAs and Community Plans, but details beyond FY28 (July 2027 – June 2028) may evolve based on state policy, funding, and system design. The LNA and associated Community Plans are intended to operate within a continuous improvement cycle and will be revisited periodically to incorporate updated data, stakeholder input, and policy changes.

Step-by-Step Process

The steps for the LNA are modeled after the [steps outlined by the federal Office of Head Start](#) for Head Start agencies completing their community assessment. To start, review this full guidance document. The steps below will prepare you to complete the customizable needs assessment framework that follows the guidance.



Step 1: Plan and Organize

Although it requires an investment of time at the outset, creating a strong project plan for your LNA will save you time and effort in the long-term. You will likely need to update this project plan regularly as you dig into the data and new areas of inquiry arise.

Confirm your “community” boundaries

Clearly define the geography and population your LNA covers (i.e., single town or multiple towns). This ensures your data sources, stakeholder engagement, and findings are consistent and meaningful over time.

Regionalized LGPs have flexibility in how they choose to approach and structure their LNA. Regional LGPs made up of similarly situated towns may choose to combine many or all elements of the LNA Framework to reflect shared strengths, gaps, and focus areas across the region. In these cases, regional LGPs do not necessarily need to complete a separate table for each town in every section, and may choose to complete only one “Strengths, Gaps, and Focus Areas” section for their entire LGP.

For regional LGPs whose towns differ more significantly, a “two-layer” approach may be more useful:

- **Layer 1:** Regional story (shared conditions), such as:
 - Shared demographic trends and family needs across towns
 - Regional supply/demand patterns (e.g., slots, deserts, capacity constraints)
 - Shared workforce challenges
 - Cross-town access barriers (e.g., transportation, eligibility, language)
- **Layer 2:** Town/community snapshots (differences that drive different actions)
 - Where needs differ by town (e.g., infant/toddler care shortages, non-traditional hour demand)
 - Local partner ecosystems that vary by community
 - Unique strengths or barriers that call for targeted strategies (e.g., major employer schedules, housing instability hot spots)

Identify who will participate in your LNA development

Your LNA will be stronger, and easier to implement, when it reflects a broad set of perspectives from your community. A team approach to conducting the LNA distributes the effort among many people and adds a variety of perspectives. Buy-in from the immediate and larger community is also more likely when the process is driven by a representative planning team. As described below, this group should include a Core Planning Team, as well as additional invested parties as feasible, based on your community context.

Assemble a Core LNA Planning Team (recommended)

- LGP staff and contractors (liaison/s, Parent Ambassadors) and fiduciary/administrative support as relevant
- Family representatives (in addition to Parent Ambassadors named above)
- Provider representatives across settings (center-based, family child care, school-based, inclusive settings where applicable)
- Local system partners (e.g., school district early childhood leads, social services, housing, public health, libraries, WIC, home visiting, Birth to Three, etc.)
- Community-based organizations with trusted ties to families (especially those serving priority communities)

Encourage participation from additional invested parties (as feasible and appropriate for your community context)

- Workforce partners (higher ed/training, workforce boards, educator organizations)
- Head Start and Early Head Start partners
- Family child care networks, intermediaries, or other support groups
- Philanthropic organizations
- Community Action Agencies (CAAs) that often hold key community needs and family services data
- Municipal leadership
- OEC Parent Cabinet Members
- Family Resource Centers

Engage families

Engaging families in the LNA process is essential to ensuring the assessment reflects the real experiences, strengths, and needs of the community. Families provide valuable insight into barriers, priorities, and emerging trends that may not be fully captured through existing data. Creating accessible and inclusive opportunities for input — such as surveys, focus groups to reflect upon the data, or community conversations — helps build trust and encourages meaningful participation. By intentionally incorporating family perspectives, the LNA can more accurately inform planning and support strategies that are responsive to those in the community most affected by the early childhood system.

Establish your LNA timeline

Refer to the overall timeline provided above and work backwards from when initial LNAs must be submitted to Shine by June 30, 2026. The exact length of time it takes to complete the LNA will vary depending on the size and complexity of your community.

As part of your timeline, you will want to consider:

- When are you already scheduled to meet with your Community Table? What additional meetings and activities will you need to schedule?
- Who will provide feedback on your initial LNA? Each LGP's LNA must receive final approval from their Fiduciary prior to submission

- How will you ensure your LNA is a living document that is updated over time?

Identify resource and TA needs

Consider the variety of resources your LGP may need to complete the LNA based on the timeline you have identified. For example, you will want to make sure your LGP staff and contractors who are working on the LNA have the necessary time in their schedules to devote to the process. Other examples of resources may include translation of written materials for families, additional administrative support for scheduling focus groups and entering survey data, and food and child care for family focus groups.

During this planning phase, you should also consider what technical assistance (TA) you may need (e.g., TA on data analysis, survey design). See the “Available TA” section of this guidance document for more information on OEC-provided TA opportunities.

As you are considering resource needs, you should also identify if there are any existing needs assessments that you can draw on for your community (e.g., Head Start community assessments, CAA community needs assessments, prior work funded through the Discovery Initiative and Graustein Memorial Fund, data from community and family foundations, local hospitals or health organizations).

Inform invested parties about the LNA process

To ensure collaboration and meaningful engagement, it is important to communicate the LNA process clearly to all invested parties. Communications should explain the purpose and scope of the assessment, the methods that will be used to collect, review, and analyze data, and how findings will inform LGP planning through the Community Plan. Clearly outlining timelines, roles, and expectations promotes transparency, encourages participation, and helps invested parties understand how their input will shape local priorities and strengthen outcomes for children and families in your community.

Step 2: Design the Work

There are many things you can learn through an LNA, and what your planning team prioritizes will affect how you gather data and from whom. Begin by reviewing the customizable LNA framework included in this Toolkit, which outlines the main sections you are expected to include in your LNA:

- LGP Information
- LNA Process
- Child and Family Characteristics

- Child and Family Basic Needs and Well-Being
- Availability and Affordability of Early Care and Education
- Quality of Early Care and Education
- Additional Supports for Children and Families
- LGP Structure
- Strengths, Gaps, and Focus Areas
- Appendices

What you choose to include in each of these sections, and how you format them, will vary by LGP, but all LGPs should include some data and analysis for each of the abovenamed sections (appendices are optional).

In preparing to collect data, the LNA team should consider and discuss how to address these five key considerations in assessment design:










1. What data do you need to complete the LNA?
2. What sources can be used to obtain this data? What data is provided by the OEC, and what other local data would you like to collect?
3. What issues or challenges might affect data collection efforts? Are there alternative methods that could be used to collect data? (Data collection methods are discussed in Step 3.)
4. How will you keep track of all the data collected? How will you make the data available to members of your planning team?
5. How will the data be displayed or disseminated after it is collected and analyzed?

As you plan for data collection, it is important to distinguish between quantitative and qualitative data sources. In addition to being collected in different ways, these data are also expressed differently.

- Quantitative data is expressed in numerical terms, and includes numerical counts, percentages, and community demographics.
- Qualitative data is represented in words (collected either verbally or in writing), and includes opinions, feelings, themes, and ideas.

A high-quality LNA draws on both quantitative and qualitative data, and it includes thoughtful analysis of each. If you can visualize in advance how key findings might be

displayed, including through graphs, tables, or charts, you’ll have a clearer frame of reference for what to collect and how to organize information as you go.

Data that are...	can be explained in a...		
in numbers or percentages	 table	 pie chart	 graph
in written or spoken words	 narrative	 case study	 table
geographic	 map	 diagram	 photograph

Source: <https://headstart.gov/program-planning/community-assessment-foundation-program-planning-head-start/important-distinction-quantitative-qualitative-data>

Step 3: Gather Data

Start with OEC-provided datasets

Each section of the provided customizable LNA framework includes a series of data prompts. Some prompts can be answered using the datasets provided by the OEC in partnership with the CTData Collaborative (“OEC-provided”), while others may require additional data from your community (“Consider collecting”). By leveraging the OEC-provided data first, you can direct your more time-intensive data collection methods, such as surveys and focus groups, on gathering information not otherwise provided. Ultimately, you may not have data for all prompts in a given section, and you may also collect relevant information from additional sources that are not listed in the framework

Additionally, all data should be interpreted with appropriate context and caution. Some datasets reflect point-in-time counts and may not capture programmatic, enrollment, staffing, or funding changes. For example, Head Start data represent information reported at a specific time and may not reflect more recent shifts in funded enrollment, service capacity, or program operations. Data on Head Start-funded spaces are also provided by service areas, which may encompass multiple towns and LGPs. LGPs are encouraged to contact their local Head Start programs directly for the most current and town-specific information.

The OEC-provided data may also be updated throughout Spring 2026 as additional datasets become available, including select data metrics from the UConn/OEC Parent/Caregiver Survey administered in Fall 2025. The OEC anticipates this survey data will be released by April 2026.

As you dig into the OEC-provided datasets, ask probing questions such as:






- Does this sound like our community?
- Do we have data reflective of different settings (e.g., FCC, centers, schools)?
- What does this data make us ask? What story does the data tell?
- What is missing?

Add other community-specific data

Identify for which topics you want to gather additional community-specific data to fill gaps or explain the story behind the numbers in the OEC-provided data.

As you consider mechanisms for collecting this additional data, consider the commonly used data collection methods presented in the table below. Keep in mind that it is sometimes appropriate to combine methods to gather additional detail. For example, after a focus group session, participants could be asked to fill out a survey.

There is *no set requirement* for how many surveys, focus groups, or other methods you must use to collect community-specific data. You have the flexibility — and are best positioned — to decide how much data to collect based on what will provide meaningful context and address gaps in the existing data for your community.

Method	Advantages	Disadvantages
 Written Survey or Questionnaire	<ul style="list-style-type: none"> • Can be widely distributed to large numbers of respondents • Can be translated into multiple languages 	<ul style="list-style-type: none"> • Return rate may be low • Requires reading and writing • May require materials to be translated
 In-person Interview	<ul style="list-style-type: none"> • Allows for in-depth responses • Can support language and literacy needs • Allows for more personal connections 	<ul style="list-style-type: none"> • Time consuming to conduct • Time consuming to analyze the responses • May require interpreters to be available
 Phone Interview	<ul style="list-style-type: none"> • Allows for in-depth responses • Can support language and literacy needs • Allows for more personal connections 	<ul style="list-style-type: none"> • Time consuming to analyze the responses • May require interpreters to be available • Requires participants to have access to telephone
 Focus Group	<ul style="list-style-type: none"> • Can select participants to ensure a variety of views • Small enough to allow each person to speak • Can foster a sense of community 	<ul style="list-style-type: none"> • Needs a facilitator and meeting space • Time consuming to analyze the responses • May require interpreters to be available
 Large-Group Meeting	<ul style="list-style-type: none"> • Can offer a variety of perspectives • Can foster a sense of community 	<ul style="list-style-type: none"> • Needs a facilitator and meeting space • Time consuming to analyze the responses • May require interpreters to be available • May have low participation rate • Some participants may feel uncomfortable speaking in a large group

Source: <https://headstart.gov/sites/default/files/pdf/community-assessment-fillable-forms.pdf>

Including family perspectives

The OEC datasets provide a strong starting point, but they don't capture the full picture of families' lived experiences. LGPs should seek to hear directly from families to understand what matters most to them, what support and services they need, the challenges they face, and reflections on the data already available. Centering family voices in the LNA process helps ensure that local planning and programming reflect community priorities and respond to real needs.

Confidentiality

Assuring participants' confidentiality is an essential part of gathering written or verbal information. Let all participants know that the process is confidential, individual names will not be included in the written LNA, findings are reported for groups (not individuals), and participation is optional. Once the initial LNA is released, communicate back with all partners and families who provided input so they know how their input was used.

Multiple years of data

Reviewing data over several years helps reveal trends and patterns that a single year may miss. Looking at multiple years of data can highlight changes, improvements, or ongoing challenges in your community. The only multi-year data variables included in this initial round of OEC-provided datasets are Number of Live Births and Birth Rate (per 1,000 population), but LGPs are encouraged to seek out additional sources of multi-year data where available. LGPs will also be able to use the data from this initial LNA as a benchmark for future years, since the LNA is intended to be an iterative process.

When thinking about data over multiple years, probing questions may include:

- How has our community changed over the past five years? What is happening at the state or federal level that may be impacting families and providers?
- Which trends were anticipated, and which were surprising?
- What do these trends suggest about where we should dig deeper as we complete our LNA, and where we should focus our attention for the Community Plan?

Supplementary local, state, and federal data sources

In addition to the OEC-provided datasets, other local, state, and federal data sources can provide valuable context for understanding the needs in your community. Examples may include, but are not limited to, community assessments completed by Head Start programs, community foundations, or other local agencies; United Way ALICE data; [KIDS COUNT reports](#); Preschool Development Grant (PDG) community needs assessments; statewide needs assessments for [Maternal, Infant, and Early Childhood Home Visiting \(MIECHV\) Programs](#); federal [American Community Survey reports](#) from the U.S. Census Bureau; publicly-accessible [CTData Collaborative datasets](#); [historical Care 4 Kids reports](#) on children and providers; public health data; and town or district surveys. These sources (and others) may help fill gaps, highlight emerging trends, and give a fuller picture of families' experiences.

- **Head Start community assessments:** All Head Start agencies are required to conduct a community assessment of their defined service area at least once during each five-year grant period to understand community strengths, needs, and resources and to inform program design and services. Agencies must also review the assessment annually and update it as needed when there are significant shifts in demographics, needs, or resources that could affect service delivery. Even if a Head Start program in your area is covered by a different LGP, you should still reach out to the agency to obtain their most recent community assessment, as it may include data relevant to your geographic region.
- **Community Action Agencies (CAAs):** Regular community-level assessments of needs and available resources are foundational to the work of CAAs. These assessments serve as a key management and leadership tool, informing agency priorities and guiding decisions about how to direct funding and other resources to best meet community needs.
- **Discovery Initiative and Graustein Memorial Fund:** Through the Discovery Initiative (supported by the William Caspar Graustein Memorial Fund and partners), some Connecticut communities completed a locally led needs assessment process that analyzed community-wide assets, gaps, and barriers affecting children birth-8 and their families, drawing on both local data and stakeholder input.
- **ALICE data:** ALICE (Asset Limited, Income Constrained, Employed) data is produced by the United Way to highlight households who earn above the Federal Poverty Level but still can't afford a basic household budget. It uses a county-level "ALICE Threshold" (based on a Household Survival Budget) to estimate how many working families are struggling to cover essentials like housing, child care, food, transportation, and health care. You can find ALICE data for Connecticut [here](#).

Interviews and focus groups

See below for some common questions and tips for organizing and completing interviews and focus groups as part of your LNA data-gathering process. You can contact your RESC if you need additional support designing interviews and focus groups.

- *Will you take written notes or record your conversations?*
Recordings are useful if you want to include quotes from participants in your LNA, but it will take time to review the transcripts. Additionally, some people may not participate openly because they do not want a recording made of what they have said. Remind participants that the information you gather is confidential. Software can record and transcribe notes at the same time.

- *How long will an interview take?*
Before interviews, tell participants how much time you may need. Most people begin to tire and lose interest after an hour of being interviewed in person or after 15 minutes on the phone.
- *Will you ask the same questions of all the respondents? Or will you ask the same guiding questions and then follow up depending on what the respondents say?*
The latter approach enables you to collect comparable information while allowing more freedom and adaptability in how you obtain that information from different respondents. If the questions differ too much from one person to the next, however, it will be much harder to analyze and compare the answers.

Surveys

Surveys can be a practical way to gather input from a broad range of families and providers, especially when you need information and perspectives that aren't available in the OEC-provided datasets. When designed thoughtfully and shared through trusted community partners, surveys can surface local preferences, barriers, and experiences that help explain the “why” behind the data and strengthen local planning. The CTData Collaborative will offer a training session on effective survey design for all LGPs, and Shine will provide you with further details.

Local surveys may be used to collect information such as:

- Family economic stability and basic needs (e.g., housing, food, utilities, employment stability)
- Family preferences for early care and education (e.g., hours, setting type, location)
- Search and enrollment experiences
- Barriers to early care and education access (transport, cost, language, waitlists)
- Satisfaction with early care and education services
- Voices of diverse providers, including Family Child Care providers and Home Visiting program staff
- Parent/caregiver well-being and stressors (e.g., mental health, social support, caregiving burden)

Some survey design best practices include:

- Keep it short (10 minutes or less completion time)
- Use plain language and avoid jargon

- Ask a small number of required demographic questions to understand who is responding to the survey
- Use skip logic where possible to reduce burden
- Pilot with a few families/providers before launching

To ensure your survey reaches and resonates with the families and providers you hope to hear from, plan intentionally for linguistic and cultural accessibility. Using plain, community-informed language and culturally relevant formats can increase participation and help ensure responses reflect the experiences of all families in your community. Some specific tips for making surveys linguistically and culturally appropriate include:

- Translate professionally (and review with community members for local phrasing)
- Use culturally relevant examples and response options (e.g., work schedules, care arrangements)
- Offer multiple modes: QR code + paper + phone-based support
- Partner with trusted messengers (e.g., Parent Ambassadors) to distribute and explain the survey

Step 4: Analyze and Make Decisions

Data analysis is the process of **organizing, combining, and interpreting** information — both what the numbers show and what people share — to answer key questions and guide decision-making. It typically involves a set of intentional steps (e.g., aggregating, disaggregating, comparing, and looking for trends) that help reveal patterns, strengths, and gaps that aren't obvious when data points are viewed in isolation. Think about data collection and data analysis as evolving. They are not finite processes, even though they do have to be conducted with timelines and deadlines in mind.

As you review the datasets provided by CT Data, compare your community's results with surrounding towns, peer communities (e.g., similar-sized towns or comparable cities), and statewide averages where available. The OEC-provided datasets include state-level data for a selection of data variables (those from the standard ACS/Census tables). These comparisons help you identify where your community aligns with — or differs from — nearby areas and similar places across Connecticut.

The data analysis discussion should aim to:

- Describe current conditions
 - What do the data show?

- What are you hearing?
- Name local strengths and resources
 - What assets are present in your community?
 - What can you build upon?
- Identify gaps and inequities
 - Who is underserved within the community?
 - Where are barriers concentrated within the community?
- Translate findings into focus areas and recommendations for the Community Plan
 - Based on the findings, what focus areas have emerged? Why are they important? How should you tackle them? Who will be involved?
 - The focus areas and recommendations from this data analysis discussion will directly link to your Community Plan

For a practical overview, see the National Center on Program Management and Fiscal Operations (PMFO) brief on Data Analysis Techniques:

<https://headstart.gov/sites/default/files/pdf/no-search/ca-b3-mp.pdf>.

Step 5: Communicate and Incorporate

Sharing data and analysis back with invested parties – including families, providers, and other local partners – is a core part of the LNA process. The LNA is not only a “needs assessment”; it is also a communication tool that helps LGPs lift up local context, provide input on community priorities, and build shared understanding that will inform the Community Plan.

Plan early for where, how, and when you will share findings so participants, including families and other partners, can see what you learned and how their input was used, validate what resonates, and understand how the information will be used. Using multiple formats (e.g., a short slide deck, one-page summary, provider convening, family-friendly infographic, or community conversation) can make the information accessible to different audiences.

When you communicate your findings beginning in late spring/summer 2026, highlight how the information will support provider planning and readiness: providers should use LNA findings to better understand local child care needs and align their program plans accordingly, which will help them craft thoughtful, responsive applications in advance of the FY28 Early Start procurement. In planning the timeline of your communications, ensure

providers in your community will have ample time to access and review the LNA prior to the anticipated release of the FY28 Early Start procurement in fall 2026.

The LNA Framework provides tables to help organize your data and reflections for each section, but you have flexibility on how you format your LGP's LNA, and you may choose to use additional visuals or graphics. Clear, consistent visuals can make your findings easier to understand and discuss. The conventions below can help you present tables, charts, and graphs in a way that is community-friendly and easy to reference:

- Include a clear title for each table, chart, and graph
- Use tables to present columns, lists, or detailed data points
- Number tables in consecutive order (e.g., Table 1, Table 2, etc.).
- Label each visual display (e.g., graph, map, pie chart) as a figure, and number each figure consecutively (e.g., Figure 1, Figure 2, etc.).
- Place each table and figure near the related text so readers can quickly connect the narrative to the data.

You may also include optional appendices to add context and transparency. These appendices can include focus group questions, survey tools, and raw data collected during the assessment. Including these resources helps clarify your methodology and allows others to replicate or further analyze your findings.

Looking Ahead: Guidance for the Community Plan

The next step in the LNA process is to develop a Community Plan that responds directly to what you learned. The LNA surfaces local strengths, gaps, and trends affecting young children and families; the Community Plan translates those findings into shared priorities and coordinated actions your LGP will take over time. Each identified focus area should be clearly grounded in LNA findings, including relevant data, stakeholder input, and identified disparities.

The Community Plan process will begin in summer 2026, and additional information and guidance will be provided to LGPs on the development of these plans. Community Plans should reflect a multi-year perspective while identifying near-term action steps that are achievable within the current planning cycle. LGPs will be required to include general components in their Community Plans to ensure consistency statewide, but there will be flexibility in format. The required components will align with the elements included for each SMART Goal in the OEC's [Elevate Program Plan](#), allowing you to build from a familiar structure.

Required components will include:

- **Focus area:** Where are you focusing your efforts and how does it connect to LNA findings?
- **Action steps:** What specific steps will you take to make progress achievable? Action steps should be specific enough to guide implementation while allowing flexibility to adjust as new data and conditions emerge.
- **Current reality, challenges, or barriers:** What conditions or constraints could affect implementation?
- **Resources needed:** What resources (people, funding, partnerships, data, support) will you use to advance the work?
- **Progress monitoring:** How will progress be reviewed and discussed over time, and how will adjustments be made as needed?

Community Plans are intended to operate within a continuous improvement cycle. LGPs should revisit and refine priorities and strategies at regular intervals to incorporate updated data, stakeholder input, and changes in policy or local context.

Available TA and Supports

To support LGPs throughout the LNA process, multiple resources and training options are available. The table below outlines which entities to connect with at different points in the LNA process and the types of support each can provide.

Support / Resource	Role	Contact
RESCs	RESCs are the first line of support for LGPs with questions about the LNA. They can assist with content-related questions and serve as a hub for connecting LGPs to additional supports and guidance.	Contact your local RESC (see Appendix 3 for assigned RESCs by town)
CTData Collaborative	The CTData Collaborative is providing data trainings and office hours for LGPs. These dates and times will be communicated to LGPs in the coming weeks.	Your RESC can advise on how to get answers to specific data questions (e.g., CTData office hours or trainings)

Shine Early Learning	Shine is responsible for the LNA submission process for all LGPs. Initial LNAs are due by June 30, 2026. LGPs must upload their LNA to their Shine Google folders. Each LGP's LNA must receive final approval from their Fiduciary prior to submission.	Allison Cusano (acusano@shineearly.com)
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Appendix 1: Overview of OEC-Provided Data Variables

As of March 2026, the following shared data variables have been made available on either a Town, PUMA (Public Use Microdata Area), or School District basis. Many variables are shared as both counts and percents.

***The majority of these data variables are in the main “OEC LNA Datasets” file; a few variables marked with asterisks below are currently available in separate included files, and will be incorporated into the main file later this Spring.*

Category or Sub-Category	Geography Type	Variable Name
Population	Town	<ul style="list-style-type: none"> Total Population Population Under 5 Years Total Households with Children Under 18 Birth Rate (2020-2024): Number of Live Births and Birth Rate (per 1,000 population)
Language Spoken (Households With At Least One Child Under 6)	PUMA	<ul style="list-style-type: none"> English-only Household French German Greek Hebrew Mandarin Pashto Russian Spanish
Language Spoken Other Than English (Number of Children Age 5-17)	Town	<ul style="list-style-type: none"> Spanish Language Other Indo-European Language Asian and Pacific Island Language Other Language
Family Structure	Town	<ul style="list-style-type: none"> Married Couple with Children Under 6 (and 6 to 17) Female Householder with Children Under 6 (and 6 to 17) Male Householder with Children Under 6 (and 6 to 17)
Income and Poverty	Town	<ul style="list-style-type: none"> Median Household Income Median Household Income of Families with Children Under 18 Median Household Income of Married-Couple Families with Children Under 18

		<ul style="list-style-type: none"> • Median Household Income of Female Householder with Children Under 18 • Median Household Income of Female Householder with Children Under 18 • Total Population Below Poverty Level • Population Under 18 Below Poverty Level • Population Under 5 Below Poverty Level
Income and Poverty (Households With At Least One Child Under 6)	PUMA	<ul style="list-style-type: none"> • Median Household Income
Child Opportunity Index (COI)	Town	<ul style="list-style-type: none"> • Composite index that measures the quality of resources and conditions that affect children's healthy development in neighborhoods across the United States
Housing	Town	<ul style="list-style-type: none"> • Total Households • Total Owner-Occupied Housing Units • Owner-Occupied Housing Units with Children Under 6 (and 6 to 17) • Total Renter-Occupied Housing Units • Renter-Occupied Housing Units with Children Under 6 (and 6 to 17) • Median Rent • Cost-Burdened Households
Housing (Households With At Least One Child Under 6)	PUMA	<ul style="list-style-type: none"> • Occupied without payment of rent • Owned free and clear • Owned with mortgage or loan • Rented • Median Rent
Homelessness	School District	<ul style="list-style-type: none"> • PreK Homelessness • Kindergarten Homelessness
Supplemental Nutrition Assistance Program (SNAP)	Town	<ul style="list-style-type: none"> • Households with Children Under 18 Receiving SNAP
SNAP (Households With At Least	PUMA	<ul style="list-style-type: none"> • Households at Least One Child Under 6, Not Receiving SNAP • Households at Least One Child Under 6, Receiving SNAP

One Child Under 6)		
WIC (Special Supplemental Nutrition Program for Women, Infants, and Children)	Town	<ul style="list-style-type: none"> • Total Served Under 5 Years Old • Total Served Under 1 Year Old
Medicaid	Town	<ul style="list-style-type: none"> • Number of People Served by CHIP • Number of People Served by Medicaid • Number of People Served by SNAP • Number of People Served by TFA • Total People Served Under 1 Year • Total People Served Ages 1-4 <p>*Data is provided across years 2015-2024</p>
Birth to Three**	Town	<ul style="list-style-type: none"> • Children referred to Birth to Three • Children evaluated for Birth to Three • Children determined eligible for Birth to Three • Children served in Birth to Three • Number of Birth to Three programs
Preschool special education**	School District	<ul style="list-style-type: none"> • Preschool children with an IEP or ISP for primary disability of Developmental Delay
211 Calls (United Way)	Town	<ul style="list-style-type: none"> • Inquiries Related to Child Care & Parenting • Inquiries Related to Education
Child Care Access	Town	<ul style="list-style-type: none"> • Score that measures the estimated level of child care access calculated at the census-tract level and then averaged by zip code; used as a proxy for child care “deserts”.
Child Care	Total	<ul style="list-style-type: none"> • United Way: Enrollment • United Way: Openings • United Way: Capacity • Number of Licensed Child Care Centers • Number of Licensed Group Child Care Homes • Number of Licensed Family Child Care Homes • Number of Child Care Centers (Exempt), e.g., School-Based • FFN (Family, Friend, and Neighbor) Providers
Federal Head Start Program Service Area	Other (Service Area/s)	<ul style="list-style-type: none"> • Number of Head Start Preschool Funded Centers • Number of Early Head Start Funded Centers

		<ul style="list-style-type: none"> • Number of Early Head Start Funded Family Child Care Homes • Federal Head Start Preschool Funded Slots • Federal Early Head Start Funded Slots • Total Funded Slots
Care 4 Kids	Town	<ul style="list-style-type: none"> • Children on Care 4 Kids Waitlist by Age Group • Families on Care 4 Kids Waitlist by Age Group • Children Served in Care 4 Kids by Age Group and Setting Type • Care 4 Kids Family, Friend, and Neighbor (FFN) Providers
Early Childhood Education	Town	<ul style="list-style-type: none"> • Early Start CT Capacity by Age Group and Space Type • Early Start CT Spaces Utilized by Age Group and Space Type • State Head Start Spaces by Age Group and Space Type • Number of Staff by Role (Teacher, Teacher Assistant) • Number of Staff by Credential (CDA, AA, BA, MA, Advanced) and Role
PreK Enrollment by School	School District	<ul style="list-style-type: none"> • PreK Student Count by School
Registry/Elevate	Town	<ul style="list-style-type: none"> • Program Count at each Elevate Level (Member, Member Accredited, Member Plus) • NAEYC Accreditation • NAFCC Accreditation • Number of Teachers in Registry • Number of Teachers by Credential • Number of Teacher Assistants or Aides by Credential
Kindergarten Entrance Inventory (KEI)	School District	<ul style="list-style-type: none"> • Creative/Aesthetic • Language • Literacy • Numeracy • Personal/Social • Physical/Motor • *Data is provided for Levels 1, 2, 3
Home Visting Services	Town	<ul style="list-style-type: none"> • Number of Children Served Through Home Visting
RAPID Survey Data	Town (where available)	<ul style="list-style-type: none"> • Children age 1-5 who Received a Developmental Screening in the Past Year

		<ul style="list-style-type: none"> • Parents Saying it was "Easy" or "Very Easy" to Access Services for their Children • Parents Saying the Services/Supports had met their Children's Needs
Sparkler**	Town	<ul style="list-style-type: none"> • Total number of ASQs completed using Sparker • Total parent accounts in Sparkler (with children who haven't aged out) • Number of Active Sparker Accounts

Appendix 2: Head Start grant recipient alignment chart (with CAA agency alignment)

See attachment in Toolkit; please note this chart is accurate as of March 2026, but is subject to change.

Appendix 3: Local Needs Assessments: Laying the Foundation (from Shine)

See attachment in Toolkit

Appendix 4: Glossary

- **Ages & Stages Questionnaires® (ASQs®):** A set of standardized, parent- (or caregiver-) completed questionnaires used to screen young children’s development across key areas (e.g., communication, motor skills, problem-solving, and social-emotional development) at different ages. ASQ results help identify children who may benefit from further evaluation or early intervention supports.
- **American Community Survey (ACS):** An ongoing U.S. Census Bureau survey that collects detailed demographic, social, economic, and housing data from communities each year. It provides updated estimates between decennial censuses to help understand trends and local conditions.
- **Connecticut Health and Educational Facilities Authority (CHEFA):** CHEFA has a Child Care Facility Loan Fund that offers three loan programs to eligible providers in Connecticut. Two of the programs are for larger-scale construction, expansion, an/or renovation. The third program provides loans for pre-development, minor renovations, equipment, or start-up costs for home-based care.
- **Child Development Associate Credential (CDA):** A nationally recognized early childhood credential that validates an educator’s competence to work with young children through a combination of training/education, work experience, a professional portfolio, and an assessment/observation. It is available across settings (e.g., center-based, family child care, home visitor) and is commonly used as an entry-level credential in the early childhood workforce.
- **Children's Health Insurance Program (CHIP):** Connecticut’s Children’s Health Insurance Program (also known as HUSKY B). CHIP provides a free or low-cost health insurance program for children and youth up to age 19 for families who are not income eligible for HUSKY A. HUSKY B offers medical, dental and behavioral health services.
- **Community Action Agency (CAA):** A public or private organization established under the Economic Opportunity Act of 1964. These agencies are responsible for managing funds from various sources, including federal, state, local, and private entities, to create and implement programs aimed at reducing poverty in their local community. CAAs assess community needs, design programs, and oversee initiatives that support low-income individuals and families, often involving volunteer work and community participation.
- **Community Plan:** An action plan developed by the LGP that translates LNA findings into shared priorities and coordinated strategies to improve outcomes for young

children and families. The Community Plan summarizes the community’s focus areas, key challenges and assets, and the action steps, partnerships, and resources that will guide implementation and ongoing course-correction over time.

- **Demand for care:** The number of parents who will seek child care outside the home from the formal, or legally operating child care system.
- **Elevate: The OEC’s** quality improvement system for licensed and license-exempt family child care providers, centers, and group homes. Elevate offers three levels of engagement:
 - **Member:** Elevate Members provide healthy and safe care for families by meeting licensing requirements from OEC.
 - **Member Plus:** Member Plus programs have taken the next step and have an approved Elevate Program Plan with OEC.
 - **Member Accredited:** Member Accredited programs have been accredited by NAEYC or NAFCC — or are approved by Head Start.
- **Family Child Care (FCC):** Regulated, home-based care for small groups of children (typically up to 6-9 in CT, with new options for up to 12) in a provider’s home. These settings provide intimate, mixed-age environments, often with specialized, consistent care. Licensed homes must meet health, safety, and training standards.
- **Head Start Agency:** A local public or private non-profit or for-profit entity designated by the federal Administration for Children and Families to operate a Head Start Preschool program, an Early Head Start program, or a Migrant or Seasonal Head Start program pursuant to the Head Start Act.
- **Head Start Program Options:** A Head Start program must choose to operate one or more of the following program options: center-based, home-based, family child care, or an approved locally designed variation.
- **Home visiting:** Voluntary parenting support and child development services for pregnant people and caregivers of children ages 0-5
- **Individualized Education Program (IEP):** Legally binding document under the U.S. Individuals with Disabilities Education Act (IDEA) for public school children ages 3–21 that outlines specialized instruction, services, and academic goals tailored to a student's specific learning.
- **Individual Support Plan (ISP):** Document for parentally placed private school children with disabilities, detailing specialized services provided by the public school district.

- **Local Governance Partner (LGP):** The community’s early childhood hub that builds trusted partnerships with families, providers, and the broader community. Each LGP is made up of four (4) distinct parts: LGP Community Table, LGP Fiduciary, LGP Liaison, and Parent Ambassadors, each defined below.
 - **LGP Community Table:** A collaborative space that serves as a neutral, inclusive forum where diverse organizations, parents, and stakeholders come together to engage in open dialogue, share insights, and work towards collective community goals.
 - **LGP Fiduciary:** The entity responsible for signing the contract with the LGP Intermediary — Shine Early Learning Inc. and distributing the LGP budget to fund the liaison, Parent Ambassador, and LGP Community Table activities.
 - **LGP Liaison:** One or more individuals who are employed year-round to coordinate and assist the efforts of the LGP to deliver services and activities, supervise the Parent Ambassador(s), and visit Early Start CT programs to support and enhance quality and compliance.
 - **LGP Parent Ambassador:** A trained parent leader within the community who serves as a trusted messenger for families and supports parents and families across the entire community.
- **Local Needs Assessment (LNA):** A systematic process used to identify the needs or gaps in services within a local community, as well as the resources and strengths available to address those needs.
- **National Association for the Education of Young Children (NAEYC):** A national professional organization that supports high-quality early learning for children from birth through age 8 through professional development, research and policy, and a widely used program accreditation system for early childhood providers.
- **National Association for Family Child Care (NAFCC):** A national organization dedicated to supporting high-quality family child care by offering professional development and resources for providers and administering a quality standards and accreditation system specifically for family child care programs.
- **Connecticut Office of Early Childhood (OEC):** The state agency that leads, coordinates, and oversees early childhood care, education, and development programs for young children and families in Connecticut. Its mission is to partner with families of young children to advance opportunities to participate in early childhood policies, funding, and programs; support early learning and development;

and strengthen the critical role of all families, providers, educators, and communities throughout a child's life.

- **OEC Parent Cabinet:** The CT OEC Parent Cabinet is a diverse, parent-led 15-member statutory statewide advisory committee to OEC (established under *P.A. 23-160, Sec. 40*). It meets regularly to help advise the agency on how to make improvements to the lives of children and families across the state.
- **Preschool or PreK:** Typically refers to early care and education services for children between ages 3-5; used interchangeably.
- **Public Use Microdata Area (PUMA):** Data reported for Census-defined sub-state geographies created so the U.S. Census Bureau can publish public-use microdata while protecting confidentiality. Unlike town-level data (which follows municipal boundaries), PUMAs are larger areas (at least 100,000 people) built from Census tracts and redrawn after each decennial census, so they often do not line up neatly with town borders.
- **Potential need:** The number of children ages five and below who have all available parents in the workforce and based on statistics, need some type of child care while their parent work.
- **Regional Education Services Center (RESC):** A nonprofit, regional public education agency established by statute to support public school districts through cooperative action. RESCs are formed by local boards of education and approved by the Connecticut State Board of Education to provide a broad range of cost-effective, collaborative educational programs and services.
- **Connecticut Early Childhood Professional Registry (OEC Registry):** A free, secure, statewide online database managed by the OEC that allows early childhood professionals and programs to track and verify education, training, and employment across settings. The Registry also supports program-level reporting (for administrators) and serves as a portal for accessing certain OEC opportunities and approvals (e.g., professional development and select applications).
- **Shine Early Learning:** The LGP Intermediary, responsible for providing oversight and coordination to LGPs.
- **Space or slots:** Used interchangeably to refer to the number of children an early care and education provider has the capacity to serve.
- **Sparkler:** A free, family-facing mobile app that helps parents and caregivers of young children track and support healthy development by offering digital ASQ

screenings and a library of play-based activities and tips. Sparkler is offered statewide in partnership with the OEC and connects families (and participating providers, via a dashboard) to follow-up supports and resources when needed.

- **Special Supplemental Nutrition Program for Women, Infants, and Children (WIC):** A federally funded nutrition program administered by the U.S. Department of Agriculture (USDA) that provides supplemental nutritious foods, nutrition education, and healthcare referrals to low-income pregnant, postpartum, and breastfeeding women, as well as to infants and children up to age five who are at nutritional risk. The program aims to promote healthy growth and development, improve maternal and child health, and support access to essential health services.
- **Supplemental Nutrition Assistance program (SNAP):** A federal program administered by the U.S. Department of Agriculture (USDA) that provides nutrition assistance to eligible low-income individuals and families. The program offers benefits, typically delivered via an electronic benefits transfer (EBT) card, that can be used to purchase food at authorized retailers. SNAP aims to improve food security, reduce hunger, and support access to healthy, nutritious food.
- **Technical Assistance (TA):** The provision of targeted and customized supports by a professional(s) with subject matter, adult learning knowledge, and skills needed to develop or strengthen processes.
- **Temporary Family Assistance (TFA):** A program that provides monthly cash and employment assistance to eligible families throughout Connecticut to support basic needs such as food, shelter and clothing. TFA is funded by the federal and state governments to provide a “safety net” for families with children.